Financial Losses in Smoking and Its Consequences in BANGLADESH

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Abstract

Smoking is a mega problem in Bangladesh. Financial losses and consequences of smoking in Bangladesh are the main spotlights of this study. Huge financial losses are involved in this ghastly habit. Losses are occupied in individual, family and national levels. Its indirect losses are found significant. This paper presents the bad effects of smoking in the form of direct and indirect losses. Smoker is not only the affected person of smoking but also the others. In consequences part, it reveals the main issues that are held responsible for problems in family and society as a whole. It identifies the main causes of smoking. The vision of this writing is refrain people from smoking. The vision is also followed by a vital issue i.e. economic viewpoint of Bangladesh. Finally, it sets some recommendations for overcoming awful effects of smoking.

Key Words: Smoking, Financial Losses, Direct Losses, Indirect Losses, Opportunity Cost, Consequences, Bangladesh

1. Introduction

Smoking is injurious to health. It is hard on the heart, but the fact is, it creates multitude diseases that ultimately lead to disability or death. It directly affects lung, lever and other important organs of human body. Whenever the organs of the human body are infected by smoking, its consequences end badly. Its losses are immeasurable or uncountable. Some losses are directly related and others are related indirectly. Smoking affects individual smoker, his/her family and society as a whole. Those who are smokers, always keep budget aside for smoking. These budgets vary from person to person. Sometimes, smokers maintain budget at the cost of his/her personal losses, family losses that lead social losses as a whole. Addition of all budget of smokers raise losses for the nation. Efroymson et.al. (2001) estimate that 10.5 million children who are currently going hungry would have enough to eat if their parents redirected 69 percent of their tobacco expenditures to food. Indirect costs of smoking are immeasurable. Smokers suffer from various health diseases that arises from smoking. Significant costs are being used for medicine purpose. Above all, it reduces the strength of individuals working capacity. If you go for the strength calculation of workforce of smoker, it results huge amount of losses of the nation.

Government always discourages smoking. It imposes high rate of tariff on this sector. Govt. has the restriction on tobacco production in land. Fertility of the land is decreased whenever tobacco production is produced on land. So, Govt. must look into the matter with utmost seriousness from its agricultural need and development. There is also the linkage with the opportunity cost. If tobacco production is produced on lands, fertility of lands is hampered. It doesn't suitable for the production of the other corn. So, opportunity costs arise due to no production of other corn.

In addition to the above discussion, smoking is considered the first and foremost step of drug addiction and other crimes in the society. There are some anti-smoking organizations in the society. They took various programs against smoking. They raise conscience on it. They bear some cost for anti-smoking program. On the other hand, when a person steps for drug addiction, she/he spends huge amount for drug materials. Ultimately, it generates disorder in mind, mental un-peace in family and crime in the society.

2. Objectives

The main objective of the study is to measure the financial losses in smoking and its consequences in Bangladesh. The specific objectives are:

- Ø To identify the financial losses of smokers.
- Ø To identify the causes behind smoking and its consequences in Bangladesh.

3. Methodology

This paper has been followed a cross sectional statistical design. Both primary and secondary sources are used to collect information. Both quantitative and qualitative data are collected. For quantitative data semi-structure questionnaire is used.

Standard statistical formula is used to determine the minimum sample size. Simple random sampling technique is used to select the respondents of the survey. This study is carried out in February 2012. For qualitative data Focus Group Discussions (FGD) are with an intension to detect the reasons behind smoking, consequences of smoking etc. For secondary sources of information various write-ups, articles, books, magazines, newspapers are being considered. Websites information is worth mentionable to complete the objectives. Moreover, data are manually edited and coded. Data entry and analysis have done by using SPSS. Both uni-variate and bi-variate analysis have performed. To test the association between variables of interest, χ^2 test is employed. Finally, with the help of key results we present a figure.

4. Literature Review

According to the international Encyclopedia of Social Sciences, Tobacco was first used by the American Indians. It was introduced to the old world by Columbus. Although many attempts to hold its spread and to eliminate its use were done by the authorities in all European and Muslim countries, smoking was increasingly spreading throughout the world during the five centuries since the Europeans reached America. In the mid-sixties, it was known that smoking had become a part of the Western industrial style of life and it was growing in the developing countries.

Bangladesh is a country of South-East Asia. It is well known as a developing country. Currently it has 14.79 corer people with 1.36% population growth rate. There are about 993 peoples living per one squire kilometer. So, it is densely populated country in the world. 72% of households in Bangladesh have only one or two rooms; in most households many people must share each room. If one person smokes, several people, including infants, young children and women, are likely to inhale that smoke and thus to be at an increased risk for the diseases caused or worsen by passive smoking.

Passive smoking is the inhalation of the tobacco smoke of others-causes lung and breast cancer and heart disease as well as exacerbating asthma in non-smokers. Fetuses exposed to smoke in the womb run higher risks of being born underweight; having mental, physical and psychological development problems and being miscarried or stillborn. Tobacco smoke is a major cause of Sudden Infant Death Syndrome (SIDS). Infants born to mothers who have smoked during pregnancy are lighter and shorter than infants of non-smoking mothers. Berkey et al. assessed the association between passive smoking and attained highest and growth rate. Children of mothers who smoked were found to be shorter than those of non-smoking mothers.

Women Smoking who smoke significantly higher cardiovascular health risk than men do suggest a major study on women and smoking released by the World Health Organization (WHO). The study, published in the medical journal *The Lancet*, found that women who smoke not only face a 25 percent higher risk of contracting heart diseases but that, unlike men, their risk increases each year they continue to smoke. (Ahmed, 2011)

When a pregnant mother smokes the quantum of oxygen that she inhales gets reduced. Similarly, carbon-dioxide is not fully exhaled from the body. The oxygen will be insufficient to meet a mother's own needs. A small quantity of oxygen is passed from the mother to the baby. The baby also gets more carbon-mono-oxide because the entire quantity is not exhaled from her body. Ultimately both the mother and child will be breathing poisonous gases like carbon-dioxide and will breath less oxygen and suffer from all sorts of respiratory problems. Pregnant women who smoke run the risk of damaging their child's reproductive system and affect the child when he/she is an adult.

5. Smoking: Bangladesh Perspective`

Most Bangladeshi peoples are striving to survive. Their income level is so least to meet the demand of family members. Any waste for smoking will further produce poverty. Nearly 20 years ago, a researcher suggested that if the condition of malnourished children deteriorated "as a result of income being used for smoking rather than for food, then each year the prospect of survival of 18,000 children would be halved. Should these estimations be anywhere near correct, the nutrition-mediated effects of smoking, in terms of chronic under nutrition as well as survival, are likely to be far more important than the direct consequences of smoking on health." UNICEF estimates that Bangladesh loses the equivalent of more than 5% of its Gross National Product in lost lives, disability and lower productivity caused by malnutrition. Here, the Table 1 shows that how much money should have been invested to take the flavor of smoking.

5.1 Brands, Company & Prices of Cigarettes

(Table 1)

6. Tobacco Production: Smoking

Tobacco and smoking are inter-related issues. Tobacco is sold and consumed almost everywhere in our society. It is a drug of easy availability and social acceptability. Due to its easy accessibility and social acceptability, there are now more young women and teenagers having access to cigarettes and hence getting addicted. To meet this emerging demand tobacco companies are in strong endeavor to produce more land for tobacco production. The farmers those are producing tobacco

are always in the problem of vicious cycle of indebtedness. From which they find it difficult to free themselves. For instance, the WHO (WHO 2005) has conducted research in Bangladesh which finds that Government spending on treating tobacco-related disease is greater than profits from the production and sale of tobacco. Geist reports-1999 found that more than 30 percent of deforestation in Bangladesh is related to tobacco production manufacturing. Total annual deforestation in land areas is 9000 hectares and total wood consumption in tons is 128000.

It has been documented that the seriously damaging health and environmental impacts caused by tobacco farming parallel those caused by each time a cigarette is lit (Campaign for Tobacco Free Kids 2001). Health threats include the large amount of pesticides used on the crop, as well as illness relating to the handling the raw tobacco leaves. Dermal absorption of nicotine while harvesting the wet green leaves leads to an illness called Green Tobacco Sickness or GTS. The symptoms of GTS include nausea, dizziness, vomiting, headaches, weakness, abdominal cramps, difficulty in breathing as well as fluctuations in blood pressure and heart rate. Use of tobacco, whether smoked or taken in other ways, causes a wide range of diseases as well as early death.

7. Direct Losses and Indirect Losses

7.1 Direct Losses

7.1.1 Financial Losses: Financial loss refers to those categories that are directly and indirectly related to finance

(money in narrow sense). Smoking is an expensive habit and the cost of health problems associated with this even becomes many folds expensive.

7.1.1.1 Outweigh in tobacco production cost: Tobacco production costs are in highest level than any other crop

production. It consumes greater amount of money, efforts (labor) and time (both labor hours and duration to final harvest).

7.1.1.2 Cost for buying cigarettes: Family incurred a greater amount of financial losses for buying cigarette as earning

members those who are smokers have made costs for cigarettes. Especially those who are poor have made mentionable amount for buying cigarettes.

7.1.2 Environmental Losses: Environmental losses cover a range of issues on which world leaders have great concern. Its main influence is count in air, soil and water. Discussion is made here in the following manner.

7.1.2.1 Air pollution cost: Air pollution is directly related with smoking. There is a direct/perfectly Positive

correlation between air pollution and smoking. Cigarette burns at 700°C at the tip and around 60°C in the core. This heat breaks down the tobacco to produce various toxins in the air.

7.1.2.2 Soil Fertility: Soil fertility is another important issue behind smoking. Smoking demands large amount of

tobacco production. In turn, it requires large amount of land. Several studies have found that tobacco production

decrease the land's fertility not only for short period of time but also long period of time.

7.2 Indirect Losses

7.2.1 Family gap: Smoking deviate the smokers from their family. In turn, it makes a large gap of understanding, mutuality, co-operation, peace and efforts of work in family. Sometimes it creates mental distrust in family members. Other family members have got influence from this bad habit of smoking. We have seen that parents are up-setting with their smoking addicted children. This worrying enlarge the problem in many ways.

7.2.2 Lost productivity and resale costs: Lost productivity may be related to time loss in working environment. According to the U.S. Department of Health and Human Services, smokers are more likely to absent from work than non-smokers. If you count the time loss in a working day, more than hours are used for smoking. Smoker's own properties that are exposed to cigarette smoke when required for sale goes down in value (resale price). A study done at the San Diego State University in 2008, showed that the asking price for smokers' cars was about 9 percent lower than non-smokers' cars. The same goes for house.

7.2.3 Hygiene and Vanity Costs: Smoking is related to hygiene costs. Hygiene costs cover a wide range of issues such as teeth whiteners, face cream to reduce the smoke-induced signs of smoking, perfumes, air refreshers and others. Also smoking can damage clothes, rugs, furniture, car interiors, home interiors etc. Costs are also added up when issues of vanity item come. Air fresheners for your home, car, office sum up a range of costs. Laundry and dry-cleaning costs for your clothes, covers, curtails, sheets and others run a range of costs.

7.2.4 Medicine Cost: We know that there is a high monetary costs involved in smoking habit. For example, those who are smoker pay more for life insurance and health insurance than those who are non-smokers. Medicine costs are worth

mentionable in financial losses consideration. A study in the *New England Journal of Medicine* determined that health care costs for smokers can be 40 percent higher than for non smokers. The list of tobacco-related diseases is long indeed and includes not only just lung but many other kinds of cancer as well as other ailments. Let's take a look at how cigarette smoke affects our bodies, from head to toe.

Hair	Smell and staining
Brain and Mental Effects	Stroke, Addiction/nicotine withdrawal, Altered brain chemistry, Anxiety about harm caused by smoking
Eyes	Eyes that sting, water and blink more, Macular degeneration, Cataracts
Nose	Less sense of smell
Thyroid	Graves disease, Thyroid disease
Teeth	Discoloration and stains, Plaque, Loose teeth, Gum disease
Skin	Wrinkles, Premature aging
Mouth and Throat	Cancer of the lips, mouth, throat and larynx, Cancer of the esophagus, Sore throat, Reduction sense of taste, Breath smells of smoke.
Hands	Poor circulation, Peripheral vascular disease, Tar stained fingers
Respiration and Lungs	Lung cancer, COPD, Cough and sputum, Shortness of breath, Colds and flu, Pneumonia, Asthma, Complicates tuberculosis
Heart	Harms, blocks and weakens arteries of the heart, Heart attack
Liver	Cancer
Abdomen	Stomach and duodenal ulcers, Cancer of stomach, pancreas and colon, Aortic aneurysm
Kidneys and bladder	Kidney cancer, Bladder cancer
Bones	Dsteoporosis, Spine and hip fractures
Spine	Degenerative disc disease
Male reproduction	Sperm: deformity, loss of motility, reduced number
	nfertility & Impotence
Female reproduction	Period pains, Earlier menopause, Cancer of cervix, Infertility and delay in conception
Blood	Leukemia
Legs and feet	Gangrene, Peripheral vascular disease
Immune system	Weakened immune system

8. Linkage of losses in smoking

The economic relations that arise in the process of producing and distributing tobacco are further complicated by the health consequences of smoking and the sizeable research that is involved in the study of these consequences in addition to the financial losses caused by smoking related diseases and the production losses caused by cutting the life shorter because of its death ratio. The amount of labor applied on one acre of the tobacco plantation is more than one hundred times the labor applied on one acre that produces wheat, seven times the labor needed for one acre with potatoes and 13 times an acre with cotton. By the same token, 100 pounds of tobacco costs 15 men hours of farming labor alone compared with only 9 seconds for 100 pounds of wheat and 7 seconds for 100 pounds of potatoes.

Consumers spend on tobacco more than they spend on each of "Education and research", religious and welfare activities, gas and domestic service combined, and personal care. If we add consumers' expenditures on tobacco and alcohol together, the total figure is more than half that is spent on clothing, accessories and jewelry.

Bangladesh is already in deforestation problem due to more tobacco production that is significantly related to smoking. For the emerging demand of smoking, tobacco production increased day by day. There is a positive correlation between rising smoking and rising tobacco production. Tobacco companies have been showing there aggressiveness for the production of tobacco with some mentionable incentives. They provide in-kind assistance through the provision of seeds (free of costs), cash, fertilizers, pesticides and extension services. They provide easy loans for growing tobacco, which act as a major attraction for farmers to grow tobacco. Tobacco productions are running at a great extent in Kustia and Chittagong Hill Tracts now. Where wood is essential for curing tobacco leaves. About six tons of wood is required to cure the tobacco grown on just one acre of land. In the hilly region, hills are also being cut to create flat land for growing tobacco.

8.1 Average daily expenditure for tobacco and equivalent in calories of rice, by sex and type of tobacco, 1997

(Table 2)

8.2 Opportunity cost theory

The opportunity cost theory consideration is important in the study of financial losses in smoking. Due to smoking, ignorance of some important things are made those are more valuable. Various examples can be mentioned in this regard. If we study the livings of Rickshaw puller in Dhaka city, it is clear enough that many of them do not have ability to support their children's education, living costs, shelter and nutrition etc. though they maintain their smoking costs. It is important to note the opportunity costs on various grounds such as students drop-out from school, productivity, deforestation, nutrition. Skipping school is often uncounted. Due to the working pressure in tobacco field at its harvest time, parents led their school going students in the field. In turn they are reducing their children's future opportunities for a better life. That is actually far long of them. After all countries development is hindered for absenteeism or students drop-out from school.

Nutrition issue is greatly considered in opportunity loss calculation. Various studies have been made in this issue and found that if smokers redirect their costs on smoking to food, it can maintain healthy nutrition for the family members. Addition of all the costs in smoking nation counts a great loss in nutrition.

9. Consequences

9.1 In Individual Level: Smoker risks are so many that cannot be counted. He/she is being continuously affected by this expensive and harmful habit of smoking. Cigarette smoke contains over 4,000 chemical compounds; 200 of which are known to be poisonous and upwards of 60 have been identified as carcinogens.

9.2 In Family Level: Quitting of bad habit of smoking is extremely difficult. Your failure at quitting the habit can lead to depression. Often, it isolates you from friends and family who don't approve of the habit, causing even more emotional damage. The smoking habit may be the most important influence on whether the children will themselves become active smokers in adolescence. Family loss is significant from smoking. It gets an extreme level if more than one family member is involved with this bad habit. Its detriment influence is goes on other member as in our country most of the living room is shared among all family members.

9.3 In Society Level: Smoking is no longer a popular activity. Smoking is associated with being a dirty, often lower class person. There is a major social stigma surrounding smoking. Those who are smoker they might be looked over for certain jobs (such as Runner Group,) in favor of a non smoker. Some employers clearly mention "Smokers Need Not to Apply" in their appointment circular. Between a smoker and a non smoker, societies choose a non smoker because of the role model issue.

Thinking about tobacco aliens same on smoking because smoking will go a long way towards stemming the tobacco epidemic. The epidemic poses a long-term economic threat to countries and had the potential to slow their development. It constantly makes severe economic losses in highly populated countries, like Bangladesh. The "WHO Report on the Global Tobacco Epidemic, 2008: The EMPOWER Package" published in February, 2008 is the significant report to tobacco control globally.

10. Findings and Analysis

10.1 Distribution of respondents by their age and smoking status

(Table 3)

10.2 Type of smoker by their occupation

(Figure 1)

10.3 Distribution of respondents by type of smoker and brand of the cigarette

(Table 4)

10.4 Distribution of respondents by their education and yearly cost involved for smoking

(Table 5)

10.5 Distribution of respondents by consequences of smoking in family by selected variable

(Table 6)

10.6 Distribution of respondents by consequences of smoking in society by selected variable

(Table 7)

10.7 Distribution of respondents by causes of smoking in society by selected variable

(Table 8)

10.8 Distribution of respondents by their suggestion on how smokers are encouraged to be non-smoker

(Table 9)

10.9 Distribution of respondents by their suggestion regarding steps that government should take to prohibit smoking

(Table 10)

11. Recommendations

- Ø Amend the existing tobacco control law with full compliance of WHO FCTC to include pictorial health warnings on the tobacco products.
- Ø Introduce effective tobacco Health Warnings on packages of cigarettes and other tobacco products.
- Ø The use of pictures with graphic depictions of disease and other harmful effects have a greater impact than words alone. Only words alone cannot reach a very large number of people those who cannot read, in countries like Bangladesh.
- Ø Restrict smoking in movies. Studies show that smoking in movies misleads youths into thinking that tobacco use is normal, acceptable, socially beneficial and more common that it really is.
- Ø Any smoking scene on TV, film or any other media should be banned.
- Ø Sincere effort to implement and enforce the MPOWER package can reverse the tobacco epidemic and help the countries build on their commitment made in the WHO FCTC to protect the health of their people. You really need it to save millions of lives worldwide.
- Ø Protect second-hand tobacco smoke through legislation and enforcement.
- Ø Ask the husband and others to refrain from smoking around pregnant woman.
- Ø Non-smoking tobaccos like jarda, sada pata, and gul should be brought under the coverage of the act. Provision of pictorial warnings on non-smoking container is to be passed.
- Ø Maintaining positive relations with the press.
- Ø Inviting the media to seminars and workshops on the dangerous situation about the effects of smoking.
- Ø Increase more mobile courts for abiding the law effectively.
- Ø The smoking and using of tobacco products (control) Act, 2005 needs to be revised thoroughly.
- Ø Introduce a chapter in the textbook curriculum with pictorial images to create awareness about the menace from the very childhood.
- Ø To take immediate action against tobacco companies to stop their interference and illegal advertisements.

12. Conclusion

Anything is not accepted if it is injurious to our health. Smoking is generally accepted bad habit that is very difficult for quitting for the smokers. Its adverse influences are counted not only with the life of smoker but also the life of all in a family, society and the nation as a whole. Smoking cost is not smoker's own costs as smoker is the counting of the total population. In aggregate the total smoking costs, it incur huge losses for the nation. It is found that secondary and higher secondary educated levels bear more expenditure for smoking. Friend's persuasion, curiosity, family problems, father's smoking, frustration are the main causes for this level. Bad consequences are seen in both family and society. In family these are misunderstanding, dependency burden, violence and others. Crimes, violence, addiction, decrease of social

standard are seen in society. Educated persons are the highly valued citizens in Bangladesh. Their scholarly thinking is to be nurtured for strong standing in the competitive world. Smoking should be stopped for advancement, sound and a development society in Bangladesh.

So, before you pick up your next cigarette, consider the healthcare costs of smoking, the emotional and social effects of the habit. There are many other ways to spend time, money and energy that are much more profitable. Avoid the devastating smoking health costs and never smoke another cigarette again!

Abbreviations: COPD= Chronic Obstructive Pulmonary Disease/Disorder. SIDS= Sudden Infant Death Syndrome. FCTC= World Health Organization Framework Convention on Tobacco Control. MPOWER= Monitor tobacco use and prevention policies, Protect people from tobacco smoke, Offer help to quit tobacco use, Warn about the dangers of tobacco use, Enforce bans on tobacco advertising, GTS= Green Tobacco Sickness, BAT=British American Tobacco, DTI=Dhaka Tobacco Industries, AK=Abul Khair

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We should protest against addiction with our mental strength. The Daily Prothom Alo, Dated June 26, 2011.

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Not only with the enforcement of law against addiction, but also we have to work together to eliminate. The Daily Prothom Alo, Dated June 27, 2011.

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Brand	Company	Price	Brand	Company	Price
Benson & Hedges	BAT	Tk. 120	Gold Mine	DTI	Tk. 22
Capstan	BAT	Tk. 64	Nasir Gold	Nasir	Tk.20
Navy	DTI	Tk. 45	Marriage	AK	Tk.25
Star	BAT	Tk. 45	Castle	DTI	Tk.40
Pall Mall	BAT	Tk. 64	Gold Leaf	BAT	Tk. 76
Hollywood	BAT	Tk. 22	Top ten	AK	Tk. 20
Bristol	BAT	Tk. 22	Sheikh	AK	Tk. 22
Marlboro	BAT	Tk. 120	Cherry Mond Superslims		Tk. 110
Salem Green (Japan)	Japan Tobacco Inc.	Tk. 140	Gudang Garam (Indonesia)	PT Gudang Garam	Tk. 180
Pine (Korea)	KT&G	Tk. 140	Just Black	JB Tobacco of London	Tk. 140

(Table 1) Brands, Company & Prices of Cigarettes

Source: Local markets of Bangladesh Time Period: February-March, 2012

Table 1 shows that a pack of Benson & Hedges costs more than two liters of milk, three kilogram of rice, three kilogram of wheat & one and half of eggs. Taking smoke is so costly that by the amount of smoking (single packet of cigarettes); smoker can spend that amount for family for two or more days. Table-1 also shows that cigarettes are most available in the Bangladeshi market with its easy accessibility. British American Tobacco cover significant amount of market share.

(Table 2) Average daily expenditure for tobacco and equivalent in calories of rice, by sex and type of tobacco, 1997

Type of tobacco	Average expenditure on tobacco (US \$)		Equivalent in calories of rice	
	Male Female		Male	Female
Avg. for all type of tobacco	\$0.11	\$0.06	1,402	770
Bidi	\$0.06	\$0.7	797	907
Cigarettes	\$0.24	\$0.15	2,942	1,869
Hukka, pipe etc.	\$0.06	\$0.04	715	522

Source: Bangladesh bureau of statistics, Statistical Pocketbook Bangladesh 1998. Dhaka: 1999

Table 2 shows that 2,942 & 1,869 equivalents in calories of rice can be consumed for male and female respectively by their expenditure made on cigarettes.

(Table 3) Distribution of respondents by their age and smoking status

	Smol	Total	
Age	Regular	Irregular	(200)
	(184)	(16)	(200)
10-19	66.7	33.3	3.0
20-29	93.3	6.7	52.5
30-49	89.4	10.6	33.0
50 and above	100.0	-	11.5
Total	92.0	8.0	100.0

Type of test: χ^2 , d.f: 3, p-value: 0.04



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Table 3 shows that, about 67 percent of the adolescent are smoking on regular basis. This percentage increases as the age of the respondents increases and all of the people of age 50 and over are habituated to regular smoking. It indicates that age of the respondents is positively associated with their smoking status and it is found to be statistically significant at 5% level. It is also evident from the study that more that 87 percent of all professions are regular smoker (Figure 1). More than three fourth of the respondents prefer Benson followed by Navy (10%) and Star (9%). Only 6 percent prefer Akij/ Abul Biri. It is striking to note that all of the consumers of Akij/Abul Biri are regular smoke (table 4).



(Figure 1) Type of smoker by their occupation



📕 Regular 🛛 🗮 Irregular

(Table 4) Distribution of respondents by type of smoker and brand of the cigarette

	Brand*				
Type of smoker	Benson	Navy	Star	Akij/ Abul	
	(151)	(20)	(18)	(11)	
Regular	91.4	90.0	94.4	100.0	
Irregular	8.6	10.0	5.6	-	
Overall	75.5	10.0	9.0	5.5	

*Multiple responses (n=200)

Yearly expense for smoking varies from TK 1095 to TK 182500. Half of the total respondents are spending more than twenty thousand taka per year for smoking. Yearly expenses on smoking shows a upward tendency for those who read up to

HSC level and it falls gradually for those who have completed Degree or higher level indicating that less qualified respondents are spending more amount of money on smoking rather than qualified persons. Statistically significant relationship is observed between yearly cost on smoking and education of the respondents (Table 5).

Yearly cost		Total		
(TK)	Below S.S.C	S.S.C & H.S.C	Degree & above	(200)
(1K)	(57)	(101)	(42)	(200)
<12000	21.6	37.3	41.2	25.5
12000-23999	27.8	54.2	18.1	36.0
24000-35999	35.5	48.4	16.1	15.5
36000-47999	34.8	60.9	4.3	11.5
≥48000	30.4	60.9	8.7	11.5
Total	28.5	50.5	21.0	100.0
Min: 1095, Max: 1825	00, Range: 181405,	Mean: 24564.5, s.d: 1	9916.6, Median: 20440	, Mode: 14600

(Table 5) Distribution of r	esnondents by	their education	and yearly cost invo	lved for smoking
	I abic 5	<i>p</i> Distribution of r	copondento by	then cuucation	and yearry cost my	nvcu ioi smoking

Type of test: χ^2 , d.f. 8, p-value: 0.01

Consequences of smoking can be seen both in family and society. Most of the respondents (78%) believed that smoking creates misunderstanding among the individuals of the family members while 18.5% thought that it increases the dependency burden of the family (Table 6). The most important social consequences of smoking are decrease in social norm (43.5%) and addiction (40%) (Table 7)

(Table 6) Distribution o	f respondents by	consequences of	f smoking in fa	mily by selected variable
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Selected variable		Consequences in	family*					
	Misunderstanding (156)	Violence (19)	Dependency burden (37)	Others (112)				
Overall	78.0	9.5	18.5	56.0				
Age								
10-19	3.2		5.4					
20-29	41.0	89.5	59.5	43.8				
30-49	41.7	10.5	32.4	43.7				
50 and above	14.1		2.7	12.5				
Occupation								
Service	44.9	21.0	43.2	54.5				
Student	30.1	73.7	46.0	25.9				
Business	25.0	5.3	10.8	19.6				
Family Status								
High	10.9	10.5	5.4	6.2				
Middle	74.4	84.2	81.1	76.8				
Low	14.7	5.3	13.5	17.0				

*Multiple responses (n=200)



Selected variable		Consequences in society*					
	Crime	Violence	Addiction	Social value	Other		
	(25)	(16)	(80)	(87)	(112)		
Overall	12.5	8.0	40.0	43.5	56.0		
Age							
10-19	-	6.3	1.3	2.3	3.6		
20-49	100.0	93.7	88.7	88.5	80.4		
50 and above	-	-	10.0	9.2	16.1		
Education							
Below S.S.C	52.0	25.0	45.0	43.7	35.7		
S.S.C and H.S.C	32.0	43.7	43.7	43.7	37.5		
Degree and above	16.0	31.3	11.3	12.6	26.8		
Family status							
High	16.0	18.8	11.3	11.5	8.1		
Middle	80.0	68.7	77.4	79.3	70.4		
Low	4.0	12.5	11.3	9.2	21.5		

*Multiple responses (n=200)

Respondents were further asked why people usually smoke. Majority (81%) of the respondents asserted that friend's persuasion plays a vital role in this respect. Other major reported factors are curiosity (69.5%), frustration (59.5%), Family problem (52%) and Father's habit of smoking. Adolescents thought that the major causes of smoking are family problem and father's habit of smoking while mid aged people believed that friend's persuasion and frustration are the major causes of smoking. It further showed that, more than 80 percent of the less qualified people thought the main cause of smoking is frustration. About 40 percent qualified respondents believed that people become addicted to smoking due to fathers addiction to smoking. It further shows that, most of the people of middle class indulge in smoking for frustration or family problem and most of the people of lower class become interested to smoking seeing their father (Table 8).

(Table 8) Distribution of respondents by causes of smoking in society by selected variable

Selected		Causes of smoking*						
variable	Friends persuasion	Curiosity	Family problem	Father's smoking	Frustration	Other		
	(162)	(139)	(104)	(96)	(119)	(31)		
Overall	81.0	69.5	52.0	48.0	59.5	15.5		
Age								
10-19	2.7	3.4	6.3	7.3	1.0	-		
20-49	87.8	85.5	85.9	81.8	87.0	85.7		
50 and above	9.5	11.1	7.8	10.9	12.0	14.3		
Education								
Below S.S.C	32.0	31.6	37.5	18.2	42.0	60.7		
S.S.C and	48.3	48.7	46.9	50.9	44.0	28.6		



	H.S.C						
	Degree and above	19.7	19.7	15.6	30.9	14.0	10.7
Ī	Family status						
	High	10.2	11.1	15.6	14.5	11.0	7.1
	Middle	75.5	76.1	78.1	67.3	81.0	89.3
	Low	14.3	12.8	6.3	18.2	8.0	3.6

*Multiple responses (n=200)

Table 9 provides the effective ways and means that might be used to motivate a smoker to become non-smoker. Most of the respondents believed that, increasing family interactions among the members of the family can prevent a smoker from smoking. About 62 percent of the respondents thought counseling on consequences of smoking can play an important role in this respect. Other major reported ways are creating new environment (60.5%) and establishing religious belief (43%). Respondents were further asked regarding steps that government should take to prohibit smoking. Nearly half of the respondents suggested that government should take initiative to start campaign to create awareness about the adverse effect of smoking while a good number of people thought that smoking can be prohibited by imposing band on production and sales of all tobacco and products related to tobacco (Table 10).

(Table 9) Distribution of	f respondents by	their suggestion on ho	w smokers are encouraged to be non-smoker
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Ways	Number	Percent
Raising the price of tobacco	31	15.5
Advertise	12	6.0
Counseling	123	61.5
Increasing family interaction	127	63.5
Establishing religious belief	86	43.0
Medicine	23	11.5
Creating new environment	121	60.5
Total	-	-

Multiple responses (n=200)

(Table 10) Distribution of respondents by their	r suggestion regarding steps that	government should take to prohibit
smoking		

Step	Number	Percent
Band	78	39.0
Creating awareness	89	44.5
Stop production of tobacco	45	22.5
Total	-	-

Multiple responses (n=200)

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