

**TOBACCO USE AND ITS EFFECTS AMONG ADOLESCENT
SECONDARY SCHOOLS**

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DECLARATION

I hereby declare that this thesis has not been submitted for candidature of any another degree.

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RECOMMENDATION LETTER

This thesis entailed "**Tobacco Use and its Effects Among Adolescent in Secondary Schools**" submitted by **Babita Pokhrel** in partial fulfilment of requirement for the Master's Degree in Health education is under my supervision. Therefore it is recommended for viva voice.

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ABSTRACT

Tobacco use is one of the chief preventable causes of death and illness in the world presently, about four million people world wide die yearly from tobacco related disease i.e. one death every eight seconds .If current trends continue, there will be one death every three seconds by 2030 and a third of them in developing countries.

The study was based on descriptive research design, using quantitative data. For the purpose of study both the primary and secondary data were used. The respondents for the survey were in total 330 adolescents of three secondary school (Pathivara secondary school, Global secondary school) in Damak Municipality. The school was selected by purposive sampling method and 165 respondents were selected by using simple random sampling method and questionnaire was used as a tool for the collection of data. This thesis was structured in five parts, first part deals with the introduction of title, theoretical background, second part reviews the related literature of the relevant works, and third part was methodology of the study, fourth part deals with the analysis and interpretation of data and last part deals with summary, finding, conclusion and recommendation.

The major objectives of this study was to determine the types to find out the impact of tobacco use (both smoked and smokeless tobacco product) among adolescents in secondary school in Damak Municipality of Nepal.

Among the respondents, 35.2 percent were past used and 25.9 percent respondents used for paan masala, pan parag and gutkha, 25.9 percents followed by cigarette. Then, adolescents reported that at least 47.5 percent respondent's father used tobacco.

About 44.2 percent respondent's friend used tobacco. Specially 35.6 percent were used paan masala, pan parag and gutkha 46.6 percents used cigarette. Then, 19 percent were used tobacco in school compound. 39.7 percent respondents save their pocket money for buying any forms of tobacco.

Similarly, 85.5 percent respondents were known about the effect of tobacco use. Main point is that 100 percents adolescents have knowledge on the effect of tobacco in health.

The study revealed that the use of tobacco among adolescents was significantly associated with tobacco use habit of family members and friends, their exposure to pro-tobacco advertisement and environmental tobacco smoke. Level of knowledge regarding impact of tobacco and prevalence of tobacco were significant with the tobacco use habit of adolescents. Thus, educational and counselling program for preventing non-users from using tobacco and for helping current and experimental users to quit tobacco use is necessary. Adolescents should be protected from exposure to tobacco use habit of family members and friends. To protect health and promote healthy environment in school compound. Therefore, It is urgent to take appropriate steps to discourage such expansion before it is too late.

TABLE OF CONTENTS

Contents	Page No.
TITLE PAGE	I
DECLARATION	II
RECOMMENDATION LETTER	III
APPROVAL SHEET	IV
ACKNOWLEDGEMENTS	V
ABSTRACT	VI
TABLE CONTENTS	VIII
LIST OF TABLES	XI
LIST OF FIGURE	XII
ABBREVIATION	XIII
CHAPTER-I: INTRODUCTION	
1.1 Background	1
1.2 Statement of the Problem	5
1.3 Objectives of the Study	6
1.4 Significance of the Study	6
1.5 Delimitations of the Study	7
1.6 Operational Definitions of the Key Terms	8
CHAPTER – II: REVIEW OF THE RELATED LITERATURE	
2.1 Review of Theoretical Literature	9
2.2 Review of Empirical Literature	10
2.3 Implication of the Review for the Study	11
2.4 Conceptual Frame Work	11

CHAPTER – III: METHODS AND PROCEDURES THE STUDY

3.1 Design and Method of the Study	13
3.2 Population and Sample	13
3.3 Study Area/Field	13
3.4 Data Collection Tools and Techniques	13
3.5 Data Collection Procedures	14
3.6 Data Analysis and Interpretation Procedure	14

CHAPTER-IV: ANALYSIS AND INTERPRETAITION OF RESULT

4.1 Demographic and Economics Characteristics	15
4.1.1 Age and Sex of Respondents	15
4.1.2 Education Status	16
4.1.3 Main Income Source of Family	16
4.1.4 Types of Family	17
4.2 Types of Tobacco Use	18
4.2.1 Use of Tobacco	18
4.2.2 Distribution of Respondent School Used Tobacco	18
4.2.3 Consume Tobacco Product	19
4.2.4 Age of First Tried Tobacco	20
4.2.5 Respondent's Knowledge on Types of Tobacco	21
4.2.6 Types of Tobacco Consume Now	21
4.2.7 Types of Tobacco Firsts Consume	22
4.2.8 Consume Tobacco Per Day	23
4.2.9 Gap of Time Consuming Tobacco	23
4.2.10 Respondents Parents use Tobacco	24
4.2.11 Members Use Tobacco in Respondent's Family	24
4.2.12 Types of Tobacco Used by Respondent's Family	25

4.2.13 Respondent's Closet Friend's use Tobacco	26
4.2.14 Types of Tobacco Consume by their Friends	26
4.2.15 Respondents Start to Used Tobacco at First	27
4.2.16 Respondents Tried to Quit this Habit	27
4.2.17 Respondents Use Tobacco in School Compound	28
4.2.18 Distribution of Respondents Manages Money to Buy Tobacco	28
4.2.19 Felling of Respondents by Using Tobacco	29
4.3 Impact of Tobacco Use	30
4.3.1 Respondents Heard about the Effect of Tobacco Use	30
4.3.2 Knowledge about the Effect of Tobacco Use	30
4.3.3 Knowledge on the Effort of Tobacco in Health	31
4.3.4 Effect of Tobacco in Health	31
4.3.5 Respondents Knowledge about the Effects in Economic Status	32
4.3.6 Health Suffers by Using Tobacco	32
4.3.7 Effect have Respondents Suffered	33
4.3.8 Taking Tobacco is Healthy Habits	33
4.3.9 Respondents Seen the People Suffer from Tobacco Use	34
4.4 Summary	34
4.5 Finding	35
CHAPTER-V: CONCLUSION AND RECOMMENDATION	
5.1 Conclusion	38
5.2 Recommendations	38
5.2.1 Recommendation for Policy Related	39
5.2.2 Recommendation for Practice Related	39
5.2.3 Recommendation for Further Research Related	40

REFERENCE

APPENDICES

LIST OF TABLES

Table No.	Table Title	Page No.
1	Distribution of the students according to their age and sex	15
2	Education status	16
3	Distribution of types of family	17
4	Distribution of use tobacco in any form	18
5	Distribution of tobacco use by types of school	19
6	Distribution of knowledge on types of tobacco	21
7	Distribution of respondents by consumes types of tobacco at now	22
8	Distribution first consumes types of tobacco	22
9	Distribution of consume tobacco pre day	23
10	Distribution gaps of time consume tobacco	24
11	Respondents parents use tobacco	24
12	Distribution member use tobacco in respondent's family	25
13	Respondent's closest friends use tobacco	26
14	Distributions the types of tobacco use by their closest friends	26
15	Respondents tried to quit this habits	28
16	Distribution the respondent's use of tobacco in school compound	28
17	How respondents manage money to buy tobacco	29
18	Respondents knowledge about the effect of tobacco use	30
19	Knowledge on the effect of tobacco in health	31
20	Distribution of respondents said effects of tobacco in health.	32
21	Distribution of respondent knowledge about the effects in economics status	32
22	Distribution of respondent's health suffer using tobacco.	33
23	Distribution of effect have respondents suffered	33
24	Distribution of respondents taking tobacco is healthy habits	34
25	Distribution of respondents seen the people suffer from tobacco use	34

LIST OF FIGURES

Figure No.	Figure Title	Page No.
1	Main income source of respondent's family	17
2	Distribution of consume tobacco products	20
3	Distribution respondents age of first tried tobacco	20
4	Distribution Types of Tobacco Use by their Family	25
5	Distribution of respondents start to use tobacco at first	27
6	Distribution of the respondents according to their feelings	29
7	Knowledge on the effect of tobacco in health	31

ABBREVIATION

COPD	:	Chronic Obstructive Pulmonary Disease
DALY	:	Disability Adjusted Life Years
ETS	:	Environmental Tobacco Smoke
FHD	:	Family Health Division
GYTS	:	Global Youth Tobacco Survey
JMC	:	Janta Multiple Campus
MOH	:	Ministry of Health
NGOs	:	Non Government Organization
PPE	:	Probability Proportional to Enrolment Size
PRECEDE	:	Pre-disposing, Reinforcing and Enabling Cues for Educational Diagnosis, Planning and Evaluation
SEAR	:	South East Asia Region
TFI	:	Tobacco Free Initiative
TU	:	Tribhuvan University
WHO	:	World Health Organization

CHAPTER-I

INTRODUCTION

1.1 Background

In Nepal, adolescents comprise more than one fifth (22%) of total population, a proportion that is expected to grow over the years to come due to a high fertility rate. Adolescence is the period of physical, psychological and social maturation from childhood to adulthood. The term "adolescent" refers to individuals between the ages of 10-19 years. There is growing recognition that because of a combination of biological, psychological and social factors, adolescents face many challenges and health risks such as unprotected sex, substance abuse, accidents and violence. The health of adolescents is profoundly associated with their behavior and development process. Healthy development of adolescents depends upon several complex factors: their Socio- economic circumstances; the environment in which they live and grow; the quality of their family, community and peer relationships; and available opportunities for education and access to health information and services. The young people of today are tomorrow's adults. The behavior of adolescent is a potential determining factor for characteristics and behavior of our adults in the future. It is of paramount importance that an environment be created and adequate support provided to enable adolescents to develop to their full potential and enjoy a healthy and responsible adulthood. (1991 census)

Tobacco is a plant grown for its leaves which are smoked, chewed or sniffed for a variety of efforts. It is an addictive substance as it contains nicotine. In addition to nicotine, tobacco contains over 23 known carcinogens and more than 4,000 chemicals. 2,3 Tobacco use is a major worldwide public health problem. It is now by far the largest preventable cause of death in the world. Although there is a health warning on every packet of cigarettes in Nepal indicating that smoking is injurious to health, these warning are illegibly printed. On the other hand, attractive and catchy tobacco advertisements are very common. Thus, the use of tobacco products including cigarettes is increasing in the country.

Tobacco use is one of the greatest burdens to the health and well being of women and girls around the world. At present, tobacco kills more than half a million women per

year worldwide. However, by the year 2020, it is estimated that the global yearly death toll will double.

In several countries, lung cancer has already surpassed breast cancer as the leading cause of cancer deaths among women.

"The tobacco epidemic is an epidemic like no other, it is impossible to blame a biological pathogen a virus, bacillus or bacterium. And neither ignorance nor the surprise effect provides and explanation. The epidemic, or more correctly pandemic, is sustained only by the search for financial gain " Says Dr. Hiroshi Nakajima, Former Director General, WHO.

The correct global trends indicate that use of tobacco is declining in developed countries as control measures take effect. Thus tobacco companies are stepping up marketing in developing countries. As a result, the use of tobacco is increasing especially among adolescents of developing countries. Ignorance about the negative health effects of tobacco use, big budget allocation for promotional activities by tobacco companies and glamour attached to smoking in the media and in advertisements has further exacerbated the problem. Tobacco is unquestionably the substance responsible for the most persistent and most widespread drug dependence, for ahead of alcohol, marijuana, heroin and cocaine. More alarming is the exponential rise in tobacco consumption and the corresponding deaths with age, income and gender being no barrier.

Tobacco and alcohol are the most widely used addictive substances in the world and both have serious public health consequences. Use of tobacco is extremely common throughout the world and most of its use is in the form of cigarettes. The World Bank estimates that in high – income countries, smoking – related health care accounts for 6-15.1% of all annual health care costs. The high smoking related health care costs are particularly worrisome for low- income countries that can least afford the health care burden, where the tobacco epidemic is expected to account for 70 of all tobacco-related deaths in the next 20 to 30 years.

The level of Tobacco use among adolescence of secondary school students affects his/her physical and mental and learning performance as well. So, the study aims at be

finding Tobacco use among adolescent students in secondary schools of Damak Municipality of Nepal.

Adolescence typically describes the years between ages 13 and 19 to and can be considered the transitional stage from childhood to adulthood. There are three types of adolescent stages. They are:

- i) Early adolescent (Generally ages 11 to 14)
- ii) Middle adolescent (Ages 15 to 17)
- iii) Late adolescence (Ages 18 to 21)

Where different changes occurs

1. Physical Changes in Adolescence

i) Physical Changes in Male

- Growth of testes and scrotum
- Growth of public hairs
- First ejaculation
- Growth spurt
- Voice change
- Growth of under arm and coarser body hair
- Oil and sweat glands activated
- Growing facial hair

ii) Physical Changes in Female

- Breast budding
- Growth of bony pelvis
- Growth spurt
- Growth of pubic hair
- Menarche
- Growth of under arm hair and coarser body hair.

- The activation of oil and sweat producing glands.
- Completion of the growth of uterus and vagina

2. Social change of adolescence in male and female

- Searching for identity
- Seeking more independence
- Seeking more responsibility
- Looking for new responsibility
- Thinking more about 'right' and 'wrong'.
- Influence more by friends
- Starting to develop and explore a sexual identity.
- Communicating in different ways.

3. Emotional changes in adolescence

- Moods and feelings
- Sensitivity to others
- Self-consciousness
- Decision- making
- Desire of love and affection
- Feeling of jealousy
- Feeling of loneliness
- Stress, tension, anger, depression

4. Mental Changes in adolescence

- Have creativity
- Have Memorization
- Have understanding
- Have imagination

- Have thinking capacity
- Have logic power

1.2 Statement of the Problem

Tobacco use is the chief preventable cause of death and illness in the world. Most people begin using tobacco before the age of 18. Recent trends indicate that the Smoking prevalence rate among adolescents is rising and age of initiation is becoming younger. If these patterns continue, tobacco use will result in the deaths of 250 million children and young people alive today, a third of whom live in developing countries.

Major consequences of smoking are not manifested until three to four decades after the onset of persistent smoking. Approximately 50% of men in developing countries are smokers and cigarette consumption is steadily rising in these countries, particularly among women and youth. Tobacco use is predicated to be one of the major causes of death and disability-adjusted life years (DALYS) in the 21st century.

Smokers who have taken up the habit in adolescence and continue to smoke regularly have a 50% chance of dying from tobacco-related disease. Half of those persons will die in middle age, thereby losing nearly 22 years of normal life expectancy. With prolonged smoking, smokers have a death rate about three times higher than non-smokers at all ages, starting from young adulthood. Presently, about four million people worldwide die early from tobacco-related disease, i.e. one death every eight seconds. If current trends continue, there will be death every three seconds by 2030.

As tobacco use in developed countries is decreasing, multinational tobacco companies are targeting youths of developing countries through different promotional activities and advertisements. Use of non-smoking tobacco products are increasing in Nepal, as tobacco control programs are very limited and focused only on tobacco products that are smoked.

Tobacco use and other high-risk behaviors are emerging as the significance problems in our society. The unhealthy behaviors acquired during adolescence are continued throughout the life cycle resulting in adverse effects on the individual family and society. Therefore, adolescents and school-aged children should be a primary focus

for intervention strategies for promoting healthy behaviors. Tobacco used by the students are very harmful. Leaving Tobacco practice is the key of the well-being of any society or school. Only a healthy student can appreciate and understand the subject matter.

Most of the adolescent students are affected by many types of diseases like cancer, heart disease, stroke, lung diseases, diabetes and chronic obstructive pulmonary disease (COPD) which includes emphysema and chronic bronchitis. Tobacco also contains nicotine, which is a highly addictive psychoactive drug. Tobacco smoke contains more than fifty chemicals that cause cancer. To develop positive health attitude and behavior on them is indispensable to successful life. Healthy child can learn better and perform better than that of unhealthy one. In this require, this study focus on the following problems /questions.

- Does tobacco use by family members /or friends influence adolescent students to use tobacco?
- What are the conditions of Tobacco use among adolescents of secondary level's students?
- How has affected their health?

1.3 Objectives of the Study

The general objectives of the study were to assess the Tobacco use and its effect among Adolescent in Secondary Schools of Damak Municipality. In this study, specific objectives are as follows;

- To determine the forms of tobacco use among adolescent in grade 8, 9 and 10 in Damak Municipality.
- To find out the prevalence of tobacco use among adolescent.
- To find out the impact of tobacco use among adolescent.

1.4 Significance of the Study

Without maintaining tobacco use practice, better learning is impossible. Thus, the study learning is impossible. Thus the study is an attempt to find out existing tobacco

use among adolescent students in Damak Municipality. So, signifies its importance itself. The significance of the study can be traced out if following points.

- It will be helpful the concerning school administration to plan and implement program relating to tobacco user in their school
- The study will make aware headmaster teacher and school members.
- This study will be helpful to guide the policy makers, programmer, educators and volunteer agencies to improve health and study environment in school.
- The study will serve as a reference material to the concerning research students.

1.5 Delimitations of the Study

Due to lack of sufficient time, financial constraints and the rigorous time schedule the study is being limited in the following points.

- The study area was delimited to Damak Municipality of Jhapa district.
- The study was related only to secondary level adolescents (class 8-10).
- For the sample, the adolescent from three non-governmental secondary schools of Damak Municipality (Pathivara English School, Global English School and Himalaya English School) studying in class 8-10 were taken.
- Among 330 adolescents, only 165 were selected in this study.
- 55-55 adolescents were selected from each school by simple random sampling method for this study.
- This study followed descriptive and quantitative research.
- The study included only the followings areas of tobacco users;
 - Types of tobacco use of finds.
 - Knowledge regarding harmful effects of tobacco use.
 - Perceptions regarding tobacco use.
 - Tobacco use of family members.
 - Impact to health by tobacco smoke.

1.6 Operational Definitions of the Key Terms

For the purpose of this study, the following operational definitions of the key terms were used.

Tobacco use is the use of cigarettes, bidi, surti, khaini, pan masalaa and gutkha in smoking, chewing or sniffing form even one.

Regular user is someone who at the time of the survey, consumed/used any tobacco product at least once a day (People who consumed every day, but not on the days of religious fasting were still classified as regular users).

Occasional user is someone who consumed any tobacco product at least once a week but not every day.

Experimental user is someone who had consumed any tobacco product at anytime but not more than 10 units of tobacco product (e.g. 10 sticks of cigarettes or 10 packet of gutkha) or equivalent amount of tobacco.

Past user is someone who was formerly (i) regular user, or (ii) occasional user and used more than 10 units of tobacco product (e.g. 10 sticks of cigarettes or 10 packet of gutkha) but currently do not consume tobacco at all.

Never user is a person who had never used any tobacco product as of the day of completing the questionnaire.

Knowledge is information, understating and skills gained through learning or experience.

Adolescent student is defined as the secondary school students of grade 8-10 of non-governmental schools within the age range of 10-19 years from Damak Municipality.

CHAPTER – II

REVIEW OF THE RELATED LITERATURE

This chapter presents relevant and factual information related to the present study based on literature cited on the basis of opinions, principles and concepts. It reviews the finding of previous studies by other researches related to the study.

2.1 Review of Theoretical Literature

Tobacco use is increasing at an alarming rate in the developing countries including Nepal. Tobacco was estimated to account for over 3 million annual deaths globally in 1990. Today this figure has risen to about 4 million annual deaths ever day. Today, about one in three adults, or 1.2 billion people smoke worldwide. By 2025, the number is expected to rise to more than 1.6 billion. It is estimated that annual tobacco –attributable deaths will rise to 8.4 million by 2020 and will reach 10 million by 2030. This increase will no however, be shared equality: by the year 2030, 70% of the tobacco attributable deaths will occur in developing countries as deaths in developed regions are expected to rise 50 % from 1.6 to 2.4 million while those in Asia will soar almost fourfold from 1.1 million in 1990 to an estimated 4.2 million in 2020.

According to WHO (1999), nearly one out of five people on the planet smoke cigarettes and estimated 800 million of these in developing countries. It is estimated that one third of the world's adult population of whom 200 million females are smokers. Globally 47 % of men and 12% of women are smokers. The proportion of the population who were smokers varies in the developed and developing world and from country to country. In developing countries, 48% of men and 7% of women smoke, while in developed countries the corresponding percentages were 42% and 24% respectively.

Worldwide, tobacco consumption is estimated to be increasing by 2 % a year, with the biggest rise occurring in the developing countries and Eastern Europe. In 1971 to 1991, the per capital consumption of cigarettes in developing countries were increased by an average of 2.5% a year. The Growth of cigarette consumption was highest in the western pacific Region (3%), followed by the South Asia Region (1.8%)

2.2 Review of Empirical Literature

According to a study on Tobacco Economics in Nepal by WHO/SEAR 2000, the overall tobacco use prevalence was higher in rural areas (45.8%) than in the urban areas (34.4%) in the country. Among the three ecological regions, the overall tobacco use prevalence rate was highest in the high hills (68.2), followed by the Terai (42.4%) and the low hills (40.9%). Tobacco use prevalence was higher among illiterate persons (55.2%) as compared to the literate population (36.1%). By gender, a much higher proportion of boys used tobacco (77.4%) of illiterate boys and (49.4%) of literate boys than their girl counterparts (44.3) of illiterate girls and 12.5 of literate girls). Literacy appears to discourage the use of all types of tobacco products among both boys and girls in Nepal. Smoking prevalence among the literate was much lower (29.7%) than among the illiterate (49.1%) and this is true for users of smokeless tobacco products as well. In Nepal 71.7% of women smoked in high hills while only 14.2 % of women in urban Kathmandu are smokers.

Poudel (2003) studied on the present topic of Tobacco use among adolescents. Nearly (41.77) products one in seven (13.2%) were current (either regular or occasional) users, one in four (22.7%) were experimental users. One in ten (10.6 %) were past users of any tobacco product. Use of pan masalaa, gutkha was more common surti (3.0%). The mean age of initiating tobacco was about 13 years and nearly one fifth (18.9) initiated before 10 years of age. Boys were 3.15 times as likely to use tobacco as compared to girls, similarly adolescents of non-governmental schools were 2.58 times as likely to use tobacco as compared to governmental school students. In conclusion the review of literature mentioned the Tobacco use among adolescent problem is great in exist every Nepalese people.

Acharya (2008) says that all procedures of the trail were complete as per the protocol designed by the sponsor. Finally results from the multivariate analysis after adjusting for the effects of the significant risk factors, revealed that smokers with negative perception of their ability to quit smoking were more likely report heavy nicotine dependence. As discussed previously, smoking cessation programs should incorporate the aspect of self – efficacy in order to achieve effective outcomes.

Jha (2002), says that the prevalence of tobacco use among students aged 16-26 years was 24.8 % very high proportion of males (32.9) were tobacco users compared to their female counterparts ((3.1%).

Similarly very high prevalence (75%) was observed in Jumla, a mountain district of Nepal. The possible reason could be that these studies are from high mountain areas where the respondents were illiterate. The cold climate in these areas may also urge them to smoke.

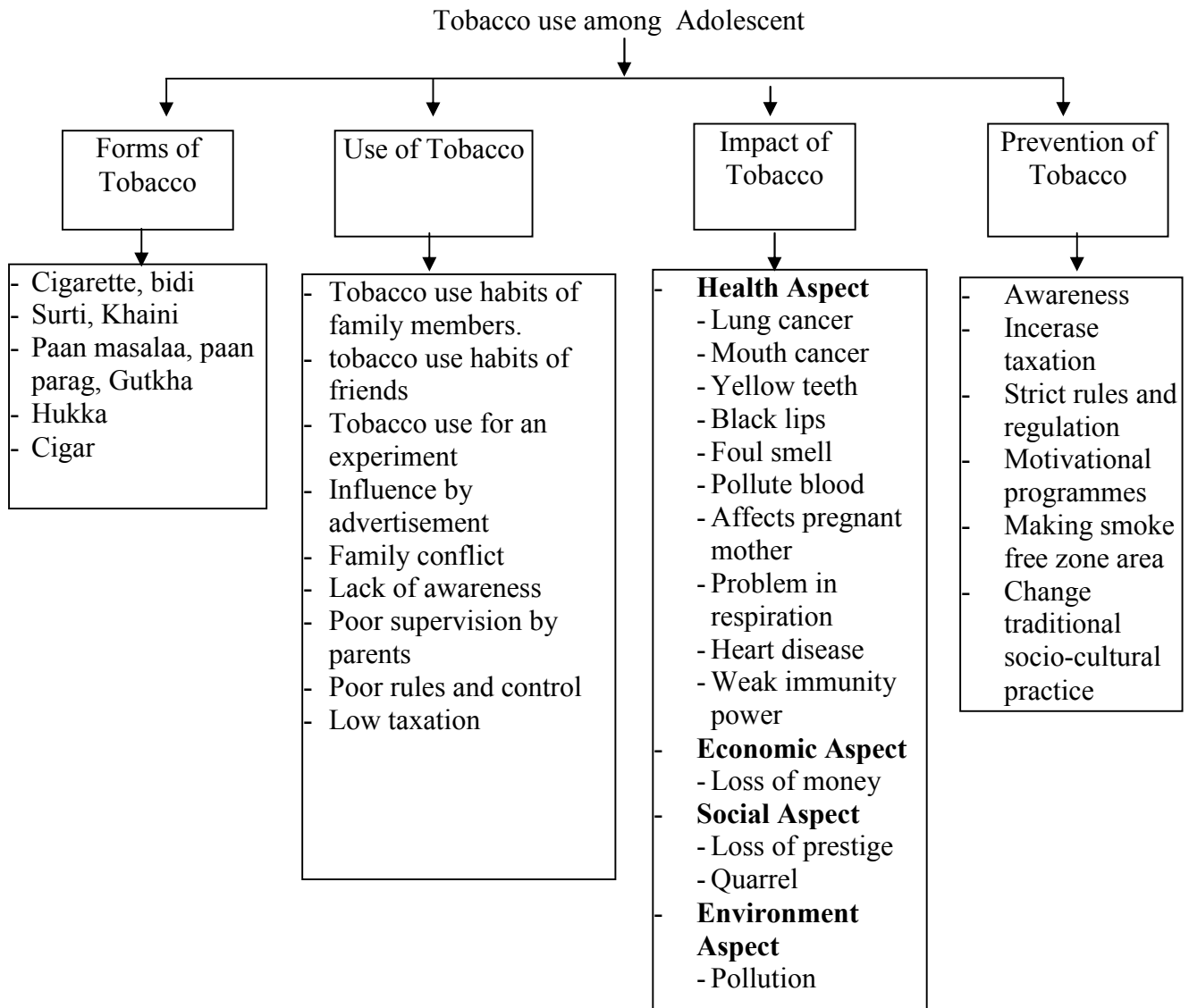
2.3 Implication of the Review for the Study

The literature review has helped in my study in following ways.

- To determine the topic of the study
- To implement various programs to the concerned field
- To identify the related field for the study
- To gain additional knowledge about research methods
- To compare the old finding of the study with the present one.
- To evaluate the recent research
- To give reference to the further studies related to the topic.

2.4 Conceptual Frame Work

Although tobacco use is an individual behavior, it is greatly influenced by social and environmental factors. In the field of tobacco use and its effect on health different writer and researcher have developed different types of conceptual framework. The present researcher has developed a conceptual framework according to objective of the study. This framework was given in diagram.



There are various factors that directly and indirectly effects on the consumption of tobacco and its use. In present contex tobacco is available in various forms like cigarettes, bidi, surti, khaini, paan masala, paan parag, hukka, cigar etc. Tobacco use habits of family members, peer pressure, for experiment, lack of awareness, influenced by advertisement are some of the main reasons behind consumption of tobacco. Consumption of tobacco has many negative effects on health, economic, social and environment. Various steps can be followed for prevention of tobacco consumption like conducting awareness programmes, increasing tax in tobaccoic products, making strict rules and implementing them, motivating people against tobacco consumption.

CHAPTER – III

METHODS AND PROCEDURES OF THE STUDY

This chapter included various details about the process through which this research was conducted. It included various procedures and types of data collection. It also presented the short description of research design, nature and source of data, population of the study, tools of data collection and validation of tools, data collection procedures, sampling procedures and data analysis and interpretation.

3.1 Design and Method of the Study

This study was based on descriptive and quantitative research design.

3.2 Population and Sample

The study is carried out in adolescent students of Damak Municipality. The population of the study was from the students studying 8, 9 and 10 classes from three secondary schools (Pathivara Secondary School, Himalaya Secondary School, Global Secondary School) of Damak Municipality. The schools were selected by purposive sampling method. There were 330 adolescent students in three secondary schools. The primary data were collected from 165 respondents by using questionnaire. The 55/55 adolescents were selected of each school based on simple random sampling method has been used.

3.3 Study Area/Field

Damak Municipality of Jhapa District was selected for the study. The population of adolescent students of Pathivara Secondary School, Himalaya Secondary School and Global Secondary School are selected. The total population was 330 only 165 were selected for sample.

3.4 Data Collection Tools and Techniques

The data has been selected with the help of questionnaire as well as interview schedule. To meet of objectives of the study the research tools were used. It was trailed-tested to 15 students of Pathivara Secondary School, Damak Jhapa district.

Besides this, the questionnaire was shown to supervisor and other experts. After feedback provided from trail-test supervisor and other experts; the tools were revised, restructured and finalized.

3.5 Data Collection Procedures

The researcher personally visited each secondary school and met the headmasters. The researcher explained her purpose of the study. The researcher also studied the relevant documents and data about the tobacco users among adolescent students in secondary level school. The questionnaire was directly administrated to the selected students. Copies of questionnaire were distributed to all the selected respondents from each school. A careful approach to administer the tools, she was involved herself in the data collection process with assistance of school teachers from the respective school. 165 of total of 330 students were enumerated for the purpose of this study.

3.6 Data Analysis and Interpretation Procedure

In the processing of data after filling up the questionnaire, the questionnaires which were filled up by students were carefully checked in the raw data. After cleaning and editing the raw data, the necessary data were presented in master chart. The data was analyzed and interpreted with the help of tables and figures. Finally, the summary and conclusion were drawn and required recommendations were stated.

CHAPTER-IV

ANALYSIS AND INTERPRETATION OF RESULT

This chapter deals with analysis and interpretation of collected data. The data tabulated and placed in sequential order according to the nature of the study. The analysis and interpretation of data were done with the help of tables and figures to make the presentation more effective and clear. After tabulating the data responses are grouped in terms of their basic nature the following are the main headings of presentation.

4.1 Demographic and Economics Characteristics

Demography is the study of birth, disease, age, sex, religion etc. A demographic characteristic is essential for every research like in every research, number of targeted population their age, sex and class were collected during this research. Without calculation of demographic feature, the research can't meet its objectives.

4.1.1 Age and Sex of Respondents

In this research also the same calculation was focused. As sex and age are inevitable parts of research, these factors had been focused considerably in this research too. Age and sex of sampled 165 students had been presented in following table.

Table No.1: Distribution of the Students According to their Age and Sex

Age Group (year)	Number of Student		Percent	Total
	Male	Female		
13-14	12	7	11.5	19
15-16	40	61	61.5	101
17-18	25	16	24.3	41
Above 18	3	1	2.4	4
Total	80(48.5%)	58(51.5%)	100	165

Table no.1 shows the number of the student by age and sex of the study area the table shows that there were 48.5 percent male and 51.5 percent female. Total number of male students from age group "13-14" was 12 and number of female student was 7.

Similarly, from age group "15-16" total male are 40 and female was 61. Finally total number of male student from age group "17-18" were 25 and female student were 16. Then, total number of male student from age group "Above 18" was found 3 and number of student was 1. Altogether total number of student from age group "13-14" was 11.5 percent from age group "15-16" was 61 percent and from age group "17-18" was 24.8 percent and from age group "Above 18" was 2.4 percent.

4.1.2 Education Status

Education makes the different in the way of thinking of a different in the way of thinking of a person. It also makes the different in doing things in a better way. It empowers the people to be healthy and to live healthy life. Education plays important roles on awareness against the disease to prevent them in time.

Table No. 2: Education Status

Class	Number of Student		Percent	Total
	Male	Female		
8	33	29	37.6	62
9	28	25	32.1	53
10	30	20	30.3	50
Total	91(55.2%)	74(44.8%)	100%	165

Table no.2 shows that majority of 37.6 percent student studied in class 8, 32.1 percent student studied in class 9 and 30.3 percents read in class 10. In this observation it is seen that most of them are male students.

4.1.3 Main Income Source of Family

In different way from where we got money. It was a very important to make our family happy and get success in life. while there are many sources of income is separate into two types for family Medicaid purposes; earned and unearned main income sources plays important roles on awareness against the disease to prevent them in time. Main income source of family sampled 165 students have been presented in following table.

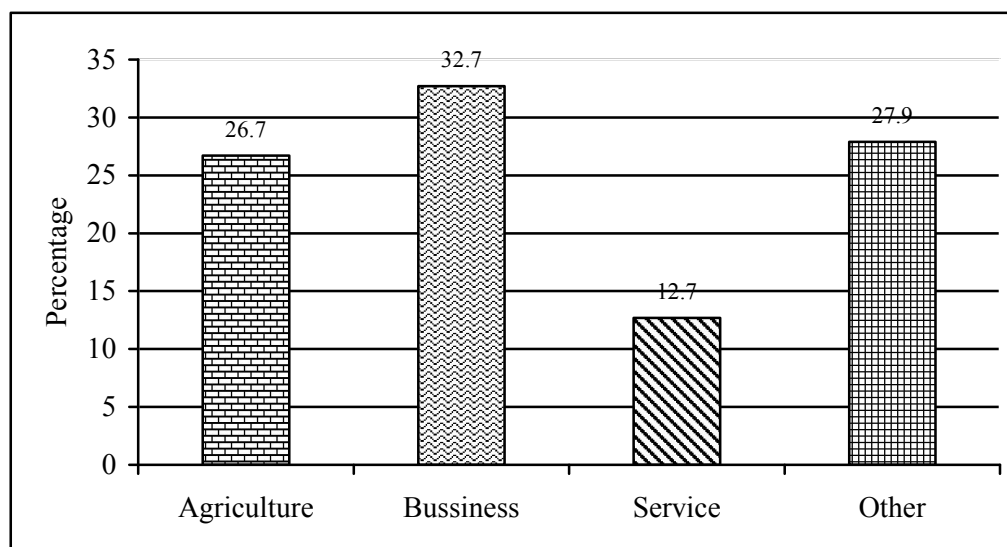
Figure No. 1: Main Income Source of Respondent's Family

Figure no.1 shows that among 165 students 32.7 percent income source of family were business and minimum were 12.7 service. Similarly 26.7 percent were agriculture and 27.9 were other source of income of the respondent's family. It is seen that most of respondents parents were involved in business. They earn good income.

4.1.4 Types of Family

Family means a group of people live together with each other. There are two types of family such as joint and nuclear. It plays vital role to up grade the living standard of people as well as helpful for healthy living. Thus, this study is done to find out the types family members.

Table No. 3: Distribution of Types of Family

Types of Family	Number	Percent
Joint	67	40.6
Nuclear	98	59.4
Total	165	100

According to the table no.3 shows that 59.4 percent students said that they were nuclear family member and 40.6 percent respondents were joint family members. According to table it seen that most of the respondents have nuclear family.

4.2 Forms of Tobacco Use

Tobacco is a plant grown for its leaves which are smoked, chewed and sniffed for a variety of efforts. Knowledge is the primary level of understanding the thing, objects, event and everything happening in the universe. It is storage of information; knowledge about tobacco is very necessary for human being. Such knowledge can be gained by book, drama, use of tobacco are concerned to many disease respiration. It grows slowly types of tobacco use of sample students were studied on following ways.

4.2.1 Use of Tobacco

Tobacco use is the leading cause of preventable illness. It cause many different cancers including cancers of the throat, mouth, nasal cavity etc. use of tobacco was the habitual for entertainment most of the people, it grows fast and in some it grows slowly.

Table No. 4: Distribution of Tobacco Use in any Form

Use of Tobacco	Number	Percent
Yes	58	35.2
No	107	64.8
Total	165	100

Table no.4 shows that 64.8 percent students were not used tobacco in any form and 35.2 percent students were use tobacco. By analyzing the table it is seen that less respondents use tobacco.

4.2.2 Distribution of Tobacco Use by Types of School

This section deals with the tobacco use pattern of adolescent students among grades 8, 9 and 10 from non-government school of Damak Municipality. Tobacco used is presented by type of school. The result is given below.

Table No. 5: Distribution of Tobacco Use by Types of School

Name of school	Yes	No	Male	Female	Total
Himalaya Eng. school	24	31	13	11	55
Global Eng. school	19	36	13	6	55
Pathivara Eng. school	15	40	11	4	55
Total	58(35.2%)	107(64.8%)	37(22.4%)	21(12.7%)	165

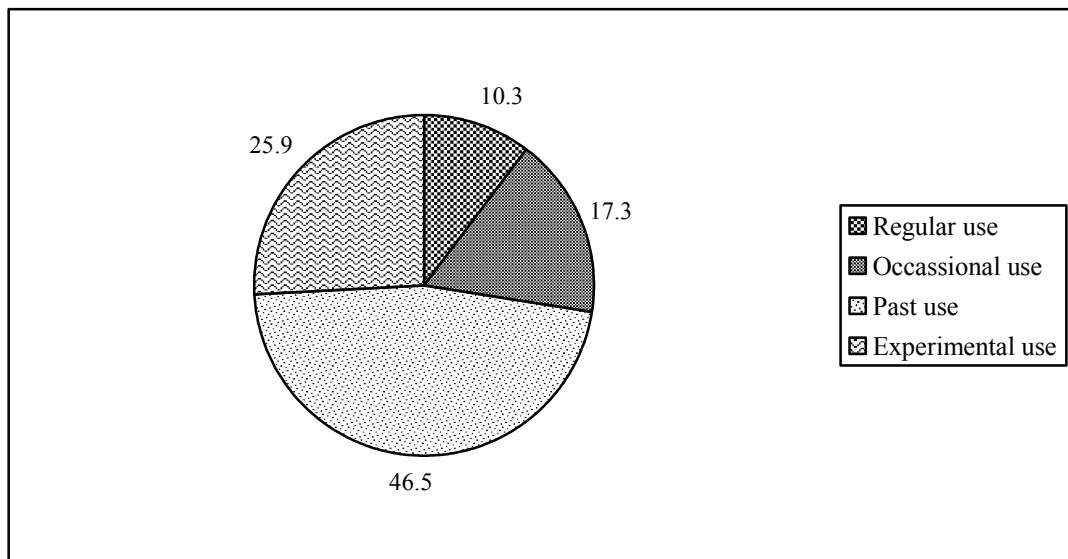
It is observed by the researcher as table no.5 shows that the condition of tobacco use of Himalaya English school 43.6 percent were found and 56.4 percent students were not used tobacco in any form. Similarly, the condition of tobacco from Pathivara English School was 27.3 percent used tobacco and 72.7 percent were not used tobacco. Then, the condition tobacco used Global English School 34.5 percent were used tobacco and 65.5 percent were not used tobacco in any form.

In this observation most of the Himalaya English school's students were found to use tobacco. It is easily reveals the truth that some of sampled students were slowly being addicted and they were not conscious on their health.

4.2.3 Consume Tobacco Product

Tobacco can be ingested in many forms. Most of the people use tobacco for experiments used. The results are given below;

Figure No.2: Distribution of Consume Tobacco Products



The figure No.2 Shows that 46.5 percent were found tobacco past use and 10.3 percent regular, 17.3 percent were found used tobacco occasionally and 25.9 percent found tobacco use for experiments. It was found that the past user of tobacco was very high among students as majority of the students were found used past and experimentally.

4.2.4 Age of First Tried Tobacco

Tobacco is the harmful chemical substances many people are use for entertainment and relay.

Figure No.3: Distribution Respondents Age of First Tried Tobacco

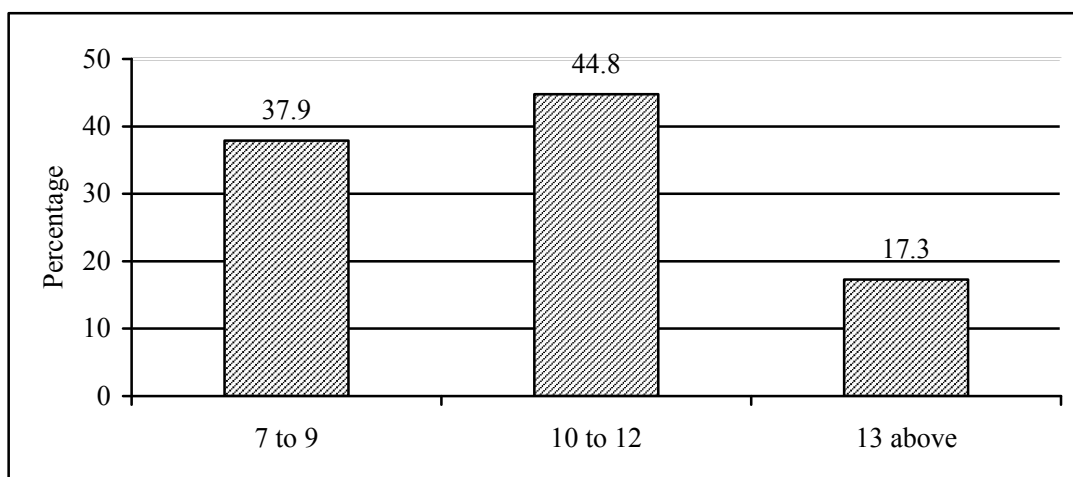


Figure no.3 shows that 44.8 percent age group of 10-12 respondents first tried tobacco

and 17.3 percent age group of above 13 respondents consume first tried tobacco and 37.9 percents the age group of "7 to 9" respondent's first tired tobacco. It was found that most of the age group of "10-12" consumes tobacco in high range. They were not conscious on their health.

4.2.5 Respondent's Knowledge on Types of Tobacco

All the respondents reported to have some knowledge of tobacco at the time of the field survey and they were asked to respond of their knowledge on agent to tobacco users. The answer is presented in the table given below:

Table no.6: Distribution of knowledge on Types of Tobacco

Knowledge	Number	Percent
Yes	117	70.9
No	48	29.1
Total	165	100

Table no.6 shows that 70.9 percent respondents have more knowledge about the types of tobacco. Similarly, 29.1 percent respondents have not knowledge about the types of tobacco. A compulsory health education which is offered in secondary level school lately fulfills the need of education regarding tobacco use among adolescent health. The curriculum should be toughly revised.

4.2.6 Forms of Tobacco Consume at Present

Tobacco use is a global epidemic among young people. As with adults, it poses a serious health threat to youth. Nearly all tobacco use being in childhood and adolescents. The result is presented in the table.

Table No.7: Distribution of Respondents by Consumes Forms of Tobacco at Present

Types of Tobacco	Number of Student		Total	Percent
	Male	Female		
Cigarettes	12	3	15	25.9
Khaini	10	1	11	19
Surti	-	-	-	-
Bidi	-	-	-	-
Paan Masala, Panparag, Gutkha Etc	16	16	32	55.1
Total	38(65.5%)	20(34.5%)	58	100

Table no.8 shows that 55.5 percent respondents consume pan masala, panparag, gutkha etc. and 19 percent respondents consume khaini. Similarly, 25.9 percent respondents consume cigarettes at present but nobody consume shurti and bidi.

4.2.7 Types of Tobacco Firsts Consume

Tobacco use may be defined as any habitual use of the tobacco plants leaf and its products. Smokeless tobacco refers to a variety of tobacco products that are either sniffed, sucked or chewed. The responses are presented in table.

Table No.8: Distribution First Consumes Types of Tobacco

Types of Tobacco	Number	Percent
Cigarettes	15	25.9
Khaini	9	15.5
Surti	-	-
Bidi	-	-
Paan masala, Pan parag, and Gutkha etc.	34	58.6
Total	58	100

Table no.8 clearly that 58.6 percent student first consume pan masala, pan parag and gutkha and 15.5 percent consume at first khaini. Similarly 25.9 percent consume at first cigarettes and no one consume surti and bidi at first. By analyzing the data it is seen that most of them start by pan masala ,pan parag gutkha etc.

4.2.8 Consume Tobacco Per Day

When a person has habit to used tobacco they became tobacco addicted. Normally, the persons take tobacco 2-3 times in a day. The table below showed the person consuming tobacco per day.

Table No.9 Distribution of Consume Tobacco Per Day

Per day	Number	Percent
1-2	26	44.8
3-4	19	32.8
5+Above	13	22.4
Total	58	100

Table no. 9 shown that 44.8 percent students were consumed tobacco "1-2" time per day and 22.4 percent respondents were consuming tobacco above 5 times per day. Similarly, 32.8 Percent respondents were consuming tobacco 3 to 4 times per day. It was found that some respondents from gaining correct knowledge but not at all. They were became addicted by slowly.

4.2.9 Gap of Time Consuming Tobacco

The frequency if consume tobacco practice depends on person to person. it was seen that some students were consume tobacco with in 30 minutes and after 30 minutes while inquiring how many times or gaps of times they consume tobacco. These responses are given below.

Table No.10: Distribution Gaps of Time Consume Tobacco

Gaps of time	Number	Percent
within 30 minutes	13	22.4
after 30 minutes	45	77.6
Total	58	100

Table no.10 shows that 77.6 percent students were consume tobacco after 30 minutes and 22.4 percent students were consuming tobacco within 30 minutes. By analyzing the table it is seen that most respondent take tobacco 48 times in 24 hours it means they are decreasing their life.

4.2.10 Respondents Parents use Tobacco

Adolescents were likely to smoke if their parents smoke. The parents used tobacco significantly impacts the smoking behaving of their children.

Table No. 11: Respondents Parents use Tobacco

Parents Use Tobacco	Number	Percent
Yes	99	60
NO	66	40
Total	165	100

Table no.11 shows that 60 percent respondent's parents used tobacco and 40 percent respondent's parents were not used tobacco. They were not conscious on their children's future.

4.2.11 Members Use Tobacco in Respondent's Family

Most of the respondents family used of tobacco by any forms. The respondents were asked who use tobacco in your family or not. The result was presented in the table.

Table No.12: Distribution Member Use Tobacco in Respondent's Family

Member	Number	Percent
Father	47	47.5
Mother	15	15.1
Brother	25	25.2
Father Mother	12	12.2
Total	99	100

Table no.12 shows that 47.5 percent father used tobacco in respondent's family and 12.2 percent used both father and mother. Then 15.2 percent mother used tobacco and 25.2 percent used by brother.

4.2.12 Types of Tobacco Used by Respondent's Family

Adolescents were asked if any of their family members (parents, sibling and other members) used tobacco. They used tobacco in any forms. The result was presented in the figure given below.

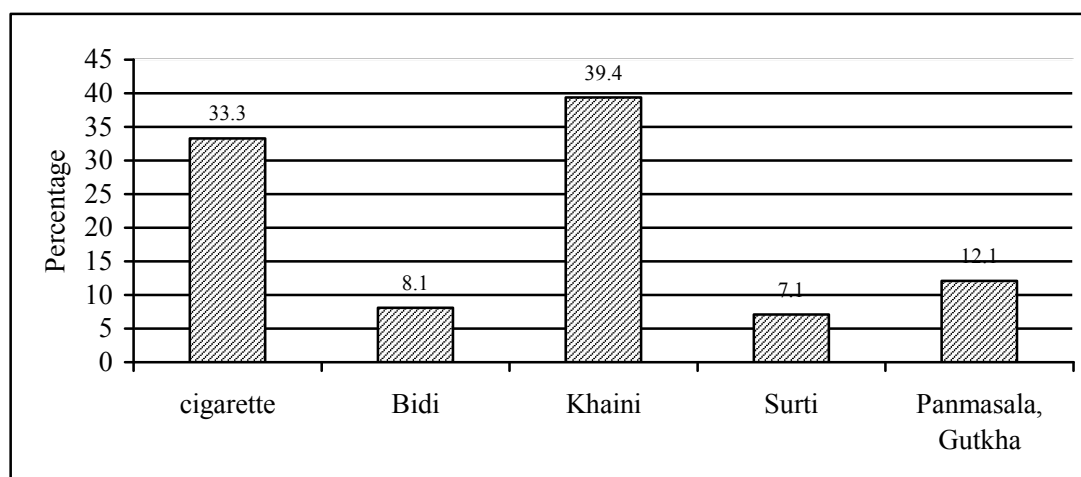
Figure No.4: Distribution Types of Tobacco Use by their Family

Figure no.4 shows that 39.4 percent parents were used khaini and 7.1 percent respondent's parents were consumed surti. Similarly 33.3 percent parents used cigarette and 12.1 percent parents were used pan masala, pan parag and gutkha etc and 8.1 percent parents were used bidi.

4.2.13 Respondent's Best Friend's Use Tobacco

Respondents were asked if any of their best friend also used tobacco in any forms. The result was presented in the table below:

Table No. 13: Respondent's best friends use tobacco

Use of Tobacco	Number	Percent
Yes	73	44.2
No	92	55.8
Total	165	100.0

According to the table no. 13 given 55.8 percent did not use tobacco and 44.2 percent said their friend didn't use tobacco. By analyzing the table it is seen that they easily come under the pressure from the peers.

4.2.14 Types of Tobacco Consume by their Friends

Most of the respondents who had friends who smoked were more likely to start smoking. Peer pressure is highly predictive in the table.

Table No. 14: Distributions the Types of Tobacco Use by their Closest Friends

Types of Tobacco	Number	Percent
Cigarettes	34	46.6
Khaini	13	17.8
Bidi	-	-
Surti	-	-
Pann masala,gutkha	26	35.6
Total	73	100

According to the table no. 14 given 46.6 percent respondent's friend used khini and no one was used bidi and surti. Similarly, 35.6 percent respondent's closest friend used paan masala, pan parag, gutkha etc. It was found that most of the closest friend used cigarette followed by pann masala, gutkha and harm of use of tobacco. Still people need knowledge on their own health.

4.2.15 Respondents Start to Used Tobacco at First

Most of the respondents started when they were teens. Those who have friend and parents who used tobacco are not likely to start using tobacco than those who don't. Some students said that they "just wanted to try it" or they thought it was "cool" to used tobacco.

Figure No.5: Distribution of Respondents Start to Use Tobacco at First

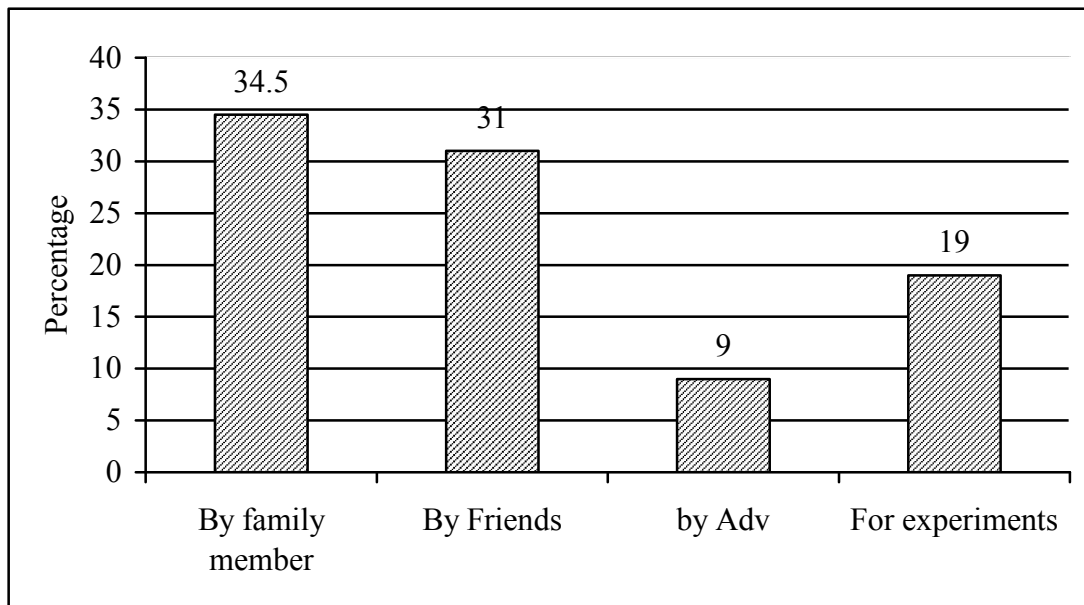


Figure no: 5 shows that 34.5 percent of respondents out of 58 tobaccos by family member and 9 percent use tobacco use for experiments. Then, 31 percent used tobacco by friends and 9 percent used tobacco by advertisement and 19 percent used tobacco for experiment. Which shows that most of the respondents start to use tobacco and tobacco products by family members and their friends. It shows that still people need to knowledge on effects of using tobacco.

4.2.16 Respondents Tried to Quit this Habit

We all know the health risks of using tobacco but that does not make it any easier to kick out the habit. Therefore, these studies clarify to stop this habit of the respondents of the study area.

Table No: 15: Respondents Tried to Quit this Habits

Quit this habits	Number	Percent
Yes	35	60.3
No	23	39.7
Total	58	100

Table no: 15 shows that 60.3 percent respondents tried to quit this habit and 39.7 percent respondents didn't tried to quit this habit. Which shows that mot of them had tried to leave this habit due to its affect on their health.

4.2.17 Respondents Use Tobacco in School Compound

Most of the adolescents spends much of their time at school and may subsequently be exposed to factors that increase tobacco use in that setting. Number of students who used tobacco they were asked to indicate have your ever use tobacco is school compound? Responses are given below:

Table No: 16: Distribution the Respondents use of Tobacco in School Compound

Use in School Compound	Number	Percent
Yes	11	19
No	47	81
Total	58	100

Table no: 16 shows that 19 percent respondents said "yes" they were used tobacco in school compound and 18 percent respondents were not tobacco in school compound. It was found that most of the students were not found using tobacco in school compound. It shows the poor school environment and related school staff were conscious of student's future.

4.2.18 Distribution of Respondents Manages Money to Buy Tobacco

Many students wonder how they'll afford everything during their studies. How they buy tobacco everyday the result were give below:

Table No. 17: How Respondents Manage Money to Buy Tobacco

Manage	Number	Percent
Father give	9	15.5
Mother give	12	20.7
Pocket money	23	39.7
By saving Tiffin by friends	14	24.1
Total	58	100

Table no: 17 shows that 39.7 percent respondents manage money to buy tobacco by pocket money and 15.5 percent managed money given by father. Similarly, 24.7 percent respondents managed money by saving Tiffin from friend's and 20.7 percent managed given by mother. By analyzing the table it is seen that students do not spend their pocket money on other but save to consume tobacco.

4.2.19 Feelings of Respondents by Using Tobacco

People said that they use tobacco for many different reasons like stress, pleasure and buzz. The response are given below

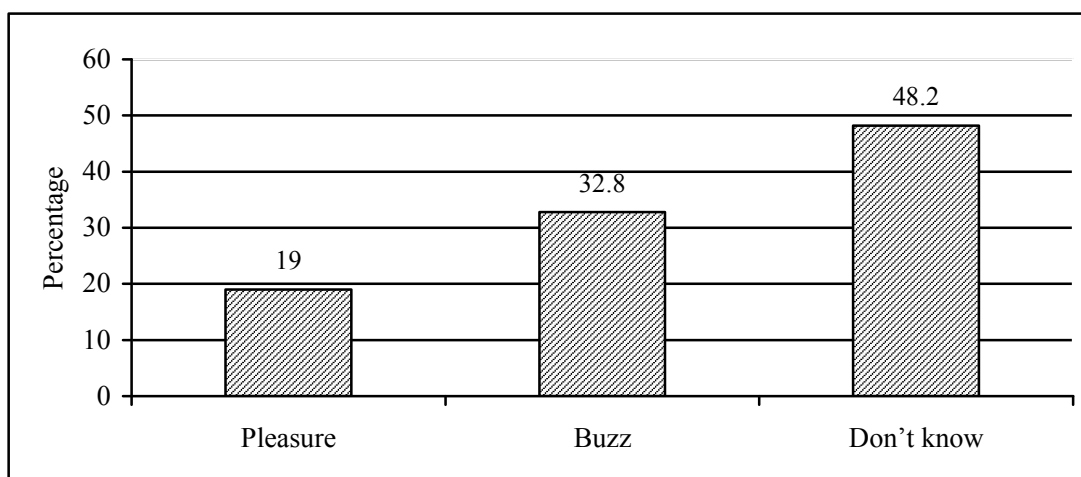
Figure No. 6: Distribution of the Respondents According to their Feelings

Figure no.6 shows that 48.2 percent respondents said that they did not know how they feel after using tobacco and 19 percent felt pleasure after used tobacco. Then, 32.8 percent respondents felt buzz. In this observation most of the respondents use tobacco

for felt buzz. They were unknown for their health. It is easily reveals the truth that most of the sampled students were not conscious on their health.

4.3 Impact of Tobacco Use

The scope of the burden of disease and death that cigarette smoking imposes on the adolescent's health is extensive. A disease in the prevalence of cigarette smoking will have additional down steam benefits by reducing the potential for non smokers to be exposed to secondhand tobacco smoke.

Tobacco is extracted from around 65 knows species of the tobacco plant. Various effects of tobacco use are economic loss, health loss and environmental loss.

4.3.1 Respondents Heard about the Effect of Tobacco Use

Tobacco is considered as a major behavioral risk factor for non-communicable diseases. One of the leading causes of death. As impact of tobacco use is very important part of research this impact had been focused considerably inn this research too.

Table No.18: Respondents Knowledge about the Effect of Tobacco Use

Knowledge	Number	Percent
Yes	141	85.5
No	24	14.5
Total	165	100

Table no.18 shows that out of 165 respondents 85.5 percent had heard about the effect of tobacco used. Similarly, 14.5 percent said they didn't know about the effect of tobacco use. Most of the respondents informed about tobacco.

4.3.2 Knowledge about the Effect of Tobacco Use

Like smoking, smokeless tobacco can affect our health in unexpected ways. Tobacco products are addictive because they contain nicotine. The respondents were asked whether they did know the effect of tobacco use or not. The result was presented in figure below.

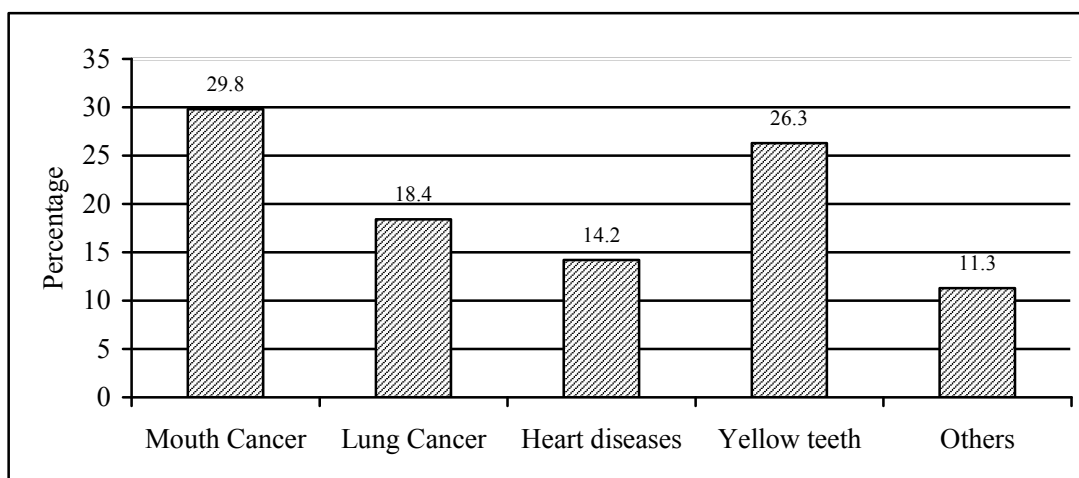
Figure No.7: Knowledge about the Effect of Tobacco Use

Figure no.7 shows that 29.8 percents respondents said the effect of mouth cancer and 11.3 percent said that the effects of others. Similarly 18.4 percent said the effect of lung cancer and 14.2 percent said the effect of health disease and 26.3 percent respondents said the effect of yellow teeth.

4.3.3 Knowledge on the Effect of Tobacco in Health

Tobacco was bad for our health and can cause negative health effects, such as cancer and diseases. The growing use of tobacco is a cause of great concern around the world due to its serious effects on health. The respondents were asked whether they didn't know the effect of tobacco in health or not. The result was presented in table.

Table No.19: Knowledge on the Effect of Tobacco in Health

Knowledge	Number	Percent
Yes	165	100
No	-	-
Total	165	100

4.3.4 Effect of Tobacco in Health

Smoking accounts for about 30 percent of all cancer death in the United States, including about 80 percent of all lung cancer deaths not all of the health problems related to smoking result in deaths. Smoking affects a smoker's health in many ways. Harming nearly every organ of the body and causing many diseases.

Table No.20: Distribution of Respondents Said Effects of Tobacco in Health

Effects	Number	Percent
Lung cancer	57	34.5
Heart disease	25	15.1
Yellow teeth	28	17
Problem in respiration	55	33.4
Total	165	100

Table no.20 shows that 34.5 percent said the effect of lung cancer and 15.1 percent said that the effect of heart disease. Similarly, 17 percent said yellow teeth and 33.4 percent said the problem in respiration.

4.3.5 Respondents Knowledge about the Effects in Economic Status

Consuming tobacco had great impact in economic status because they need money to consume it. Thus, the study shows the concept of respondents about the effect of tobacco in economic health.

Table No. 21: Distribution of Respondent Knowledge about the Effects in Economics Status

Knowledge	Number	Percent
Yes	165	100
No	-	-
Total	165	100

By analyzing the table it is seen that every respondent has knowledge on the effecting factors in economic status by using tobacco.

4.3.6 Health Suffers by Using Tobacco

Tobacco use has predominantly negative effects on human health. Tobacco use leads most commonly to diseases affection the heart liver and lungs. Adolescent smokers suffer from shortness of breath almost three times as often as teens who don't smoke. Research has focused on adolescent's health.

Table No. 22: Distribution of Respondent's Health Suffer Using Tobacco

Health suffer	Number	Percent
Yes	7	12.1
No	51	87.9
Total	58	100

Table no.22 shows that 87.9 percent respondent's health was not suffered by using tobacco and 12.1 percent had suffered by using tobacco.

4.3.7 Effect Have Respondents Suffered

Tobacco use in teenagers and young adults can cause both immediate and long-term harm. Extending beyond parents, siblings may also exert an effect on adolescent smoking. The results were given below:

Table No. 23: Distribution of Effect has Respondents Suffered

Types of Suffered	Number	Percent
Yellow teeth	3	42.8
fast heart beat	2	28.6
Fever	1	14.3
Headache	1	14.3
Total	7	100

Table no.23 shows that 42.8 percent out of 7 suffered from yellow teeth after used tobacco and 14.3percent equally suffered from fever and headache. Then, 28.6 percent suffered from fast heart beat. By analyzing the table it is seen that minimum respondents are in mild complication at present.

4.3.8 Taking Tobacco is Healthy Habits

Today we're more aware about how smoking is for our health. Smoking is restricted or smoking is a hard habit to break because tobacco contains nicotine, which is highly addictive. The results were given below:

Table No. 24: Distribution of Respondents Taking Tobacco is Healthy Habits

Healthy Habits	Number	Percent
Yes	91	55.2
No	74	44.8
Total	165	100

Table no.24 shows that the 55.2 percent respondents said taking tobacco is health habit and 44.8 percent said taking tobacco isn't health habits. It shows that the lack of knowledge about health or tobacco use after taking it.

4.3.9 Respondents Seen the People Suffer from Tobacco Use

Wherever, smoke touches living cells, it does harm. When people get large amounts of tobacco, they are at risk for lung cancer and other disease. Tobacco use is also shows in online and on TV and movies showing smokers are another big influence.

The following table present the fact about respondents seen the people suffer from tobacco use.

Table No: 25: Distribution of Respondents Seen the People Suffer from Tobacco Use

Suffer	Number	Percent
Yes	165	100
No	-	-
Total	165	100

4.4 Summary

Health is the foundations of the children. They are the pillar of the nation. If the children are healthy the nation will be healthy.

In study area the students in the secondary level weren't award about their health, nor they are able to adopt healthy rules and behaviors, rather they were found careless and spending most of their time in playing mobiles and other entertaining business. They

also didn't know the effects created in gaining of quality education due to unhealthiness.

The study was mainly based on primary data and descriptive types design. After collecting the necessary information the data were tabulated in master chart. They were analyzed and interpreted with the help of tables and figures. The information was collected from randomly 330 students of samples schools through interview schedule and observation, structured questionnaire with the target people.

This study was conducted on three private schools of Damak Municipality, Jhapa. The objective of this study was to determine the forms of tobacco use among adolescent in grade 8, 9 and 10 and to find out the prevalence and its impact of tobacco use among adolescent.

Finally, the collected data information were analyzed and interpreted. All of the respondents were adolescents (boys+girls) of secondary level, knowing to lack of awareness want to appropriate knowledge on tobacco use. It is found that they had good knowledge about tobacco but they didn't try to leave this habit.

4.5 Finding

Some of the major findings of the study were given below:

- 4.5.1 Among students, altogether total number of students from age group of "15-16" was 101 (61.3%) and "above 18" was 4 (2.4%).
- 4.5.2 From education status 37.6 percent students were studied in class 8 and 30.3 percent students were studied in class 10.
- 4.5.3 Majority of the respondents 32.7 percent had expressed business was the main source of income 27.3 percent were found other source and 26.7 percent were agriculture. Then, 12.7 percent service was the main source of income of their family.
- 4.5.4 Majority of the respondents 59.4 percent had expressed they were nuclear family members and 40.6 percent have joint family.
- 4.5.5 About 35.2 percent respondents correctly answer they were used tobacco in any form and 64.8 percent said they were not used tobacco.

- 4.5.6 Majority of the respondents, 36.9 percent were found tobacco user from Himalaya English School and 27.3 percent used tobacco from Pathivari English school.
- 4.5.7 Majority of respondents 46.5 percent said that they were consume tobacco past use and 25.9 percent consume tobacco for experimental use.
- 4.5.8 Majority of respondents 44.8 percent age group of "10-12" was first tried tobacco and 37.3 percent age group age group of "7-9" were tired tobacco at first.
- 4.5.9 Majority of the respondents 70.9 percent had knowledge on types of tobacco and 29.1 percent hadn't knowledge about the types of tobacco.
- 4.5.10 Majority of the respondents 55.1 percent used paan masala, pan parag and gutkha at now. Then, 25.9 percent used cigarette at now.
- 4.5.11 Majority of the respondents 58.6 percent consume paan masala, pan parag, gutkha at first then 25.9 percent consume cigarettes at first.
- 4.5.12 Majority of the respondents 44.8 percent respondents were consume tobacco 1-2 times per day. Then, 32.8 percent consume tobacco 3-4 times per day.
- 4.5.13 Among students 60 percent said their parents use tobacco and 40 percent respondent's parents were not used tobacco.
- 4.5.14 Most of the respondents 47.5 percent were seen father use tobacco and 25.2 percent respondent's brother use tobacco.
- 4.5.15 Similarly, 39.4 percent respondents parents were used khaini and 33.3 percent used cigarettes.
- 4.5.16 Majority of the respondents 44.2 percent closest friend were used tobacco and 55.8 percent closest friend were not used tobacco.
- 4.5.17 Most of the respondents, 35.6 percent closest friend used paan masala, pan parag, gutkha etc. and 46.6 percent used cigarettes.
- 4.5.18 Majority of the respondents 34.5 percent students started to tobacco by family members at first. Then, 31 percent used by friends.
- 4.5.19 Most of the respondents 60.3 percent had tired to quit this habit.
- 4.5.20 Among students 81 percent had not used tobacco in school compound and 19 percent used tobacco in school compound.

- 4.5.21 Similarly, 39.7 percent respondents manage money to buy tobacco by pocket money. Then, 24.1 percent managed by saving Tiffin and by friends.
- 4.5.22 More over, 48.2 percent students said they didn't know how they feel after used tobacco and 32.8 percent felt buzz.
- 4.5.23 From observation, 85.5 percent respondents had more knowledge about the effect of tobacco use and 14.5 percent hadn't know about it.
- 4.5.24 Majority of the respondents, 29.8 percent know about the effect of mouth cancer, 26.3 percent said the effect of yellow teeth.
- 4.5.25 All of the respondents 100 percent had more knowledge about the effect of tobacco in health.
- 4.5.26 From observation, 34.5 percent said the effect of lung cancer, 33.4 percent said the problem in respiration, 17 percent said yellow teeth and 15.1 percent said heart diseases.
- 4.5.27 Majority of the respondents, 100 percent had more knowledge about the effect of tobacco in economic status.
- 4.5.28 All of the respondents, 12.1 percent respondents health suffered by using tobacco.
- 4.5.29 From observation, 42.8 percent suffered from yellow teeth and 28.6 percent suffered from fast heart beat.
- 4.5.30 From observation, 55.2 percent said taking tobacco is a health habits and 44.8 percent said taking tobacco isn't a health habit.
- 4.5.31 All of the respondents 100 percent had seen the people suffered from tobacco use.

CHAPTER-V

CONCLUSION AND RECOMMENDATION

5.1 Conclusion

The study entitled "Tobacco use and its impact among adolescents students in secondary school Damak Municipality, Jhapa district is conducted among 165 adolescent. After analyzing the data it shows that most of the ever-user initiated tobacco use by 14-15 years of age. The majority of them are past user and by experimental use but they were potential regular user in the future.

Finally, tobacco use by close friends and family member were strong influencing factor for tobacco use of adolescents. A substantial proportion of adolescent were being exposed to the tobacco use behavior of family member and friends, creating an environment to develop more tobacco users in future.

Maximum respondents had good knowledge about the impact of tobacco in health or in economics status nearly half thought that tobacco users had more friends and more than one in tobacco users are more attractive.

Thus, school based educational programs focusing on all forms of tobacco (both smoked and smokeless) should be planned and implemented. Parental counselling is necessary to inform them about the influence of their tobacco use on their children. Programmers to protect every adolescent from being exposed to the tobacco use of others are necessary.

Health education program should be provided to adolescent to raise the level of awareness of the impact of tobacco use and to change their perception.

5.2 Recommendations

On the basis of finding of this study, the following recommendations are made for the government and non-government agencies and individuals. The finding may be useful for formulating policies and programs to improve better health status of school level of adolescents.

5.2.1 Recommendation for Policy Related

- 5.2.1 Education plays a vital role determine every change in the society. The education about tobacco use and its impact in health should be included and improved in the lower to secondary level curriculum.
- 5.2.2 To aware the students about tobacco use and its effect in health programs. Should be conducted in the education institution.
- 5.2.3 Appropriate to improved prohibits the sale of cigarettes containing certain characterizing flavors (such as strawberry, grapes, orange and other flavors).
- 5.2.4 Local newspapers agencies and institutions as well as NGOs at local level should be encouraged and co-operation for raising awareness among the secondary level adolescent about tobacco use and its effect on health.
- 5.2.5 Using explicit photos and smoking – associated health warning on all tobacco products, packages and labeling.
- 5.2.6 All states should license retail sales outlets that sell tobacco products.
- 5.2.7 Making tobacco products less affordable by using raising taxes on tobacco products.
- 5.2.8 School and colleges should be banned all forms of tobacco (both smoked and smokeless) in indoor locations.
- 5.2.9 Mass media (Radio, T.V) should be encouraged to organized regular programmed on tobacco use and its effect on health.

5.2.2 Recommendation for Practice Related

- 5.2.2.1 Health observation program should be given priority in schools regularly.
- 5.2.2.2 Secondary health teacher should facilitate with the special health training and be refreshed time to time.
- 5.2.2.3 Parents should be aware of importance of health and effect f tobacco in health.
- 5.2.2.4 Educate students and families on the negative health consequences of tobacco use as part of elementary and high school curriculums in tandem with public program.
- 5.2.2.5 Regular health check-up program for the students should be conducted by the school collaboration with the health post or hospital.
- 5.2.2.6 The school must be banned all forms of tobacco in indoor locations.

5.2.2.7 School teachers and parents must be aware of various programs including seminars, workshops and discussion program, so that they can be able to receive information and for teaching these topics.

5.2.3 Recommendation for Further Research Related

- 5.2.3.1 To investigate the level of awareness of the guarders on the issues of their children's health effects from tobacco use.
- 5.2.3.2 Advice to smokers to adopt a smoke-free home should be included in all efforts promoting cessation.
- 5.2.3.3 Further studies regarding the effect of smoke free homes on youth initiation are required.
- 5.2.3.4 Further evidences of the effect of smoke free homes and school staff on smoking behaviors in countries at different stages of the tobacco epidemic is needed.
- 5.2.3.5 A comparative study on the tobacco use and its effects among adolescents between public and private school.
- 5.2.3.6 Effectiveness of the curriculum of secondary level students on tobacco use and its effect in health.

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APPENDIX – I
TRIBHUVAN UNIVERSITY
FACULTY OF HEALTH AND PHYSICAL EDUCATION
JANATA MULTIPLE CAMPUS
Questionnaire used on the study of "Tobacco use and its effects among
adolescents in secondary schools"

Name..... School

Class Sex..... Age.....

Demographic and Economics

1. What is your name?

.....

2. How old are you?

.....

3. In which class do you read?

.....

4. What is your gender?

- i. Male ii. Female

5. What is the main source of income in your family?

- i. Agriculture ii. Business iii. Service iv. Other

6. How many members are there in your family?

.....

7. What is your family type?

- i. Joint ii. Nuclear

8. What does your father do?

.....

9. What does your mother do?

.....

Types of tobacco use

1. Do you know about tobacco?

- i. Yes ii. No

2. Have you ever tried with cigarette smoking or use of tobacco in any form?

- i. Yes ii. No

3. If yes, how frequently do you consume tobacco product?

- i. Regular use ii. Occasional use iii. Past use

iv. Experimental use/ not more than 10 items

4. How old were you when you first tried a cigarette or used any tobacco product?

.....years

5. Do you know the types of tobacco?

- i. Yes ii. No

6. If yes, what one the types of tobacco?

.....

7. What tobacco products do you consume now?

- i. Cigarettes ii. Khaini iii. Surti iv. Bidi

v. Paan masalaa, pan parag, Gutkha vi. Others

8. At first what types of tobacco did you consume?

- i. Cigarettes ii. Khaini iii. Surti iv. Bidi

v. Paan masalaa, Pan paraag, Gutkha vi. Others

9. How much do you use tobacco per day?

.....

10. How much do you use tobacco per day you use tobacco?

- i. Within 30 minutes ii. After 30 minutes

Prevalence of Tobacco use

1. Do your parents use tobacco?

- i. Yes
- ii. No

2. If yes, who use tobacco in your family?

.....

3. What types of tobacco used by them?

- i. Cigarette
- ii. Bidi
- iii. Khaini
- iv. Surti
- v. Paan Masalaa, pan parag, Gutkha

4. Do any of your best friends use tobacco?

- i. Yes
- ii. No

5. If yes, what types of tobacco used by your friends?

- i. Cigarette
- ii. Khaini
- iii. Bidi
- iv. Surti
- v. Pan masalaa, pan parag, Gutkha

6. How did you start to using tobacco at first?

- i. By family members
- ii. By friends
- iii. By advertisements
- iv. For experiments

7. Have you tried to quit these habits?

- i. Yes
- ii. No.

8. Have you ever use tobacco in school compound?

- i. Yes
- ii. No

9. How do you manage money to buy tobacco?

.....

10. How do you feel when you use tobacco?

- i. Pleasure
- ii. Buzz
- iii. Don't Know

Impact of tobacco use

1. Did in your school know the effect of tobacco use?

- i. Yes ii. No

2. Do you know the effect of tobacco use?

- i. Yes ii. No

3. If yes, what are the effects of tobacco use?

.....

4. Do you know the effect of tobacco in health?

- i. Yes ii. No

5. If yes, what are the effects of tobacco in health?

- i. Lung cancer ii. Heart disease
iii. Yellow teeth iv. Problem in respiration

6. What do you think, is consumption of tobacco effects in economic status?

- i. Yes. ii. No

7. Have your health suffer by using tobacco?

- i. Yes ii. No

8. If yes, what effect have you suffered?

.....

9. Do you think taking tobacco is health habits?

- i. Yes ii. No

10. Have you seen the people suffer from tobacco use?

- i. Yes ii. No