

# **Adherence of Students in the Anti-Smoking Campaign in Kidapawan City**

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## **ABSTRACT**

This study determined the influence of socio-demographic profile and adherence of students in the anti-smoking campaign. The descriptive-correlational design utilized in this study. Data were gathered through survey questionnaire from 100 respondents. Mean was analysing the socio-demographic profile and adherence of students. Pearson-product moment correlation was used to analysing the relationship that exists between the variables socio-demographic profile and adherence of students. Further, the multiple regression analysis was used to measure the influence of. The sex (t/F -714 p-value .477) and income (t/F -.130 p-value .873) are not significant while the age (t/F -2.097 p-value 0.39) is significant. Level of awareness of the public on anti-smoking and to determined the significant differences on the level of awareness in the implementation anti-smoking campaign. Lastly the anti-smoking campaign the overall mean is 4.12 and the standard deviation is .576.

**Keywords:** *Socio-demographic Profile, Level of Adherence, Anti-Smoking Campaign*

## **INTRODUCTION**

Adherence on cessation and underlying factors contributing to low adherence. Adherence addresses the practicalities of taking medication, change perception about medication, such as reasons to take it or concern about doing. ( Peng, Annie Ruoqing 2020). Smoking is an unhealthy behavior that can become an addiction. It is the most important preventable cause of premature death. It includes all forms of smoking, such as cigar smoking, cigarette smoking, pipe smoking, and exposure to secondhand smoke. In many studies, smoking is associated with higher levels of disability and a higher probability of dying. Smoking frequently leads to cancer, cardiovascular

diseases, respiratory diseases, or cerebrovascular diseases. Compared to non-smokers, current smokers show higher levels of disability, and heavy smokers (more than one pack per day) are in poorer health than light smokers. Likewise, smoking until death can produce a difference in age at death of about 10 years compared to lifelong non-smokers (Doll et al. 2004). But negative effects can be reversed through smoking cessation (Ostbye et al. 2002, Doll et al. 2004, Mitra et al. 2004). Accordingly, the probability for ill health decreases with every year of smoking cessation. It is supposed that the negative effects of smoking will be outbalanced after 15 years of a smoking-free life.

All forms of smoking are harmful and there is no form of safe or safer smoking (William C. Lloyd 2021). According to the Global Youth Tobacco Survey, the number of young smokers is increasing. Furthermore, health officials had previously raised concerns about the increasing number of Filipino smokers aged 13 to 15. Among Filipino students aged 13 to 15 years old, tobacco use increased from 13.7% in 2011 to 16% in 2015 based on the Global Youth Tobacco Survey. Some youth those who are poor, whose social networks are characterized by high smoking rates and whose personality is characterized by sensation-seeking and deviance tolerance begin experimenting in early adolescence, and these youth tend to be at high risk for many risk behavior. Some youth exhibit symptoms of addiction soon after smoking onset, and well prior to regular use. Many youth tobacco users report wanting to quit and trying but failing to succeed and exposure to tobacco marketing is one cause of youth smoking. (James D. Sargent 2014)

### **Statement of the problem**

This study determined the relationship between socio-demographic profile and Adherence of Students in the Anti-Smoking Campaign in Kidapawan City. More specifically, it sought answers to the following questions:

1. What is the level of socio- demographic profile in terms of:
  - 1.1 Age
  - 1.2 Sex
  - 1.3 Income?
2. What is the level of Adherence of students in the Anti-Smoking Campaign?
3. Is there a significant relationship between socio-demographic profile and adherence of students?
4. Do socio-demographic profile significantly predict Adherence of Students?

## **FRAMEWORK**

Interventions based on current theories of behaviour change place heavy emphasis on benefits to be accrued by behaviour change and the relative ease of change, and this approach has proven effective at helping people initiate changes in their health practices (Lichtenstein and Glasgow, 1992; Wing, 1997). Intervention strategies designed to heighten people's awareness of the benefits have included education about health benefits and testimonials from people who have successfully changed their behavior. Strategies designed to lessen the costs of behavior change include practical aids such as meal replacements (Pirie et al., 1992; Jeffery et al .1993). The major shortcoming of these interventions has been their limited success in promoting behavioral maintenance, i.e. the interventions have the ability to elicit the initiation of new behavior's, but not the ability to sustain those changes over time. The independent variable is the socio-demographic profile which contains 3 dimension such as age, sex, and monthly income. The dependent variable is the level of adherence smoking which measured two dimensions, mass media campaign and Parental approval.

## **METHOD**

### **Research Design**

Quantitative research deals in numbers, logic and objective stance. It focuses on numeric and unchanging data and detailed, convergent reasoning, generation of a variety of ideas about a research problem. Its main characteristics are the data is usually gathered using structured research instruments, the results are based on larger sample sizes that are representative of the population, the research study can usually be replicated or repeated, given the high reliability and the researcher uses research tools, such as questionnaires or computer software to collect numerical data (Babbie et al. 2010). The correlational design is a technique to describe and measure the degree of association (or relationship) between two or more variables or sets of scores (Creswell, 2002). It determined the socio-demographic profile in terms of age, sex and monthly income and the level adherence in terms mass media campaign and parental approval. Correlational research investigates the relationship of the dependent and independent variable and uses surveys, classification and data reduction techniques, and assessments of relations among variables.

### **Respondents**

The respondent of the study are the Criminology students presently enroll school year 2021-2022. There one hundred (100) participants who that served as part of the study were selected using the purposive sampling technique.

### **Instruments**

Sets of adopted questionnaire were used to gather from the respondents. Even if the tools already have validity and reliability assessment. These instruments were subjected to validity and reliability test. These instruments include socio demographic profile and level of adherence.

### **Statistical Tools**

Mean used to measure the socio-demographic profile and level of adherence of students in the anti-smoking campaign. Standard Deviation was used to determined the socio-demographic profile and level of adherence of students in the anti-smoking campaign. Person Product Moment Correlation is used to determined the relationship between the socio-demographic profile and level of adherence of students.

## **RESULT AND DISCUSSION**

### **Socio-demographic Profile of Students**

Table 1 shows the socio-demographic profile of anti-smoking campaign in Kidapawan City. The socio-demographic profile contains age, sex, and monthly income.

**Table 1**

#### **Age**

	<b>Frequency</b>	<b>Percent</b>
20 & above	64	64.6
Age less years old than 20	35	35.4
Total	99	100.0

In terms of age, it appears that greater percentage of the respondents are the age of 20 & above with frequency of 64 or 64.6 percent, and the least are in age bracket

of less years old than 20, 35 or 35.4 percent. The total the frequency is 99 and percent of 100.0. Increasing age and increasing experiences, older people have more opportunities to get into smoking than younger people (Boss & Rose, 1997).

### Sex

		Frequency	Percent
Sex	Male	70	70.7
	female	29	29.3
	Total	99	100.0

The table indicates that the study male dominated with 70 or 70.7 percent while female was only 29 or 29.3 percent. This only shows that majority of the respondent were male. Cigarette predominantly used by men. In early times, women smoked less compared to men because of the norm that smoking in men connotes power, making it a symbol of masculinity, whereas smoking in women signals promiscuity (Tax Research journal 2016).

### Income

		Frequency	Percent
Income	without income	52	52.2
	less than 3 thousand	30	30.3
	Above 3 thousand	17	17.2
Total		99	100.0

The table likewise conveys that the respondent without income is 52 or 52.5 percent, less than 3 thousand is 30 or 30.3 percent and above 3 thousand is 17 or 17.2 percent. This result differs from Laaksonen (2004) who found that those low income often smoke than those with higher income. Adolescents' income and smoking is likely to be heterogeneous, because personal income during adolescence reflects complex dimensions (Julian Perelman, Joana Alves 2017). Personal income may have a different impact on demographic subpopulations, defined in terms of age and sex. It was observed, in particular, that the relationship was lower among adolescents from low

SES families, attributed potentially to the greater access to cigarettes from non-commercial sources and illegal trade. We may also expect the link to be greater among older adolescents who earn more money and are more likely to be addicted, and may thus rely more heavily upon cigarettes from commercial sources. Finally, smokers who obtain their cigarettes from commercial sources may be more influenced by their financial means than those who obtain them from non-commercial ones (Timo-Kolja Pfoertner, Irene Moor, Bruno Federico, Mirte A. G. Kuipers, Matthias Richter, Arja Rimpela, Anton E. Kunst, and Vincent Lorant 2017)

**Table 2**  
**Level of Adherence**

<b>Questionnaire</b>	<b>Mean</b>	<b>Std. Deviation</b>	<b>Description</b>
Policy briefing is facilitated to individual	4.11	.587	High
Motivational interviewing techniques	4.20	.571	High
There are specific resources allocated for cessation support activities	4.19	.698	High
Banning of smoking in public places	4.22	.985	High
Advertisement or promotion in newspaper or magazine is helpful	4.17	.729	High
Parents should prohibit first their kids	4.26	.803	High
Smoking should prohibited in public places	4.09	1.089	High
Have you been influence by the health warning on cigarette packages	3.85	1.082	High
Ubiquitous social reinforcing of smoking, little support for quitting	3.90	.920	High
Giving out cigarette to build rapport or promote adherence to care	3.85	1.063	High
Information available on social media and signage on the public places	4.06	.879	High
If smoking areas are designated, they are completely separated from non-smoking areas	4.21	.836	High
Thought other people about the danger of smoking	4.22	.910	High
Coordinate tobacco policy	4.15	.930	High

Take action to control the smokers	4.24	.916	High
There must be smoking cessation available in different barangays	4.20	.869	High
Children are never exposed to passive smoking	4.18	1.014	High
Overall Mean	4.12	.576	High

Adopted to (Merima Ibisevic 2015)

The overall mean is 4.12 with the standard deviation .576 with interpretation of high.

Among the 17 statement, the statement number 6 which is parents should prohibit first their kids got a highest mean of 4.26 with the standard deviation of .803 with interpretation of high. Among the 17 statement, the statement number 10 which is Giving out cigarette to build rapport or promote adherence to care got a lowest mean of 3.85 with the standard deviation of 1.063 with interpretation of low.

To improve adherence to smoking cessation interventions, it is first necessary to identify and understand smoker-level characteristics that drive non adherence (ie, non-conformance with a provider's recommendation of timing, dosage, or frequency of medication-taking during the prescribed length of time (Lauren R Pacek, PhD, F Joseph McClernon 2018).

Parental approval of smoking as one of the most important determinants of adolescent smoking (Shakib et al., 2005). Parental modelling and attitudes appear in the first place. A major risk of adolescents' smoking initiation is the imitation of their parents' smoking behaviour and that observation of parental smoking is associated with adolescent smoking and heavy smoking in early adulthood. This relationship remains even when controlling for peer influences. Besides, having both parents smoking more than doubles the risk of smoking. This risk is smaller when parents are former smokers or declining smokers; and the earlier the parents quit smoking, the lower the risk of adolescent's smoking (Joana Alves, Julian Perelman 2016).

Media is the source to publicize information and create awareness among the society (Elsevier B.V 2017). Televised anti-smoking advertisements are an important component of comprehensive tobacco control programs. They are designed to counter pro-tobacco influences and increase pro-health messages throughout a state, region or community. These advertisements may promote smoking cessation as well as decrease the likelihood of initiation. They also can have a strong influence on public support for tobacco control interventions(Hyland, M Wakefield, Cheryl Higbee 2006)

### **Relationship of Socio-demographic profile and Adherence of Students in the Anti-Smoking Campaign**

It shows the socio-demographic profile and level of adherence of anti-smoking campaign. The result show that there is a significant relationship between the independent variables (socio-demographic profile ) and dependent variable level of adherence

In particular, there is a significant relationship between socio-demographic profile and level of adherence. The positive correlation coefficient suggests that there is a directly proportional relationship between the two variables. In others words, this finding denotes that the increase the students profile and level adherence of anti-smoking campaign. Media is the most important source to publicize information and create awareness to the students (Elsevier B.V 2017). Anti-smoking media campaigns have been shown to increase population-level quit attempts among adults (Durkin, Brennan, & Wakefield, 2012), to reduce smoking initiation among adolescents (National Cancer Institute, 2008), and to reduce smoking risk and prevalence among young adults and college students (Brennan, Momjian, Jeong, Naugle, & Parvanta, 2012; Murphy-Hoefer, Griffith, Pederson, Crossett, Iyer, & Hiller, 2005). Such campaigns are thought to exert their influence by engaging attitudes and beliefs that bear on individuals' decisions to smoke, including perceived norms, self-efficacy beliefs, and beliefs about the benefits and harms of smoking (Agostinelli & Grube, 2003; Capella, Fishbein, Hornik, Ahern, & Sayeed, 2001; Cohen, Shumate, & Gold, 2007; Fishbein & Yzer, 2003)

**Table 3**

**Relationship between the Age, Sex, and Income of Students**

<b>Students</b>	<b>Mean</b>	<b>Std. Deviation</b>	<b>t/F</b>	<b>p-value</b>	<b>Remarks</b>
20 & above	4.03	.625	-2.09	.039	Significant
Age Below 20 years old	4.28	.437			

Table 3 Represent the result of socio-demographic profile. That consists of age, sex, and income. Age 20 & above the mean is 4.03, standard deviation is .625 while the below 20 years old the mean is 4.28, the standard deviation is .437, the t/F is -2.09, p-value .039 and the remarks is significant. Among older age groups that entered adolescence many decades earlier during periods of growing cigarette use, high SES groups should show relatively high rates of smoking, education disparities in smoking should be modest, and smoking should have a relatively small role in accounting for mortality disparities. In contrast, among younger age groups that entered adolescence



during periods of declining cigarette use, lower SES groups should show substantially higher rates of smoking, education disparities in smoking should be greater, and smoking should have a large role in accounting for educational mortality disparities. (Preston and Wang 2006)

Male		4.09	.598	-.714	.477	Not Significant
Sex	Female	4.18	.525			

Sex male the mean is 4.09, standard deviation .598, while the female the mean is 4.18, standard deviation .525, t/F -.714, p-value .477 and the remark is not significant. Gender also plays a role in the diffusion process (Pampel 2002). Although a similar pattern of change occurs for women and men, the process of cigarette diffusion among women typically lags a decade or two behind men (Lopez 1995). Because men adopt cigarettes before women, the earliest stage of the epidemic shows a rising gap between men and women. These status-based processes of change in cigarette smoking should produce diverse mortality disparities across age groups and genders. Because smoking begins by adulthood for the vast majority of those adopting the addictive habit, the attitudes and behaviors at the time of a cohort's adolescence will shape later patterns of smoking. ( Ferrence 1989)

Without income		4.00	.546	.130	.878	Not Significant
Income	less than 3 thousand	4.13	.610			
	Above 3 thousand	4.17	.635			

Income the students without income the mean is 4.00, standard deviation .546, the less than 3 thousand the mean 4.13, standard deviation .610 and above 3 thousand the mean is 4.17, standard deviation .635 while the t/F .130, p-value .878, the remarks is not significant. The result of students profile the sex and income are not significant while the age is significant.

## Conclusions

Based on the findings, the following conclusions were drawn. The review findings were helpful in elucidating the types of tobacco policies being implemented on college students and their effects on the smoking behavior of Kidapawan City. The majority of current research is cross-sectional, which does not provide the needed data in order to make causal statements about anti-smoking policies. Community colleges provide a rich and unique opportunity to collect data on a population that is often older and more racial diverse than a typical college students sample. Also, there is at present a need to understand through research how evidencebased implementation and compliance strategies can be utilized to ensure policy success. A strong policy on paper does not often translate into a strong policy inaction. Thus, comparing policies on the strength of written documents alone is not enough; policies need to be compared on the extent to which they are enforced as well as the impact they have on student behavior. This review may be of particular interest to college in the process of making their own anti-smoking policies. The combined results of the existing studies on the impact of anti-smoking policies on smoking behaviors among kidapawan city college students can help colleges and universities make informed decisions.

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