

# Attitude of Adolescents towards Anti-Smoking Parental Actions

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**Abstract:-** In today's world to raise a child, parenting styles are more focused upon and adolescents is age where sensitivity of the relationship between parents and children is highest. To avoid bad habits like smoking, alcohol, drug abuse etc. parents might use strict approach towards adolescents which makes them rebellious and go against their parents. The objective of this paper was to study the role of antismoking parental actions on attitude of adolescents towards smoking. The research was conducted on 105 participants of the age group 18- and 19-years old adolescents. Through convenience sampling, the sample was taken. The data was collected by self-made questionnaire using a Likert scale to measure the attitude having the criterions such as rules about smoking in one's home, using non-smoking sections of public establishments and asking others not to smoke in one's presence of their child, in adopting adolescents' attitude towards smoking. The results were analysed using descriptive statistics and Spearman's coefficient using SPSS software, showing no effect of antismoking parental action on the attitude of adolescents. Parental actions influence teenagers, but attitude is persuasive and can change through factors like peer pressure and social media in this study.

**Keywords:-** Anti-Smoking, Smoking, Parenting, Adolescents, Correlation

## I. INTRODUCTION

Adolescence is an age where the pressure of a career is at the utmost. Peer pressure and parenting pressure are also there. Under this pressure influenced by their surroundings and peers, teens might get involved in habits like smoking. The thrill of trying new things might have an effect on the attitude of trying smoking or not trying it.

In the research done by Rose M. E. Huver, Rutger C. M. E. Engels and Hein de Vries (2005) early adolescence and getting a transfer from primary to secondary school are characterized by a good amount of increase in the percentage of youths that have ever tried smoking. An adult who smokes daily, 89% had their first cigarette before their 19th birthday and 71% had started daily smoking by age 19 according to the US Department of Health and Human Services. The Integrated Model for Change (I-Change Model) proposed by De Vries *et al.* and earlier versions of this model, later called the ASE model (Attitude–Social influence– self-Efficacy), have been successful in predicting smoking and other health behaviors. According to this model, smoking intention and behavior can be predicted

from a set of motivation factors or cognitions, i.e., attitude perceived social influences and self-efficacy expectations. Attitudes consist of the advantages and disadvantages a person perceives concerning a certain health behavior. Social influence is a constellation of three types of the perceived influence of others, consisting of perceived social norms, behavior, and pressure. Finally, self-efficacy is defined as the estimated ability to engage in certain behavior. These cognitive factors are influenced by several predisposing factors, among which are social factors. Behaviour is then predicted by intention as well as by ability factors and barriers. One of the predisposing social factors relates to anti-smoking parenting practices that can be described as content-specific acts of parenting. Associations between parenting practices and smoking have been found in parental reactions to adolescent smoking, such as punishments, house rules about smoking, and communication about smoking.

In the research done by M. Robyn Andersen, Brian G. Leroux, and Jonathan B. Bricker (2004) Social influence includes a variety of social environmental factors affecting adolescent smoking. The most important among these is parental smoking. It is still unclear, however, there are many other mechanisms by which parents influence their children's tobacco smoking. Parenting style may influence adolescents as there is evidence that closeness to parents is protective, reducing smoking among children and adolescents. Another potential mechanism for parental influence is specific parenting practices or the parents' antismoking actions. Specific practices of parents that might influence adolescents' smoking might include having rules restricting smoking in the home. This has been found to reduce rates of adolescent smoking compared with households without such rules. Other antismoking actions, however, such as choosing to sit in non-smoking sections of restaurants and asking others not to smoke in one's presence, may also reduce adolescents' smoking, and these have not, to our knowledge, been examined. If parents' antismoking actions reduce tobacco use by their teenage children, it may help parents, most of whom hold antismoking attitudes and do not want their children to smoke.

The present research wants to study the effect of parental actions toward antismoking and its effect on the attitude of late teens. One of the reasons for exploring this was the lack of studies available on this. Studies related to the same are also very less. Thus, increasing the scope of the present topic for future research and space to explore. The study focuses on the attitude of adolescents toward

smoking after there have been some anti-smoking actions taken by parents. It has been assumed that there will be a positive effect on the late teens of antismoking parental actions.

## II. METHODOLOGY

### ➤ Objective

To understand the effect on the attitude of late teens when any antismoking parental actions have been taken.

### ➤ Hypothesis

- (H<sub>1</sub>)- There will be a statistically significant correlation between antismoking parental actions and the attitude of adolescents toward smoking.
- (H<sub>0</sub>)- There will be no statistically significant correlation between antismoking parental actions and the attitude of adolescents toward smoking.

### ➤ Sample

The present study includes a sample of 105 adolescents from Gujarat aged 18-19 years who filled up the google forms questionnaire. A convenience sampling technique was used to collect the sample.

### ➤ Tools Used

Data was collected by self-made questionnaire and to measure attitude 3 and 5-pointer Likert scale was used. To find correlation and analyze the data SPSS software was used. The questionnaire had two sections- the reliability for section 1 came out to be 0.414 and the reliability for section 2 came out to be 0.685.

### ➤ Inclusion criteria

- Only Adolescents aged between 18 and 19 were taken.
- Adolescents who can read, write and understand English were taken.
- Only responses from Gujarat state were considered.

### ➤ Exclusion Criteria

- Adolescents who were physically or mentally challenged were excluded.
- Adolescents who are not currently residing in Gujarat were excluded.

### ➤ Procedure

To collect the data, a Google form was created and circulated among 18 years and 19 years old adolescents in the month of May 2022. The form consisted of 4 parts: Informed consent with demographic information, psychological assessments in 2 parts, and debriefing used in the study. Basic instructions about the study were given in the form and the email address of the researcher was provided in case the participants had questions regarding the study. Demographic information including name, age, educational qualification, email address, gender, and city were collected. There were separate instructions for each section and were provided before the start of each section. It was made sure that the participants' information was kept confidential. The aim of the study and information about the psychological assessments used were provided under the column of debriefing at the end of the questionnaire. In total 116 questionnaires were collected but few were rejected as they were not meeting the criteria and 105 questionnaires were retained. It was made sure that all the ethics were followed.

### ➤ Ethics

- Confidentiality was maintained.
- Informed consent from potential research participants was taken.
- Detailed debriefing was given to the participants of the study.
- Anonymity was maintained. No harm was done to the participants while conducting the research.
- Transparency was maintained during the research.
- No discrimination was done among the participants during the research.

## III. RESULT AND INTERPRETATION

To fulfill the objectives of the present research both descriptive and inferential statistics were used. In the statistical tools of SPSS, correlation was used. In addition to this, descriptive statistics were also used to understand the nature of the data.

Table 1 Descriptive Analysis

	N	Minimum	Maximum	Mean	Std. Deviation
Section1	105	0	15	7.26	3.038
Section2	105	0	16	5.35	3.731
Valid N (listwise)	105				

Section 1- attitude toward smoking, section 2 – antismoking parental actions The mean for section 1 came out to be 7.26

- The mean for section 2 came out to be 5.35
- Std. Deviation for section 1 is 3.038
- Std. Deviation for section 2 is 3.731

Table 2 Case Processing Summary

	N	%
Cases Valid	105	100.0
Excluded <sup>a</sup>	0	.0
Total	105	100.0

- Listwise deletion based on all variables in the procedure.

Table 3 Reliability Statistics

Cronbach's Alpha	N of Items
.414	10

- The reliability for section 1 is 0.414

Table 4 Case Processing Summary

	N	%
Cases Valid	105	100.0
Excluded <sup>a</sup>	0	.0
Total	105	100.0

- Listwise deletion based on all variables in the procedure.

Table 5 Reliability Statistics

Cronbach's Alpha	N of Items
.685	4

- The reliability for section 2 is 0.685

Table 6 Correlations

	Section1	Section2
Section1 Pearson Correlation	1	.033
Sig. (2-tailed)	105	.741
N		105
Section2 Pearson Correlation	.033	1
Sig. (2-tailed)	.741	105
N	105	

For 105 (N) participants Pearson correlation of both the section is 0.033 indicating a moderate positive correlation and the significance 2-tailed value is 0.741 which is greater than the standard alpha value of 0.05 which means the attitude of adolescents towards smoking is not statistically significant with anti-smoking parental actions.

Table 7 Correlations

	Section1	Section2
Spearman's rho section1 Correlation Coefficient	1.000	.053
Sig. (2-tailed)	105	.589
N		105
section2 Correlation Coefficient	.053	1.000
Sig. (2-tailed)	.589	105
N	105	

For 105 (N) participants Pearson correlation of both the section is 0.053 indicating a moderate positive correlation and the significance 2-tailed value is 0.589 which is greater than the standard alpha value of 0.05 which means the attitude of adolescents towards smoking is not statistically significant with anti-smoking parental actions.

- (H<sub>1</sub>)- There will be a statistically significant correlation between antismoking parental actions and the attitude of adolescents toward smoking.

The hypothesis of the research states that there will be a statistically significant correlation between antismoking parental actions and the attitude of adolescents toward smoking. After the analysis, there was no statistically significant correlation between both variables. The result shows there is a negative correlation between both variables. This shows that antismoking parental actions do not affect the attitude of late teens toward smoking.

Factors like peer pressure and social media influence have a greater impact on adolescents than on parents. If any of the friends are into smoking habits, they will likely ask their other friends to do so. The one who does not smoke and hangs out with them will feel pressurised and will try out smoking, if not a regular smoker, then he/she can become an occasional smoker. To be a part of the social group and be accepted in the culture the attitude of adolescents can change toward the usage of cigarettes. Also, teenagers who go to other cities for studies are desperate to make new friends and be accepted in the groups and that can lead to a change in attitude toward smoking even after antismoking parental actions.

Social media has a great influence on the lifestyle of people, children, adolescents, and adults, all are highly influenced by it. Actors in movies and videos when playing a character who smokes, adolescents found it quite 'attractive and cool'. Teenagers try to adapt the personality of the character as a lot of times that character is loved by all and becomes famous and under the influence of that many teenagers change their attitude positively towards smoking. Adolescent is an age where children become rebellious as they are confused between being an adult or children. At this stage, the attitude can be very persuasive.

Also, the addictive nature of smoking and the sense of relief in body after doing it, makes it a habit. Adolescent period, where teenagers are confused and filled with anxiety for the future but also wants to have fun and have a "I don't care" attitude brings them closer to such substances.

The study wanted to know if antismoking parental actions have a positive effect on the attitude of late teens, even if there is a positive attitude, factors like peer pressure and social media influence have a greater effect due to which the attitude could change.

#### IV. CONCLUSION

Thus, in light of the present collected data, this can be concluded that there is no effect of antismoking parental action on the attitude of adolescents. Parental actions influence adolescents, but attitude is persuasive and can change through factors like peer pressure and social media in this study.

##### ➤ *Limitation*

- The sample was very specific and limited.
- Smoking is a disturbing topic, many of the data collected can be biased or not correctly filled.
- This data is not generalizable as the number of males and females are not equal, the data collected is biased towards males.

##### ➤ *Future Implications*

- Current study only includes late teens but a larger age group of adolescents can be taken to study the attitude.
- Because the current study used a convenience sampling technique, future researchers can use other sampling techniques to make samples more representative of the population.
- The culture of smoking is increasing, this study can be performed on a larger scale population and can create awareness among parents about the attitude of their children and the anti-smoking actions they take.
- Creating awareness about adolescent smoking attitude and addiction.

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##### ➤ *Conflict of Interest*

The author declared no conflict of interest.

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