



# AMERICAN JOURNAL OF PHARMTECH RESEARCH

Journal home page: <http://www.ajptr.com/>

## Trend of Smoking In Students of Ras Al Khaimah, UAE

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### ABSTRACT

The present study aims to find the incidence of smoking among the youth of Ras Al Khaimah (UAE). It is assumed that adolescence and young adulthood are the most susceptible stages to start tobacco use. This study mainly focuses on analyzing the age patterns in which the youth is mostly inclined towards smoking, finding the major causes and factors that influence this inclination, and creating awareness about the harmful effects of smoking on their health. A structured questionnaire consisting of 15 questions was administered among 116 randomly selected participants. The main parameters of the study were prevalence of smoking, age, category of responder, number of cigarette /day, reason, whether they tried to stop smoking, methods used to stop smoking, awareness about passive killer and whether they got any advice from parents/guardians regarding smoking etc. The results shows that many sociodemographic, environmental, behavioral and personal factors are responsible for smoking. More than 88.37% of young adults get this habit at the age below 18 years either directly or indirectly and family/friends play a significant role in this habit. Only an insignificant 9% benefitted from the awareness programs. This emphasizes the importance of creating more awareness programs for the youth. The study comes to the conclusion that more longitudinal and cohort analyses with a large number of volunteers is necessary to examine these trends more closely. The findings demonstrate considerable heterogeneity in smoking among young adults. So it is the time to warrant immediate attention from the public health community.

**Keywords:** Smoking and youth, factors influence smoking, smoking in RAK, social norms attitudes to smoking.

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Received 14 September 2016, Accepted 25 September 2016

Please cite this article as: Usman S *et al.*, Trend of Smoking In Students of Ras Al Khaimah, UAE. American Journal of PharmTech Research 2016.

## INTRODUCTION

One billion people in the world are smokers and every eight seconds somebody dies from smoking. Many factors are associated with smoking among youth. One important risk factor associated with youth smoking is working in conjunction with each other, and getting synergistic effect on smoking risk. Thus, it is nearly impossible to separate out and label one risk factor as most important. Smoking in young population in United Arab Emirates (UAE) is also in rise, it has been reported that children in UAE had their first cigarette before the age of 14. A new study found one in five boys aged 13 to 15 responded as current cigarette smokers in UAE.<sup>1</sup> Another study suggested that nearly 25 to 30% of the UAE's adult population already smoke some form of tobacco.<sup>2</sup>

The survey reports about the effects of smoking on health show that passive smoking is more harmful than active smoking. In particular, if young people aged 12-14 years, have household member who regularly smokes inside the house, it increases the probability that the young person will smoke by 2%, whereas probability for age group 15-19 years will increase by 18%.

Many young smokers justify smoking one or two cigarettes once in a while—known as social smoking—by thinking that occasional smoking won't damage their health as much as smoking every day.

One of the biggest effects being a social smoker can have, is that they may become a habitual smoker. Many smokers view "social smoking" as a safe option, they think of it as being no different than having a candy bar every once in awhile. They are mistaken in thinking that the adverse health effects from smoking are limited to those who would be considered "heavy smokers."

The aim of this study is to determine the incidence of the smoking in the students in Ras al Khaimah and its rationales.

## MATERIALS AND METHOD

A cross sectional study was conducted in the RAK Medical and Health Sciences University between November and February of 2013-2014. In the present study students were recruited from the study site on the basis of convenient sampling. A survey form comprising of 15 questions was developed to determine the incidence and factors associated with smoking initiation. Questionnaire was pretested. Data was analyzed statistically on non-parametric tools.

**QUESTIONNAIRE**

1) Are you a smoker?

- Yes
- No

2) If yes, at which age did you begin to smoke?

- Below 13 years
- 13-15
- 16-18
- 19- Over

3) If yes, how many cigarettes do you smoke per day?

- 1-5
- 5-10
- 10-15
- 15-20

4) How many times have you tried to stop smoking?

- Never
- 1-3 times
- 4-6times
- 7-10 times

5) Have you ever tried to stop smoking using the following methods?

- Clinics
- Stop with friend
- Medications
- Smoking cessation awareness program

6) If you are not a smoker do the following people smoke?

- Your relatives
- Your parents
- Your friends
- Others

7) How interested are you in stopping smoking, or encouraging people to stop smoking :

- Strongly
- Very
- Little
- Not at all

8) While you were growing up, how many of your parents / guardians smoked at all?

- None
- One
- More than one
- don't know/not sure

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- One
- More than one
- don't know/not sure

- Seeing the effect it has on your parents/ family/ others
- Your strong desire to stop smoking

13) What is your opinion about the warning labels on cigarette packages?

- They influenced me to quit smoking
- They made me worry about my smoking
- They had no effect
- They amused me
- They angered me
- There were no warning labels on cigarette packages

14) Are you aware of that passive smoking kills millions of people per year?

- Yes
- No

15) Do you think smoking should be banned?

- Yes
- No

## RESULTS AND DISCUSSION

A total of 116 volunteers participated in the study. Out of which 66 (56.9%) were men and 50 (43.1%) were women. Forty three (37.07%) participants were smokers whereas seventy three (62.93%) were nonsmokers.

Socio-demographic factors such as age, race/ethnicity and socioeconomic status have consistently been associated with smoking among youth (Table 1 & 2). The evaluation of questionnaire showed that at the age of 13-15 years the students are typically engaged in more risk behaviors (Table 3). As per Dr. Thomas Armstrong, 12-20 years come under adolescence in which **the** biological event of puberty unleashes a powerful set of changes in the adolescent body that reflect their sexual, emotional, cultural, and/or spiritual changes. Adolescence has significant potential to adopt any new and attractive thrill as a challenge.<sup>3</sup>

**Table 1: Demographic information of participants**

Nationality	Gender	Category
Arab	54 Male	66 Smokers 43
Non-Arab	62 Female	50 Nonsmokers 73

**Table 2: No of participants and their age group**

Age	Smoker	Non-Smoker	Total Number
Below - 18	2	5	7
18 - 28	36	65	101
29-39	1	3	4
40- onward	4	0	4
<b>Total</b>	<b>43</b>	<b>73</b>	<b>116</b>

**Table 3: Age of starting smoking among young people**

Category of smoker*	
below 13 years	25.58%
13-15years	44.19%
16-18 years	18.60%
≥ 19 years	11.63%

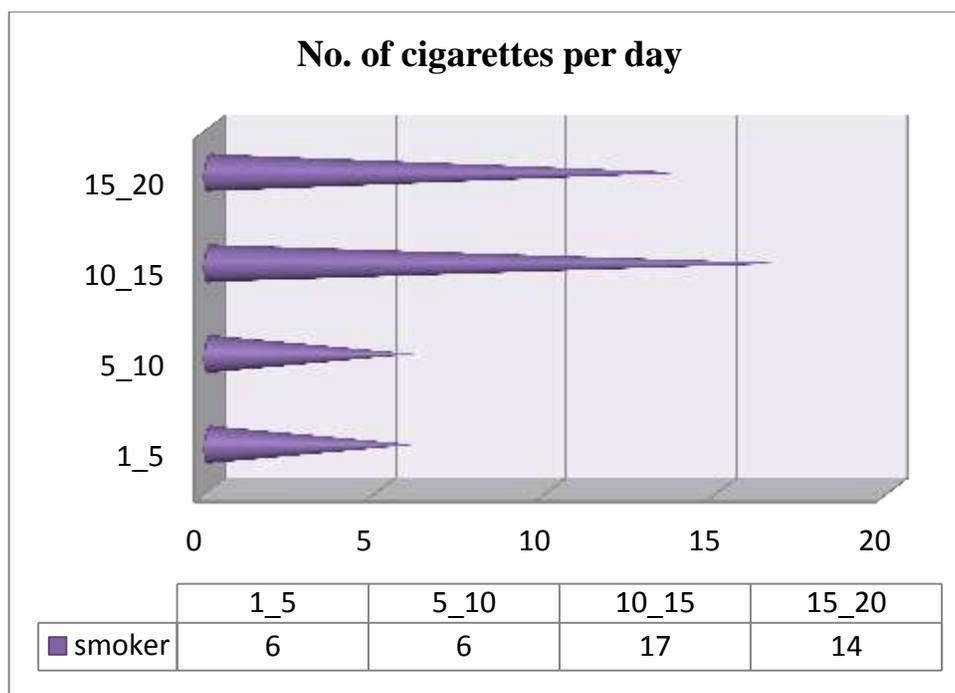
\*based on total number of smoker

The present data shows that most of the students (44.19%) started smoking at the age of 13-15 years (Table 3). Students who have friends who smoke are more susceptible to smoking. There is strong evidence that friend smoking is influential in youth smoking initiation.<sup>4,5</sup> The presented result is also supported by World Health Organization region report (2010–2011) which says that the students at the ages of 13–15 are more prone to smoking.<sup>6</sup>

Figures show that 25.58% smokers started their smoking below 13 years of age. This age group comes under Late Childhood (9-11) where they have the potential to acquire social and technical skills that enable them to find solutions for dealing with the increasing pressures of the society.

They seek new ways to cope with everyday responsibilities that pull them towards the risk behaviors.

As per the proposed study, more than 88.37% of young adults get this habit at the age below 18 years either directly or indirectly (Table 3). In contrast, most studies have revealed no significant association between gender and smoking.<sup>7</sup> A WHO study in 194 countries found that 21.3% of boys and 9% of girls aged 13 -15 in the UAE used tobacco.<sup>6</sup>



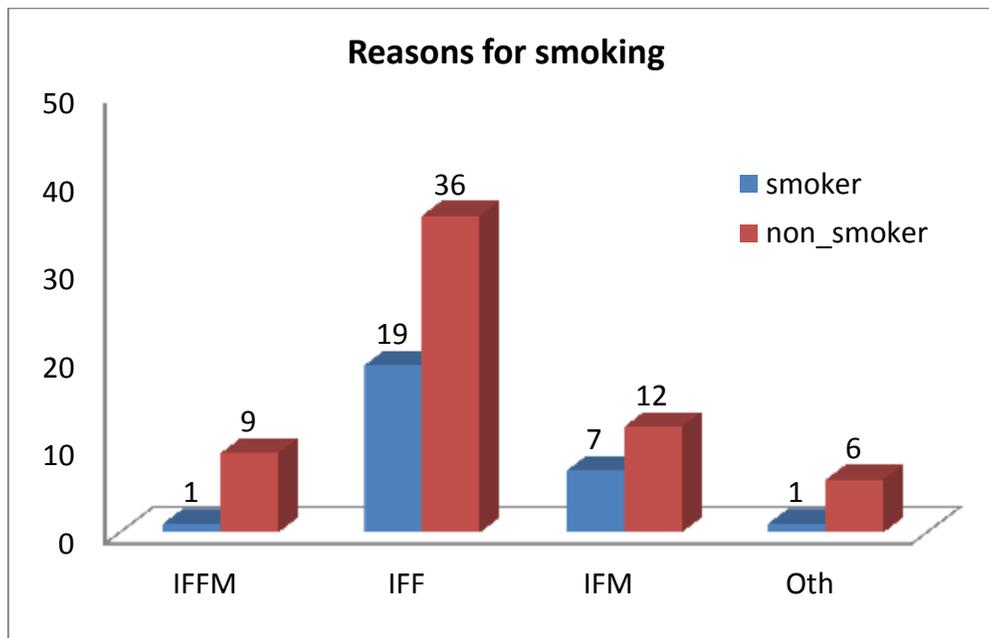
**Figure 1: How many cigarettes do they smoke per day?**

It was observed that out of 43 smokers majority (39.53%) smoked 10-15 cigarettes in a day whereas 32.56% smokers smoked 15-20 cigarettes in a day (Figure 1). As per, “The National” published on 4<sup>th</sup> Experts said teenage smoking was on the rise and blamed cheap cigarettes and inadequate education on the health risks. November, 2013, the expert opinion that teenage smoking was on the rise and blamed cheap cigarettes and inadequate education on the health risks.<sup>8</sup> Gulf News published on March 17, 2015, says that “Health-care experts called for concerted measures to reduce the global threat, which kills one in every six people now and is projected to kill eight million people by 2030 if no action is taken.”<sup>2</sup>

The last study done in 2005 reported that just 39 per cent of kids smoked at age 13 or under, while the new research finds that 82.1 per cent of school kids will do so.<sup>9</sup>

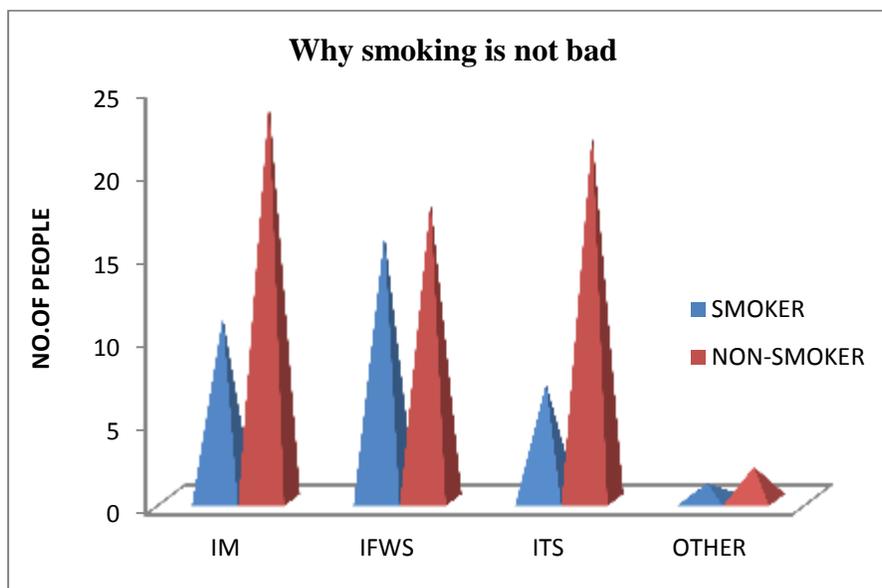
Teenagers are most likely to be under the influence of family members (IFFM), friends (IFF) or media (IFM). The present study showed that the influence of friends (44.2%) seem to be the most dominant one (Figure 2). The same analysis came from non-Smokers (49.32%). They agreed that

sometimes the children themselves might not even like the smell of tobacco but they pretend to like it in order to be accepted in their group of friends who are already into the habit.



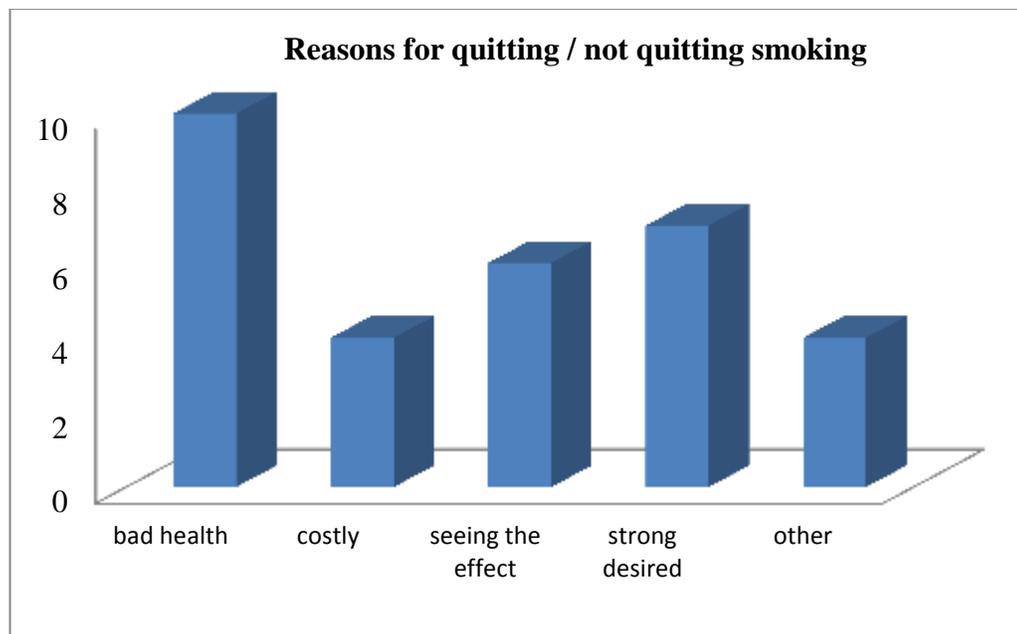
**Figure 2: Why do teenagers smoke?**

Smokers 25.58% and 32.88% non-smokers who participated in this study believe that smokers indulge in smoking to improve their mood (IM) (Figure 3). But as per our study majority of smoker i.e. 37.91% fall under the age group of 13-15years who get into this habit because of friends who smoke (IFWS) and encourage them to do so. Whereas non-smokers (30.14%) believe that the people start smoking to improve their style (ITS) and only 24.66% agreed that the friends can produce influence on them.



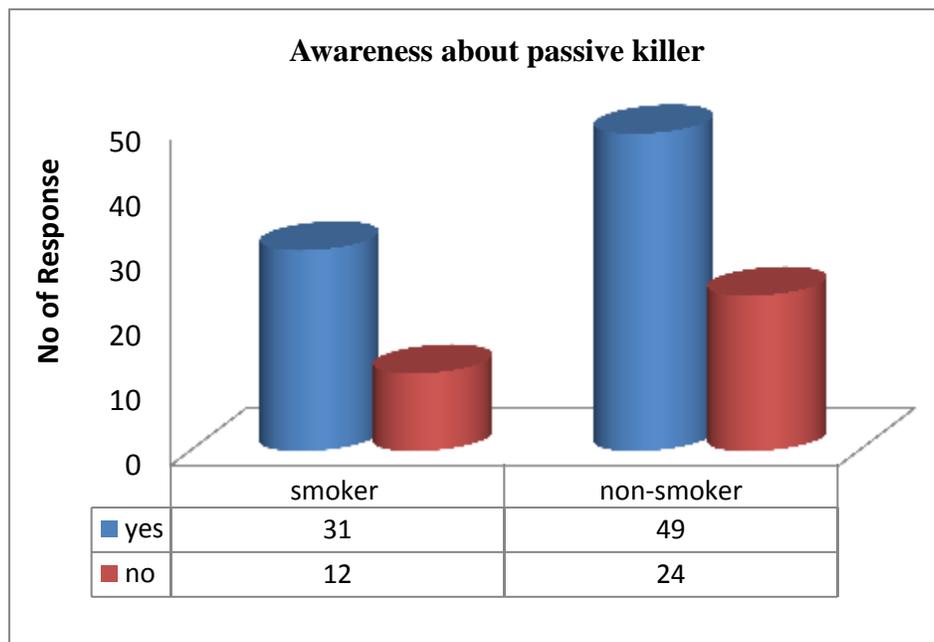
**Figure 3: Why does youth support smoking?**

Approximately all young smokers reported that they seriously tried to quit smoking but all of them have different motive to stop it (Figure 4). Only 23.26% of smokers think that it is bad for health, 16.28% strongly desired to leave it whereas 13.95% wanted to make their parents happy and only 9.3% were worried about the cost. The WHO estimates that around 6 million people die each year from tobacco use.



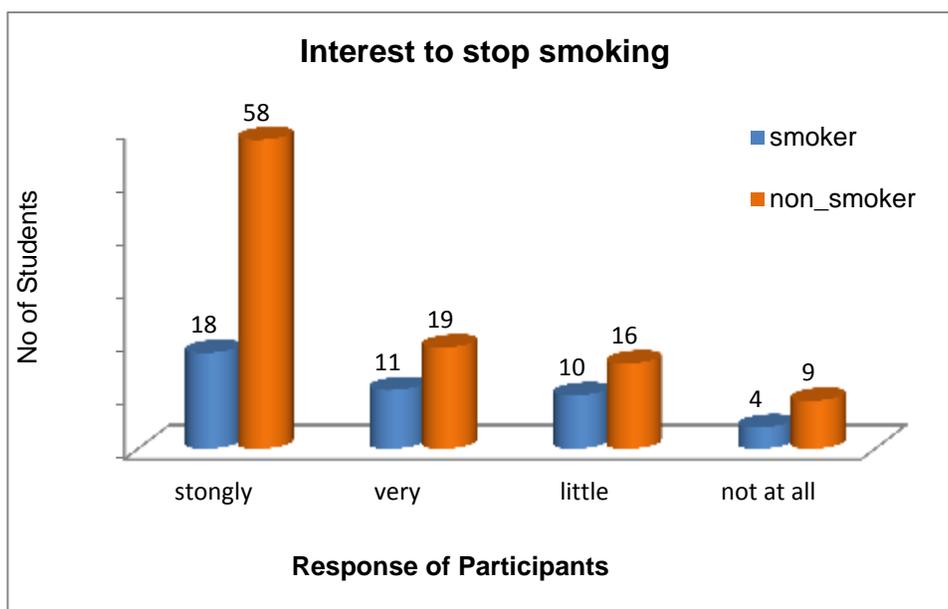
**Figure 4: Why should youth quit/not quit smoking?**

When the researchers asked participants about the consequences of passive smoking, they found that 72.1% of smokers and 67.12% of non-smokers were aware of it (Figure 5). But the non-awareness of youth towards the harmful effects of smoking is an alarming situation. WHO reported on 6<sup>th</sup> July 2015 that children from poor households are frequently employed in tobacco farming to provide family income. These children are especially vulnerable to "green tobacco sickness", which is caused by the nicotine that is absorbed through the skin from the handling of wet tobacco leaves.<sup>10</sup> A study carried out by the World Health Organization (WHO) says that in the year 2004 tobacco killed around 6 million people a year. More than 5 million of those deaths are the result of direct tobacco use while more than 600,000 are the result of non-smokers being exposed to second-hand smoke.<sup>10</sup> So there is a dire need to equip the youth with more awareness about the consequences of smoking.



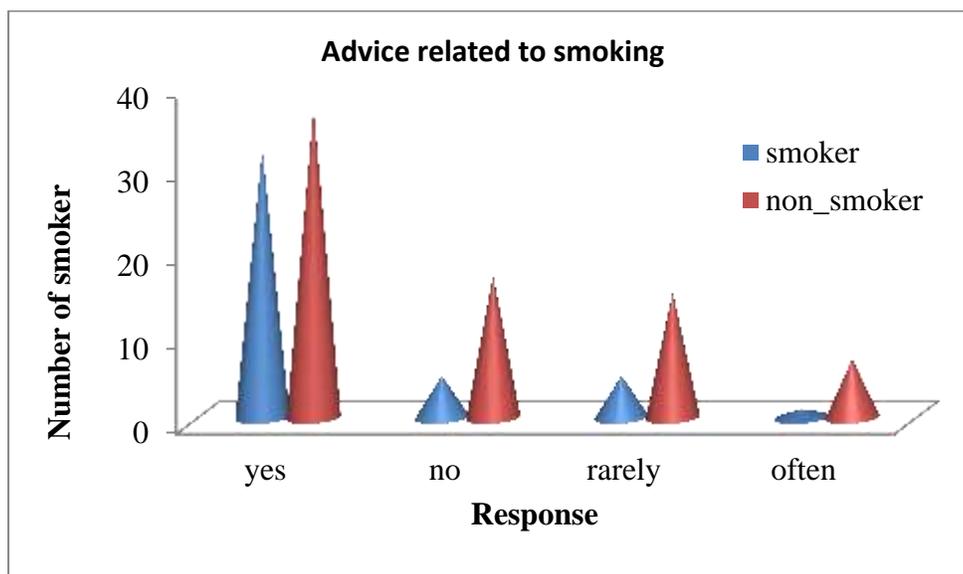
**Figure 5: Are they aware about the consequences of smoking?**

Interestingly, 79.45% of non-smokers and 41.86% (Figure 6) of smokers strongly believe that there should be more awareness programs for smokers. This shows that youth understand the consequences of smoking and are interested in quitting it. But the children as young as 12 years are taking up smoking either due to peer pressure or negligence at home. This often drives them to immoral acts, as they smoke behind their parents' back. And because their pocket money might not suffice to buy a cigarette pack they could resort to stealing.

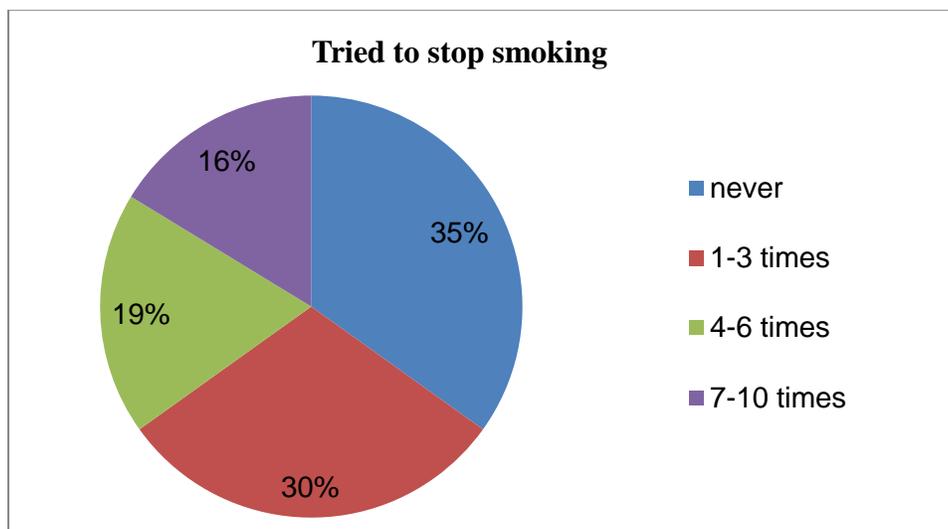


**Figure 6: Do you encourage people to stop smoking?**

Timely advice regarding smoking and its bad consequences on health is the responsibility of parents, family and guardians. Only 59.48% of present study participants (Figure 7) received the information about the hazardous effects of smoking from their family and guardians.



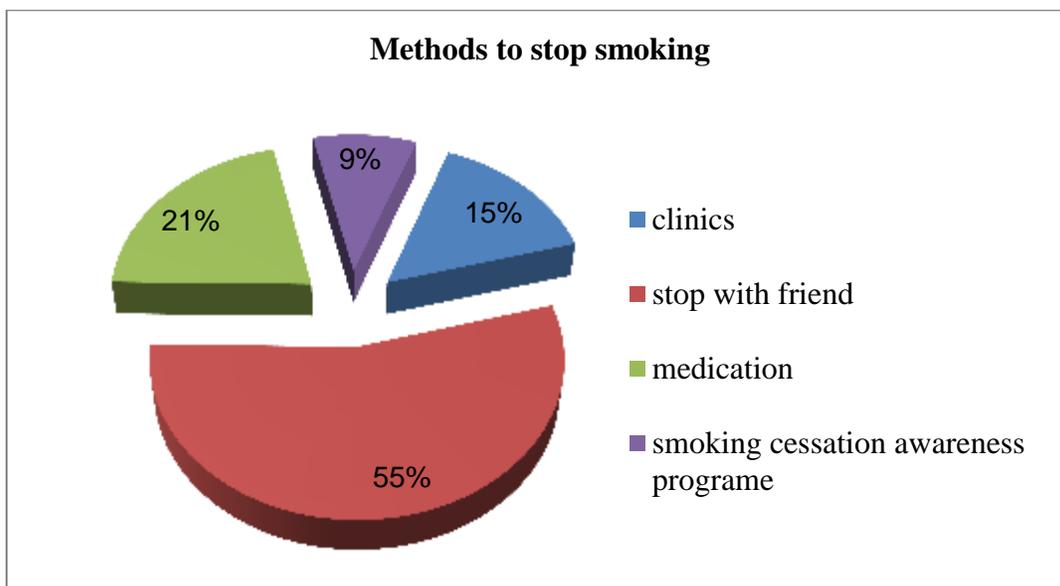
**Figure 7** Were you advised to quit smoking?



**Figure 8:** How many times did you make an effort to stop smoking?

With regards to quitting smoking, the results suggest that successful attempts to quit smoking are relatively rare among youth, but increase sharply after the age of 17years. A total of 30% of young adult smokers had attempted 1-3 times, 19% had attempted 4-6 times and 16% attempted 7-10 times to quit this habit whereas the bigger percentage (35%) never tried to get rid of this habit (Figure 8). Sometimes the young do try to abandon their habit but fail to do so because certain influences in their environment as family members or relatives smokers, friends circle,

advertisements, movies and lower prices of tobacco products etc., make it difficult for them to give up.



**Figure 9: Which method was adopted to stop smoking?**

It has been observed that friends have the strongest influence on teenagers in starting smoking. The methods adopted to quit smoking (Figure 9) also confirm the same. 55% of smokers tried to quit smoking along with a group of friends and 36% by taking medical help (clinics and medication). But what is important to note is that they may start smoking again under the influence of friends. Only an insignificant 9% benefitted from the awareness programs. This emphasizes the importance of creating more awareness programs for the youth.

A family of smokers also encourages their younger ones to take up the habit early. They smoke when neither their lungs, nor brain is fully mature, causing irreversible damage. In this respect family can play a significant role. Parents should encourage their children to have different extra-curricular activities like music, sports etc. and reward their children for their achievements.

This analysis also indicated that the warning sign on the cigarettes package is not effective as only 18-20% participants agreed that they thought about the harm of smoking after reading the warning, but 30-35% said that they had no effect of these signs and labels. More than 75% participants wish that smoking should be banned in public and smokers should be heavily fined for doing so.

## CONCLUSION

The findings demonstrate considerable heterogeneity in smoking among young adults. The various factors associated with youth smoking are intricately intertwined, and while some may influence smoking initiation, others may simply co-occur with smoking. It is thus important to understand

which of the factors associated with youth smoking are instrumental in youth experimentation and progression to regular smoking. Perhaps the most efficacious approach is to focus tobacco prevention strategies on those factors which current evidence suggests impact both smoking initiation and progression, such as parental smoking, friend's smoking, cost of cigarettes and attitude toward smoking.

**Limitations:**

The number of participants was very less. So the study comes to the conclusion that more longitudinal and cohort analyses with a large number of volunteers is necessary to examine these trends more closely. The present situation is alarming. So more needs to be done to protect non-smokers at their place of education, work and public transport. Right now only 7% of the world's population lives in areas with strict anti-smoking laws.

**ACKNOWLEDGEMENT:**

The authors would like to thanks Vice Chancellor of Ras Al Khaimah Medical & Health Sciences University and Dean College of Pharmaceutical Sciences, RAKMHSU for their encouragement and support

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