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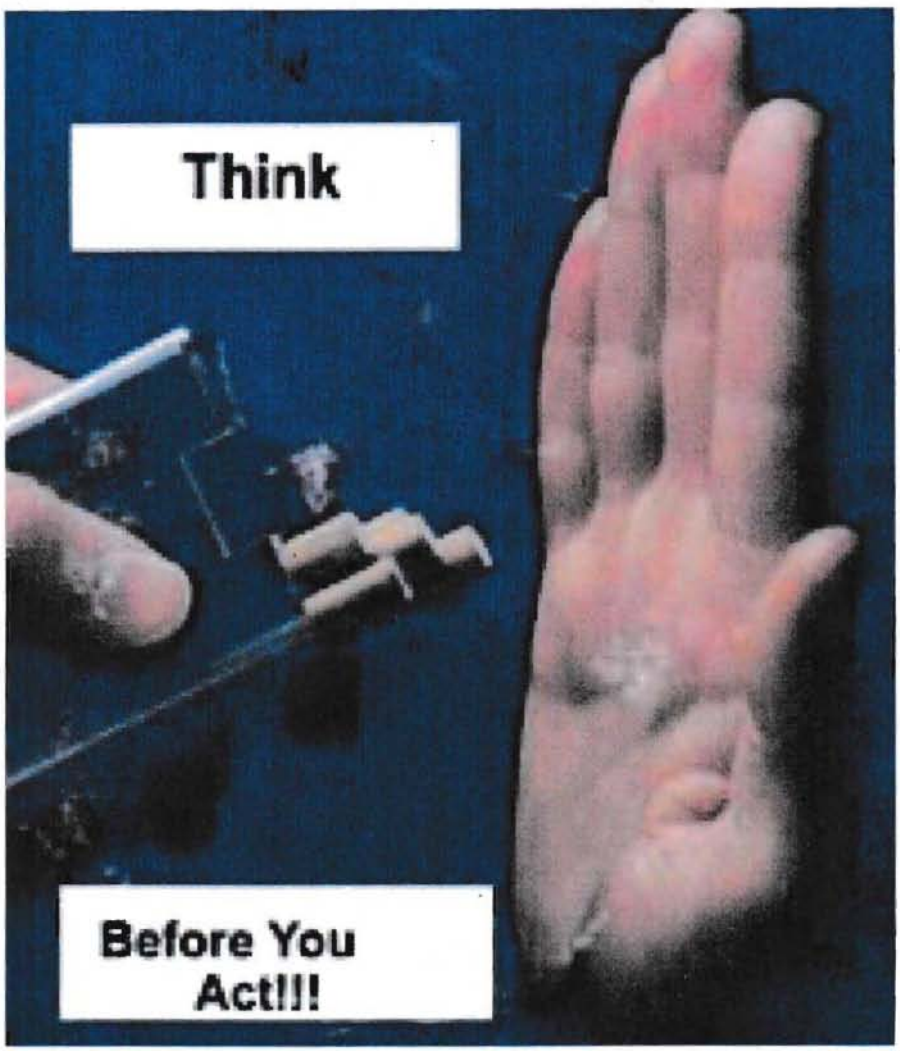

SMOKING

Factors Affecting the Growth

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Table of Contents

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List of Tables i

List of Figures ii

List of Appendices iii

List of Exhibits i\/

1: Summary

1.1 Major findings 2

1.1.1 Factors Increasing the growth of smoking 2

1.1.2 Smoking Causes Diseases 4

1.1.3 Giving Up Smoking 4

1.2 Conclusions 5

1.3 Recommendations 6

2: Problem Definition

2.1 Background To The Problem 7

2.1.1 What Is Smoking 7

2.1.2 History of Smoking: 7

2.1.3 Smoking From Religious Point of View 7

2.1.4 Different Smoking Accessories 8

2.1.5 Name of Some Tobacco Companies 9

TOPIC

TOPIC

2.1.6 Who smokes? 9

2.1.7 Why Do People Smoke? 9-11

2.1.8 What In Smoke Causes Disease/ types 11-14

2.1.9 How Smoking Is harmful 12-16

2.1.10 How to Quit Smoking 16-18

2.1.11 Leading Quit Smoking Products 19

2.1.12 The Symptoms After Quitting: 19

2.1.13 Second Hand Smoke 20

2.1.14 World No-Tobacco Day 21

2.1.15 Bans of Smoking 21

2.1.16 Statistical Information 21-28

3: Approach to The Problem

3.1 Theoretical Framework 29-30

3.2 Analytical Model

3.2.1 Verbal Model 30

3.2.2 Graphical Model 31

3.2.3 Mathematical Model 32

4: Research Design

4.1 Type of Research Design 32

4.2 Information Need 33

4.3 Data Collection from Secondary Sources 34

4.4 Data Collection from Primary Sources 34

4.5 Scaling Technique 34

4.6 Questionnaire Development and Pre-testing 35

4.7 Sampling Technique

4.7.1 Target Population 36

4.7.2 Sampling Unit 36

4.7.3 Sampling Frame 36

4.7.4 Sampling Technique 36

4.7.5 Sampling Element 36

4.7.6 Sampling Size 36-37

4.7.7 Execution 37

4.8 Field Work 37

5: Data Analysis

5.1 Methodology 38

5.2 Plan of Data Analysis 38-58

6: Results 59

7: Limitations 60

8: Conclusion and Recommendations 61-62

Exhibits

A Questionnaires and forms

B Statistical output

C Lists

TOPIC

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List of Tables

Topic	Page
2.1 Cigarette smoking status by Sex	22
2.2 Daily cigarette consumption	23
2.3 Views on giving up smoking	24
2.4 Most common diseases caused by smoking	25
2.5 Smoking prevalence	25
2.6 Tobacco Economy	26
2.7 Market share by cigarette manufacturer in Bangladesh	26
2.8 Spending Pattern by a Smoker in Day, Month and Year	27

List of Graphs

Topic	Page
2.1 Cigarette smoking status by Sex:	22
2.2 Proportion of Young adults taking up smoking by [illegible]	23
2.3 Smoking prevalence:	25
2.4 Market share by cigarette manufacturer in Bangladesh:	26
2.5 Spending Pattern by a Smoker in Day, Month and Year	27

Sayeed Alam
Senior Lecturer
Department of Business Administration
East West University.
43 Mohakhali C/A
Dhaka-1212

Dear Sir,

I am very pleased to submit the research paper you have assigned me to identify the factors affecting the growth of smoking and quantitative research on it. This is my final project paper where I tried to find out the vital role of smoking as a negative initiator. After finishing the project I think I have gathered knowledge about how to conduct a quantitative research on social issues like smoking. Thus this project not only enhance my social responsibly but also the scope of marketing with the research paper as a marketing major student. This project extends my knowledge and may help me in the future.

Thank you very much for giving me such kind of opportunity to enrich my knowledge. I would like to thank you for your valuable guidance in every problem I had and the precious time that you gave me. I will be available for any further clarifications required.

Thank you

Rajib Saha

RAJIB SAHA
ID: 2003-3-10-066
Business Administration Department

07-12-06

Re: Letter of **Authorization**

To whom it may concern

It has been authorized that Rajib Saha, is the student of East West University. As per the course requirement of BUS - 498, he is assigned to submit a report after a thorough analysis, which includes collection of data and information, Dissemination, which to some extend sensitive in nature as related to smoking and employment of those data to do a research on smoking habit increment as a social research and to look for a scope of marketing as well.

So it is requested that the related authorities should co-operate with them by sharing the requirements needed by them.

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M. Sayeed Alam
(Senior lecturer)
Department of Business Administration
East West University

Rajib saha **ID: 2002-3-10-066**

[illegible] purpose of Final Project of Under graduation you have been assigned several report [illegible] from whom you have selected the subject "Smoking – Factors affecting the growth" as [illegible]gnment. This report will not only enable to visualize the social aspect of a problem, but [illegible]lp you to understand practical business operation in the project report as it also finds [illegible] of marketing.

[illegible] advice you to collect all relevant data to prepare the project report and present it [illegible]g all the parameters of Business Purpose aspects involved in the subject. Keeping in [illegible] time constrain and the deadline of this project; you must organize your works and [illegible]rks amongst your group members.

[illegible]ou a well-structured project report and a very good luck.

[illegible]

EXECUTIVE SUMMARY

[illegible] of course BUS 498, my course instructor, M. Sayeed Alam has [illegible] with the opportunity to prepare the assignment on research [illegible] factors affecting the growth of smoking.

[illegible] summary presents the clear vision of the report with different titles. [illegible] contains a short description of background analysis (what is [illegible] reasons of smoking), title, synopsis, problem statement (broad [illegible] specific statement), hypotheses, scope of research, type of research [illegible] undertaken, sampling plan, budgeting, contribution of the research, [illegible]. The report ends with limitations of the research.

[illegible] study I have learned lots of things, which are related with my course [illegible] Project Management (BUS – 498). This study expand my knowledge in [illegible].

ABSTRACT

Health and education are the basis of economic productivity. Healthy populations are critical for poverty reduction, economic growth and long-term development.

In addition to the traditional burden of communicable diseases, developing countries today are faced with a huge increase in non-communicable diseases, mental illness and violence and injuries. Tobacco is a major contributor of these diseases, with now account for more than half of diseases of countries. This alarming increase threatens to undermine the economic and social development.

Tobacco is cultivated in many regions around the world and can be legally purchased in all countries. The dried leaf of the plant *Nicotiana Tabacum* is used smoking, chewing and snuff.

For much of the 20th century, smoking was regarded as a socially learned habit and as a personal choice. It is only in the past decade or so that the fundamental role of nicotine in sustaining smoking behavior has begun to be more widely accepted. It is now recognized that cigarette smoking is primarily a manifestation of nicotine addiction and that smokers have individually characteristics preferences for their level of nicotine intake. Smokers regulate the way they puff and inhale to achieve their desire dose. The link with nicotine addiction does not imply that pharmacological factors drive smoking behavior in a simple way and to the exclusion of their influences. Social, economic, personal and political influences all play an important part in determining pattern of smoking prevalence and cessation. Although drug effects underpin the behavior, family and wider social influences are often critical to determine who starts smoking, who gives up and who continues.

One of the most serious health problems facing our nation is smoking. The world views smoking as socially acceptable--cool—fashionable though it causes different types of diseases. But according to the present estimates, smoking is responsible for over 25 diseases, causing 3.5 million deaths every year. One million of these deaths occur in developed countries.[1]

Generally smoking is inhaling and exhaling the smoke of tobacco or something similar to tobacco. Tobacco is the prepared leaf of several plants of the nightshade family, used for smoking or chewing as snuff. The tobacco plant is native to tropical America and is now wildly grown all over

[1] *Dr Uton Muchtar Rafei, Regional Director, WHO*

the world. Tobacco can be finding in cigarettes, cigars, pipes, and chewing tobacco (snuff). Besides tobacco people can smoke different other things like churut, hookah, marijuana etc. But in the term "smoking" we mainly understand cigarette.

Nearly one third of the global adult population is 1.1 billion of who 200 million are female, are smokers. Nearly about 47 per cent of men and 12 per cent of women smoke globally. In developing countries, 48 per cent of men and 7 per cent women are smokers. It is therefore, obvious that a vast number of lives are at stake. If the present trends continue by 2020, smoking will become the lading cause of death and disability, killing more than 10 million people annually. *(World Health Organization, CAB).*

With this in mind, the World Health Organization has focused on "*World No -Tobacco Day*". Every year they create a new slogan, which encourages smokers to quit the habit and motivating non-smokers, particularly the young and the women, not to start. They also set up different smoking cessation activities. Smoking cessations greatly reduce the risk of smoking related diseases. Individuals to stop smoking or using tobacco related products can avoid many deaths through action.

1.1 Major **Findings:**

This research paper presents the result of a survey on smoking behavior and its factors for which it is increasing. The surveys where primarily designed to explore views on smoking, reasons of smoking etc.

The key findings are outlined below:

1.1.1 **Factors Increasing the Growth of Smoking:**

Most of the time high school graduates, blue collar workers, and men in low income brackets are more likely to smoke than men in higher income brackets, white collar workers and people with college educations. Women who work are more likely to smoke than housewives, or women in households with a low family income. In addition, children from households where the parents and siblings smoke may learn the habit more frequently than children in smoke free homes.

As smoking is very harmful to the society, it is very important to know to the factors, which influence or encourage people to smoke. And these reasons are sometimes so powerful that

[illegible] people know that it is harmful for their health, their family as well as their society, still [illegible] cannot stop it. The factors are:

[illegible] Norms /**Pressure:** These are the most frequently given reasons for smoking. More [illegible] than males reported social norms and social pressure as reasons for beginning to smoke.

[illegible] Who **Smoke:** Some children pick up habits—good and bad—from their parents. Most [illegible] people smoke if at least a member in the family, mostly father, was a smoker.

[illegible] **Peer groups:** "Friends" as a reason for smoking showed a small degree of [illegible] across age. Peer pressure is a major influence among teenagers in our society. [illegible] who have friends who take up the habit tend to start themselves.

[illegible]: Curiosity is another reason for smoking mainly for female and teenagers. When they [illegible] people to smoke they become interested to try it at least once.

[illegible] / **Pleasure:** Relaxation and pleasure show a relatively higher degree of [illegible]. For currently smoking, pleasure is a reason more frequently by females than males.

[illegible]: "Image" is a more important reason for smoking at age 11 than at age 13. Mainly this [illegible] is connected with social norms and pressure.

[illegible]: Advertising is another minor reason for which people become motivated and start [illegible]. People smoke because of the way cigarettes are advertised and where they are shown.

[illegible] and **Legal:** Available and Legal can be the reason of smoking. . There is no [illegible] of supply. Anywhere and at any time cigarettes can be bought, borrowed, or bartered [illegible].

[illegible] with **Stress & Boredom:** Sometimes when people become bore with their daily [illegible] or face extreme pressure, to get rid from this they build smoking habit.

Addiction: Again addiction is another reason. When people addicted they explain different [illegible] of excuses and the shallow reasoning has been used to validate all kinds of wrong behavior [illegible] actions made by them.

1.1.2 Smoking Causes Diseases:

Smoke is composed of a large number of different substances that affect many parts of the body. Tobacco tar – a short name for the condensed solid particles in smoke – contains about 4,000 known chemicals, including poisons, and 50 cancer-causing substances. Many have been linked to disease.

- *Cancers of mouth, pharynx, larynx*
- *Arteriosclerosis*
- *Cancer of pancreas*
- *Chronic bronchitis*
- *Ischemic heart diseases*
- *Asthma*
- *Pulmonary heart diseases*
- *Other respiratory diseases*
- *Osteoporosis*
- *Cancer of stomach*
- *Aortic aneurysm*
- *Peripheral vascular diseases*
- *Cancers of oesophagus*
- *Cerebral vascular diseases*
- *Cancer of bladder*
- *Pulmonary tuberculosis*
- *Myocardial*
- *Pneumonia*
- *Other heart diseases*
- *Age related macular degeneration*
- *Myeloid leukemia*
- *Peptic ulcer*
- *Chronic Cough*
- *Low vital capacity*
- *Increased blood pressure*
- *Cancer of lips*
- *Cancer of pelvis of kidney*
- *Cancer of nose*
- *Tobacco amblyopic*
- *Crohn's diseases*
- *Periodontitis*
- *Reduced growth of fetus*
- *Cancer of body of kidney*

1.1.3 Giving Up Smoking:

For most people, becoming a non-smoker is more of a process than an event. More than 50% of smokers who quit do soon their own, but it usually takes several attempts before they succeed permanently. Many things can help individuals give up or stay off cigarettes – it depends on their

[illegible] and how addicted they are. There is no one right way to quit. Different [illegible] will stop smoking in different ways.

[illegible]

The effect of smoking on teenagers is very dangerous. Many children are conditioned to perceive [illegible] as glamorous, sophisticated, an adult habit, a status symbol and a sign of [illegible]. As they used to smoke from their childhood, they become addicted on it and face all the problems related smoking. Again women smokers are likely to increase as a percent of the total. A recent official report showed, they seem to be less influenced by the anti smoking campaign. The negative effects of smoking for women are: breast and cervical cancer, prone to premature menopause, unsuccessful pregnancy and impaired fertility, newborn child may also be affected.

So smoking should be stop from this society. With this in mind, the World Health Organization has focused on "*World No -Tobacco Day*". Every year they create a new slogan, which encourages smokers to quit the habit and motivating non-smokers, particularly the young and the women, not to start. They also set up different smoking cessation activities. Smoking cessations greatly reduce the risk of smoking related diseases. Individuals to stop smoking or using tobacco related products could avoid many deaths through action. So we have to remember ***"Smoking is the other name for suicide."*** We have to build tobacco free society.

Recommendations:

From the above discussion, we can say that the following things should be followed to stop smoking. These are:

- *Setting up a national multi-sectored body to provide and mobilize necessary support and resources.*
- *Providing health education*
- *Adopting appropriate fiscal measure*
- *Setting up a health promotion fund based on levy on tobacco products*
- *Discontinuing of advertising, promotions and sponsorships of smoking*
- *Restricting availability and accessibility of tobacco products*
- *Adopting measures for consumer protection*
- *Protecting health of non users*
- *Making non-users aware about the negative side effects of smoking.*
- *Providing support to smokers to quit*
- *Continuing research on smoking and its bad sides*
- *Provision of alternative livelihood.*
- *Put more tax on tobacco companies.*
- *School and colleges should take proper action to stop smoking.*
- *All public places should banned smoking*
- *All the vehicle should be smoke free*
- *Should conduct anti smoking campaign*

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DEFINITION

To The **Problem:**

Smoking?

and exhaling the smoke of tobacco or something similar to tobacco. Tobacco leaf of several plants of the nightshade family, used for smoking or chewing as plant is native to tropical America and is now wildly grown all over the world. finding in cigarettes, cigars, pipes, and chewing tobacco (snuff). Besides tobacco different other things like churut, hookah, marijuana etc. But by the term mainly understand cigarette.

Smoking:

starts growing in the Americas. Tobacco in its original state is native only to **1000 BC** people start using the leaves of the tobacco plant for smoking and users are thought to have been the Mayan civilizations of Central America. Its adopted throughout the nations of Central and most of North and South **AD** Rodrigo de Jerez became the first European smoker in history. One of Columbus's fellow explorers, he took his first puff of the New World's version of the When he returned home he made the mistake of lighting up in public and was for three years by the Spanish Inquisition. But when he came out he found people used to smoke and till then people used to smoke.

from **Religious Point of View:**

much controversy has raged over the negative effects of tobacco use, especially As there is no rule written in the Holy Quran or in the Bible about smoking, it issue.

any specific command like *"Thou shalt not smoke or chew tobacco,"* so many that it is not a sin. But it is harmful to one's health. Even the Bible does not directly smoking is a sin. But it does teach many principles of right human conduct and showing that habits such as smoking violate God's supreme laws: *love toward*

fellow man (Matt. 22:36-40). According to Bible, men are not smoking to other people. In Philippians 2:3-4, the apostle Paul exhorts us to "*...in lowliness of mind* *esteems other[s] better than themselves. Look not every man on his own things, but* *the things of others."* Paul is not saying that man should covet (desire) the , but rather that man should show concern for their well being. As smoking is individual as well as other people, it should be stopped.

point of view, smoking is not a sin, but any kind of addiction is not allowed. people have an addictive habit, they are a slave to it, whether it is alcoholism, drug dependence, etc. It literally becomes an addict's *god*, because it drives his actions.

Different Smoking Accessories:

types of smoking accessories are available in the market. These are:

Bubbler ***Smoking Pipe, Hookah***

Name of Some Tobacco Companies in World:

Company	Country	Company	Country
Dunhill Tobacco	United States	**PT B.A.T. Indonesia**	Indonesia
British American Tobacco Bangladesh	Bangladesh	**Japan Tobacco Inc.**	Japan
Imperial Tobacco Inc.	Canada	**British American Tobacco Kenya**	Keyan
British American Tobacco Ghana	Ghana	**Lacson Tobacco Company**	Pakistan
ITC Industries Ltd.	India	**Remgro Ltd**	South Africa
Ceylon Tobacco Ltd	Sri Lanka	**British American Tobacco Plc**	United Kingdom

Who smokes?

High school graduates, blue-collar workers, and men in low-income brackets who are more likely to smoke than men in higher income brackets, white-collar workers and people with college educations. Women who work are more likely to smoke than housewives, or women in households with a low family income. In addition, children from households where the parents or siblings smoke may learn the habit more frequently than children in smoke free homes.

Why Do People Smoke?

Why do people smoke when it is so bad for them? That is a question that everybody will most likely ask himself or herself. There is no definite answer, but there are some leads. Most form their habits early in life and do nothing to change them. Eventually, these habits seem as natural as breathing, sleeping and eating. There are many reasons for which people tend to smoke. Many researches also have been conducted to know the factors, which influence or encourage people to smoke. And these reasons are sometimes so powerful that though people know that it is harmful for their health, their family as well as their society, still they cannot stop it.

children pick up habits—good and bad—from their parents. In 1992, the *Journal of the American Medical Association* reported, "75% of all teenagers who smoke have ***parents who smoke.***" Around 43% of the participants stated that at least a member in the family, mostly father, was a smoker.[2] All too often, parents adopt the child-rearing philosophy of "Do as I say, not as I do." They may try to impress upon their children the serious adverse effects of certain behavior, yet display that behavior themselves. They may say, "Now, kids, don't smoke, because it'll kill you," while supporting a carton-a-week habit. This sends a confusing message to children, one they may translate into a license to do whatever feels good or gains them peer acceptance.

Other reasons reported from a study (Sarason IG, Mankowski ES, Peterson AV Jr, Dinh KT., Fred Hutchinson Cancer Research Center, Division of Public Health Sciences) are:

- For beginning smoking, the reasons are:

  - ***Curiosity***
  - ***Social Norms***
  - ***Social Pressure***

These are the most frequently given reasons for smoking. A number of gender differences appear with 10th grade students beginning and current smoking. More females than males report social norms and social pressure as reasons for beginning to smoke. In Bangladesh, children smoke because of their curiosity.[3]

- For current smoking, the reasons they have defined are:

  - ***Pleasure***
  - ***Addiction***

In current smoking, pleasure was given as a reason more frequently by females than males. Addiction is another reason. When people addicted they explain different types of excuses, "It's my body. If I want to smoke, it's my business. Besides, it's not hurting anybody else."

---

drug abuse: Bangladesh, 67 Regional Health Forum – Volume 6, Number 2, 2002

Rana, SM Chowdhury, A Mills ,67 Regional Health Forum – Volume 6, Number 2,

reasoning has been used to validate all kinds of wrong behavior and actions: pre-marital sex, alcoholism, drug abuse, prostitution, abortion, etc.

- According to other study the reason for smoking are:

  Image: "Image" is a more important reason for smoking at age 11 than at age 13.

  Friends: "Friends" as a reason for smoking showed a small degree of consistency across age. Peer pressure is a major influence among teenagers in our society. Young adults who have friends who take up the habit tend to start themselves. About 36% students started smoking because of the peer pressure.

  Relaxation / Pleasure: Relaxation and pleasure show a relatively higher degree of consistency.

- Some other reasons of smoking are ***coping with stress, boredom.*** Sometimes when people become bore with their daily activity or face extreme pressure, to get rid from this they build smoking habit. (2006 Canadian Cancer Society.)
- ***Advertising*** is another minor reason for which people become motivated and start smoking. People smoke because of the way cigarettes are advertised and where they are shown. In Bangladesh, 3% people said that they smoke for the first time because of advertisement.
- ***Available and Legal*** can be the reason of smoking. . There is no shortage of supply. Anywhere and at any time cigarettes can be bought, borrowed, or bartered for.

What Do Smoke Causes Disease/ types:

Smoke is composed of a large number of different substances that affect many parts of the body. "Cigarette Tar" – a short name for the condensed solid particles in smoke – contains about 4,000 known chemicals, including poisons, and 50 cancer-causing substances. Many have been linked to disease. Some of the chemicals and poisonous gases smoke are:

- Arsenic
- Acetone (used in paint stripper and nail polish remover)
- Ammonia
- Carbon monoxide
- Cyanide
- Mercury
- Nicotine
- Lead
- Marijuana

types of smoking include:

: Nicotine (found naturally in tobacco plants) is a powerful stimulant to the brain and nervous system. It is extremely addictive. Sixty milligrams of nicotine taken at one time the average adult human being by paralysing breathing. The reason it doesn't kill smokers that it is taken in tiny doses, which are quickly metabolized and excreted by the body.

in cigarette smoke: Carbon monoxide in smoke replaces the oxygen in red This forms a chemical called carboxyhemoglobin (COHb). When you smoke, nicotine the heart to work harder while the carboxyhemoglobin takes away the oxygen your heart more of to work properly. Carbon monoxide also promotes cholesterol deposits in

: The most common myth is that *"Marijuana Leads to Harder Drugs."* 90% of drug smoked Marijuana first. Therefore, smoking Marijuana leads to harder drugs. There are chemicals in the marijuana plant.

Smoking Is harmful:

the smoke touches the lips, it begins to attack living cells. It continues to do so it goes:

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Smoking creates negative effects in human life in various ways.[4] As we can see they cause different types of diseases. Like:

Chronic Cough: The irritating substances in smoke prompt the protective mechanisms of the air passages and lungs to work against them. This causes coughing. The well-known smoker's morning cough of smokers is a different issue altogether.

Low vital capacity: If people continuously smoke, it will reduce their capacity *and productivity.* They become tired when they are in pressure.

Lung cancer: Lung cancer is more common among smokers because cigarette smoke, which is acidic, must be inhaled to get a higher impact from nicotine. Eighty percent of lung cancer cases have been linked to cigarette smoking. The risk of lung cancer is proportional to the number of cigarettes smoked.

Increased blood pressure: Another affect of smoking is it increases blood pressure.

[4] From World Health Organization, 1992

[redacted] are:

- [redacted] of mouth. pharynx, [redacted]
- [redacted]sclerosis
- [redacted] of pancreas
- [redacted] bronchitis diseases
- [redacted] heart diseases
- [redacted]
- [redacted] heart diseases
- [redacted] respiratory diseases
- [redacted] aneurysm
- Peripheral vascular diseases
- Cancers of oesophagus
- Cerebral vascular diseases
- Cancer of bladder
- Pulmonary tuberculosis
- Myocardial degeneration
- Pneumonia
- Other heart diseases
- Peptic ulcer

[illegible] effects caused in part by smoking are:

- ✓ *Cancer of lips*
- ✓ *Cancer of nose*
- ✓ *Crohn's diseases*
- ✓ *Osteoporosis*
- ✓ *Cancer of stomach*
- ✓ *Periodontitis*
- ✓ *Cancer of pelvis of kidney*
- ✓ *Tobacco amblyopic*
- ✓ *Cancer of body of kidney*
- ✓ *Age related macular degeneration*
- ✓ *Myeloid leukemia*
- ✓ *Reduced growth of fetus*

[illegible] Teenagers:

The effect of smoking on teenagers is very dangerous. Many children are conditioned to [illegible] smoking as glamorous, sophisticated, an adult habit, a status symbol and a sign of [illegible]. As they used to smoke from their childhood, they become addicted on it and face [illegible] problems related smoking.

[illegible] (Adhunik, World No-Tobacco Day)

- [illegible] has five million child smokers with 55 thousand children starting smoking each year.
- [illegible] has 52 thousand people of less than 20 years starting smoking each year.
- In [illegible], a 1993 survey found 44.6% of urban school children consumed tobacco.
- A survey in Sri Lanka found that 15% of smoking people had first smoke by the age of 11 years.
- A survey in Bangladesh showed that 23 per cent of people in 15-16 age group smoke

[illegible] Women:

[illegible] smokers are likely to increase as a percent of the total. Women are adopting more [illegible] role in society; they have increase spending power, they live longer than man. And as [illegible] official report showed, they seem to be less influenced by the anti smoking campaign. [illegible] effects of smoking are:

1) Breast and cervical cancer
2) Prone to premature menopause
3) Unsuccessful pregnancy and impaired fertility
4) Newborn child may also be affected.

World No-Tobacco Day)

estimated 45 million women use tobacco smoking
study showed that 71.75% of women in high mountain area and 58.95% of
smoked.
28.4% of female over 16 years of age smoked.
Bangladesh showed that 5 million women smoked smoke.

Quit Smoking:

becoming a non-smoker is more of a process than an event. More than 50% of
quit do soon their own, but it usually takes several attempts before they succeed
Many things can help individuals give up or stay off cigarettes – it depends on their
smoking and how addicted they are. There is no one right way to quit. Different
smoking in different ways.

To Quit:

quit smoking must be made by the smoker. They have to make that commitment
Other people or institutions can't do it for them but there are ways that can help to
process easier.

the smoker: Smoking is a powerful addiction and quitting can be hard.
their own reasons for smoking. So each smoker should be motivated to quit

the quit process: Quitting does not happen in one step – smokers usually
5 stages:

about quitting

quitting but not ready to quit **4) Quitting**

to quit **5) Remaining a non-smoker**

Quitting: Health Canada has created this website to help smokers move stages of quitting by following a fictional character. (Canada)

Challenge: Provides testimonials and tips from smokers and ex-smokers in stages of quitting and a community bulletin board to get and give support. (Canada).

site built by teens for teens. Offers a safe place for teens to get information and -smoking prevention and quitting smoking. *(Canada).*

Zine: This site was created by youth for youth who want to explore why they want to quit. (*Canada).*

This site gives a place to start own online quit plan, tools and guides to help quit oriented support forums, clubs and chat rooms. The Boston University, School of maintains this site. *(United States)*

.gov: Provides access to a comprehensive guide on quitting developed by ex- experts. *(United States)*

This site offers help to 12-18 year olds trying to quit smoking by following a 4- supported by 4 virtual teenagers and their quit stories. *(United States)*

: Presents advice and information on how to quit. Questionnaires and quizzes where people might be in the 5-step process with online forums available to who are trying to stay tobacco free. *(International).*

to **Quit Smoking:**

people can do for their health is to quit. It may not be easy, but if they keep on be successful. There are some stages, which people can follow to quit smoking

stages are:

- ***Stage I: You're not thinking about quitting***
- ***Stage II: Thinking about quitting***
- ***Stage III: Preparing to quit***

- ***Stage IV: Quitting***
- ***Stage V: Relapse and staying smoke-free for good***

about Quit Smoking: Planned or Unplanned:

quit smoking, a question comes around that whether they planned it or that is in an unplanned way. Many smokers gear up for months to try and kick meticulous plans to ease them off the nicotine. But deciding to quit on the moment is far more likely to be successful according to new research.

researchers of the University College London, "*Unplanned attempts to stub out were 65 per cent likely to succeed compared to 45 per cent of those who planned could be because planning ahead creates tension, making smokers more likely to* In the research almost 2,000 smokers and ex-smokers were asked about their quit the tobacco habit. Nearly half of their attempts to stop were found to be unplanned) and these were the most successful.

suddenly one weekend without any planning or intention. I ran out of cigs and see how long I could last without one. That was 18 months ago."

Cheltenham, UK

Professor Robert West, director of tobacco studies at UCL, "*The results do not should tell everyone to stop without planning ahead."*

of tobacco control for Cancer Research UK, said "*This is an interesting survey that there are different strokes for different folks. The new findings suggest that some on the spur of the moment and that is very good news for them. Others benefit a quit date. In both cases people can always get additional support from NHS which have helped thousands of people give up."*

before you quit, get rid of all ashtrays and lighters. On the day you quit, quit at 12 go to bed early, and before you know it, you have gone 24 hours without smoking! on a project at home. You will keep busy so you are not thinking about smoking, plus accomplish something."

St. Pierre, Chicago, USA

Quit Smoking Products:

conducted by the researchers where they identified about 13 different quit products. For this study they used some criteria and methodology. The lists of these products are given below:

- [illegible]
- [illegible] Smoke
- [illegible]Quit
- [illegible]

to include those products that satisfied a majority of the criteria. In the year four over-the-counter quit smoking products made the cut. These four products high overall effectiveness, but also were easy to use, had low occurrences of side had a high success rate. The companies that make them, as evidenced by their guarantees, also back all four.

Possible Withdrawal Symptoms after Quitting:

have the same experience and some have no symptoms at all. Withdrawal include:

- Changes in body temperature
- Changes in heart rate
- Changes in digestion
- Changes in muscle tone
- Changes in appetite.
- Withdrawal symptoms may also cause irritability, anxiety, cravings for tobacco
- Sleep disturbances.

find these symptoms generally diminish in 7 days but they may not disappear weeks or months. Various medications can help with these symptoms.

Second Hand Smoke:

exposed to second-hand smoke are at higher risk of getting cancer and other lung . It is estimated that more than 300 non-smokers die from lung cancer each year of second-hand smoke (Health Canada).[5]

Second-hand smoke is dangerous:

Second-hand smoke is more dangerous than directly inhaled smoke. It is harmful even when cannot see or smell it. Second-hand smoke releases the same 4,000 chemicals as smoke directly inhaled, but in even greater quantity. Approximately 50 of these chemicals cause cancer.

burn for approximately 12 minutes, but smokers usually only inhale for 30 seconds. As cigarettes are spewing second-hand smoke into the air for non-smokers to breathe. Second-hand smoke burns at a lower temperature than inhaled smoke (mainstream) it 2 times more tar & 5 times more carbon monoxide, which reduces the amount of in the blood.

Health risks of second-hand smoke:

Second-hand smoke is linked to the deaths of huge number of people every year.

The short-term effects include:

- irritation
- discomfort and sneezing
- headache, nausea and dizziness
- cough and sore throat, asthma, allergies
- increased heart rate and blood pressure

Long-term effects include:

- Reduced ability to take in oxygen.
- Heart disease and stroke.
- Lung cancer
- Childhood asthma

Canadian Cancer Society

No-Tobacco Day:

every year "World No-Tobacco Day" is observed all most all over the world with specific theme selected for the Day by the World Health Organization.[6] types anti- smoking organizations mainly do different campaigns to protect from this society. They focus on negative and bad sides of smoking and try to ledgeable and aware.

Smoking:

General Luther Terry announces that smoking causes lung cancer. In Cigarette Labeling and Advertising Act requires US Surgeon General's warnings on UK Government bans cigarette ads on television in the UK. Then after ads for cigarettes are banned in America. Last advert is for Virginia Slims and is In 1973 first US federal restriction on smoking. Officials rule all airlines must sections. During 1997 Federal judge rules that US Government can regulate a drug. Then in 2002 British Medical Association claims there is 'no safe level of tobacco smoke' and in 2003 New York City bans smoking in all public places (31 adesh, government bans cigarette ads on television in 1990.

Information:

of world:

Health Organization (WHO), 110 crore people (one third) around the world Among which about 20 crore (200 million) are woman. Statistically in world men and 12 percent women used to smoke. In developing countries, 48 7 percent women smoke daily where as in developed countries, 42 percent men omen smoke daily.

Transaction, World No-Tobacco Day, 2004.

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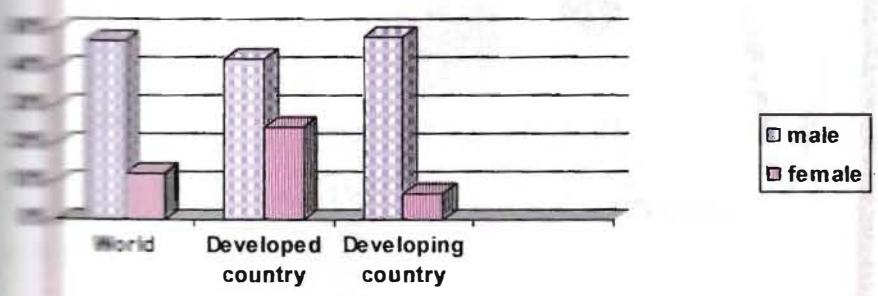
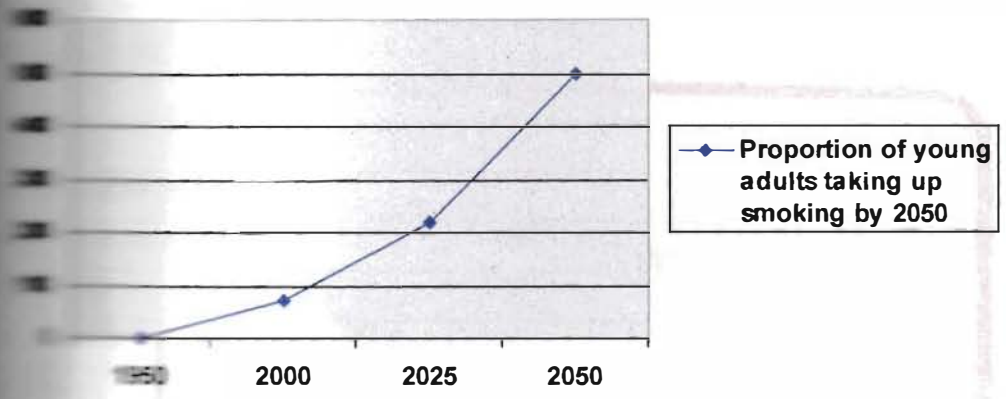
[redacted] status by **Sex:**

	Male	***Female***
[redacted]	47%	12%
[redacted] *Country*	42%	24%
[redacted]	48%	7%



[redacted] every year about 35 million people died, that is 10,000 people died every day. [redacted] million people died in developing countries. Moreover, it is suspected that about [redacted] children and teenagers will die because of smoking. By 2020, smoking is predicted to [redacted] leading cause of death & disability.

Young adults taking up smoking by 2050:



1994; Peto, personal communication

consumption:

cigarette per day	1997 %	1999 %	2000 %	2001 %	2002 %	2003 %	2004 %	2005 %
a day	38	32	36	34	37	35	34	32
a day	37	43	38	39	40	41	40	36
than 10 a	25	25	25	27	23	24	27	32
	506	448	446	414	396	456	423	375
a day	28	29	24	32	25	26	26	21
a day	41	42	47	37	41	42	45	44
than 10 a	31	29	29	31	34	32	29	35
	539	536	502	452	448	488	425	433

[illegible] giving up **smoking:**

[illegible] giving up [illegible]	Age				Total
	16 - 24	25 – 44	45 - 64	65 & over	
	%	%	%	%	%
[illegible] to give up:					
[illegible]	21	29	33	14	28
[illegible]	23	30	22	12	24
[illegible]	23	15	12	7	14
[illegible]	8	6	7	10	7
[illegible] *to give*	75	80	74	43	73
[illegible] *to give up*	25	20	26	57	27
[illegible]	117	336	268	81	804

[illegible] of **Bangladesh:**

[illegible] there are about 1.50 crore male and about 50 lakh female smokers. If on an [illegible] one cigarette is smoked per person per day, about two crore cigarette is burning daily [illegible] the average cost is 50 paisa per cigarette, we are burning out one crore taka daily or on [illegible] words Tk 365 crore annually. Annual budget of the country is over 4,000 crore taka.

[illegible] carried out in 2001 showed the poorest households in Bangladesh pay about 10 times [illegible] for tobacco as for education and in the countryside over 10.5 million malnourished [illegible] could afford an adequate diet if money spent on buying tobacco were spent on food. [illegible] *president Amanullah Khan)*

[illegible] consumption and number of smokers in Bangladesh is rising by more than 10% annually [illegible] had been reflected in the increases of government revenues being collected from tobacco [illegible] by similar percentages on a year to year basis in consequence of an upswing in the [illegible] tobacco products. *(Amanullah Khan, once an executive of Bangladesh Tobacco Company [illegible] BAT) and a staunch anti-tobacco campaigner since 1987).*

caused by smoking:

	Boys	Girls	All
	57.1	58.6	57.9
	39.9	39.7	39.8
	77.7	74.4	75.9
	32.4	31.0	31.7
	4.4	3.9	4.1

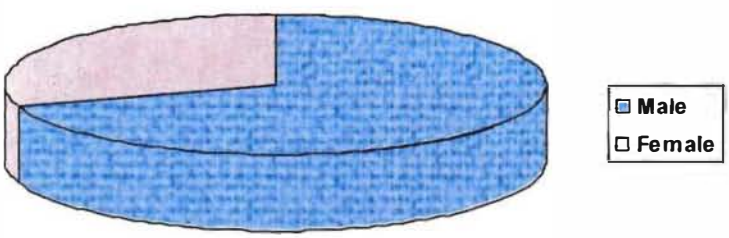
conducted by SM Ahmed, AKMM Rana, SM Chowdhury, A Mills ,62 Regional – Volume 6, Number 2, 2002)

prevalence:

Bolder, 2001)

Males	48.3%
Females	20.9%

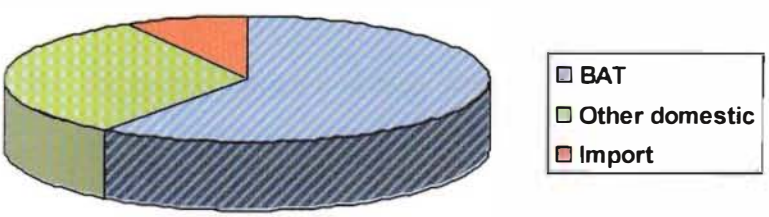
obacco prevalence in Bangladesh)



	Per capita consumption (Cigarette sticks)	Total consumption (in million)
	492	17787
	294	14007
	194	12373
	239	17449
	234	19717

cigarette manufacturer in Bangladesh:

(Bangladesh)	60%
domestic companies	32%
	8%

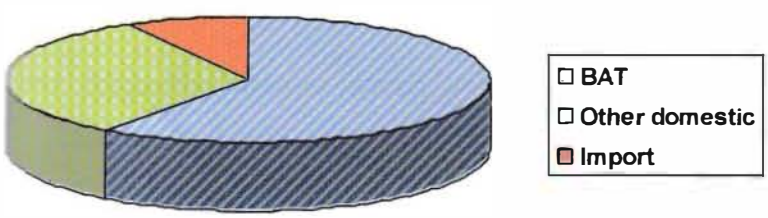


Economy:

Per capita consumption (Cigarette sticks)	Total consumption (in million)
492	17787
294	14007
194	12373
239	17449
234	19717

by cigarette manufacturer in Bangladesh:

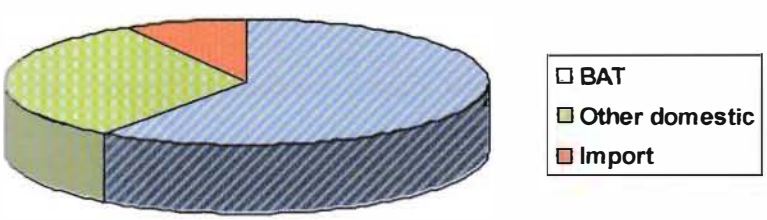
(Bangladesh)	60%
domestic companies	32%
	8%



Per capita consumption (Cigarette sticks)	Total consumption (in million)
492	17787
294	14007
194	12373
239	17449
234	19717

Share by cigarette manufacturer in Bangladesh:

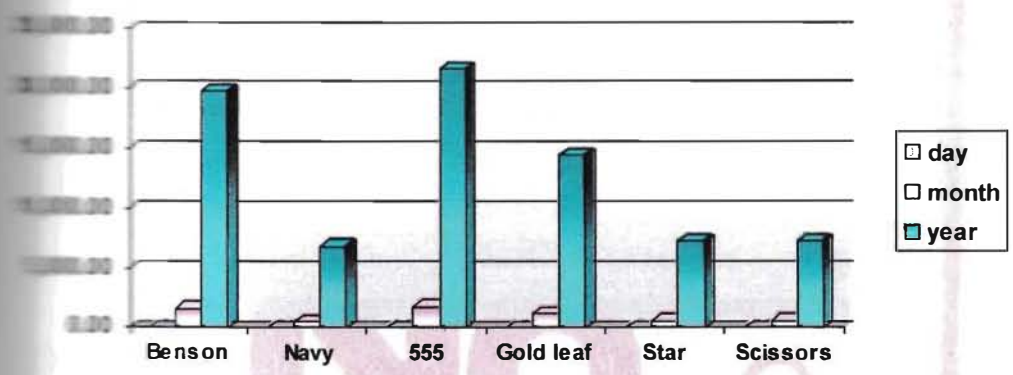
BAT (Bangladesh)	60%
Other domestic companies	32%
Import	8%



by a **Smoker in Day, Month and Year:**

	Day	Month	Year
	55	1650	19800
	19	570	6840
	55	1800	21600
	40	1200	1`4400
	20	600	7200
	20	600	7200

Association of Bangladesh



of the Problem:

research is conducted to identify what are the factors which are affecting the smoking i.e. what are the reasons of customers to buy cigarette.

Objective:

the triggering factors which are liable for increased smoking in

components of marketing research problem:

factors:

which have an influence on smoking (Parents, curiosity, social norms, pleasure, addiction, image, friends, advertising and availability)?

Objectives:

smokers and the factors, which influence smoking as I have already defined Now I have found about the Specific objectives:

objectives are:

a. To identify the major influential factors to become a smoker.
b. To know whether a smoker-family member has any influence on the adopter.
c. To identify the level of curiosity that influences a smoker to become addicted.
d. To find out the influence of social norms
e. To understand how the social pressure influence a smoker to become a regular smoker.
f. To find out the size of the segment that smokes only for pleasure.
g. To identify the segment size of addicted smokers
h. To know how image influence.
i. To identify the degree of influence by the friends or co-workers.
j. To understand the level of influence by commercial advertisements
k. To know whether availability of the product has any positive impact on purchase decision or not.

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APPROACH TO THE PROBLEM

Theoretical Framework (Research Task):

Conceptualizing & Identifying Key Variables.	It provides a conceptual foundation and understanding of the basis process underlying the problem situation. For smoking the factors or variables are parents, curiosity, social norms, social pressure, pleasure, addiction, image, friends, advertising and availability.
Operationalizing Key Variables	Theoretical constructs can suggest independent and dependent variables naturally occurring in the real world.
Selecting A Research Design	Indicate whether exploratory research design or descriptive, causal research design to be used. Here the research done is an exploratory research.
Selecting A Sample	Identify the population and suggesting variables for qualifying respondents, imposing quotas, or stratifying the population. Here we use non-probability sampling.
Analyzing & Interpreting Data	Guide the selection of a data analysis strategy and the interpretation of results. Non-parametric form of data analysis technique has been used.
Integrating Findings	Can be interpreted in the light of previous research.

The theoretical framework of the research "Factors affecting the growth of smoking" is:

To identify the reasons behind increasing the number of smokers, I have initially identified some variables / factors, which are significantly correlated with the purchase of cigarette. Pleasure, curiosity, *social norms, social pressure, pleasure, addiction, image, friends, advertising and availability* are the factors or variables that influence an individual for starting to smoke cigarette. So smoking cigarette is based on the *simultaneous activation* or some more activation of these variables. These variables are to be described under the exploratory research *design* (qualitative research), them for data collection I have to select some suitable *sample*, for analyzing data I have to determine *non parametric data analysis* technique and finally *findings* will be interpreted with the existing body of knowledge.

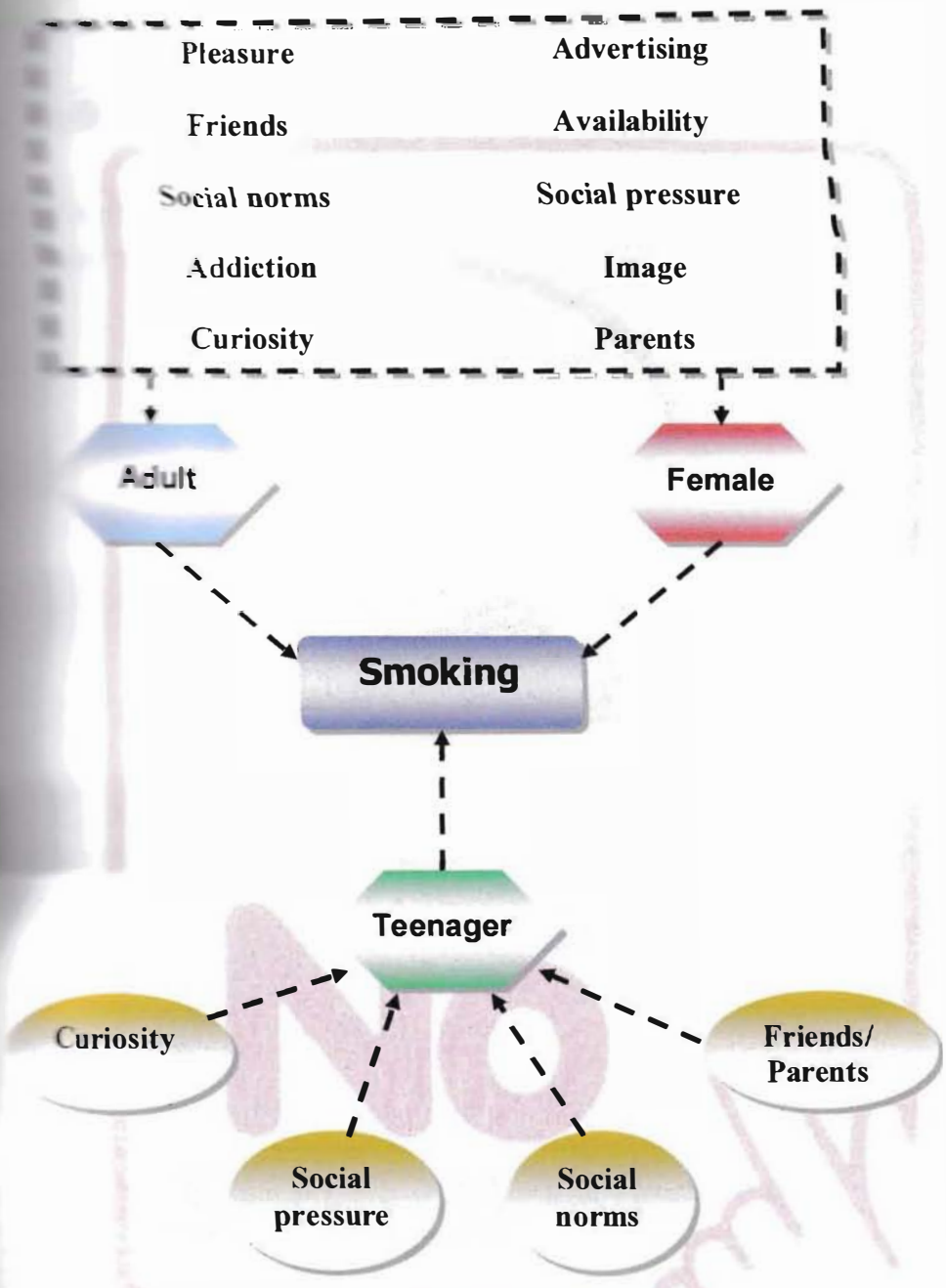
Theoretical Model:

Theoretical model is a set of variables and their interrelationships designed to represent, in whole or part, some real system or process. Model can have many different forms. The most

Conceptual Model:

A smoker who smokes can be divided into adult, female and teenager. The factors, which influence adult and female, are quite similar like pleasure, advertisement, image, social norms, social pressure, parents/family, friends, availability, addiction and curiosity. On the other hand factors that affect teenagers for smoking is more specific like curiosity, social norms, social pressure and parents/family/friends.

Model:


Pleasure
Advertising
Friends
Availability
Social norms
Social pressure
Addiction
Image
Curiosity
Parents
Adult
Female
Smoking
Teenager
Curiosity
Friends/
Parents
Social
pressure
Social
norms

Mathematical Model:

Mathematical model of graphical model and verbal model is:

Dependent variable (smoking)

Independent variables (factors which influence smoking)

X_1 = *Pleasure*

X_2 = *Advertisement*

X_3 = *Image*

X_4 =*Social norm*

X_5 = *Social pressure*

X_6 = *Parents/family*

X_7 = *Friends*

X_8 = *Availability*

X_9 = *Addiction*

X_{10} = *Curiosity.*

That, ***Rate of smoking = f (factors which influence smoking)***

DESIGN:

Research Design:

Research is limited to narrower areas. The study is conducted in Dhaka. The main focus area Dhaka city. So I mainly focus on narrower area rather than wider area. The time duration of Research is from June 2006 to July 2006.

- ***Type of research:*** Quantitative research (To quantify the data and generalize the results from the sample to the population of interest.)

- ***Research design:*** Descriptive research (Type of conclusive research used to describe something.)

- ***Data collection:*** Survey method (Involve structure questionnaire given to respondents and elicit specific information.)

- ***Questionnaire:*** Structure questionnaire

  Scaling: Non comparative scaling technique-itemized rating scale - likert

- ***Data analysis:*** Parametric

Information Need:

Type of information obtained in a questionnaire is classified as:

Basic Information:

The basic information relates directly to the research problem like do they smoke, when they start, why they smoke etc.

Classification Information:

It consist socioeconomic and demographic characteristics, used to classify the respondents and understand the result. In questionnaire, questions are divided into different categories to know respondents' habit, attitude, and opinion regarding smoking.

Identification Information:

Includes name, address, contact number, occupation, gender etc. It is the respondents profile the questionnaire.

Data Collection from Secondary Sources:

Secondary data are data that have already been collected for purpose other than the problem at hand. I collect secondary data from various journals of "Adhunik" (anti-smoking organization), from CAB (Consumer association of Bangladesh) and from Internet.

Data Collection from Primary Sources:

Researcher originates primary data for the specific purpose of addressing the problem at hand. For collecting data from primary sources i first conducted depth interview with decision makers that is with smokers. Among which most of them are students; others are service holders and individual people. Secondly, I take interview of expertise like doctors and people who are working on smoking (anti-smoking organization). At last I conduct a survey of 100 smokers to collect data.

Scaling Technique:

In the questionnaire most of the questions are in likert form, which is a five point rating scale. This scale has specific categories and each specific category has its description. In my research questions I have defined categories and their descriptions are as follows:

- Strongly disagree = 1
- Disagree = 2
- Neutral = 3
- Agree = 4
- Strongly agree = 5

Likert scaling technique is used because it is easy for my respondents to understand and place their points as for each feature there is one number. More over the outcome I get is easy to implement for data analysis.

scaling, I also use constant sum scaling technique. Respondents are given 100 asked to distribute this point among some statements. This technique is used to rank regarding why they smoke and why they should stop smoking.

Questionnaire Development and Pre-sting:

Development:

questionnaire is developed for the research. The questionnaire starts with *screening* to screen the potential respondents, that is that are the smoker. Then *main questions* know respondents' habit, attitude, and preference. There is also one *open-ended* to bring out respondents opinion regarding smoking. The questionnaire ends with *profile*, which include name of the respondents, their occupation, contact address, telephone number.

testing of the questionnaire on a small sample of respondents for the purpose of the questionnaire by identifying and eliminating potential problems. To improve the , I do not go for pre-testing but sufficient steps are taken to improve questionnaire errors.

Technique:

Population: the studies generally target all those people who smoke cigarettes, in their life.

Unit: Target population of the study divided into two parts – male and female.

Frame: The list or set of directions for identifying target population comes Association of Bangladesh (CAB).

Technique: Cluster sampling under probability sampling technique should be But for academic purpose, here quota sampling under non-probability sampling will be Quota will be taken by gender (male and female).

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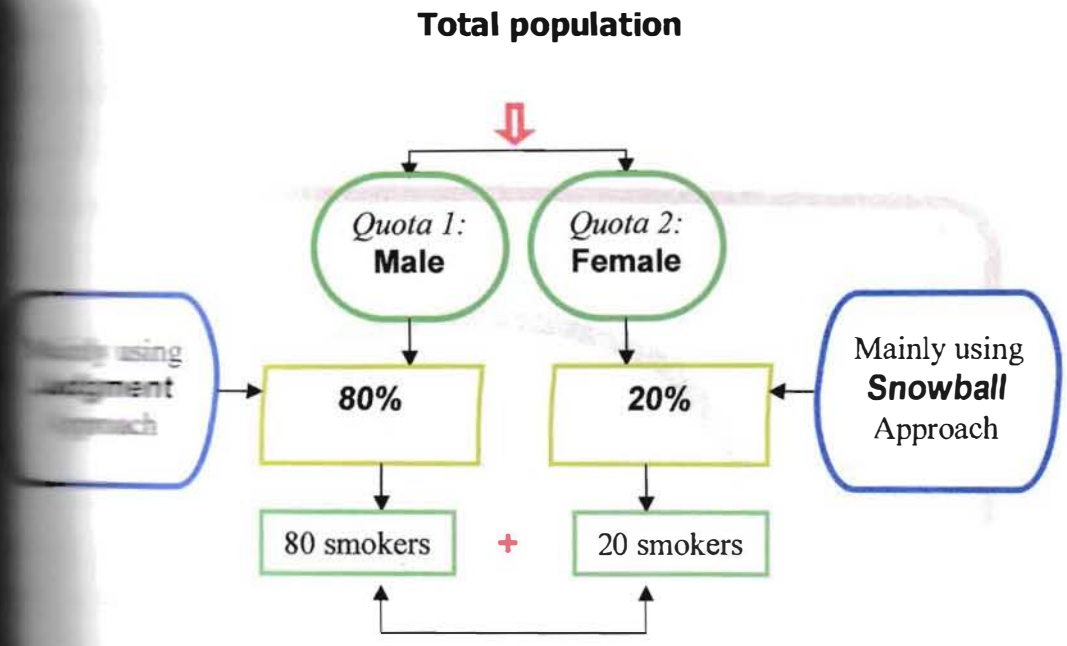


Element: Each male and female smoker in Dhaka City is the sample element

Size: Formula for finding sample size is:

= Standard deviation
= Level of confidence
= Precision level

sample size for research:

	Means:
the level of precision	**D = 5**
the confidence level (CL)	**CL = 95%**
value associated with CL	**z value is 1.96**
standard deviation of population	**Estimated ð: ð = 25.5**
the sample size using the formula for standard error	$n = \frac{ð^2 z^2}{D^2} = \frac{(25.5)^2 (1.96)^2}{5^2} = 100$

Execution: Allocate sample by quota. Then select respondents by using judgment technique and snowball technique. For male, use judgment sampling technique and snowball technique. At last survey the smokers subject to quota requirement.

Field Work:

Research has been carried out by 1 member and the member work in field for collecting data from respondents (smokers). While doing the survey in field, some steps have been followed:

Make the Initial Contact:

The field work begin by making opening remarks that convinced potential respondents to participate mentioning that this research is conducted by the students of East West University and will be done only for academic purpose.

Ask Questions:

Questions have been asked to the respondents by following some guidelines:

- Questions are asked in the order in which they appear in the questionnaire.
- Exact wording have been used which is given in the questionnaire.
- Questions have been read slowly.
- Questions that are not understood have been repeated.

Recording the Answers:

The answers are recorded in questionnaire (place for official use) so that it becomes easy to enter data into SPSS.

the Interview:

has been obtained properly and necessary answers have been given to the questions about the project. The survey ends with thanking the respondents and appreciation.

ANALYSIS

gy:

I use both the parametric and non-parametric approach.

questionnaire the first question is screening that is just use "yes" or "no", so I use scaling under non-parametric data analysis technique. It has one variable so I apply distribution.

other questions, which are in likert form, I use scale/ interval under parametric data technique.

as I use constant sum scaling to rank, here I use ordinal scaling technique under non- data analysis.

Plan of Data Analysis:

of my questions are in likert form so I have used scale/ interval under parametric analysis technique. Here I use t-test as all of the statements deals with one variable. I significance level is equal to .05 and develop the hypotheses. The hypotheses are:

H_1: Depression leads a person to start smoking

H_2: Mostly at the age of below 20 people become addicted in smoking

H_3: Peer groups are responsible to make a person smoker

H_4: A person generally smokes while working

H_5: Tea stalls near to the working places are the basic smoking zones

H_6: Smoking increases the working efficiency

H_7: People are not clearly aware about the harmfulness of smoking

H_8: People are interested to quit smoking.

H_9: Addiction makes a person to be reluctant from quit smoking.

H_{10}: People perceive that international politics is involved in spreading smoking.

hypotheses (H_0), I develop the statement, which comprise of existing situation, and in ***hypotheses (H_1)*** I have developed statement, which I want to prove. If the outcome than 0.05 than I have accepted null hypotheses. But if the outcome comes less then I have accepted alternate hypothesis. Thus:

> 0.05, **Accept null hypothesis (H_0)**

< 0.05, **Accept alternate hypothesis (H_1)**

used constant sum technique so use ordinal scaling to rank the results. At the end for I make statistical decision and marketing decision.

ESIS TESTING

number 1.

is not the main factor that leads a person to be smoker.

is the main factor that leads a person to be smoker.

Level: 95%

Statistics

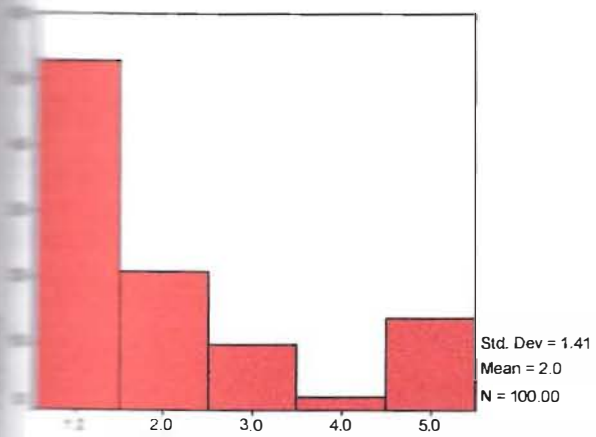
started smoking

	Valid	100
	Missing	0
		2.03
		1.00
		1
		1.41
		203

How did started smoking

	Frequency	Percent	Valid Percent	Cumulative Percent
friends	53	53.0	53.0	53.0
	21	21.0	21.0	74.0
eldesr cigarette	10	10.0	10.0	84.0
tradition	2	2.0	2.0	86.0
	14	14.0	14.0	100.0
Total	100	100.0	100.0	

did started smoking



did started smoking

Decision: From the frequency distribution table we have found that 14 percent of population starts smoking from frustration that is less than 50 percent so I can reject hypothesis and accept null hypothesis.

Decision: We can say that frustration is one of the factors that lead to be the but not the most affecting factor rather the friend that is 53 percent is the mostly factor.

esis number 2.

groups are not responsible to make a person smoker.

groups are responsible to make a person smoker.

Level: 95%

One-Sample Statistics

	N	Mean	Std. Deviation	Std. Error Mean
members and are mostly ible for of smoking	99	3.69	1.24	.12

One-Sample Test

	Test Value = 3					
	t	df	Sig. (2-tailed)	Mean Difference	95% Confidence Interval of the Difference	
					Lower	Upper
members and are mostly ible for of smoking	5.500	98	.000	.69	.44	.93

Decision: From one sample t test I have found that significance level is (0.000) less than 0.05. So, null hypothesis is rejected and alternative hypothesis is accepted so Peer groups are responsible to make a person smoker.

Decision: Peer groups are responsible to make a person smoker.

[illegible]esis number 3.

[illegible] person doesn't smoke while he is in mental work.

[illegible] person generally smokes while he is involved in mental work.

[illegible]ificance Level: 95%

[illegible]quencies

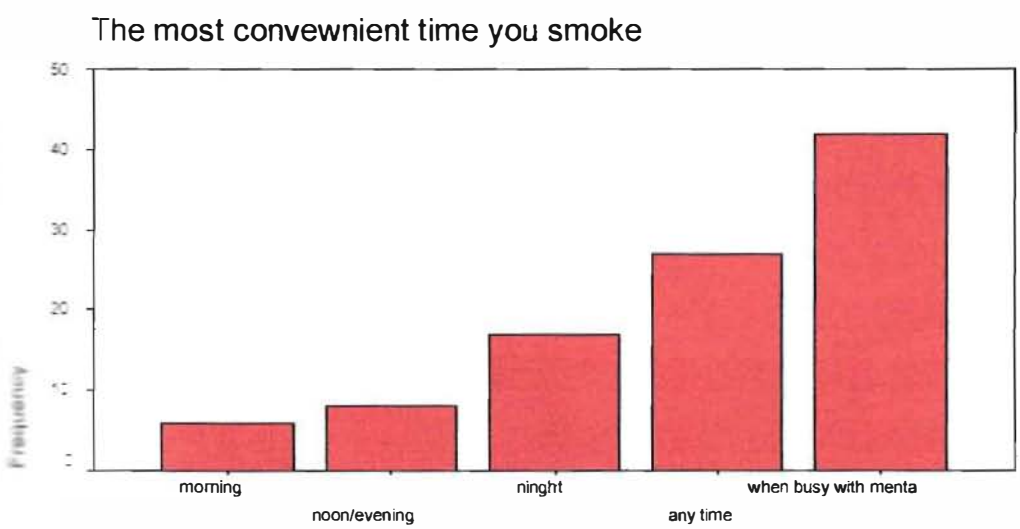
Statistics

The most convewnient time you smoke

N	Valid	100
	Missing	0
Mean		3.91
Median		4.00
Mode		5
Std. Deviation		1.21
Sum		391

The most convewnient time you smoke

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	morning	6	6.0	6.0	6.0
	noon/evening	8	8.0	8.0	14.0
	ninght	17	17.0	17.0	31.0
	any time	27	27.0	27.0	58.0
	when busy with mental work	42	42.0	42.0	100.0
	Total	100	100.0	100.0	



The most convewnient time you smoke

Decision: From the frequency distribution table we see 42 percent of the [illegible] are supporting that they smoke while they works, so the null hypothesis is rejected [illegible] alternate is accepted.

Decision: A person generally smokes while the person is involved in mental work.

[illegible] number 4.

[illegible] near to the working places are not important as smoking zones.

[illegible] near to the working places are the basic smoking zones.

[illegible] **Level:** 95%

[illegible]

Statistics

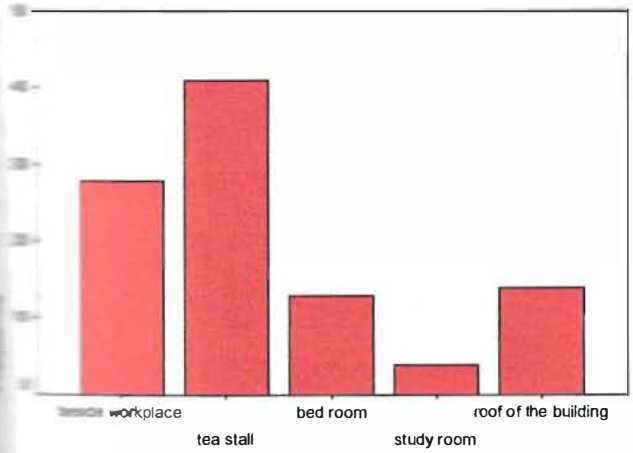
[illegible] convenient place you smoke

[illegible]	Valid	100
	Missing	0
[illegible]		*2.35*
[illegible]		2.00
[illegible]		2
[illegible] Deviation		1.31
[illegible]		235

the most convenient place you smoke

		Frequency	Percent	Valid Percent	Cumulative Percent
[illegible]	beside workplace	28	28.0	28.0	28.0
	tea stall	41	41.0	41.0	69.0
	bed room	13	13.0	13.0	82.0
	study room	4	4.0	4.0	86.0
	roof of the building	14	14.0	14.0	100.0
	Total	100	100.0	100.0	

the most convenient place you smoke



the most convenient place you smoke

Decision: From the frequency distribution table I find that most of the people smoke the tea stall, as the percentage is 41 percent, which is much higher than the other places. hypothesis is rejected and the alternate is accepted.

Decision: From the frequency distribution chart, we see most of the people smoke the tea stall. So it is said that tea stalls beside the working place are the basic smoking

number 5.

is not a refreshing factor.

works for refreshment.

Level: 95%

One-Sample Statistics

	N	Mean	Std. Deviation	Std. Error Mean
gives	100	4.18	1.15	.11

One-Sample Test

	Test Value = 3					
	t	df	Sig. (2-tailed)	Mean Difference	95% Confidence Interval of the Difference	
					Lower	Upper
gives	10.267	99	.000	1.18	.95	1.41

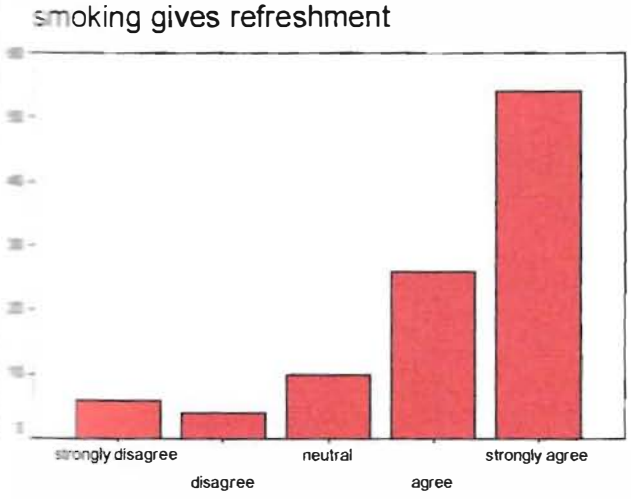
Statistics

smoking gives refreshment

N	Valid	100
	Missing	0
Mean		4.18
Median		5.00
Mode		5
Std. Deviation		1.15
Sum		418

smoking gives refreshment

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	strongly disagree	6	6.0	6.0	6.0
	disagree	4	4.0	4.0	10.0
	neutral	10	10.0	10.0	20.0
	agree	26	26.0	26.0	46.0
	strongly agree	54	54.0	54.0	100.0
	Total	100	100.0	100.0	



Statistical Decision: From one sample t test I have found that significance level is (0.000) which is less than 0.05. So, null hypothesis is rejected and alternative hypothesis is accepted.

Marketing Decision: From the frequency distribution table, I see that 54 percent people smoke for refreshment. So we can say that smoking gives refreshment to the smokers.

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[redacted]s number 6.

[redacted]eople are not interested to quit smoking.

[redacted]eople are interested to quit smoking.

[redacted]ificance Level: 95%

[redacted]equencies

Statistics

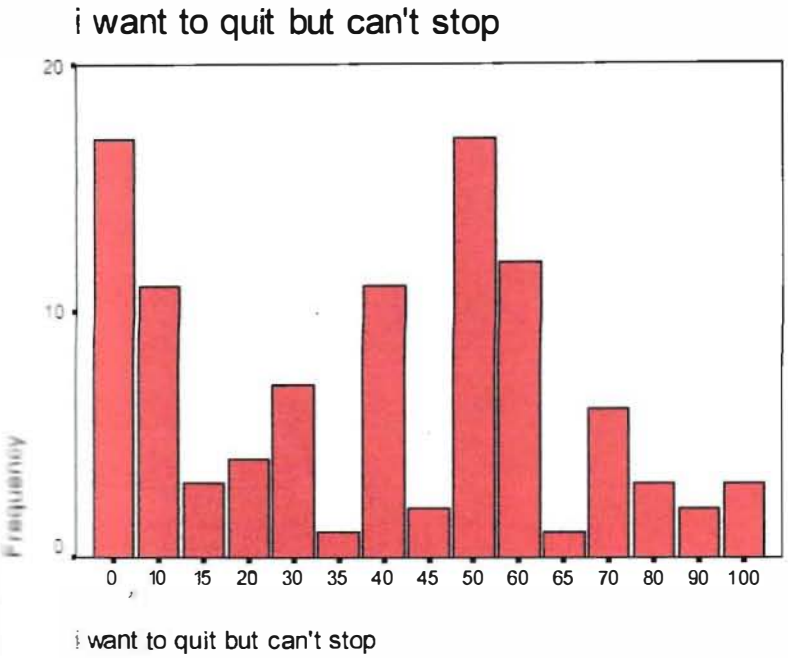
[redacted]ant to quit but can't stop

N	Valid	100
	Missing	0
Mean		37.85
Median		40.00
Mode		0[a]
Std. Deviation		27.34
Sum		3785

a. Multiple modes exist. The smallest value is shown

i want to quit but can't stop

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	0	17	17.0	17.0	17.0
	10	11	11.0	11.0	28.0
	15	3	3.0	3.0	31.0
	20	4	4.0	4.0	35.0
	30	7	7.0	7.0	42.0
	35	1	1.0	1.0	43.0
	40	11	11.0	11.0	54.0
	45	2	2.0	2.0	56.0
	50	17	17.0	17.0	73.0
	60	12	12.0	12.0	85.0
	65	1	1.0	1.0	86.0
	70	6	6.0	6.0	92.0
	80	3	3.0	3.0	95.0
	90	2	2.0	2.0	97.0
	100	3	3.0	3.0	100.0
	Total	100	100.0	100.0	



Statistical Decision: From the frequency table I found that mean is 37.85 and mode is 40 from the point of distributing 100 points so we can say that the null hypothesis is rejected and the alternate is accepted, that means people are interested to quit smoking.

Marketing Decision: From the distribution diagram we see that most of the people are interested to quit smoking.

Hypothesis number 7.

Advertisements are not efficient to spread of smokers.

Advertisements are efficient to spread of smokers.

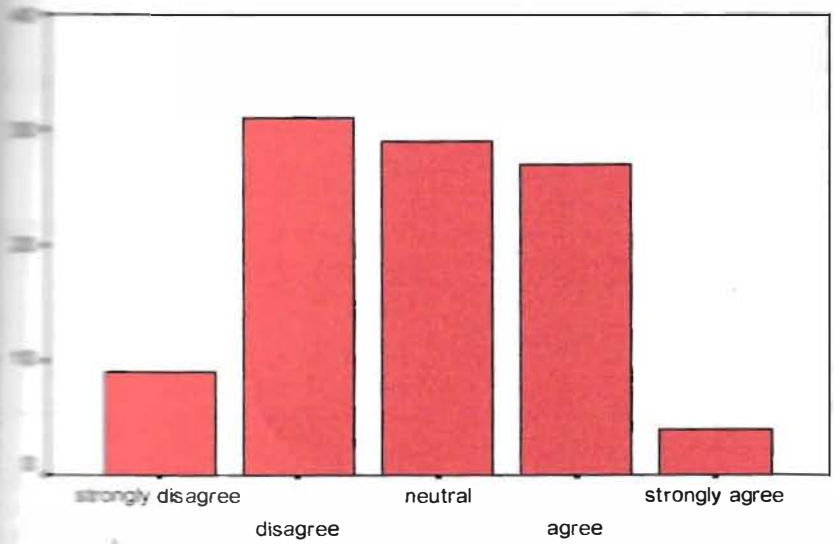
Significance Level: 95%

Statistics

banning on advertisemtns of smoking

	Frequency	Percent	Valid Percent	Cumulative Percent
strongly disagree	9	9.0	9.0	9.0
disagree	31	31.0	31.0	40.0
neutral	29	29.0	29.0	69.0
agree	27	27.0	27.0	96.0
strongly agree	4	4.0	4.0	100.0
Total	100	100.0	100.0	

banning on advertisemtns of smoking



banning on advertisemtns of smoking

One-Sample Statistics

	N	Mean	Std. Deviation	Std. Error Mean
banning on advertisemtns of smoking	100	2.86	1.04	.10

One-Sample Test

	Test Value = 3					
	t	df	Sig. (2-tailed)	Mean Difference	95% Confidence Interval of the Difference	
					Lower	Upper
banning on advertisemtn of smoking	-1.340	99	.183	-.14	-.35	6.73E-02

Statistical ***Decision:*** From one sample t test I have found that significance level is (.183) which is more than 0.05. So, null hypothesis is accepted and alternative hypothesis is rejected that means, Advertisements are not efficient to spread of smokers.

Marketing ***Decision:*** From the frequency distribution table, we see that only 31 percent of our respondents agreed that advertisement works for the spread of smoking; it means that advertisements are not efficient in spreading smoking.

[illegible] number 8.

[illegible] doesn't make a person reluctant to quit smoking.

[illegible] makes a person reluctant to quit smoking.

[illegible]ance Level: 95%

[illegible]

One-Sample Statistics

	N	Mean	Std. Deviation	Std. Error Mean
[illegible] increases [illegible] just shifts [illegible] not the [illegible] smoke	100	3.91	1.16	.12

One-Sample Test

	Test Value = 3					
	t	df	Sig. (2-tailed)	Mean Difference	95% Confidence Interval of the Difference	
					Lower	Upper
[illegible] increases [illegible] just shifts [illegible] not the [illegible] smoke	7.816	99	.000	.91	.68	1.14

[illegible]

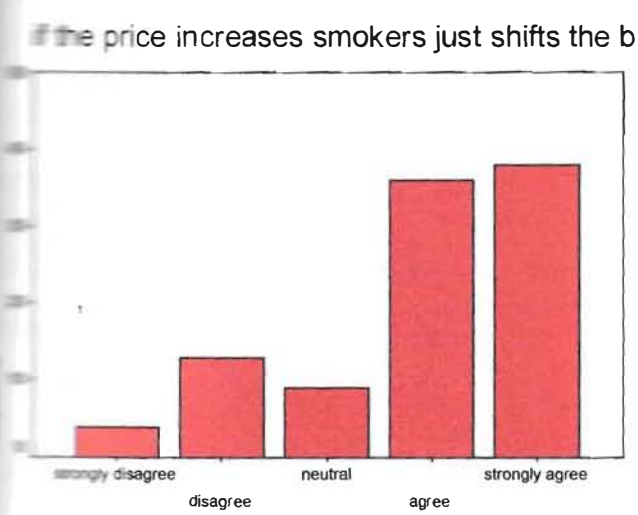
Statistics

[illegible] increases smokers just shifts [illegible] not the number smoke

[illegible]	Valid	100
	Missing	0
[illegible]		3.91
[illegible]		4.00
[illegible]		5
[illegible] Deviation		1.16
[illegible]		391

if the price increases smokers just shifts the barand not the number smoke

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	strongly disagree	4	4.0	4.0	4.0
	disagree	13	13.0	13.0	17.0
	neutral	9	9.0	9.0	26.0
	agree	36	36.0	36.0	62.0
	strongly agree	38	38.0	38.0	100.0
	Total	100	100.0	100.0	



if the price increases smokers just shifts the barand not the numbe

Statistical Decision: From one sample t test we have found that significance level is (0.000) which is less than 0.05. So, null hypothesis is rejected and alternative hypothesis is accepted.

Marketing Decision: From the frequency distribution table we see that 73 percent respondents agreed that if the price increases than they would rather shift the brand but they would not stop or reduce the number of cigarette they consumed.

Hypothesis number 9.

H0: International politics has no impact on spreading cigarette

H1: International politics has an impact on spreading cigarette

Significance Level: 95%

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One-Sample Statistics

	N	Mean	Std. Deviation	Std. Error Mean
is there any relationship of international politics and spread of smoking	100	2.96	.93	9.31E-02

One-Sample Test

	Test Value = 3					
	t	df	Sig. (2-tailed)	Mean Difference	95% Confidence Interval of the Difference	
					Lower	Upper
is there any relationship of international politics and spread of smoking	-.430	99	.668	-4.00E-02	-.22	.14

Frequencies

Statistics

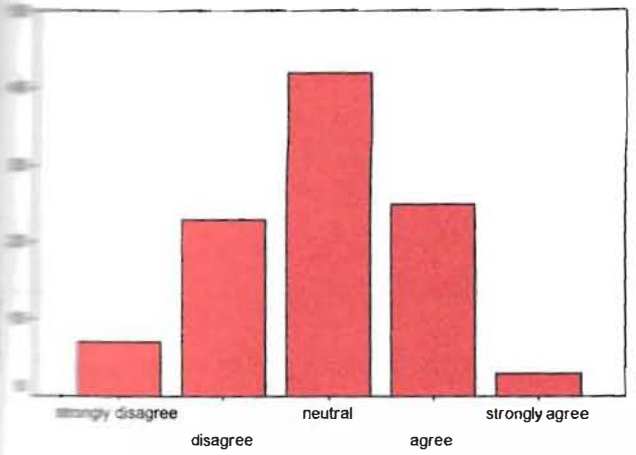
is there any relationship of international politics and spread of smoking

N	Valid	100
	Missing	0
Mean		2.96
Median		3.00
Mode		3
Std. Deviation		.93
Sum		296

is there any relationship of international politics and spread of smoking

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	strongly disagree	7	7.0	7.0	7.0
	disagree	23	23.0	23.0	30.0
	neutral	42	42.0	42.0	72.0
	agree	25	25.0	25.0	97.0
	strongly agree	3	3.0	3.0	100.0
	Total	100	100.0	100.0	

is there any relationship of international politics



is there any relationship of international politics and spread of smol

Decision: From one sample t test we have found that significance level is (.668) which is much higher than 0.05. So, null hypothesis is accepted and alternative hypothesis is rejected.

Decision: International politics has no impact on spreading cigarette

Hypothesis number 10.

Curiosity is not the main factor that makes a person to be smoker.

Curiosity is the main factor that makes a person to be smoker.

Significance Level: 95%

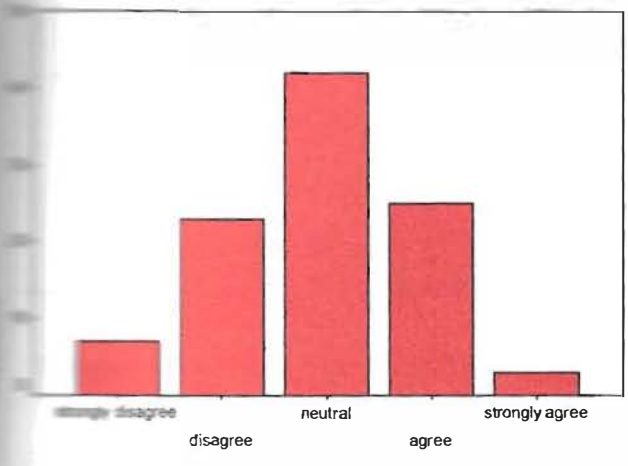
Frequencies

Statistics

you have started smoking from

N	Valid	100
	Missing	0
Mean		2.19
Median		2.00
Mode		1
Std. Deviation		1.22
Sum		219

is there any relationship of international politics



is there any relationship of international politics and spread of smol

Decision: From one sample t test we have found that significance level is (.668) which is much higher than 0.05. So, null hypothesis is accepted and alternative hypothesis is rejected.

Decision: International politics has no impact on spreading cigarette

Hypothesis number 10.

Obesity is not the main factor that makes a person to be smoker.

Obesity is the main factor that makes a person to be smoker.

Significance **Level:** 95%

Frequencies

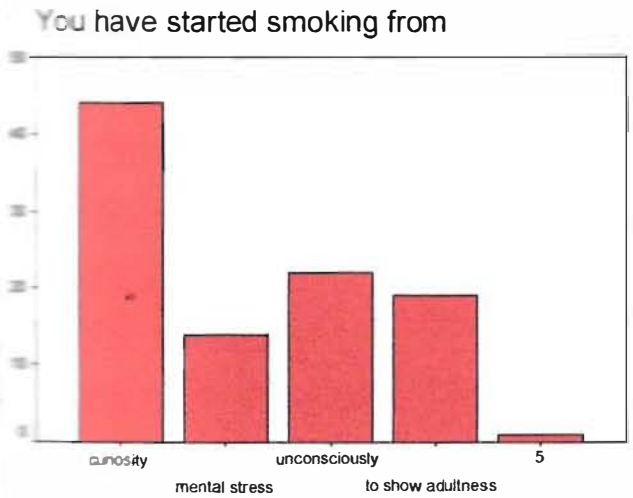
Statistics

has have started smoking from

N	Valid	100
	Missing	0
Mean		2.19
Median		2.00
Mode		1
Std. Deviation		1.22
Sum		219

You have started smoking from

	Frequency	Percent	Valid Percent	Cumulative Percent
curiosity	44	44.0	44.0	44.0
mental stress	14	14.0	14.0	58.0
unconsciously	22	22.0	22.0	80.0
to show adultness	19	19.0	19.0	99.0
5	1	1.0	1.0	100.0
Total	100	100.0	100.0	



Decision: From Frequency distribution table we see that 44 percent of the responders have started smoking from curiosity so the null hypothesis is rejected and the alternative is accepted that means a person basically starts smoking from curiosity.

Decision: According to most of the responders a person starts smoking from curiosity.

Hypothesis number 11.

Penalty against smoking on the street is not reducing smoking.

Penalty against smoking on the street is reducing smoking.

Significance Level: 95%

morally accept spending money on a harmful thing like cigarette

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	strongly disagree	6	6.0	6.0	6.0
	disagree	62	62.0	62.0	68.0
	neutral	17	17.0	17.0	85.0
	agree	9	9.0	9.0	94.0
	strongly agree	6	6.0	6.0	100.0
	Total	100	100.0	100.0	

Statistical Decision: From the t test we can see that significance level is .519, which is grater than .05 so accept the null hypothesis.

Marketing Decision:

Penalty against smoking on the street is not reducing smoking

Hypothesis number 12.

Ho: People are willing to spend money on cigarette

H1: People are not willing to spend money on cigarette.

Significance Level: 95%

Frequencies

Statistics

morally accept spending money on a harmful thing like cigarette

N	Valid	100
	Missing	0
Mean		2.47
Median		2.00
Mode		2
Std. Deviation		.96
Sum		247

Frequencies

Statistics

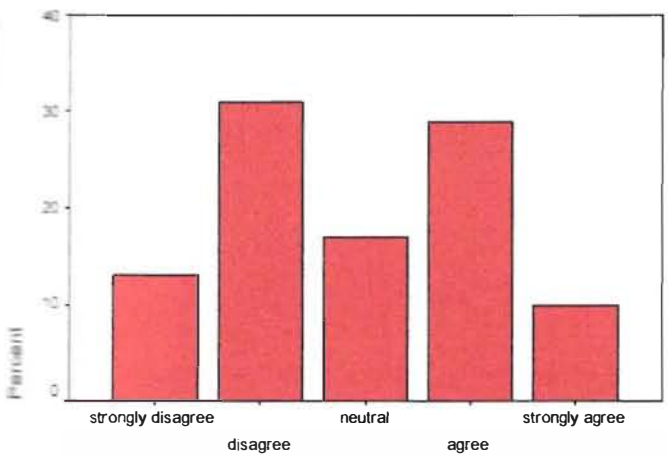
penalty against smoking on the street

N	Valid	100
	Missing	0
Mean		2.92
Median		3.00
Mode		2
Std. Deviation		1.24
Sum		292

penalty against smoking on the street

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	strongly disagree	13	13.0	13.0	13.0
	disagree	31	31.0	31.0	44.0
	neutral	17	17.0	17.0	61.0
	agree	29	29.0	29.0	90.0
	strongly agree	10	10.0	10.0	100.0
	Total	100	100.0	100.0	

penalty against smoking on the street



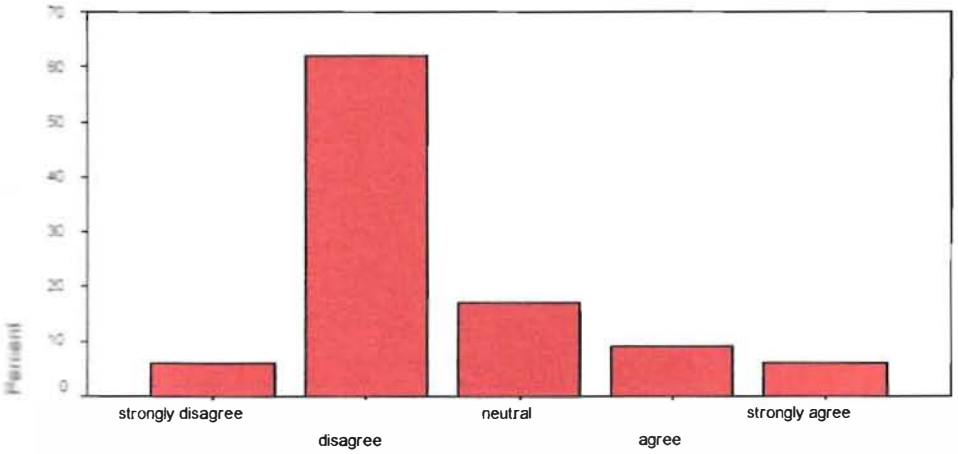
penalty against smoking on the street

T-Test

One-Sample Statistics

	N	Mean	Std. Deviation	Std. Error Mean
penalty against smoking on the street	100	2.92	1.24	.12

morally accept spending money on a harmful thing like cigarette



morally accept spending money on a harmful thing like cigarette

T-Test

One-Sample Statistics

	N	Mean	Std. Deviation	Std. Error Mean
morally accept spending money on a harmful thing like cigarette	100	2.47	.96	9.58E-02

One-Sample Test

	Test Value = 3					
	t	df	Sig. (2-tailed)	Mean Difference	95% Confidence Interval of the Difference	
					Lower	Upper
morally accept spending money on a harmful thing like cigarette	-5.531	99	.000	-.53	-.72	-.34

Statistical Decision: From the t test we can see that significance level is .000, which is less than .05, so accept the alternate hypothesis.

Marketing Decision: People are not willing to spend money on cigarette

Hypothesis number 13.

H0: A person doesn't become smoker because it is available in the market.

H1: A person becomes smoker because it is available in the market.

Significance Level: 95%

Frequencies

Statistics

a person becomes smoker because of its availablity in the market

N	Valid	100
	Missing	0
Mean		3.54
Median		4.00
Mode		4
Std. Deviation		1.13
Sum		354

a person becomes smoker because of its availablity in the market

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	strongly disagree	5	5.0	5.0	5.0
	disagree	17	17.0	17.0	22.0
	neutral	16	16.0	16.0	38.0
	agree	43	43.0	43.0	81.0
	strongly agree	19	19.0	19.0	100.0
	Total	100	100.0	100.0	

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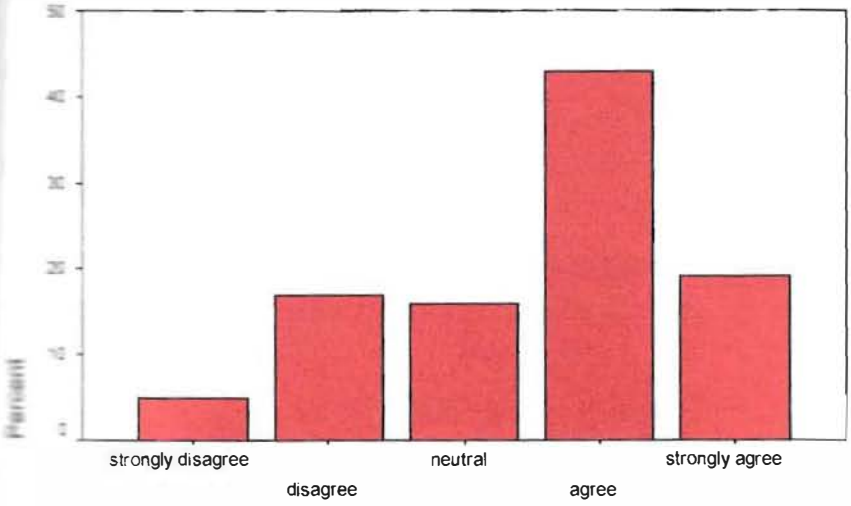
a person becomes smoker because of its availablity in



a person becomes smoker because of its availablity in the market

T-Test

One-Sample Statistics

	N	Mean	Std. Deviation	Std. Error Mean
a person becomes smoker because of its availablity in the market	100	3.54	1.13	.11

One-Sample Test

	Test Value = 3					
	t	df	Sig. (2-tailed)	Mean Difference	95% Confidence Interval of the Difference	
					Lower	Upper
a person becomes smoker because of its availablity in the market	4.771	99	.000	.54	.32	.76

Statistical Decision: From the t test we can see that significance level is .000, which is less than .05, so accept the alternate hypothesis.

Marketing Decision: A person becomes smoker because it is available in the market

RESULT OF THE RESEARCH

Results:

This research work helped me to find out some of the factors that are mostly important incase of spreading of smoking, the results are as follows:

- We can say that frustration is one of the factors that lead to be the smoker but not the most affecting factor rather the friend that is 53 percent is the mostly affecting factor.
- Peer groups are responsible to make a person smoker.
- A person generally smokes while he is involved in mental work.
- From the frequency distribution chart, we see most of the people smoke beside the tea stall. So it can be said that tea stalls beside the working place are the basic smoking zones.
- From the frequency distribution table, we see that 54 percent people smoke for refreshment. So it can be said that smoking gives refreshment to the smokers.
- From the distribution diagram we see that most of the people are interested to quit smoking.
- From the frequency distribution table we see that 73 percent of our respondents agreed that if the price increases than they would rather shift the brand but they would not stop or reduce the number of cigarette they consumed.
- International politics has no impact on spreading cigarette.
- According to most of the responders a person starts smoking from curiosity.
- Penalty against smoking on the street is not reducing smoking.
- People are not willing to spend money on cigarette
- A person becomes smoker because it is available in the market

LIMITATION OF THE RESEARCH

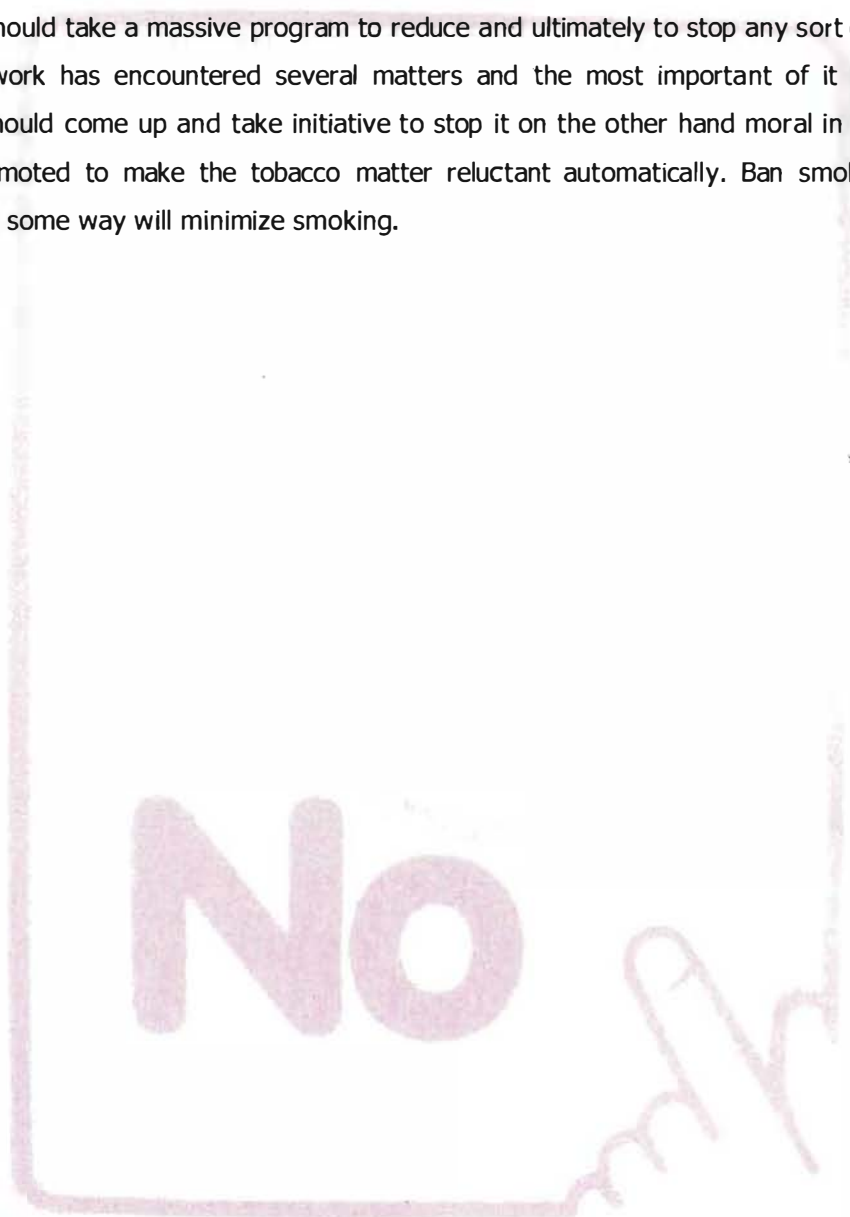
Limitations and caveats:

There were several types of limitations that were my obstacle to do the research work. The obstacles and limitations are stated below.

1. Time was very limited.
2. Lack of sufficient information.
3. Difficult to collect data from field.
4. It is very much difficult to have time from people to do the research work.
5. Lack of experience in this field.
6. Difficult to manage the data and sample units.
7. Pressure of other courses has reduced the time to devote here.
8. Information was irrelevant.
9. Short period of time to cover a huge area for respondent.
10. It was very much difficult to collect the female respondents.

CONCLUSION

Coming at the end part of the research, I could develop certain perceptions and feelings resulting from being in touch with the whole issue and feel the need to include some of my personal suggestions to improve the overall tobacco scenario of our country and the world as well. The Government should take a massive program to reduce and ultimately to stop any sort of tobacco. My research work has encountered several matters and the most important of it is that the government should come up and take initiative to stop it on the other hand moral in the society should be promoted to make the tobacco matter reluctant automatically. Ban smoking in the public place as some way will minimize smoking.



Recommendations

SOCIAL perspective:

- Government should take initiative to stop the production of tobacco gradually in the country.
- Government should discourage investment in this field.
- Ultimately tobacco banning in the country and import of any sort of tobacco related things should be totally stopped.
- The norms regarding cigarette should be changed, it should be strictly against tobacco.
- A long-term work idea should be taken to stop tobacco in our country.
- We should think of our next generation so that they are totally out of any sort of touch of tobacco.
- Family guardians should be very much careful to their children.
- Any sort of advertisements and promotional activity of tobacco products should be stopped.
- NGO activity like anti smoking campaigns might be helpful.
- Promotion and advertisements against smoking and tobacco.
- The tobacco producer should be discouraged to produce it.
- Religious advice might be helpful.
- Penalty against smoking on the street and the law of it should be implemented strictly.
- Availability of tobacco related should be reduced.

MARKETING perspective:

- The research says that there is a strong demand for the tobacco products. Producer needs to look for the market among the users.

- They should promote to the places, which are POS (Point of Sales).

- As the Hypothesis says that mental stress time and working zones are the best places to utilize the smoking habit as a relief, so they should concentrate more on those situations.

- They should promote in such a way that *friends and peer groups* are the prime target to get the new potential markets.

- *They should stop promoting cigars as a tool to live a frustration free life as hypothesis rejected rather it is accepted by 54% hypothesis as a refresher. So, a new refreshing ingredient may increase its market share by proper promotion.*

- POS promotion should be done on the tea stalls as cigars are most sold by the tea stalls as a side-by-side habit of tea. *Here, the habit is important not the health hazard even potential customers come out of that as the hypothesis suggested.*

- Cigars makers should look forward with *diversify thinking and for alternative products as 73% hypothesis* suggest that people are willing to quit smoking.

- *Indirect promotion by Anti-Smoking Tool with the existing laws helps to focus out the new brand. So, thus new brand building scopes.*

- To keep the chain of smoking alive in the society they should keep eyes keen on the *distribution channels and availability,* as people are curious still and willing to spend on it till the research is conducted.

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I, the students of East West University am conducting a research on "factors affecting the growth of smoking" as because smoking is acting as a silent death ambassador and I want to find out some recommendations to reduce the rate of smoking in the society. This study will just take few minutes and only be used as a requirement of our academic purpose. I would appreciate your valuable time.

For further information please contact:

Please tick (√) the Answer.

For official Use

01. Are you smoking for at least 1 and half year?

NO

02. What was the age you started smoking first?

9-12 year	13-16 year	17-19 year	20-23 year	23-26 year

03. How did you start smoking?

Friends	Cousin	Stealing elders cigarette	Family tradition	Frustration

04. You have started smoking from---

Curiosity	Mental stress	Unconsciously	To show adultness

05. The most convenient time for smoking is----

Morning (bath room)	Noon/ evening	Night	Any time	when I am busy with mental work

06. Please provide your opinion regarding the following statements.

Factors	Strongly Disagree (1)	Disagree (2)	Neutral (3)	Agree (4)	Strongly Agree (5)	
Considering all the harm facts of smoking a person should stop smoking instantly.						
The family members and society are mostly responsible for the spread of smoking.						
A person becomes smoker because it is available in the market.						
If the price increases a smoker would just shift the brand rather than the number of cigarette.						
Smoking gives refreshment.						
Running on advertisements of smoking will help to reduce the smoking.						
A person starts smoking only from curiosity.						
Can you morally accept spending money on a harmful thing like cigarette?						
Is there any relationship of international politics and spread of smoking?						
Penalty against smoking on the street is reducing smoking						

07. The most convenient place for smoking is-----

Beside work place	Tea stalls	Bed room	Study room	Roof of the building	

08. Do you think that high taxes over tobacco companies are really helpful for a country's long term economical success?

Yes		Neutral	

09. What could be the solution to reduce the growth rate of smoking?

Personal Details

Name of the respondent:

Gender: Occupation:

Contact address: Contact No:

THANK YOU