

To cite this article: Wathiq Faraon, Firas A. Jassim, Sajjad S. Issa, Hiba Hadi and Malak Falih (2024). ASSESSMENT OF THE KNOWLEDGE OF NURSING COLLEGE STUDENTS ABOUT THE HARMFUL EFFECT OF PASSIVE SMOKING, International Journal of Education and Social Science Research (IJESSR) 7 (1): 65-75 Article No. 891, Sub Id 1388

## ASSESSMENT OF THE KNOWLEDGE OF NURSING COLLEGE STUDENTS ABOUT THE HARMFUL EFFECT OF PASSIVE SMOKING

Wathiq Faraon, Firas A. Jassim, Sajjad S. Issa, Hiba Hadi and Malak Falih

Phd Teacher department of basic science – college of nursing - university of Basrah

DOI: <https://doi.org/10.37500/IJESSR.2024.7108>

### ABSTRACT

**Background:** Smoking is a major public health problem worldwide. There have been thousands of studies investigating the impact of active smoking on health, the effects of passive smoking on health are not fully understood.

**Objectives:** To assess the knowledge of nursing college students about the harmful effect of passive smoking.

**Methodology:** A cross –sectional study designed to assess the knowledge of nursing college students about the harmful effect of passive smoking and the study was conducted using electronic forma which was distributed to the students electronically. Electronic convenient sampling technique was used. A total sample size was 150 students from University of Basra College of nursing all stages were involved in the study.

**Results:** our study showed that Residency 61.4 % were from Basra, 13.3 % from Dhiqar, 10 % from Babylon, 7.4 % from Baghdad, 6.6 % from Samawa and 1.3 % from Dyala. Age: 16 % were aged from 18 – 22, 80 % aged from 23 – 27 and 4 % aged from 28 and above. Stage: 22 % were in the first stage, 16 % were in the second stage, 18 were in the third stage and 44 % in the fourth stage. The study shit: 70 % of the sample were from the morning study and 30 % were from the evening study. knowledge according to questionnaire responses by the students: The students of college of nursing had good knowledge about the harmful effects of passive Smoking, where most items of the questionnaire were significant indicating the high level of knowledge.

**KEYWORDS:** Assessment, knowledge, nursing college students' harmful effect, passive smoking

### INTRODUCTION

Smoking is a major public health problem worldwide. There have been thousands of studies investigating the impact of active smoking on health, and the overall toxic effects of active smoking are generally recognized [1]. In comparison, the effects of passive smoking on health are not fully understood. Existing studies suggest that passive smoking and active smoking might equally increase the risk of certain diseases, such as female breast cancer [2], allergic rhinitis, allergic dermatitis, and food allergy [3]. As early as 1928, Schooner suspected that inhalation of husband's smoke could

cause lung cancer among non-smoking wives [4]. Since then, a substantial body of research about environmental tobacco smoke and health has appeared [5]. But the impact of passive smoking on health remains largely inconclusive and has not been systematically summarized. Due to relatively small health risks associated with exposure to passive smoking, investigation of this issue requires large study sizes. Difficulties in measuring passive smoking and controlling various confounding factors further add to the uncertainty in any investigation of the effect of passive smoking. Consequently, a meta- analysis, pooling together individual original studies quantitatively, has played an important part in establishing the evidence about the health effects of passive smoking [5].

According to the WHO report on the Global tobacco epidemic 2011, tobacco use not only kills nearly 6 million people annually but also causes huge economic damage worldwide each year [6]. In Malaysia, more than 10,000 people die from smoking – related illness every year despite the fact that tobacco use is preventable [7]. If no urgent action is taken to reduce tobacco consumption, it is estimated that tobacco use related mortality will exceed one billion worldwide in the 21st century [8].

Second hand smoke (SHS) is inhalation of other people’s tobacco smoke. SHS is also commonly known as passive smoking,' environmental tobacco smoke and involuntary smoking. Inhaling SHS is an unavoidable consequence of being in a smoke-filled environment [9].

SHS is mixture of air- diluted side stream smoke from the burning tip of a cigarette, and the exhaled mainstream smoke exhaled by the smokers [10].

Mainstream smoke inhaled by a smoker contains over 4000 chemicals (both particles and gases), including chemical irritants and almost 70 carcinogens (cancer causing substances) [11]. Side stream is dangerous as whilst it has a similar composition to mainstream smoke, the concentrations of toxins and carcinogens are often much higher [12].

Over 11,000 people in the United Kingdom (UK) were estimated to have died as a result of SHS exposure in 2003 [13], SHS exposure is now widely recognized as a concern being raised for the health of children [14]. This is of great significance to adolescents, as using effective social interactions is essential for behavioral, emotional adaption and successful functioning. Children and adolescent socialization ability improve their communication skills and makes them more receptive to social influence, and grow better with good communication skills [15].

**OBJECTIVE OF THIS STUDY:**

To assess the knowledge of nursing college students about the harmful effect of passive smoking.

**METHODOLOGY:**

design of the study

A cross –sectional study designed to assess the knowledge of nursing college students about the harmful effect of passive smoking and the study was conducted using electronic forma which was distributed to the students electronically.

Electronic convenient sampling technique was used. A total sample size was 150 students from University of Basra College of nursing all stages were involved in the study.

The study was started at May 2020 to July 2020. 3\_2 setting and samples: sampling was used to select from student of college of nursing at university of Basra and for the morning and evening studies and for all academic levels.

The researcher developed the following tools for the study there are two parts of tool: part one demographic characteristics: It included age level of education and address part two questionnaires on the harmful effect of passive smoking which included 20 questions.

A three responses Likert scale has been used (YES, NO and Uncertain), the mean of scores for each item was calculated.

Statistical data analysis: using SPSS programv.26 for finding the results:

1- Frequency

2-Percentage

3-Mean of Scores

**RESULT AND DISCUSSION****Table 1 the distribution of the sample according to addresses**

Governorates	Frequencies	Percentages
Basra	92	61.4
Dhiqar	20	13.3
Babylon	15	10
Baghdad	11	7.4
Samawa	10	6.6
Dyala	2	1.3
Total	150	100

The table showed the distribution of the sample according to governorates, 61.4 % were from Basra, 13.3 % from Dhiqar, 10 % from Babylon, 7.4 % from Baghdad, 6.6 % from Samawa and 1.3 % from Dyala

**Table 2: the distribution of the sample according to age**

Age intervals	Frequencies	Percentages
18_22	24	16
23_27	120	80
28_ above	6	4
Total	150	100

The table showed that 16 % were aged from 18 – 22, 80 % aged from 23 – 27 and 4 % aged from 28 and above.

**Table 3 the distribution of the sample according to stages**

Stages	Frequencies	Percentage
Stage 1	33	22%
Stage 2	24	16%
Stage 3	27	18%
Stage4	66	44%
Total	150	100%

The table showed that 22 % were in the first stage, 16 % were in the second stage, 18 were in the third stage and 44 % in the fourth stage.

**Table 4 the distribution of the sample according to participation from morning and evening studies:**

Study	Frequencies	Percentages
Morning	105	70%
Evening	45	30%

The table showed that 70 % of the sample were from the morning study and 30 % were from the evening study.

**Table 5 the response to the questionnaire**

NO.	Items	Yes	No	Uncertain	MS
1	Cigarette contain more than 400 harmful substances.	46 (30.5%)	10 (7.3%)	94 (62.3%)	2.24
2	Passive smoking made disease worse for non-smoker.	130 (86.1%)	2(2%)	18 (11.9%)	2.85
3	Passive smoking	144(96%)	1(1%)	5(3%)	2.95

	affect the asthma more .				
4	Passive smoking causes digestive problems such as ulcer .	67 (4.4%)	31 (21.2%)	52 (34.4%)	2.24
5	Passive smoker exposed to the same problems as the actual smoker	77 (51%)	27 (18.5%)	46 (30.5%)	2.3
6	Passive smoking more dangerous in an enclosed environment.	142 (94%)	1 (1%)	7 (5%)	2.94

7	Passive smoking can lead to miscarriage in pregnant women.	71 (47.3%)	16 (10.7%)	63 (42%)	2.36
8	Passive smoking can lead to an ectopic pregnancy	19 (12.6%)	57 (34.4%)	74 (49%)	1.75
9	Passive smoking can increase the likelihood of underweight child	48 (31.8%)	38 (5.8%)	64 (42.4%)	2.06
10	Passive smoking can increase the probability of caesarian section birth.	48 (31.8%)	38 (25.8%)	64 (42.4%)	2.06
11	Passive smoking can lead to the irritation eye and nose in kids	113 (75.3%)	8 (5.7%)	29 (19.3%)	2.7

12	Passive smoking expose children to cancer.	92 (60.9%)	10 (7.3%)	48 (31.8%)	2.55
13	Passive smoking can cause sudden fetal death.	65 (43%)	23 (15.9%)	62 (41.1%)	2.28
14	Passive smoking can cause heart attacks in adults.	103 (68.2%)	3 (2.6%)	44 (29.1%)	2.66

15	Passive smoking put adults at risk of lung cancer.	119 (78.8%)	3 (2.4%)	28 (18.5%)	2.77
16	Passive smoking can lead to atherosclerosis in adults.	104 (68.9%)	3 (2.6%)	43 (28.5%)	2.67
17	Passive smoking increase heart attack.	98 (64.9%)	3 (2.6%)	49 (32.5%)	2.63
18	Passive smoking cause social problems between the smoker and the surroundings.	121 (80.1%)	6 (4.6%)	23 (15.2%)	2.76
19	Seeing an older smoker gives an incentive for children to smoke at an early age.	127 (84.1%)	6 (4.6%)	17 (11.3%)	2.8
20	Passive smoking can cause kidney failure for an non-smoker.	37 (24.5%)	45 (30.5%)	68 (45%)	1.94

The table showed the responses of the students to the questionnaire items regarding the harmful effects of passive smoking, a three responses Likert scale has been used (YES, NO and Uncertain), the mean of scores for each item was calculated. the results were as the following

First item (Cigarette contain more than 400 harmful substances.) showed significant level of knowledge for the students where the MS was 2.24.

Second item (Passive smoking made disease worse for non- smoker.) showed high significant level of knowledge for the students where the MS was 2.95.



Third item (Passive smoking affect the asthma more.) showed high significant level of knowledge for the students where the MS was 2.95.

Fourth item (Passive smoking causes digestive problems such as ulcer.) showed significant level of knowledge for the students where the MS was 2.24.

Fifth item (Passive smoker exposed to the same problems as the actual smoker) showed significant level of knowledge for the students where the MS was 2.3.

Sixth item (Passive smoking more dangerous in an enclosed environment.) showed high significant level of knowledge for the students where the MS was 2.95

Seventh item (Passive smoking can lead to miscarriage in pregnant women .) showed significant level of knowledge for the students where the MS was 2.36

Eighth item (Passive smoking can lead to an ectopic pregnancy) showed significant level of knowledge for the students where the MS was 1.75

Ninth item (Passive smoking can increase the likelihood of underweight child) showed significant level of knowledge for the students where the MS was 2.06

Tenth item (Passive smoking can increase the probability of caesarian section birth.) showed significant level of knowledge for the students where the MS was 2.06

Item 11 (Passive smoking can lead to the irritation eye and nose in kids) showed high significant level of knowledge for the students where the MS was 2.7

Item 12 (Passive smoking expose children to cancer.) showed high significant level of knowledge for the students where the MS was 2.55

Item 13 (Passive smoking can cause sudden fetal death.) showed significant level of knowledge for the students where the MS was 2.28

Item 14 (Passive smoking can cause heart attacks in adults.) showed high significant level of knowledge for the students where the MS was 2.66

Item 15 (Passive smoking put adults at risk of lung cancer.) showed high significant level of knowledge for the students where the MS was 2.77

Item 16 (Passive smoking can leads to atherosclerosis in adults.) showed high significant level of knowledge for the students where the MS was 2.67

Item 17 (Passive smoking increase heart attack.) showed high significant level of knowledge for the students where the MS was 2.76

Item 18 (Passive smoking cause social problems between the smoker and the surroundings) showed high significant level of knowledge for the students where the MS was 2.76

Item 19 (Seeing an older smoker gives an incentive for children to smoke at an early age.) showed high significant level of knowledge for the students where the MS was 2.8

Item 20 (Passive smoking can cause kidney failure for a non- smoker.) showed significant level of knowledge for the students where the MS was 1.92

### CONCLUSIONS:

The students of college of nursing had good knowledge about the harmful effects of passive Smoking, where most items of the questionnaire were significant indicating the high level of knowledge.

**Recommendations:**

Make an additional subject about the harm of smoking in general whether active or passive to the curriculum of college of nursing

**REFERENCES:**

- 1- AK EA, Gad dam S, Gunukula SK, Hoeing R, JaoudePA, Iran J. The effects of water pipe tobacco smoking on health outcomes: a systematic review. *International Journal of Epidemiology*. 2010; 39(3):834-57. Doi: 10.1093/ije/dyq002 PMID: 20207606
- 2- Sadri G, Mahout H. Passive or active smoking, which is more relevant to breast cancer. *Saudi medical journal*. 2007; 28(2): 254-8. Epub2007/02/03. PAMID: 17268706.
- 3- Saulyte J, Rregueira C, Montes-Martinez A, Khudyakov P, Takkouche B. Active or passive exposure to tobacco smoking and allergic rhinitis, allergic dermatitis, and food allergy in adults and children: a systematic review and meta-analysis. *PLoS medicine*. 2014; 11(3):e1001611. Epub 2014/03/13. Doi: 10.1371/journal.pmed .1001611 PMID:24618794; PubMed Central PMCID: PMC3949681.
- 4- Schooner E. Beitrag zur statistic und Klink der lungentumoren. *Journal of cancer research and clinical oncology*. 1928; 27(5): 436-50.
- 5- Smith GD. Effect of passive smoking on health. *Bmj*. 2003; 326(7398): 1048-9. PMID: 12750182.
- 6- World Health organization. WHO report on the Global Tobacco Epidemic, 2011: Warning about the dangers of Tobacco. Geneva: World Health Organization; 2011.
- 7- Institute for Public Health (IPH). Report of the Global Ault Tobacco Survey (GATS) Malaysia, 2011. Malaysia: Ministry of Health Malaysia; 2012.
- 8- World Health Organization. Report on the global tobacco epidemic, 2013: Enforcing Bans on Tobacco Advertising, Promotion and Sponsorship. Geneva: World Health Organization.
- 9- U.S. Department of Health and Human Services. The Health Consequences of Involuntary Exposure to Tobacco Smoke: A Report of the Surgeon General. Atlanta, GA: U.S. Department of Health and Human Services, Centers for Disease Control and Prevention, Coordinating Center for health promotion, National Center for Chronic Disease Prevention and Health Promotion, Office on Smoking and Health, 2006.
- 10- Fielding JE, Phenow KJ. Health effects of involuntary smoking. *New England Journal of Medicine*. 1988;319(22): 1452-60.
- 11- United States Environmental Protection Agency. Respiratory health effects of passive smoking; lung cancer and other disorders. EPA/600/6- 90/006F 1992.
- 12- Hoffmann D, Hoffmann I. Significance of exposure to side stream tobacco smoke. IARC scientific publications. 1987(81):3-10.
- 13- Jamrozik, K. Estimate of deaths attributable to passive smoking among UK adults: database analysis. *British Medical Journal*, 2005. 330:812-17.



- 14- Royal College of Physicians. Passive smoking and Children. A report of the Tobacco Advisory Group of the Royal College of Physicians. London: Royal college of Physicians; 2010.
- 15- Mahfoudh F. Hassan, Luay Abdulwahid Shihab, IAJPS 2018, NEGATIVE EFFECTS OF INTERNET ON INDEXES THE MANTEL HEALTH OF NURSING STUDENTS, <http://www.iajps.com>, 05 (04), 2360-2367.