

Perceptions and Behaviors of wives toward the Exposure of Passive Smoking at Home in AL-Qassim Region

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Abstract: The study aims to determinethe perceptions, attitudes, and behavior of wives toward exposure to passive smoking at home.

Methodology: A questionnaire was designed based on focus group discussion results. A Cross sectional study was done on 250 women attending primary health care centers in Buraidah, Onaizah and Riyadh Alkabra within the Qassim Province who live in a house with at least one smoker. The study was done from January 2012 until July 2013.

Results: The data was analyzed using the statistical package for the social sciences (SPSS). This study has shown Low knowledge is The only significant determinant of non-active behavior of wives to stop smoking (P = 0.006).

Conclusion: It is highly important to educate wives about the side effect of the passive smoking and the importance of preventing smoking at home and smoking in company of others especially children, and to emphasize the importance of strict implementation and follow up of anti-smoking regulations especially at home.

Keywords: passive smoking – at home – housewives- KAP.

1. INTRODUCTION

Passive smoking is one of the important health issues that should be considered in health planning. It is linked with cancer, heart disease, respiratory illness, and is the leading source of indoor air pollution¹. Husband's smoke habits in the home can affect the health of family members who do not smoke². Nearly 700 million, half of the world's children, are exposed to tobacco smoke by the 1.2 billion adults who smoke³

Fifty-one women with lung cancer and 163 other hospital patients were interviewed regarding the smoking habits of themselves and their husbands. Forty of the lung cancer cases and 149 of the other patients were non-smokers. Among the non-smoking women there was a statistically significant difference between the cancer cases and the other patients with respect to their husbands' smoking habits. Estimates of the relative risk of lung cancer associated with having a husband who smokes were 2.4 for a smoker of less than one pack and 3.4 for women whose husbands smoked more than one pack of cigarettes per day⁴.

The effects of passive smoke exposure on the heart can be rapid. For example, a Japanese study has shown that just 30 minutes of exposure to secondhand smoke by healthy non-smokers can have a measurable impact on a coronary blood flow. Exposure to SHS (secondhand smoke) increases blood platelet activity, causing the blood to thicken and become more likely to clot. The tobacco smoke also affects cells lining the coronary arteries, contributing to the narrowing of the arteries. This reduction in blood flow may lead to a heart attack⁵.

Breathing in secondhand smoke is particularly harmful for children. The World Health Organization has estimated that nearly 700 million, or almost half of the world's children, are exposed to tobacco smoke by the 1.2 billion adults who smoke. Secondhand smoke in the home is a major source of exposure for children because children spend most of their time at home and indoors. Unlike adults who can choose whether or not to be in a smoky environment, children have

little choice. They are far less likely to be able to leave a smoke-filled room if they want to: babies cannot ask; some children may not feel confident about raising the subject; and others may not be allowed to leave even if they do ask. Children who breathe in secondhand smoke have an increased risk of sudden infant death syndrome this is twice as likely in babies whose mothers smoke, developing asthma, serious respiratory (breathing) conditions such as bronchitis and pneumonia, meningitis coughs and colds middle ear disease⁶. Children who grow up with a parent or family member who smokes are also about twice as likely to start smoking later in life ⁶. Wives have a great influence on the education of smoking manners among family members. The results of the research show that the major factors influencing wives' perception and attitude to their husbands' smoke behavior are their knowledge.

Therefore, Educational interventions targeting the mother parent could significantly reduce the exposure of her children to second hand smoke at home. The aim of this study is to determinethe perceptions, attitudes, and behaviors of wives toward the exposure of passive smoking at home.

2. METHODOLOGY

Focus group discussion was done on 6 females, working at Qassim University, with different level of education. Each one of the females lives at home with at least one smoker. They were asked about their knowledge on the hazards of passive smoking , their attitude toward smoking at home and how they dealt with the situation.

The statements of women were “ smoking will never harm me it will just effect the one who smoke”. The other one said “I know that is the smoke cause harmful effects, as I read in magazines but the smoker will never listen to me”. The other female said that “what I am really afraid of is my children, I do not want them to take their father as an example and smoke in the future” . For the attitude, 5 of them tried to stop the smoker from smoking. One of them said “ I did not give my son (the one who smoke) money ,to stop him from buying cigarette, I thought that he will stop smoking as he is not having the money to buy one, but it did not work, he started to steal money from other people.. as a result of this I have given him money again. I did not want my son to go to jail” the other female said “ I always ask the smoker to go outside and not to smoke in front of the children” the other said “ I do not smoke but one time, I did smoke in front of my husband to initiate him to stop smoking”

From the focus group statements, comments and responses we designed an instructional questionnaire to explore the, knowledge, behavior and attitude of women toward passive smoking at home.

Cross sectional study was done on 250 women attending on primary health care centers in Buraidah, Onaizah and Riyadh Alkabra within the Qassim Province. This was selected because women attending them come from different areas with different socioeconomic background. We chose the study population from all non-smokers females aged 20 years and more attending the primary care centers either as a patient or accompanying a patient who live in a house with at least one smoker. They were interviewed and asked about their knowledge, attitude and behavior toward the exposure of passive smoking.the study was done fromJanuary 2012 until July 2013. The data was analyzed using the statistical package for the social sciences (SPSS, 2012)

3. RESULTS

Table 1 Socio-demographic characteristics of the wives

		Frequency	Percent
Age in years	(20-25)	52	43.33%
	(25-40)	42	35.0%
	(40-50)	17	14.2%
	50 and more	9	7.5%
Educational level	elementary education	11	9.2%
	intermediated education	13	10.83%
	secondary education	20	16.7%
	higher education (collage graduate & post graduate)	65	54.2%
	non	11	9.16 %
Marital status	Divorced	1	0.83%
	Married	70	58.33%
	Single	47	39.16%
	Widowed	2	1.7%

number of children at home (less than 13 years old)	no	34	28.33%
	1-3	65	54.16%
	4-6	10	8.33%
	7 and more	11	9.16%
person that smoke at home	Brother	24	20%
	Father	27	22.5%
	Husband	31	25.8%
	other	4	3.33%
	Son	15	12.5%
duration of exposure to smoke/day	Uncle	19	15.83%
	no exposure	25	20.83%
	less than 30 minutes	18	15.0%
	30-60 minutes	24	20.0%
	more than 60 minutes	53	44.16%

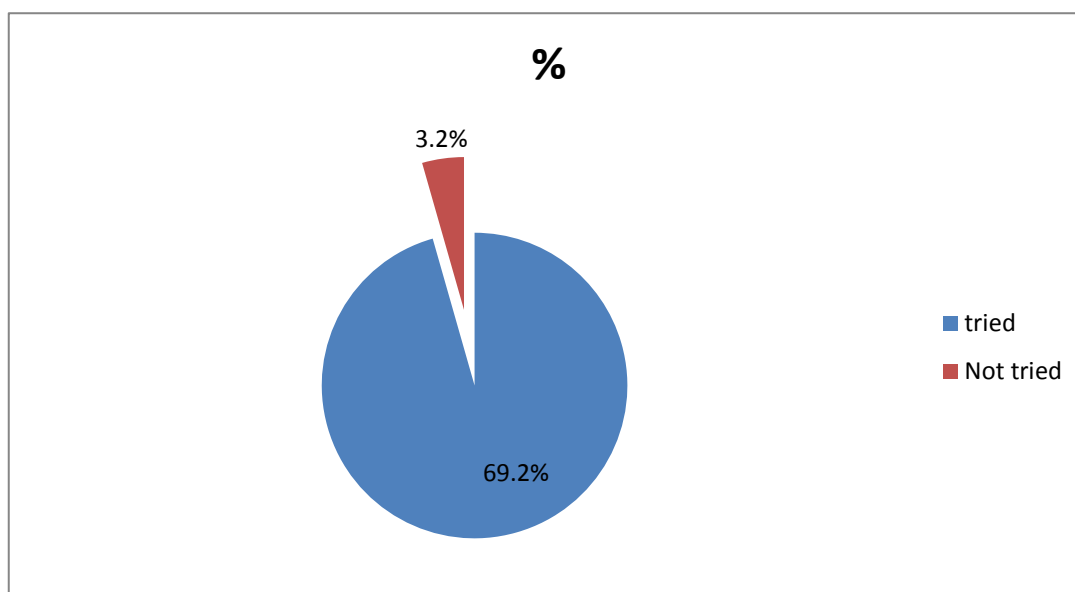


Figure 1 Attitude of wives towards prohibiting smoking at home

Table 2 Frequency and percentage distribution of behaviors & attitudes of the studied group towards passive smoking

Behaviors		Frequency	Percent
I did not tried to prevent smoker from smoking at home because	smoking just effect the one who smokes	2	5.4
	feeling afraid of smoker's reaction	18	48.6
	smoker will not listen	13	35.1
	I do not have time	2	5.4
	Other	2	5.4
methods used with the smoker	kindly advise	74	89.1
	Deprivation of money	5	6
	physical punishment	4	4.8
	Other	0	0
regrets any methods used	Yes	20	24.1
	No	63	75.9
methods were effective	Yes	9	10.8
	No	57	68.6
	Somewhat	16	19.2
reasons for regression	become more stubborn	3	15
	Link to bad friend	2	10
	Stole	4	20
	Detroit relation	10	50
	other	1	5
if the smoker smokes at home	Ask him to put out cigarette	15	12.5

	ask him to go outside	34	28.3
	ask him to smoke in a different room.	22	18.3
	tell him side effects of smoking	18	15.0
	I do not care	23	19.2
	Other	62	6.6
when the smoker smokes in front of children	ask him to stop smoking	33	27.5
	ask him to smoke outside	46	38.3
	ask children to go outside	19	15.8
	I do not care	22	18.3

Attitudes		Frequency	Percent
Your opinion of the effect of passive smoking on your life	Negatively	71	59.2
	Positively	4	3.3
	no effect	45	37.5
Negatively on	Psychosocial	8	11.2
	Health	21	29.5
	Economic	31	43.6
	family relationships	6	8.4
	Other	5	7
Agree that the smoker have to quit smoking	Strongly Agree	89	74.2
	Agree	18	15.0
	I do not know	9	7.5
	Disagree	2	1.6
	Strongly Disagree	2	1.7

Table 3 Frequency and percentage of sources of knowledge of the studied group towards active smoking

		Frequency	Percent
How did you know about the risk of smoking	Newspapers and magazines	19	35.0
	Internet	29	25.0
	Email	6	2.5
	Friends	9	5.0
	TV	16	17.5
	Other	1	9.2

Table 4 Frequency and percentage of knowledge of the studied group towards passive smoking

		Mean	SD	Strongly disagree		Disagree		I don't know		Agree		Strongly agree	
				N	%	N	%	N	%	N	%	N	%
1.	Passive smoking can cause side effects as with active smoking	1.97	0.87	41	34.2	48	40	25	20.8	6	5	0	0
2.	Passive smoking increases the risk of pneumonia in children	1.8	0.75	46	38.3	49	40.8	25	20.8	0	0	0	0
3.	Passive smoking increases the risk of Asthma in children	3.6	1.3	10	8.3	15	12.5	25	20.8	30	25	40	33.3
4.	Passive smoking increases risk of delivering a child with congenital abnormalities in pregnant woman	2.3	0.84	26	21.7	32	26.7	59	49.2	3	2.5	0	0
5.	Passive smoking does not increase risk of behavioural problems in children	3.4	1.1	6	5	16	13.3	46	38.3	27	22.5	25	20.8
6.	Passive smoking increase risk of learning difficulties in children	2.8	0.75	9	7.5	19	15.8	80	66.7	10	8.3	2	1.7
7.	Passive smoking increase risk of cardiovascular disease	2.5	0.86	22	18.3	23	19.2	71	59.2	2	1.7	2	1.7
8.	Passive smoking increases the risk of ear infections in children	2.2	0.84	31	25.8	36	30	51	42.5	2	1.7	0	0

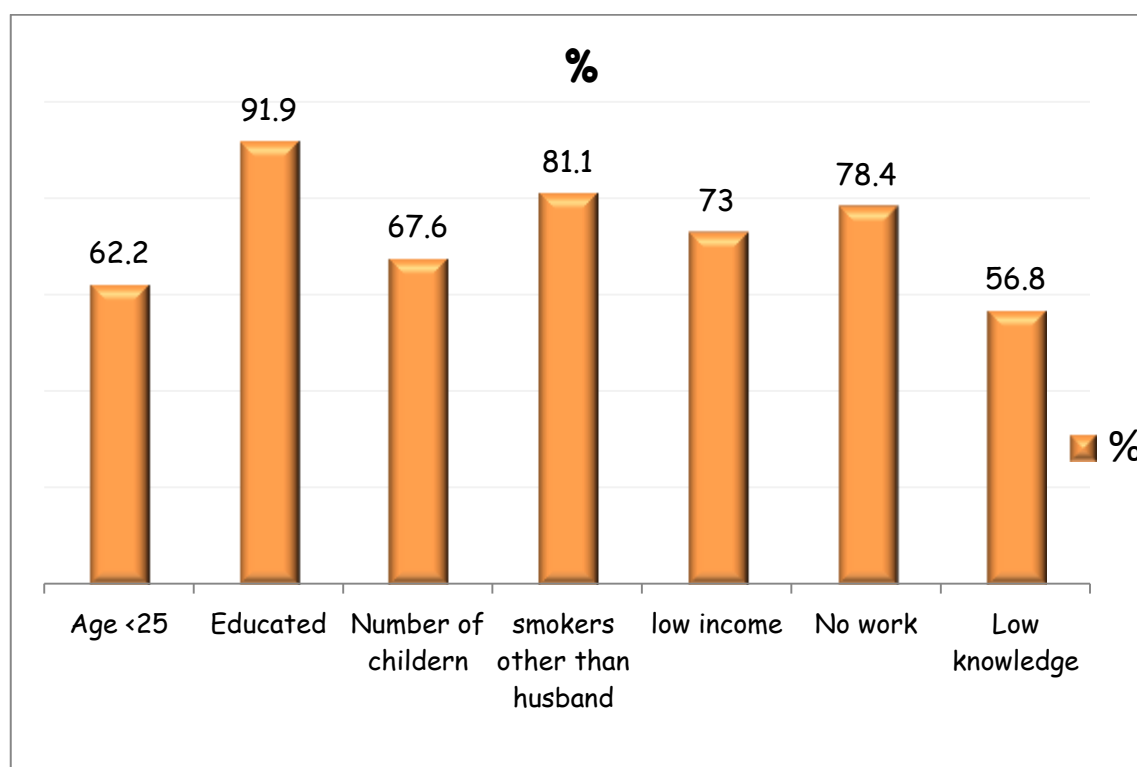


Figure 2 Characters of women with no active behavior to stop smoking at home

4. DISCUSSIONS

This study shows that the majority of wives are exposed to smoke for more than 60 minutes per day (table 1). 69.2% of them tried to prohibit the smoker from smoking at home (figure 1). Most of the wives prohibit smoking by kindly advising the smoker to stop smoking at home. In addition, about 20% of them regret the method they used due to the deterioration of the relationship with the smoker. Also, the method that they used was not effective in preventing smoking at home (table 2).

In addition, the study shows that the reason behind not trying to ask smoker to prohibit smoking at home is because the wives are being afraid that the smoker may be aggressive with her or will not respond to the advice. However, Most of the females, recognized that the passive smoking can negatively affect their life. The study also shows that most common positive behavior towards passive smoking is asking the smoker to smoke outside the room where her children are.

Maternal sources of information were mostly from newspapers and magazines, so the interesting finding was the strong relationship between highly educated women and their good knowledge about effect of passive smoking (table 3).

Also, most of studied group are unaware about the health problems caused by passive smoking including pneumonia, increased risk of delivering child with congenital anomalies, learning difficulties of child, increased risk of cardiovascular diseases; however, 15% of the wives agreed that the passive smoking increases risk of asthma (table 4).

Also, this study showed the Characters of women with no active behavior to stop smoking at home. Low knowledge was the only significant determinant of non active behavior to stop smoking with $P = 0.006$ (figure2).

5. CONCLUSION AND RECOMMENDATION

This study has shown Low knowledge is The only significant determinant of non active behavior to stop smoking ($P = 0.006$). So It is highly important to educate wives about the side effect of the passive smoking and the importance of preventing smoking at home and smoking in company of others especially children, and to emphasize the importance of strict implementation and follow up of anti smoking regulations especially at home.

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