The Menace of Tobacco Smoking among Nigerian Adolescents

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Abstract

Smoking is one of the most common forms of recreational drug use. Smoking is a practice in which a substances such as, tobacco, marijuana or cannabis is burned and the smoke tasted or inhaled. It is primarily practiced as a route of administration for recreation drug use, as combustion release the active substances in drugs such as nicotine and makes them available for absorption through the lungs. The tobacco companies have hand in getting people to start smoking because they know that 90 percent (90%) of smokers started smoking when they were younger than 18 years of age. These companies continue to do research on youths using hidden cameras, interviews and psychological tests to find new ways to appeal to them. In recent times, tobacco smoking is by far the most popular form of smoking ahead of pipes, cigars and chewing tobacco and is practiced by over one billion people in the majority of all human societies. The implications of smoking include health implication, social implication, financial implication, psychological implication, educational implication, and air pollution. Hence, it was recommended that the government should be sincere and more proactive in safeguarding the health of adolescents by putting embargo on the sale and distribution of tobacco and its products. **Keywords:** smoking, adolescents, information, implication.

Introduction

Smoking is a practice in which a substances such as, tobacco, marijuana or cannabis is burned and the smoke tasted or inhaled. It is primarily practiced as a route of administration for recreation drug use, as combustion release the active substances in drugs such as nicotine and makes them available for absorption through the lungs. It can be done as a part of rituals to induce trances and spiritual enlightenment, (Lock, Reyndds and Tansey, 1998). Smoking is one of the most common forms of recreational drug use. In recent times, tobacco smoking is by far the most popular form of smoking ahead of pipes, cigars and chewing tobacco and is practiced by over one billion people in the majority of all human societies resulting in nearly 2 billion people, that is a-third of the world's population being exposed to pulmonary tuberculosis pathogen (Philips, 2010; World Health Organization, 2002).

Smoking has been shown to be a leading cause of premature mortality and morbidity resulting in several millions of deaths globally. It has been predicted that if the pattern currently seen among youth continues, a lifetime of tobacco use would result in the deaths of 250 million children and young people alive today, most of them in developing countries (WHO, 2012). National Population Commission (2009) submitted that Nigeria is one of the most populous countries in Africa, with an estimated population of 162 million people of which youth are estimated to be more than 30%. In Nigeria, the prevalence of tobacco use among adults (12.3% males <1% in females) is generally lower than in more developed countries, however, prevalence among youth tends to be higher than among adults, a mean lifetime smoking prevalence of 26.4% was reported among secondary school students with values ranging from 7.2% to 42.9% (Odukoya, Odeyemi, Oyeyemi and Updhyay, 2013).

Substances that are Commonly Smoked

American cancer society (2005) stated that tobacco smoking among the youth is a public health concern because of the immediate and long-term health risks associated with tobacco use such as asthma, chronic cough, chronic obstructive airways disease, cancers and cardiovascular diseases. Adolescent tobacco use has also been linked to other risky health-related behaviours, mental health problems, suicide, motor vehicle accidents, violent crime and even dental problems (US Department of Health and Human Services, 2004). Furthermore, research on the sequence of drug use suggests that cigarette smoking may serve as a gateway to illicit drugs (Mackay and Eriksen, 2002). Tobacco use in any form is dangerous and addictive and every effort should be made to discourage its use. According to Greaves (2002); Philips (2010), substances that are smoked include: Marijuana (cannabis), Tobacco, Clarified butter (ghee), Fish offal, Dried snake skin, Pastes molded around incence sticks, Ayurveda (for medical purposes), Dhumrapana (drinking smoke). Similarly, USDHHS (2010) hinted that smoked tobacco products which may be cigarettes, pipes, cigars or hand-rolled tobacco are particularly harmful because the burning process releases a dangerous cocktail of about 7,000 chemicals of which about 70 are known carcinogens.

Types of Smokers

Ekrakene and Igeleke (2010) hinted that individuals who smoke tobacco can be categorized into active smokers, passive smokers and non smokers. According to them, active or actual smokers are those that voluntarily inhale

tobacco smoke; passive smokers are also known as secondhand smokers and this is the involuntary inhalation of smoke from tobacco products, scientific evidences have shown that exposure to second-hand tobacco smoke causes death, diseases and disability and it is on the basis of the risk that passive smokers are exposed to that led to the prohibition of tobacco smoking in public places because second-hand (passive) smokers are exposed to the same problems as active smokers; lifelong non-smokers with partner who smoke in the home have 20-30% greater risk cancer and those exposed to cigarette smoke in the work place have an increased risk of 16-19%; nonsmokers are those who do not inhale tobacco smoke voluntarily or involuntarily which is a very rare thing. There are three types of smokers, viz:

Primary or Active Smokers: These are habitual smokers. They just cannot do anything if they have not smoked.

Secondary or Passive Smokers: This category of smokers are occasional smokers, they sometimes indulge in it to socialize.

Tertiary Smokers: They can be said to be unintentional smokers. They inhale the smoke because of their closeness to the scene of the smoke e.g. waiters and waitresses in bars.

Why Adolesents Smoke

Once smoking has begun, cessation is difficult and smoking is likely to be a long-term addiction because many professors of medicine and doctors who despite the quitting smoking:

- i. *Support:* Good role-modeling especially by parents, educational and religious leaders will help them in quitting. The right support from friends and family members who are committed to helping can make the first week after quitting much easier. Support can also be found on-line in various groups and forums.
- ii. *Preparing for Cravings:* It means preparing for the cravings one will have ahead of time. Healthy diet should be taken to minimize the withdrawal symptoms and keep the energy up.
- iii. *Exercise:* Exercise is one of the best things one can do during the first weeks because it helps to reinforce ones commitment to his/her health. It helps to remove the toxins and nicotine from the body.
- iv. *Drink Plenty of Water:* Water is important for someone who just quitted smoking because the body is struggling to wash impurities out of the body and the main avenue for doing that is with water.
- v. *Take Vitamins:* Smoking cigarettes robs the body of vital nutrients. Taking a multivitamin every day can help the body get through the toughest first weeks and allow the body to acclimatize.
- vi. *Inclusion in School Curriculum:* Including smoking education in the school curriculum will bring knowledge about the implication of smoking closer to these adolescents.
- vii. *Enforcement of Government Policies:* Policies prohibiting the advertisement and use of tobacco in public places should be properly enforced.

Implications of Smoking

According to American Cancer Society (2009), smoking causes certain fatal diseases, such as COPD (emphysema and chronic bronchitis), cancer and ischemic heart disease. Between 1950 and 2000, approximately 70 million people died due to tobacco use; over the next fifty years, another 450 million might die from smoking-related diseases; annually, 8 million people become ill with pulmonary tuberculosis and 2 million people die from this disease worldwide (Centers for Disease Control and Prevention, 2002; Ekrakene and Igeleke, 2010).

WHO (2008) hinted that the implications of smoking include health implication, social implication, financial implication, psychological implication, educational implication, and air pollution. They are underneath discussed:

Health Implication: Medical studies have proven that smoking tobacco is among the leading causes of many diseases such as lung cancer, heart attacks, erectile dysfunction and can also lead to birth defects. Others are:

i. Gastro intestinal disorder: such as mal-absorption, ulcers, inflammation of the gastro intestinal tract e.t.c..

Metabolic disturbance: such ashypokalemia, hypomagnesemia e.t.c.

- *ii. Cardiovascular problem:* The disturbance caused include hypertension, atherosclerosis, cardiomyopathy e.t.c.
- *iii.* Endocrine system disorder: The problem include diabetes and pancreatitis.

Central nervous system: The problem include depression, organic brain syndrome, sleep disturbances, memory loss e.t.c.

- *iv.* Neuro-muscular problem: The problem include myopathy.
- *v. Financial Implication:* Smoking brings additional spending. It drains the purse of the smoker thereby causing (sometimes) serious financial hardship for the individual.
- *vi. Psychological Implication:* It can cause personality disorder. They become irresponsible, maladjusted, poor dressing habit.

- *vii. Educational Implication:* Adolescents who smoke easily engage in gangsterism, truancy, vandalism and all sorts of vices that may eventually lead to poor performance, repeat and eventual withdrawal or expulsion.
- *viii. Social Implication:* Adolescents may engage in stealing so as to gratify their desire to smoke. Hence it brings social stigma.
- *ix. Air Pollution:* The smoke released during smoking serves as pollutant to the environment.

Tips on Quitting Smoking

According to WHO (2002) West and Shiffman (2007), Gilman and Xun (2003), the following tips can help in quitting smoking:

- viii. *Support:* Good role-modeling especially by parents, educational and religious leaders will help them in quitting. The right support from friends and family members who are committed to helping can make the first week after quitting much easier. Support can also be found on-line in various groups and forums.
- ix. *Preparing for Cravings:* It means preparing for the cravings one will have ahead of time. Healthy diet should be taken to minimize the withdrawal symptoms and keep the energy up.
- x. *Exercise:* Exercise is one of the best things one can do during the first weeks because it helps to reinforce ones commitment to his/her health. It helps to remove the toxins and nicotine from the body.
- xi. *Drink Plenty of Water:* Water is important for someone who just quitted smoking because the body is struggling to wash impurities out of the body and the main avenue for doing that is with water.
- xii. *Take Vitamins:* Smoking cigarettes robs the body of vital nutrients. Taking a multivitamin every day can help the body get through the toughest first weeks and allow the body to acclimatize.
- xiii. *Inclusion in School Curriculum:* Including smoking education in the school curriculum will bring knowledge about the implication of smoking closer to these adolescents.
- xiv. *Enforcement of Government Policies:* Policies prohibiting the advertisement and use of tobacco in public places should be properly enforced.

Conclusion and Recommendations

The Nigerian government has done quite a lot in tackling tobacco problems in the country; however, much is yet to be done. The government through the Federal Ministry of Health should not only warn the populace that smoking is dangerous to health, they should equally demonstrate the political will that will make tobacco business very unattractive on the Nigerian shores. Government should ban the sale and distribution of tobacco and tobacco related products. The government should not see tobacco companies as an employment or revenue generating venture at the expense of the undiscerning youths. Government at all levels must promote more public awareness of the harmful effects of smoking and ensure availability and affordability of treatment options for tobacco dependence. Also, as responsible citizens, people should take responsibility for their wellbeing by avoiding this injurious practice.

References

- AmericanCancerSociety.(2005)","CancerFactsandFigures",[Online]Available:http://our.cancer.org/downloads/STT/CAFF2005f4PWSecured.pdf(June 6, 2010)
- American Cancer Society. (2009)", "Atlanta: The Society. Cancer Facts and Figures 2007-2009", [Online] Available: http://www.cancer.org/docroot/ipg.asp (March 29, 2010)
- Centers for Disease Control and Prevention (CDC). (2002)", "Cigarette Smoking among Adults--United States. MMWR Morb Mortal Wkly Rep., 51(29):642-5.
- Centre for Disease Control and Prevention. (2012)", "Youth and Tobacco Use", [Online] Available:http://www.cdc.gov/tobacco/datastatistics/fact_sheets/youth_data/tobacco_use/index.htm (June 6, 2010)
- Centre for Disease Control. (2004)", "American Legacy Foundation Factsheet on Lung Cancer: The Health Consequences of Smoking", A Report of the Surgeon General. [Online] Available:http://www.treas.gov/press/release/reports/tobacco.pdf. (July 26, 2010)
- Ekrakene, T. and Igeleke, C.L. (2010)", "Prevalence of Pulmonary Tuberculosis among Active and Passive Smokers of Cigarette in Benin City, Nigeria", International Journal of Biomedical and Health Sciences, 6(1): 91-96. [Online] Available: http://www.asopah.org (June 6, 2010)
- Gilman, S.L. and Xun, Z. (2003)", "A Global History of Smoking", Reaction Books. [Online] Available:http://books.google.com/?id=mM5bybuVcw(&printsec=frontcover&dq=The+Nazi+Warton+ cancer. (July 26, 2010)
- Greaves, L. (2002)", "High Culture; Reflections on Addiction and Modernity", Edited by Anna Alexander and Mark S. Roberts. State University of New York Press. [Online] Available: http://www.cdc.gov/mmwr/preview/mmwrhtml/mm5644a2htm (July 27, 2010)

- Lock, S. Reynolds, L.A. and Tansey, E.M. (2003)", "The History of Smoking and Health", (2nd ed), Rodopi. [Online] Available: http://books.google.com/?id=mM5bybuVcwC&Printsec=FrontCover&dq=smoke (July 27, 2010)
- Mackay, J. and Eriksen, M. (2002)", "The Tobacco Atlas", [Online] Available: http://www.who.int/tobacco/en/atas4.pdf (July 27, 2010)
- National Population Commission. (2009)", "Nigeria Demographic and Health Survey. [Online] Available: http://www.measuredhs.com/pubs/pdf/ FR222/FR222.pdf (July 27, 2010)
- Odukoya, O.O., Odeyemi, K.A., Oyeyemi, A.S. and Updhyay, R.P. (2013)", "Determinants of Smoking Initiation and Susceptibility to Future Smoking among School-Going Adolescents in Lagos State, Nigeria. Asian Pacific Journal of Cancer Prevention, 14 (3), 1747-1753.
- Phillips, J.E. (2010)", "African Smoking and Pipes. *The Journal of African History*, 24(3). [Online] Available: http://bjm.bjmjournals.com/cgi/reprint/328/7455/1529 (July 26, 2910)
- Tyas, S.L. and Pederson, L.L. (1998)", "Psychosocial Factors Related to Adolescent Smoking: a Critical Review of the Literature. *Tob Control*, 7, 409-20.
- US Department of Health and Human Services. (1994)", "Preventing Tobacco Use among Young People", A Report of the Surgeon General, Atlanta, Georgia: Public Health Service, Centers for Disease Control and Prevention, Office on Smoking and Health. US Government Printing Office Publication No S/N 017-001-00491-0.
- US Department of Health and Human Services. (2004)", "The Health Consequences of Smoking: a Report of the Surgeon General. U.S. Department of Health and Human Services, Centers for Disease Control and Prevention, Office on Smoking and Health.
- US Department of Health and Human Services. (2010)", "How Tobacco Smoke Causes Disease: The Biology and Behavioral Basis for Smoking Attributable Disease", A Report of the Surgeon General. Atlanta, GA: U.S. Department of Health and Human Services, Centers for Disease Control and Prevention, National Center for Chronic Disease Prevention and Health Promotion, Office on Smoking and Health.
- West R. and Shiffman, S. (2007)", "Fast Facts: Smoking Cessation", Health Press Ltd. [Online] Available: http://www.SmokingCessationGuide Here.net (July 26,2010)
- World Health Organistion. (2008)", "Report on the Global Tobacco Epidemic", [Online] Available: http://www.who.int/tobacco/framework/WHOFCTC english.pdf (July 26, 2010)
- WHO. (2002)", "Smoking Statistics", World Health Organization Regional Office for the Western Pacific. 2002. [Online] Available: http://www.wpro.who.int/mediacentre/factsheets/fs20020528.htm (July 26, 2010)
- WHO. (2012)", "Tobacco Fact Sheet", [Online] Available: http://www.who.int/mediacentre/factsheets/fs339/en/ index.html (June 6, 2010)

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