

# Awareness and Response of Smokers to Anti Smoking Campains on Cigarette Packs: A Study of Commercial Bus Drivers in South East Nigeria

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## Abstract

Smoking has been identified as a health risk, a pattern of behavior usually acquired during adolescence. It is a growing public health problem in the developing world and also an important global challenge for public health policy makers worldwide, tobacco use is widespread and efforts to combat smoking and its health hazards are being scaled up. Based on this, the Federal Ministry of Health in Nigeria came up with health warning which adorn every cigarette pack sold in Nigeria to campaign against cigarette smoking. Specifically, the study sought to ascertain if the commercial bus drivers who smoke in South East Nigeria are aware of the anti-smoking campaign message on the cigarette pack also to ascertain if these smokers are exposed to the campaign message on the cigarette pack and as well how they respond to it. The study was built on Health Belief Model (HBM) and Uses and Gratification theory. The research design of the study was based on triangulation: the survey which is predicted on the use of questionnaire, the in-depth interview approach and observation. Statistical result indicates a weak relationship between the target audience and the level of awareness and response to the anti-smoking campaign on cigarette packs. The study concludes that other media of communication like the Television, Newspaper, Posters and Mobile Telephones be included in the campaign process since the respondents make use of these other media.

**Keywords:** Awareness, Responsiveness, Scare Message, Cigarette smoking

## BACKGROUND TO THE STUDY

It is estimated that tobacco use kills more than five million people every year more than HIV/AIDS, tuberculosis and malaria combined. If current trends continue, tobacco use could kill more than eight million people per year by 2030, and up to one billion people in total in the 21<sup>st</sup> century (WHO, 2009).

To worsen this scenario, tobacco smoking is linked to other common causes of death, such as road accidents. Tobacco smoking has a lot of negative influence on driving which could result in accident and subsequently death. Smoking while driving can stimulate the confidence of drivers and make them not realize they are speeding; this could be dangerous, as it is characterized by all forms of careless drinking. Smoke from the cigarette can interfere with the driver's sight, thereby resulting in fatal accidents.

The World Health Organization (2003) in its World Mental Health Survey states that 16.8% of Nigerians use tobacco (cigarettes, cigars, or pipe); however the prevalence is much higher among certain population groups such as commercial drivers among whom rates range from 25% to 85%. Factors such as peer pressure, availability, accessibility and affordability of cigarettes as well as high stress levels associated with the job and the perceived need for stimulants use may contribute to the high prevalence of smoking among commercial bus drivers. Commercial bus drivers are thus an important target group in efforts to control tobacco use in Nigeria (WHO, 2003). Worldwide, tobacco use is widespread and efforts to combat smoking and its health hazards are being scaled up.

The tobacco epidemic is rising rapidly; hence the regulation of tobacco products is critical. In recent times, research has shown that there is an alarming increase in the rate of smoking among adolescents. In the northern part of Nigeria where the weather is hot, it is established that there are high sales of cigarette (Benson & Hedges Research 2004).

Warning labels on smoking messages have become a popular method employed by some governments in an attempt to inform their citizens of the health consequences of smoking. For instance, the introduction of Canada's new graphic warning labels in December 2000 prompted other countries to review their requirements on new warning label in many of those countries. (Strahan et al, 2002). In Nigeria, the Federal Government through the Federal Ministry of Health realized and appreciated this fact and initiated the following warning labels which adorn every cigarette pack sold in Nigeria: "Say No to Tobacco Smoking", "The Federal Ministry of Health warns that tobacco smoking is dangerous to health", "The Federal Ministry of Health warns that smokers are liable to die young." The Federal Government of Nigeria in 2011 also went further to the passage of the National Tobacco Control Bill which is expected to help check smoking excesses. The bill domesticates the World Health Organization-Initiated Framework Convention on Tobacco Control, a global standard for tobacco control. The major highlights of the bill include: ban on single stick sale of cigarettes; ban on tobacco advertisement, sponsorship and promotions; ban on selling cigarette to persons under the age of 18; ban on

smoking of tobacco products in public places, which include airports and public buildings; clearly visible tax stamps on cigarette pack and enforcement provision to ensure that the law is effectively implemented. Similarly, anti-smoking groups in Nigeria, particularly Cancer Charities along with NAFDAC campaign, have attempted through the mass media to counter the advertising of cigarettes by creating their own campaign messages to highlight the negative effects of smoking. In this regard, the earliest commercials mainly focused on encouraging smoking cessation, and highlighting the increased risk of lung cancer and the problems associated with passive smoking. However, the messages have become increasingly hard-hitting over the years, with some messages now centered on decreased physical attractiveness of smokers and the risk of erectile dysfunction.

Despite the numerous public reports and cigarette warning labels on the risk of smoking, observation on our streets and motor parks shows that a large number of drivers smoke even while driving. Most drivers apparently see smoking as a way of life and a habit that cannot be compromised (Mahoney, 2000). The increasing prevalence of smoking especially among commercial bus drivers in motor parks (WHO, 2003) calls for empirical studies to be undertaken to unearth drivers' awareness of, exposure to and response to the anti-smoking campaign messages on cigarette packs.

### **STATEMENT OF RESEARCH PROBLEM**

The problem that influenced this study is the fact that it is not fully known if the anti-smoking message on the cigarette packs is an effective strategy at inducing behavior change of commercial bus drivers from smoking behavior to non smoking behavior. In addition, the observed smoking behavior among the commercial bus driver's in the motor parks seems to cast doubt as to the efficacy of the anti-smoking message on the cigarette packs, which calls for empirical revelation to the propensity of this message at triggering smoking behavior change. It is important to find out the effectiveness of this strategy at inducing behavior change in commercial bus drivers who smoke. Also to find out the number of the drivers who have quit the smoking habit because of the awareness of and exposure to this message. Regardless of the campaign message, it will also be important to know how many of these drivers still maintain the smoking habit.

### **OBJECTIVES OF THE STUDY**

The decision to embark on this study was informed by the fact that in Nigeria, the prevalence of tobacco use is much higher among commercial bus drivers (WHO, 2003). Against this backdrop, this study was informed by the need to establish if placing anti-smoking campaign message on the cigarette packs elicits the desired response and impact from the target audience. This general objective was narrowed down to specific objectives as follows:

1. To ascertain if the commercial bus drivers who smoke in South East Nigeria are aware of the anti-smoking campaign message on the cigarette packs.
2. To ascertain if these smokers are exposed to the campaign message on the cigarette packs.
3. To verify how these smokers respond to the anti-smoking campaign message on the cigarette packs.
4. To determine if any relationship exists between the scare message on the cigarette packs and the tendency of these smokers to stop smoking.
5. To determine also, if there are other factors other than the anti-smoking campaign message that induce these smokers to re-consider smoking.

### **RESEARCH QUESTIONS**

The following research questions were posed for investigation.

1. To what extent are commercial bus drivers who smoke in South East Nigeria aware of the anti-smoking campaign message on the cigarette packs?
2. Are these smokers exposed to this campaign message on the cigarette packs?
3. How do these smokers respond to the anti-smoking campaign message on the cigarette packs?
4. What relationship, if any exists between the anti-smoking message on the cigarette packs and the tendency of these cigarette smokers to stop smoking?
5. What other factors other than the anti-smoking campaign message induces these smokers to re-consider smoking?

### **SCOPE OF STUDY**

The smokers used in this study are cigarette smokers among commercial bus drivers in the major Motor Parks in South East Nigeria, whose awareness of, exposure and response to the health message on the cigarette packs will be determined. By virtue of their occupation, this group of people appears more vulnerable to smoking, probably because of the stress involved in their occupation. Any major city in Nigeria where we have Motor Parks would have been chosen for this study; but a purposeful decision was taken to delimit this study to drivers who operate in the major Motor Parks of major cities across the States in the South East, with the full knowledge that there

could be a replication of this study in other parts of the country which were not covered.

### **SIGNIFICANCE OF THE STUDY**

This study is therefore significant because it seeks to establish if the commercial bus drivers in South East Nigeria are aware of and exposed to the health message on the cigarette packs and what their responses are in terms of taking health action which entails stopping. The study also seeks to find out if the drivers are indifferent about health actions by continuing their smoking habit. Ultimately, findings from this study could generate relevant literature aligned to the premise of this study. Also, it would provide for the originators of the campaign information on how well the campaign is doing or how insignificant it is in influencing behavioral change, such that new strategies might be adopted to make for more effective campaign. Various stakeholders like Cancer Charities, Nafdac, Road Safety and Health NGO's will take advantage of the findings of this study to re-strategize in their bid to wage war against cigarette smoking.

### **LITERATURE REVIEW**

#### **SMOKING: A GLOBAL HEALTH CHALLENGE**

WHO (2012) reports that the tobacco epidemic is one of the biggest public health threats the world has ever faced. It kills nearly six million people a year of whom more than 600,000 are non-smokers exposed to second-hand smoke. Approximately one person dies every six seconds due to tobacco and this accounts for one in 10 adult deaths. Up to half of current users will eventually die of a tobacco-related disease. According to their study, nearly 80% of the more than one billion smokers worldwide live in low and middle income countries where the burden of tobacco-related illness and death is heaviest. Tobacco users who die prematurely deprive their families of income, raise the cost of health care and hinder economic development. In some countries, children from poor household are frequently employed in tobacco farms to provide family income. Despite considerable progress of clinical and public health initiatives to reduce smoking in industrialized nations, smoking rates are increasing in the new democracies of Central and Eastern Europe (WHO,2001) and cigarette smoking has been termed "the emerging epidemic" in developing countries.

Additionally, the American Cancer Society (2014) reports that second-hand smoke affects the heart and blood circulation, and over time causes heart disease and lung cancer. The ACS report says that there is an increased risk of asthma, lung infection and ear infections among children exposed to second-hand smoke. Smoking affects the society by its pollution in the air, making room for new laws such as smoking zones, high taxes which are why cigarette cannot be illegal.

#### **Tobacco prevalence and consumption worldwide**

Ibe and Ele (2003) studied the prevalence of smoking in young Nigerian females, precisely in secondary schools in Anambra State, South East of Nigeria. The study concluded that the prevalence of cigarette smoking in young Nigerian females is relatively low. The study recommends that interventions at this stage will be timely but effective strategies to curb the habit will require identifications of other factors that may be contributing to the social menace. Also, Hussain et al (2010) conducted a study to determine the prevalence of cigarette smoking and knowledge of its health implication among Nigerian Army Personnel. The prevalence of smoking among the respondents was high. In spite of their knowledge of cigarette smoking health hazards, the respondents could not relate this to military fitness and combat effectiveness. Their knowledge of the adverse effect did not translate to their smoking behavior. The researchers concluded that there is need for continuous anti-smoking programmes to be established by the medical authority in the Nigeria Army to sensitize personnel on the dangers of cigarette smoking.

Fajoju and Okhihu (2009) in a study on drug abuse among students of Ambrose Ali University, Ekpoma, Nigeria, equally show that among drugs abused, such as Cocaine, Marijuana, Librium, Colanut, Tobacco is one most widely abused. Based on the findings of the study, the researchers recommended the need to organize awareness programs on campuses to educate students more on the deadliness of drugs which will affect their learning. They also recommended that university authorities should put in place severe disciplinary measures to stem the tide of drug abuse. Likewise, Kobiowu (2006) conducted a study on the social and academic implication of drug abuse among undergraduates of Obafemi Awolowo University, Ile-Ife Nigeria. He found that among drugs commonly abused is tobacco. The study revealed that the academic pursuit of those undergraduates who engage in drug misuse is not unduly jeopardized, and that the abusers do not socialize extraordinarily, contrary to seemingly popular expectation. Again, Salawu et al (2009) conducted a study on cigarette smoking habits among adolescents in Yola South Local Government. The study shows that the overall prevalence of smoking was (33.9%) of the population used: 40.4% males and 22.6% females.

### **REVIEW OF EMPERICAL STUDIES ON AWARENESS AND RESPONSE TO ANTI-SMOKING**

## CAMPAIGNS

A good number of empirical studies have investigated the subject of this work. In a study of, Hansen, Winzeler and Topolinski (2010) used Terror Management Theory to examine the impact of anti-smoking messages in cigarette package labeling in the context of self-esteem and mortality-salient warnings. They found that warning messages on cigarette packages can be effective at inducing anti-smoking attitudes. However, they found a link between smoking and self-esteem which suggested that fear-based warnings may not be heeded by those who base their self-esteem on smoking. Hansen et al. (2010) therefore argue that a differential strategy should be applied to warn smokers against negative consequences of smoking, death-related warnings “are not effective and even have unwanted effects when smokers have a high smoking-based self-esteem.” In their view, young smokers who want to impress their peers may base their self-esteem on smoking to a higher degree than others. Furthermore, their research suggests that such populations should be warned against noxious consequences of smoking with death-neutral messages that undermine their smoking-based self-esteem. Their research found that “when smokers are faced with death-related anti-smoking messages on cigarette packs, they produce active coping attempts as reflected in their willingness to continue the risky smoking behavior.” Similarly, Devlin et al. (2007) found from their study of young people in England that fear-based anti-smoking appeals can encourage a defensive response and “ultimately rejection of the message, particularly among more committed smokers.” According to the researchers such appeals were likely to be effective only when combined with appropriate forms of advice and support with the efficacy components of messages being designed to specifically meet the needs of young people.

Schmitt et al (2008), for example, tested whether fear – arousing persuasive messages (i.e. video anti-smoking campaigns) could modulate intentions, attitudes and behaviors. In their threat condition, students expressed stronger anti-smoking intentions than did the students in the control condition.

Anti-smoking campaigns in the United States have informed audience members that smoking over a lifetime carries a great health risk and that quitting minimizes that risk. On the surface, two of the necessary factors for behaviors change (Knowledge of severity and belief in response efficiency) are already in place. However, this may not be the case as research, shows many inconsistencies in smokers understanding of the severity of the risk. Many are not aware of the addictiveness of smoking (Lumborg, 2007), nor do they realize that young smokers can show evidence of dependency within days or weeks of smoking. He also suggests that another compelling explanation is smokers’ underestimation of the addictiveness of cigarettes, which increase their likelihood of initiating smoking. Difranza et al (2000) further states that without the belief in personal vulnerability and self efficacy, smokers are unlikely to succeed in quitting. Weinstein (2001) states that without that belief, self-efficacy is likely to be and irrelevant concept because students will believe that quitting is easy.

In Malaysia, smoking-related diseases are among the important current public health issues being the main cause of mortality with 10,000 deaths reported annually (Malaysian Medical Association, 2002). This health issue is even more urgent because smoking prevention is also an important measure in curbing drug abuses in the population. The national drug agency of Malaysia (Persatuan Mencega Dadah Malaysia, PEMADAM) reported that 100% of drug addicts are smokers (Pemadam 2003). So also, Sly et al (2001) in a media tracking survey of teenagers demonstrated high rates of campaign awareness, and specific ad awareness in the first six weeks of the campaign, which persisted to one year. In addition, over the first year of the campaign, there was change in attitudes consistent with the intentions to smoke and smoking behavior among Florida youths. Compared with youths in other states with low levels of anti-smoking activity. In addition, in a level on the index of “Truth” advertising impact, were less likely to initiate smoking than youth who could not confirm awareness of the television advertisement.

## REVIEW OF NIGERIAN/AFRICAN EMPIRICAL STUDIES ON ANTI-SMOKING CAMPAIGNS

Joyce et al (2014) in their study on the impact of tobacco smoking on health and cessation among a cohort of smokers in Ibadan shows that the prevailing ailments and the most prominent health problems among the tobacco smoking motorcyclists were basically chest pain, cough associated with sputum discharge. Easy invasion of malaria parasites and dry lips with dark coloration in a descending order; 32%, 25%, 20%, and 10% respectively. Tobacco use resulting to addiction is linked to various health related risk factors. According to the researchers a better degree of awareness should be channeled to the danger posed by continuous smoking, influence of friends and co-workers in the cycling- business coupled with irregular check- up at the various governments, health centres across the state and country. This awareness campaign is achievable through jingles on the radio, advertisements in newspapers and anti-smoking seminars and workshops in our schools and hospitals. Also they were of the opinion that the federal and state government should formulate and effect positive policies to limit allowable degree of smoking per day; especially for the young minds. Therefore showing the need for mental health professionals to develop appropriate psychotherapeutic interventions to facilitate cessation among tobacco smokers.

Dunsi Oladele et al (2013) studied Critical Realism: A practical ontology to explain the complexities of

smoking and tobacco control in different resource settings. (Original field work in Nigeria), including participant observation of smokers, in-depth interviews and focus groups with smokers, in-depth interviews with health professionals working in the area of tobacco control in Nigeria. The researchers interviewed a total of 42 individuals consisting of active smokers and health professionals in Lagos Nigeria. Twenty smokers participated in the in-depth interviews, while another group of 15 smokers in a focus group. In addition, seven health professionals working in tobacco control were interviewed. After interviewing 30 participants, key categories in the analysis started to emerge. Ethics approval for this study was obtained from the ethics board of the Lagos University Teaching Hospital in Nigeria and the University of Albert in Canada. Findings from the study suggests that Critical Realism holds promise for addressing underlying mechanisms that links complex influence on smoking. The study argues that understanding the underlying mechanisms associated with smoking in different societies will enable a platform for effective implementation of tobacco control policies that work in various settings.

Tanimowo et al (2014) studied Youth in Southwestern Nigeria: Awareness of Anti-Smoking Efforts and The Adverse Health Effects of Cigarette Smoking. A descriptive cross-sectional study was carried out among 600 final year students of two schools each from Oyo state and Osun state in South Western Nigeria using self-administered questionnaire with core questions from the WHO Global Youth Tobacco survey questionnaire. There were 366 (61%) males and 234 (39%) females and most (80.7%) were in the 15-19 years age group. The current smoking rate was 19% with male: female ratio of 3.6:1. More than half of the smokers were unwilling to stop smoking immediately despite the fact that most of the students were aware of the adverse health effects of smoking. Majority (70% and above) were not aware of any antismoking efforts in their environment. Friends and classmates were the highest groups of people which might have influenced the initiation of smoking (38.4%). This is closely followed by parents (13.3%) Anti-smoking programmes specially directed towards the youths should be commenced in Nigeria. This should include: continuing anti-smoking health education in school syllabi, discover aging parents and guardians from smoking, legislation against advertisement and sale of cigarettes to youth, increase the rates of tobacco products thereby increasing the retail price, enforcing anti-smoking laws in public places and initiating smoking cessation programme in Nigeria. It is high time the already ratified WHO Framework Convention on Tobacco Control (FCTC) became domesticated in Nigeria.

Jensen et al (2011) in their study of terror management theory and anti-tobacco messages on young adults used a 2 (death explicit/non-death message) x 2 (smoker/non-smoker) between-subjects experiment wherein young adult participants were exposed to either 7 death-explicit or 7 non-death anti-tobacco ads and completed self-report measures of anxiety, cultural worldview defense, smoking blame, behavioral intention, and perception of smoking consensus following. Findings from this study suggested that responses to death-explicit anti-tobacco ads support previous TMT findings that death-related thoughts function as a motivating force in defending cultural worldviews and overestimating social consensus for minority viewpoints.

Phinse et al (2013) studied the evaluation of a specifically designed tobacco control program to reduce tobacco use among school children in Kerala. A cross-sectional survey on tobacco use and related effects was conducted using a structured questionnaire in 13 randomly selected schools in Kannur district of Kerala. These students were followed for a period of one academic year with multiple spaced interventions such as anti-tobacco awareness of classes, formation of anti-tobacco task forces, inter school competitions supplying IEC (information, education and communication) materials and providing a handbook on tobacco control for school personnel. Final evaluation witnessed a sharp decline in the current tobacco use as 4.68%. They observed a statistically significant difference towards the future use of tobacco ( $p < 0.001$ ) and awareness about the ill effects of passive smoking ( $p < 0.001$ ) among boys and girls. Further, a significantly increased knowledge was observed among boys compared to girls about tobacco and oral cancer ( $p = 0.046$ ). Their study concluded that the comprehensive school based tobacco control project significantly reduced the tobacco use pattern in the target population. School tobacco projects incorporating frequent follow ups and multiple interventions appear more effective than projects with single interventions.

## OVERVIEW OF CAMPAIGNS

### “Truth Campaign”

Prevention messages are often used for youth who have yet to pick up the habit of smoking or those who are not fully addicted. The Truth Campaign was created in 2000 by the anti-smoking organization, the American Legacy Foundation. The target audience for the campaign is 12 to 17 year-olds within the United States and the secondary audience is 18 to 24 year-olds. It was not a campaign that was “anti-smoker, or anti-smoking, just anti-manipulation” (Legacy 2012). “Truth” counters tobacco messaging and helps teens to make informed decisions by giving them “control” and emphasizes the consequences of rebelling through tobacco uses. Truth aims to “encourage youth to develop positive beliefs about not smoking” by emphasizing the deception of tobacco companies (Evans 2005). The campaign gave teens the power of knowledge to help them make their own decisions about smoking. Rather than framing smoking as negative, “Truth” chose to positively frame not

smoking, which was done through advertising and marketing, truth was emphasized as a brand, like Nike or Apple, which teens could connect to. The campaign also heavily relied on the sharing of “Truth” values among peers; the brand was essentially framed in a positive manner which led teens to desire to be “Truth” teens. A “Truth” teen was someone who was in charge of their own life and did not rely on cigarettes or smoking as a form of rebelling.

Since the campaign on “Truth” gives people facts, it emphasizes the importance for them to make their own decision about whether or not they want to quit or avoid smoking instead of relying on peer pressure or industry advertising pressure. Its tactics used counter-marketing strategies that emphasized that smoking is “following orders” because that is exactly what the tobacco industry wants young people to do, instead of not smoking or quitting which would be considered rebellious. The campaign relied heavily on TV advertising and showed 30-second advertisements that were shocking and informative, such as the “body bags” ad created by Arnold Worldwide. The ad shows 1,200 body bags piled up in front of tobacco company office in New York City to represent the 1,200 people who die every day from tobacco. Other ads created by truth display the harsh effects of smoking.

Cami (2008) is of the view that the research on truth shows that the campaign resulted in almost 300,000 fewer youth smokers between 2000 and 2008. Truth is associated with a 20 percent decrease in smoking initiation which results in approximately 73,000 fewer smokers from 2000 to 2004 (Farrelly 2009). This campaign was able to use gain framing because its audience was most susceptible to a positive message. Truth had to highlight the positives associated with not smoking in order for teens to choose not to rebel, where as a negative framed message may have inspired them to rebel more. Though its Master Settlement Agreement (MSA) funding ended in 2003, the truth campaign continues to spread its life saving messages across multiple platforms such as an online site, music and gaming tours and an interactive mobile game.

Farrelly et al (2005) reports that anti-smoking campaigns, such as the America legacy foundations truth campaigns have in some cases achieved larger effects, and can substantially reduce the number of people who start smoking and progress to established smoking, from 1999-2002, the prevalence of smoking in young people in the US decreased from 25.3% to 18% and the truth campaign was responsible for about 22% of that decrease while a small effect by clinical standard truth was responsible for reducing the number of youth smokers by about 300, 000 during the observed time period. This would result in millions of added life years and reductions in healthcare costs and other social costs. Thus social marketing can have major social impact when applied effectively at a population level.

#### **The Campaign for Tobacco- Free Kids**

The campaign was created in 1996 as a non-profit organization that accepts no government or tobacco industry funding. It was one of the only non-profit that attempts to tackle youth tobacco use in the United States and abroad. The campaign was an advocate for policies that prevent youth smoking, help smokers quit, and protect people from secondhand smoke. As stated by Campaign for Tobacco Free Kids (2012), its mission is to:

- **Promote** public policies proven to reduce tobacco use and exposure to secondhand smoke. These include higher tobacco taxes, comprehensive smoke free laws, well-funded tobacco prevention and stop-smoking programs, as well as tough regulation of tobacco prevention and stop-smoking programs, and tough regulation of tobacco products and marketing.
- **Expose** and counter tobacco industry efforts to market to children and mislead the public.
- **Strengthen** tobacco control efforts in the United States and worldwide by providing support and information to many partners.
- **Mobilize** organizations and individuals to join the fight against tobacco.
- **Empower** a tobacco-free generation by fostering youth leadership and activism.
- **Inform** the public, policy makers and the media about tobacco’s devastating consequences and the effectiveness of the policies.

The campaign for Tobacco Free Kids tends to take a different approach than “Truth” to address smoking issues within the United States. The campaign actually works outside of international barriers to fight against big tobacco overseas where marketing is often heavier and more targeted. Rather than focusing on consumers, the Campaign aims to fight big tobacco through policy changes. Where “Truth” aimed to reach kids and impact their own personal thoughts and behavior, the Campaign tried to reach a step further by targeting lawmakers. It aggressively pursued lawmakers to adopt policies that would restrict tobacco companies and their efforts to market to youth. Though the Campaign for Tobacco Free kids is focused on policy changes, it does have programs to help kids gain more knowledge about smoking and its harsh effects on one’s body.

## THEORETICAL FRAMEWORK

### HEALTH BELIEF MODEL: AN OVERVIEW

Key constructs in the Health, Belief Model include perceived risks and benefits with regard to tobacco use, perceived barriers and self-efficacy for quitting, and cues to action (see table below).

Construct	Definition (for tobacco Users)
Perceived Susceptibility	Tobacco user's perceived chances of developing smoking-related conditions (i.e., lung cancer, CVD, gum disease, infertility, etc.)
Perceived Severity	Tobacco user's beliefs regarding seriousness of various smoking –related conditions and the consequences of these conditions
Perceived Benefits	Tobacco user's belief in the efficacy of the advised action for smoking cessation in reducing various health risks
Perceived Barriers	Tobacco user's opinion of the tangible and psychological costs of the advised action for quitting smoking
Cues to action	Strategies to activate “readiness” to quit within tobacco user
Self-Efficacy	Tobacco user's confidence in their ability to terminate use of tobacco

### USES AND GRATIFICATION THEORY

This theory would then imply that the media compete against other information sources for viewers' gratification. UGT has a heuristic value today because it gives communication scholars a “perspective through which a number of ideas and theories about media choice, consumption, and even impact can be viewed.” UGT could be applied to identify the type of gratification people get from smoking. People smoke for the following uses and gratifications

- To belong to a social class
- As a fashion
- Escape from worry
- Relaxation motives
- Mood management / adjustment.

#### Research Hypotheses

The following assumptions were raised in this study

**Ho1:** Commercial bus drivers who smoke cigarette in South East Nigeria and who do not engage in general discussions about the dangers of smoking are not likely to be aware of the anti-smoking campaign message on the cigarette packs

**Ho2:** Commercial bus drivers who smoke cigarette and do not buy cigarette in packs are not likely to be exposed to the anti-smoking campaign message on cigarette packs.

**Ho3:** Commercial bus drivers who smoke in South East Nigeria and who do not hold health beliefs are more likely to be indifferent to the anti-smoking campaign message on the cigarette packs.

**Ho4:** There is no significant relationship between the scare message on cigarette packs and the tendency of these cigarette smokers to stop smoking.

**Ho4:** Factors like religion, marriage and economy are unlikely to induce these smokers in South East Nigeria to stop smoking rather than the scare message on the cigarette packs.

The hypotheses were tested using bi-variate correlation because they help to determine significant relationship between two variables.

## RESEARCH METHODOLOGY

### RESEARCH DESIGN

This study was based on triangulation. The survey which dwells on the use of questionnaire, the indepth interview approach and observation was used to collect data at the motor parks from commercial bus drivers who smoke. Commercial bus drivers were chosen because of their propensity and predisposition to smoke. They would be easily located at their place of work which is the Motor Park.

### STUDY POPULATION

Thus all the drivers in all the Motor Parks in all the five South-East States make up the study population. The South East States include: Abia, Anambra, Ebonyi, Enugu, and Imo State.

### SAMPLE AND SAMPLING PROCEDURE

A purposeful decision was made to select the largest Motor Park in each state. Field observation was used to determine the smokers among the commercial bus drivers in the selected Motor Parks. The field observation showed that all the Motor Parks are controlled by the local government with the help of Nigeria Union of Road

Transport Workers. Data collected from the NURTW Chairman/President of each Motor Park show the number of registered commercial bus drivers while observation helped to gather the number of smokers from among the drivers.

**TABLE 2**  
**NUMBER OF REGISTERED DRIVERS AND SMOKERS**

S/N	State	Major Motor Park	Number of registered drivers	Number of smokers	%
1.	Abia	ASA ROAD MAIN PARK	160	135	
2.	Anambra	EKE AWKA MOTOR PARK	140	110	
3.	Ebonyi	OCHOUDO MOTOR PARK	162	130	
4.	Enugu	OGBETE MAIN PARK	155	120	
5.	Imo	CENTRAL MARKET MOTOR PARK	149	125	
TOTAL			766	620	

Source: Okolo's Field Survey, 2014.

A sample size of 620 was used for this study. A population of 620 smokers is arguably manageable for a study of this nature. This sample size had been determined for this study by the census method used.

#### DATA COLLECTION INSTRUMENT

Quantitative data was collected using a 20 item questionnaire (See Appendix A). While, qualitative data was collected from the commercial bus drivers using in-depth interview which entailed recording their responses on tape, playing back the tape, transcribing the responses, presenting and subjecting them to analysis. The questionnaire address the variables directly related to the research questions and hypotheses that have been developed for this study.

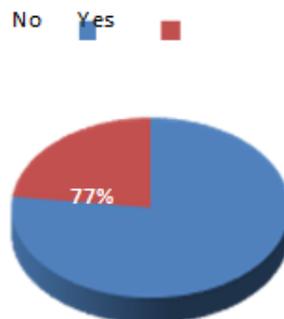
#### DATA PRESENTATION, ANALYSIS AND INTERPRETATION

This is the actual results of the data analysis, using SPSS. Pearson's chi square tests were used to statistically test the data. Data collected by the researcher was analyzed in line with the mixed method employed. According to the demands of each methodology, data were presented in both quantitative and qualitative forms. The qualitative methods were used to provide more insight about the quantitative data.

#### RESPONSE RATE

A total of 620 copies of the questionnaire were distributed. Out of 135 copies of the questionnaire distributed to the commercial bus drivers in Abia State, 134 were returned and 1 was lost. In Anambra State, out of 110 copies distributed, 110 were returned and none was lost. In Ebonyi, 130 copies were distributed, 129 were returned and 1 was lost. In Enugu, 120 copies were distributed, all were returned. In Imo State, 125 copies were distributed, all were returned. The overall return rate was 618 copies of the questionnaire and these were useful to the study.

**TABLE 3: Respondents' Awareness of the Campaign on Cigarette Packs**



The data in Table 3 shows that 77% (N = 477) of the respondents under study were not aware of the campaign message on the cigarette packs. This is an indication that most of the respondents were ignorant of the caveat "Smokers are Liable to Die Young" which adorns all cigarette packs sold in Nigeria. Respondents who have knowledge of the campaign were few at 23% (N=141)

**TABLE4: Relationship between Awareness of Campaign Message on Cigarette Packs and Education**

Respondents' Response	Educational Qualification							Total
	First Degree	'O/A' Level	FSCl	None	Junior WAEC	HND/NCE	OND	
No	143	160	62	22	8	31	39	465
Yes	6	39	27	58	6	17	0	153
Total	149	199	89	80	14	48	39	618

X = 157.625; diff 6; p < .000

The relationship found in this table suggested overall that most respondents were not aware of the campaign message on the cigarette packs and this was predominant among respondents with 'O/A' Level Certificate. The picture in the table above suggests a significant relationship between respondents' low level of awareness of campaign on cigarette packs and respondents' with 'O/A' Level.

**TABLE 5: Relationship between Awareness of Campaign Message on Cigarette Packs and Age**

Respondents' Response	Respondents Age					Total
	21-30 years	31-40 years	41-50 years	51-60 years	61 and above	
No	103	139	162	43	16	463
Yes	26	24	61	18	26	155
Total	129	163	223	30	42	618

X = 14.217; diff 5; P < .01

The table above shows a relationship which suggests that most respondents who were not aware of the campaign message on the cigarette packs comes from respondents within 41-50 years of age. The table also shows that respondents who were aware of the campaign message come from the same age bracket.

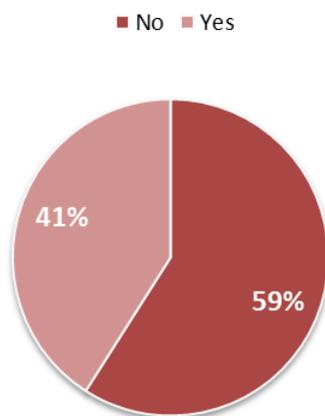
**TABLE 6: Relationship between Awareness of Campaign Message on Cigarette Packs and Marital Status.**

Responses	Marital Status			Total
	Single	Married	Divorced	
No	204	239	22	465
Yes	54	75	24	153
Total	258	314	46	618

X = 5.712; diff. 2; p < .05

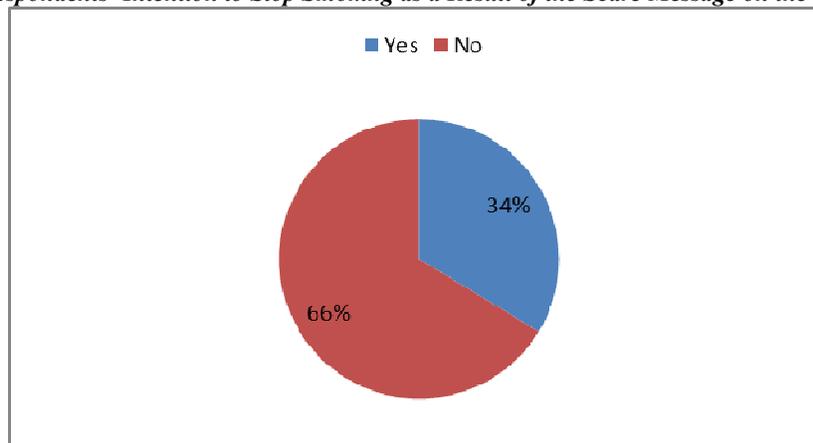
Data from the table above shows that most of the respondents were not aware of the campaign message on the cigarette packs and this comes from respondents that were married. This implies that there is a significant relationship between respondents who were married and non- awareness of the campaign message on the cigarette packs.

**TABLE 7 Respondents' Exposure to Campaign on Cigarette Packs**



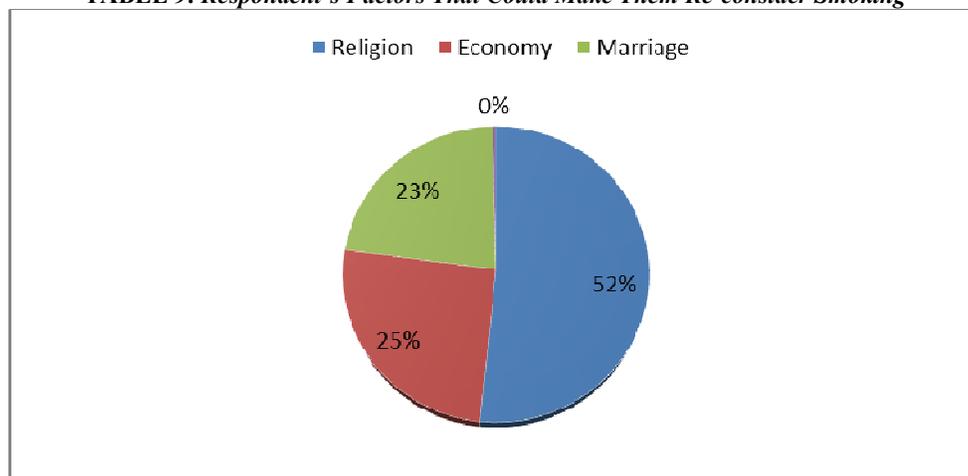
Data in the above table shows that 59% (N = 364) of the respondents under study have never taken time to read the anti-smoking campaign message on the cigarette packs while 41% (N = 254) says they have. It is believed that those respondents who do not buy cigarette in packets may not be exposed to the message on the cigarette packs.

**TABLE 8: Respondents' Intention to Stop Smoking as a Result of the Scare Message on the Cigarette Packs**



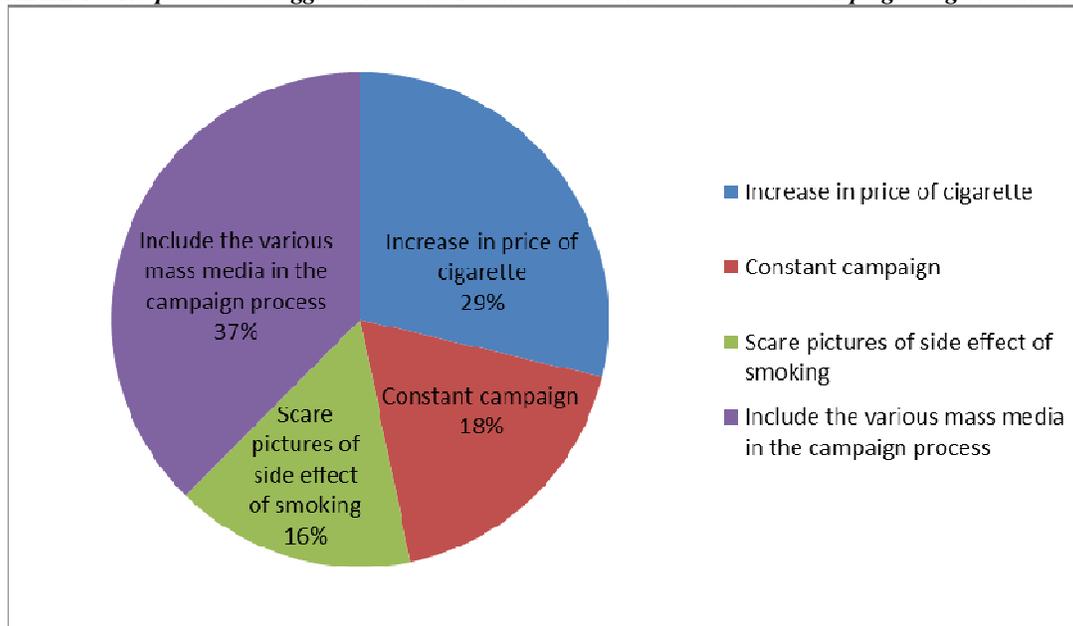
The data in Table 8 shows overall that most of the respondents about 66% (N = 411) do not have the intention to stop smoking irrespective of the scare message “Smokers Are Liable to Die Young” written on all cigarette packs sold in Nigeria. This is an indication that the scare message does not have any meaning to them or that they don't believe in the scare message. It is also worthy of note that those respondents who said they have intention to stop smoking as a result of the scare message were in the minority, about 34% (N = 207) of them.

**TABLE 9: Respondent's Factors That Could Make Them Re-consider Smoking**



Findings from the Table above shows that the respondents have other factors that could make them re-consider smoking. Religion has been seen to be a major factor that will make respondents re-consider smoking, about 52% (N = 320) of them. Other factors like Economy, Marriage were also seen to make some respondents re-consider smoking at 25% (N = 156) and 23% (N = 140) respectively. An insignificant percentage of the respondents 3% (N = 2) were of the opinion that they would not re-consider smoking on the basis of religion, economy or marriage. Data suggest overall that the above mentioned factors could be of help in the campaign process.

**TABLE 10: Respondents' Suggestions to the Federal Government towards the Campaign against Smoking**



Analysis from Table 10 shows that most of the respondents suggest that other mass media of communication be engaged in the campaign process about 37% (N = 233). Other suggestions were made like increase in price of cigarette 29% (N = 178), constant campaign 18% (N = 112), adding of scare pictures of side effects of smoking on the cigarette packs 16% (N = 95). Previously in this study we found out that the respondents make use of the different mass media of communication as information source and also that they have heard about the dangers of smoking from these other sources apart from the cigarette pack. Therefore, it will be needful for other media of communication to be adopted in the campaign process as suggested by the respondents.

**CONCLUSION:** This study found a low level of awareness, exposure and response of commercial bus drivers who smoke in South East Nigeria to the anti-smoking campaign message on the cigarette packs. It also found out that most commercial bus drivers are not in contact with the cigarette packs where the campaign message is written because most of them buy cigarette in sticks. This present study could be compared with previous study done by Thomson et al (2009) who are of the view that health related anti- smoking campaigns, always characterized by emphasis on the harms of a number of tobacco uses do help to increase peoples cognition, awareness and attitude towards smoking. They are also of the view that no evidence shows a significant relationship between their own campaign and smokers actual behavior change, especially quitting the habit.

Finally, statistical result indicates a weak relationship between the target audience and the level of awareness, exposure and response to the anti-smoking campaign message on the cigarette packs.

This study used selected survey questions to establish the level of awareness, exposure and response of commercial bus drivers to the anti-smoking campaign message on cigarette packs. The major findings of the study revealed that the awareness, exposure and response level of the target audience to the anti-smoking campaign on cigarette packs is low.

**RECOMMENDATIONS**

This study, first recommends that awareness level of the target audience be raised by constant campaign; this can be done by making use of every mass media of communication: television, radio, newspaper, magazine, and internet. e.t.c. in the campaign process, not just the cigarette packs.

Also, the study recommends that pictures of side effects of smoking should accompany the caveat “smokers are liable to die young” on cigarette packs. This will help to create fear on the target audience and the pictures and images will always remind them of the need to quit smoking. This has been done in Canada, Australia and America with maximum result (International Tobacco Control Policy Evaluation Project (2012) in a study with former smokers from Australia, Canada, the UK and the USA has shown that health warnings can reduce the odds of smoking relapse, because they may remind former smokers of the reasons they had for quitting).

Furthermore, religious leaders should be involved by the government as one of the stakeholders of this campaign. Since the target audience of this study says that of factors like economy, marriage and religion will

make them to re-consider smoking. There should be an aggressive campaign through the various religious leaders we have all over the country irrespective of denomination.

### SUGGESTIONS FOR FUTURE RESEARCH

Future research can examine many different areas based on the findings of this study. One area of study could be to identify the type of mass media (television, newspaper, magazine, internet, radio e.t.c.) which the target audience is mostly exposed to. This study found out that radio is the main source of news and information for the target audience. Future research can expand on it. Another area of study could be to identify factor among factors that can induce the respondents to re-consider smoking.

Beyond the commercial bus drivers in the Motor Parks, future research could focus on other groups like University students, Army personnel's, Medical personnel's, people who visit bars, hotels, restaurants and local joints among other groups. This will be with the aim of determining how aware, exposed and how they respond to anti-smoking campaign on cigarette packs. Previous research has used this group of people mainly on smoking dangers, prevalence and mass media anti-smoking campaigns.

Replication of this study could be conducted in other parts of Nigeria and beyond to consolidate the findings.

### LIMITATIONS OF STUDY

This research was not without limitations. The sample used limited generalization to the group involved. This necessitated the recommendation for further studies in other context.

Secondly, there was a misconception on the respondents about the real intention of the researcher who sought their opinion through questionnaire. This might have influenced some of the commercial bus drivers to turn in partially completed and uncompleted surveys. As a result, the questionnaire was completed by 618 commercial bus drivers. This was not considered appreciable enough to significantly jeopardize the outcome of the study.

Lastly, it could be said that there was a dearth of literature, because the study had little reviews on anti-smoking campaign on cigarette packs. What most researchers have studied is mainly on smoking dangers, prevalence and mass media campaigns against smoking.

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