



Perceived Barriers To Smoking Cessation Among Undergraduate Students In Ignatius Ajuru University Of Education, Port Harcourt Rivers State

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ABSTRACT

This study was conducted to ascertain the perceived barriers against smoking cessation among undergraduate students in the Ignatius Ajuru University of Education, Port Harcourt, Rivers State, Nigeria. The study adopted the cross-sectional survey research design using a sample of 205 undergraduate students aged 18-35 years. The sample was drawn using multistage sampling technique. A researcher-developed questionnaire was used to draw data from the respondents. Data analysis was done using mean, standard deviation rank-order to identify the perceived barriers to smoking cessations. From the result obtained, it was shown that includes the major barriers to smoking cessation included previous failure to quit, negative effect of social media and entertainment, concerns about health, and physical addiction. Based on this result, it was recommended that seminars/workshops should be conducted on campuses to enlighten students on the hazards of cigarette smoking, while also providing strategies on how to successfully overcome smoking addiction.

Keywords: smoking cessation, undergraduate students,

INTRODUCTION

Globally, the health and economic implications of cigarette smoking has been receiving considerable attention. Par the World Health Organizations (WHO, 2017) estimates, over six million deaths globally can be attributed to tobacco smoking. While over one billion people practice tobacco smoking, recent statistics shows that there is an increase in the incidence of smoking especially among the youths, notably among university students (Emerole et al, 2013). The impact of this worrisome trend on the present academic prospect of students and their future implications have raised considerable concerns in both policy discourse and academic research.

While these concerns remains, there is credible evidence that tobacco companies are expanding their market into developing countries, including Nigeria. Nigeria, like most other developing countries have failed to develop adequate response to these trends and threats. As such it is estimated that by 2030, these developing countries would account for more than 80% of tobacco-related deaths globally (Egbe et al, 2016). This is because both direct and indirect smoking (second-hand smoking) are dangerous and are the leading cause of serious medical conditions such as cardiovascular and respiratory diseases, including coronary heart disease and lung cancer. It causes low birth weight and sudden death in pregnant women and infants, respectively (WHO, 2016).

Recent empirical evidence shows that most individuals starts smoking during the adolescent stage where there is a higher need for exploration and independence. In their study of university students in Yemen, Nasser and Zhang (2019) reported that cigarette smoking was greater among male students than among female students. Furthermore, Emerole et al. (2013) in their study of students in Imo State University Owerri, reported a cigarette prevalence of 27% among the 350 respondents. Among the reasons advanced

for this relative low prevalence was the increased awareness of the health and social hazards associated with smoking. Furthermore, from their study, it was also reported that most of the individuals sampled admitted their desire to quit smoking, with some reporting failed attempts to quit. It has therefore become important to investigate on the barriers or obstacles against cigarette smoking among university students. However, the current study was conducted using students in Ignatius Ajuru University of Education.

Within the health behaviour literature, barriers are operationalized as factors or variables that prevent individuals from engaging in positive behaviour change. Broadly, barriers are categorized as either structural or individualized. This conceptualization of barrier is consistent with the Social Determinants of Health Framework (SDHF) which maintains that individuals' health actions are influenced by a combination of factors across different levels which ranged from individual genetic and physical characteristics, social and community networks, to broader influences of culture, socioeconomic determinants and the environment (Marmot, 2005). Utilizing this framework, this study recognizes that barriers limiting smoking cessation among undergraduate students could also be individual, social and cultural.

Previous studies have attempted to investigate some barriers to smoking cessation among different population with different results obtained. For instance, Chau et al (2019) investigated on the barriers to smoking cessation among individuals attending a primary care setting in Malaysia. The study adopted a qualitative research design with data collected using semi-structured interview that were audio taped. Result from the study showed that five themes emerged on the barriers to smoking cessation which included personal and lifestyle factors, nicotine addiction, socio-cultural norms, misconception and failed assisted smoking efforts. Similarly, in their study using respondents from Pakistan, Hameed and Makih (2021) adopted a qualitative design to explore barriers to smoking cessation in marginalized communities of Islamabad and the possibility of their use of Harm Reduction Products (HRPs), primarily e-cigarettes. Data was collected from 48 respondents using the interview process. Result from the study showed that the major barriers to smoking cessation were peer pressure and friendship. Furthermore, lack of knowledge on smoking alternatives was identified to be a major reason for not seeking medical assistance for quitting smoking.

Adopting a quantitative approach towards establishing the barriers and motivation towards smoking cessation in Singapore and the role of physicians, Joshi et al (2010) used a sample of 175 physicians and 347 patient-smokers who completed a written questionnaire. The result from the study revealed that the top two major motivations cited by respondents for wanting to quit smoking were concern about their own health and concern about the health of family members and friends. The third reason given by patient-smokers was the cost of cigarettes. Similarly, Qidwai (2004) investigated on the perception of family practice patients on the barriers to smoking cessation in Pakistan. Data was collected from a sample of 100 patients using a questionnaire-based survey from the Khan University Hospital, Karachi, Pakistan. The result showed that the major obstacles against smoking cessations included craving for smoking, fear of inability to cope with stress, and increased irritability were identified as the major factors holding them back from smoking cessation.

A review of the studies above showed that previous researchers have attempted to investigate on some barriers against smoking cessation. However, none of the studies above have investigated on the barriers to smoking cessation among undergraduate students in Ignatius Ajuru University of Education in Port Harcourt, Rivers State, Nigeria. This study is imperative because Ignatius Ajuru is located in the heart of Port Harcourt Metropolis which have been reported to have a high prevalence level of cigarette smoking by Okagua et al (2016). Generally, many students who are in the youth phase of their lives start smoking out of curiosity, and many become habitual smokers during this period. Factors related to habitual smoking include the perception of cigarettes, a combined use of alcohol and drugs, intrafamilial linkage, and smoking by friends and parents. In particular, along with alcohol, smoking is known to be a gateway to other types of drug abuse. For these reasons, it is crucial to identify not only factors that drive smoking behaviour, but also barriers to smoking cessation among this special population. (Tucker et al, 2003). It is based on this observation that the present study sought to investigate on the barriers to smoking cessation among undergraduate students in the Ignatius Ajuru University of Education, Port Harcourt Rivers State.

METHODOLOGY

A cross-section survey research design was adopted for this study using a sample of 205 undergraduate students aged 18-35. The sample was drawn using a multistage sampling technique involving stratified, simple random and convenience sampling techniques. Stratified sampling technique was used to draw a four faculties from the faculties in the institution. Thereafter, two departments were drawn using simple random sampling techniques from each faculty that was selected. Thereafter, convenience sampling technique was employed to draw a sample 100 students from each department. Effort was made to draw students from each academic level in the department to be included as the sample for the study. Finally, purposive sampling technique was used to draw the final sample of 205 respondents who self-reported as smokers. Smokers in this study referred to those who have been taken at least a stick of cigarette in the last three months.

Ethical clearance was obtained from the Research and Ethic Committee of the Ignatius Ajuru University of Education, as well as the deans of faculties and head of departments in the respective departments chosen for the study. Individual respondents were also provided with consent forms which assured their confidentiality and freedom to exit without any consequence.

The instrument for data collection was a researcher developed self-report questionnaire which sought to identify the barriers to cessation of smoking among undergraduates. The instrument was broadly divided into three broad sections. The first section contained spaces for demographic variables such as their age, sex, marital status, level of study, faculty of study and residence. The second section of the questionnaire sought to establish the various barriers to smoking cessation as obtained from the literature. This section was developed using a four-point Likert frequency scale of Regularly (RE), Sometimes (SO), Rarely (RA) and Never (NE) which were scored 4, 3, 2 and 1 point(s) respectively.

Data entry and analysis was done using the Statistical Package for Social Sciences (SPSS) software Version 21 (IBM Corporation, Atlanta, GA, USA). The results obtained were presented in tables as shown below. First, the demographic details of respondents were presented before their responses on the barriers were presented. Mean, standard deviation and rank-order were used to identify the perceived barriers to smoking cessations.

RESULTS

Table 1: Socio-demographic variables of respondents

Variables	Frequency	Percentage
Age		
18-25	123	60
26-35	82	40
Sex		
Male	193	94.16
Female	12	5.85
Marital Status		
Single	175	85.36
Married	30	14.64
Level of Study		
100	41	20
200	43	20.98
300	57	27.81
400	64	31.21
Faculty		
Science-related	61	29.76
Art-related	37	18.05
Education-related	107	52.19
Residence		
On-Campus	88	42.93
Off-campus	117	57.07

From Table which showed the socio-demographic variables of respondents used in the study, it was shown that a total of 205 undergraduates were used for the study. The table further showed that 123 (60%) were between the ages of 18-25, while 82 (40%) were between 26-35 years. Furthermore, 193 (94.16%) were males while 12 (5.84%) were females, while 175 (85.36%) were singles with 30 (14.64%) indicated there were married. On their level of study, 41 (20%) were in 100 level, with 43 (20.98%) and 57 (27.81%) being in 200 and 300 levels respectively, while 64 (31.21%) indicated being in 400 level. In addition, 61 (29.76%), 37 (18.05%) and 107 (52.19%) reported being in science-related, art-related and education-related faculties respectively. On their residence, 88 (42.93%) reported residing on campus, while 117 (57.07%) indicated that they reside off-campus.

Table 2: Barriers to Smoking Cessation among undergraduates

S/N	List of Barriers	Mean	SD	Rank	Decision
1	Craving/Physical addiction	3.02	0.78	3 rd	Accepted
2	Tried quitting before and it was too hard	3.11	0.81	1 st	Accepted
3	Fear of losing companions and friends who smoke	2.67	0.77	6 th	Accepted
4	Concerned that I would gain weight	2.27	0.61	9 th	Rejected
5	Concern that I will feel sick	2.59	0.65	7 th	Accepted
6	Lack of substitute to help during the cessation process	2.83	0.94	5 th	Accepted
7	Ridicule from friends and social network	2.42	0.64	8 th	Rejected
8	Fear of failure after quitting	3.04	0.73	2 nd	Accepted
9	Negative effect of social media and entertainment	2.90	0.82	4 th	Accepted

From the results shown in Table 2 on the barriers to smoking cessation among undergraduate students, it was shown that the major barriers in their order of difficulties included previous attempt to quit (mean = 3.11, SD = 0.81), fear of failure after quitting (mean = 3.04, SD = 0.73), craving/physical addiction (mean = 3.02, SD = 0.78), negative effect of social media and entertainment (mean = 2.90, SD = 0.82), lack of substitute to help during the cessation process (mean = 2.83, SD = 0.94), fear of losing companions and friends who smoke (mean = 2.67, SD = 0.77) as well as concerns about falling sick (mean = 2.59, SD = 0.65). On the other hand, some factors which were not accepted as barriers included ridicule from friends and social network (mean = 2.42, SD = 0.64) and concerns about weight gain (mean = 2.27, SD = 0.61).

DISCUSSION OF FINDINGS

Despite the deleterious effect of smoking on the physical, mental, social and economic health of young people, including undergraduates, recent evidence points that many still indulge in this act. Despite repeated warnings from government agencies and even cigarette manufacturers, many individuals still find it hard to break free from the habit. It was against this background that this study sought to determine some barriers and obstacles against smoking cessation among undergraduate students in Ignatius Ajuru University of Education.

From the result obtained, the major obstacle holding back the respondents from smoking cessation is their concerns that they have tried quitting before but it was too hard. This phenomenon is what is generally referred to as learned helplessness. Many respondents have after repeated effort realized that they eventually relapsed which is thus a major barrier against their effort to break free from smoking. The result from this study is similar to that obtained by Qidwai (2004) who obtained that many among patients in Pakistan, there is a significant tendency for many to stop making attempts to break cease smoking after more than one attempt. Also, in their study of barriers to smoking cessation in Singapore, Joshi et al (2010) obtained that most respondents stated after trying to quit smoking with no success, they have decided to continue smoking.

Another identified barrier to smoking cessation from this study is craving and physical addiction. This result is not surprising but expected because it is evident that smoking is a leading cause of nicotine addiction globally. According to a systematic review by Flemming et al (2015) on smoking cessation among partners of pregnant women, the major barrier identified was addiction to smoking. Similarly, as

Igwe et al., (2021) obtained from their study, even though undergraduates in Nigerian universities have adequate knowledge on the harmful effects of smoking, the addiction to the substance is a major factors why most of them cannot stop smoking. Another result obtained from the study showed that another major factor which was a barrier to smoking cessation is the negative effect of social media and entertainment. This result is not surprising but expected because in social media and other forms of entertainment, there is a considerable glamorization of smoking behaviour by celebrities and other social media influencers. Furthermore, the widespread use of social media by undergraduate could imply that many undergraduates would be exposed to contents where smoking is promoted. As Renzelli (2020), most tobacco companies have resorted to using social media influencers to promote smoking and sales of cigarettes.

Finally, one of the major barriers to smoking cessation identified among the respondents is the lack of substitute to help during the cessation process. As Popova and Ling (2013) advanced, the use of alternatives or substitute to tobacco smoking is very helpful in the process of helping individuals break free from the addiction process. However, like they concluded, alternative tobacco products are attractive to smokers who want to quit smoking, but these data did not indicate that alternative tobacco products promote cessation.

CONCLUSION

This study revealed that the major factors which are barriers to smoking cessation among undergraduate students includes previous failure to quit, negative effect of social media and entertainment, concerns about health, and physical addiction. In this direction, seminars/workshops should be conducted on campuses to enlighten students on the hazards of cigarette smoking, while also providing strategies on how to successfully overcome smoking addiction. Lectures could be delivered on public advocacy days to draw awareness. Public health practitioners should build a robust information database to provide alternative for those making attempts to stop smoking.

Limitations of the Study

There are some limitations to this study. First of all, this survey was limited to one of all the universities in Nigeria, which is located in a particular region. This may limit the generalizability of the findings. Also, the data were collected among students that were available on the day of the survey and self-reported use of tobacco products may have been under-reported, and recall bias was likely to occur in the study. Despite this challenge, it is believed that this study has contributed to knowledge by establishing the perceived factors which are considered barriers to smoking cessation among students.

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