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#### Introduction

Smoking may be appealing because it symbolizes a transgression of the prohibition.

However, when people started smoking during adolescence, it is more difficult to overcome, so the best solution is to never start or stop immediately. It is commonly believed that smoking affects the health of smokers only later in life, after many years of smoking or chewing tobacco. In fact, the negative health effects begin to occur shortly after the adoption of smoking.

The most serious danger of smoking is tobacco addiction (Greaves, 2002). Although the lack of research makes it difficult to say with certainty how quickly addiction to nicotine takes young smokers, existing indices suggest that most smokers and smokeless tobacco users become addicted before the end of adolescence. That dependence is a major concern because it makes almost impossible to give up smoking later, even if the smoker wants. This dependence increases the risk of developing smoking-related diseases and dying prematurely.

Smoking is immediately raised the heart rate and blood pressure. Smoking also increases the physical effects of stress on the body from other sources. Cigarette smoking has been associated with the onset and severity of atherosclerosis (hardening and thickening of the arteries with fatty degeneration) in men of 15 to 34 years. Smoking introduces carbon monoxide in the body and reduces the ability of blood to carry oxygen, and increases the resting heart rate and basal metabolism. These effects cancel out the benefits of endurance training in smokers. The effects of smoking on physical fitness are influenced by dose (Sloan, Smith & Taylor, 76). This

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means that the importance of consequences refers to the duration of smoking and amount smoked.

Smoking reduces ventilator function in smokers, which is clear evidence of damage to small airways of the lungs of smokers in the twenties. There is a correlation between smoking and increased rates of cough, phlegm, wheezing, colds and shortness of breath. Smoking aggravates the problems caused by asthma, and lung function abnormalities associated with smoking are more pronounced in asthmatics. It was found that asthma is more common among young people aged 11 to 16 who smoke and the evolution of this disease during childhood and early adulthood is less satisfactory in smokers (Mehta & Preston, 2012).

The most serious consequences of smoking are chronic and fatal diseases occur most often later in life, after longer periods of smoking and greater consumption (Pirie, 2012). However, many of these diseases occur when the smoker is very young, and are more likely to occur when started smoking early. The risk of lung cancer is much more severe in smokers who started smoking before the age of 20 than those who started later. The increase in risk is more closely related to the duration of smoking than the amount of tobacco consumed. Similarly, evidence suggests that the risk of dying from coronary heart disease is higher among smokers who started younger than those who started later.

Smoking is not only injurious for lungs, heart etc. but it also directly affects the smoker's physical appearance. Smoking alters the appearance of the skin, teeth and hair, among other things. Wrinkles and gray hairs are things that no one can escape but smoking accelerates this process. The bags under the eyes are classic among smokers. A possible explanation of this is that smokers sleep badly, are restless and that is evident in their physical appearance. Snuff

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smoke prevents facial skin breathe oxygen and nutrients such as vitamin C and carbon monoxide. This may cause wrinkled, dry, pale, emaciated, discolored and stained skin. Smoking not only affects the appearance of the face, but it also negatively affects the appearance of the body. The skin loses its own elasticity; some areas may begin to get limp and fall including the inner arms and breasts. The most visible sign in the mouth of a smoker are yellow teeth. Smokers tend to develop periodontal disease, gum problems, bad breath, tooth loss and mouth cancer. Baldness is also a consequence of smoking. Smoking is also one of the major causes of voice hoarseness or aphonia, a disorder which affects the vocal apparatus. It is the inability to transmit voice beyond a whisper.

There is clear evidence that smoking in adulthood is responsible for a progressive loss of lung function. Smoking during childhood may increase the risk of chronic obstructive pulmonary disease (e.g. Chronic bronchitis and emphysema) in adulthood. Abnormalities in lung function observed in adolescent smokers may be responsible for an increased risk of later suffering of chronic obstructive pulmonary disease.

Indeed, tobacco is responsible for about 5 million deaths each year worldwide, accounting for 8 people die every minute from smoking. Diseases caused by smoking appear with a delay of 20 to 40 years, epidemiologists may provide that it is 10 million deaths that are expected by 2030 at current rates (Forey et al., 2013). At a convention of the American Cancer Society with more than 20,000 cancer specialists in May 2003 in Chicago, John Seffrin stated with about: "Tobacco is the only weapon of mass destruction used against all peoples of the world". Tobacco kills especially in developing countries.

Reducing tobacco consumption should be the main priority for world leaders, who are trying to cope with the large and increasing number of deaths caused by non-communicable diseases (NCDs).

# Justification of Research

Many Chronic diseases which are responsible for two-thirds of deaths in the world are caused due to smoking. The proportion of smokers is increasing, particularly among women and young people in precarious situations. With policy combining education, practical and personalized assistance, strict control and systematic enforcement," the "United Kingdom has reduced nearly 10 points the level of tobacco consumption in 10 years, in from 30% to 20% of smokers in the general population. Smokers often feel guilty about smoking and avoid mentioning their respiratory problems to their doctor, such as wheezing, shortness of breath or cough, for fear of having to undergo another discourse on smoking cessation. Unfortunately, this is not a good reason to avoid a diagnosis that could explain these respiratory problems. What is important is to use appropriate treatment to feel better and enjoy life to the fullest.

Role of leaders is important in reducing tobacco consumption in UK. They can device comprehensive intervention plan and formulate multi-pronged strategy which may play a decisive role in reducing tobacco consumption which ultimately leads towards the reduced risk of chronic diseases and deaths associated with these diseases. It, therefore, opens room for more research regarding the role of leaders in reducing tobacco consumption. This will not only occur through increased knowledge about this subject, but also, through the development of new research areas by addressing research gaps that may emanate from this research, people are bound to benefit significantly from the research which will determine whether the use of

effective policy to prevent tobacco consumption as a strategy to reduce risk of chronic diseases or whether there should be other alternatives to be considered.

# Aim of the Study

The basic aim and purpose of this study is to establish that role of leaders is important in reducing the tobacco consumption in the UK. The aim is to establish the benefits and hurdles that are associated with devising effective policies for reducing tobacco consumption and thereby suggest best strategy for its implementation.

# Objectives of the Study

- To identify the risks related to smoking and tobacco consumption
- To discuss the advantages and hurdles faced by the leaders and governments in implementing effective policies to reduce tobacco consumption
- Identify and suggest the best strategy to implement an effective policy for reducing the risk of tobacco consumption
- To describe and discuss the impact of these policies and interventions on the overall health conditions and mortality rate of the country

### Research Questions

- Does Smoking really pose as severe danger as depicted by the statistics?
- What is the importance of the role of leaders in this regard?
- Are there any hurdles associated with the implementation of policies devised for reducing tobacco consumption? Are these impediments strong enough to discourage their implementation?

 What is the best strategy to implement an effective tobacco consumption reduction policy?

#### Literature Review

The industrial change in the mid of the eighteenth century introduced gradual changes in the mode of life of the people, their thinking and attitudes. It was not a change for good. Thomas Holmes proposed that all change is stressful because it forces people to adapt to new, unfamiliar circumstances (Holmes & Rahe, 1967). Holmes acknowledged that some changes require more adjustment than do others. Nevertheless, he believed that the change produced by positive life events as well as by negative ones is stressful and can damage a person's health. The era of material progress brought prosperity for many but it fell with a heavy hand on spiritual values in which all the noble emotions and values of humanity are enshrined. Feelings of social discomfort can arise from a number of sources. They can be a learned reaction of to unpleasant encounters, as social problems in the past contribute to social anxiety about the future.

The persons who excessively use tobacco feel social anxiety (Russel et al., 2004). The state of social anxiety is a momentary experience that flares up at a certain time or in a certain place, and then passes. The trait of social anxiety is more enduring: a characteristic of certain individuals that persists over time and across situations. For those chronically afflicted, their anxiety locks them into increasingly unpleasant social interactions. Such individuals tend to reject other people, perhaps because they fear being rejected themselves. They are withdrawn and ineffective in social interactions, perhaps because they perceive negative reactions even where there are none. In fact, however, other people often do react negatively to interactions with socially anxious individuals.

In the United Kingdom, an adult (16 +) are likely to smoke 5 cigarettes a day; among the smokers 21% are men and 20% are women. In England, 11% of young people aged 15 are regular smokers (Doll et al., 2004). Role of leaders are very important to formulate a strategy which may reduce the consumption of tobacco in UK. For this purpose they, first of all increase tobacco price. The price of cigarettes in UK has increased by over 200% between 1992 to 2011. Over the same period, sales of cigarettes fell by 51% while government revenues have increased by 44% through tobacco taxes. The prevalence of adult smoking has declined from 27% in 2000 to 20% in 2010.

Year	Increase in Tobacco Excise duty
1993- 1997	3% more than inflation
1998 - 2000	5% more than inflation
2001- 2008	Equal to Inflation
2009	2% more than inflation
2010	1% more than inflation
2011	2% more than inflation
2012	5% more than inflation

Source: Chambers, 2013

In the UK, cigarettes are subject to a specific tax and add valorem tax. The UK government has developed a system called "Tobacco tax escalator" that increases automatically tobacco taxes as a percentage of more than the rate of inflation. As a member of the European Union, total excise duties of UK should be at least 57% of the average price of weighted retail cigarettes. In 1993, the government established a system of higher tobacco taxes, i.e. 3% more

than the rate of inflation. In 1997, the percentage increases to 5% and then in 2001 the system is suppressed. Thus, introduces the tax increase to keep pace with inflation until 2008.

In 2009, tobacco taxes increased by 2% over the inflation. In 2010, the system was replaced with 1% higher than the rate of inflation fell to 2% in 2011 and 5% in 2012. Currently, the total tax (VAT included) is 82% of the price (Chaloupka & Warner, 2013). This increase in tobacco taxes in the UK affected UK tobacco industry also. The illicit trade has grown from a little less than 5% in the early 90s to 20% in 2000 (Cullum & Pissarides, 2004). The increase is largely due to the fact that tobacco smuggling promote their products. The industry excuse increased illegal trade.

In 2000, the government implemented a strategy to fight against smuggling, which was strengthened in 2006, 2008 and 2011. With this evolutionary strategy, illicit trade fell from 21% to about 9% in 2012 while taxes were increased. Thus, Cigarette sales fell 51%, from 85.7 billion cigarettes sold in 1992 to 42 million in 2011.

Research has shown that the prevalence of smoking among adults remained stable between 1994 and 2000 (Adda & Cornaglia, 2006). This prevalence has sharply declined from 2000 when important strategy in the fight against tobacco smuggling was introduced. The revenues of British Government have increased from 5.9 billion GBP to GBP 8.5 billion between 1992 and 2011 despite the decline of sales. Thus, to reduce the consumption of tobacco, the most effective method is to increase the price of tobacco products through increase in taxes on these products. Higher prices encourage consumers to stop using tobacco and deter potential consumers to start using tobacco.

Apart from that UK government has also taken some other steps to reduce the consumption of tobacco. For example, the British Ministry of Health announced that cigarette packs should be visible on the shelves of shops from 2012. Cigarette packs are longer be visible in shops in the UK. Packages may however be presented on visible displays of "temporary and in special circumstances. Smoking is undeniably one of the most important in the field of public health challenges, tobacco is responsible for the deaths of 80,000 people each year in the country.

British Parliament since 2006 voted to ban smoking in public places in England, including pubs, restaurants and private clubs, but also in offices and factories. 1 in 4 adults currently smoke, against 1 of 2 in 1974. Consumption has declined steadily, but tobacco still kills more than 100,000 people a year in Britain. In the 80s, Britain was the pioneer of warnings on cigarette packages and tax weapon to increase selling prices.

In the fight against smoking, all ideas are good to take. Imitating an initiative for several years by Canada, the United Kingdom was the first European country to impose cigarette manufacturers to apply photographs on cigarette packages. Accompanied by a health message now usual, these images are intended to "disgust" the smoking of cigarettes by imposing their vision of a lung oxidized by tobacco smoke, and even a "too young" dead man because of the cigarette. The effects of smoking on sexuality, aging skin, and fetal development are also part of the selected images.

In all, five images were selected by British health authorities, after consultation with the public. The British Minister for Health, said that warnings by the image are the last critical step in reducing the number of smokers. The initiative was welcomed by associations against cancer

el countries. These new posts started appearing on cigarette packets from autumn 2008 and on all tobacco-related products in 2009.

# Methodology

In this section we will be looking at the ways through the help of which the different steps involved in the research can be streamlined and can be put effectively into practice. At the same time it also helps in understanding and applying of different methodological principles which help the researcher to conduct the research of this particular study and use the steps that are necessary for it. With the help of all these salient features and steps and their subsequent implementation substantial credibility is added to the research on the whole.

It is important to mention here that the nature of methodology applied and used is dependent upon the kind of research that is conducted. The nature of methodological principles applied varies in terms from usage whether it is quantitative or qualitative and changes in methodology are incorporated accordingly (Bryman, 2008).

### Research Philosophy

The term 'research philosophy' is used as a collective term that denotes to all different research methodologies and belief systems that can be used and implemented when conducting the research and resolving different questions that comprise the integral part of research.

Different dimensions of research that are actually applied when conducting and fulfilling the different stages of research include axiology, epistemology and ontology (Malhotra & Burks, 2007). During the course of the different stages of research methodological principles related to the fundamentals of research will be complied and under the light of these research features different stages of methodology will be conducted.

### 1.3.2 Research Approach

The approach towards this approach will be the one that is applied to all different kind of researches. The researcher will focus upon the ways and procedures that are applied in research to study the behavioral responses and along with all other different phenomenon that continually confront and conform to the theoretical model that has been crafted for the conduction of the research. Validity in any research must be of constant concern to the research since it plays an important role in establishing credibility of a research but also in the reproduction of results that form the basis of research. However, in this context it is also important to understand and apply the research approach which is applied (Cooper & Schindler, 2003).

The nature of approach that will be applied for this research is in the form of deductive approach. Deductive approach is based on general statements and the logical conclusion derived on the basis of these statements (Eisehartdt, 2008). On the other hand, Inductive approach is the assessment applied based on the individual instances of life that respondents had experienced in the different phases of their life.

Strategy employed for the conduction of research is mainly influenced and dependent on the type of research which is being conducted, whether it is qualitative or quantitative. The principles and features that comprise the research nature of each type differ considerably. In qualitative research the strategy employed is mainly in the form of extracting information and response obtained from the feedback and opinions provided to people regarding an issue.

This particular research will be based on the qualitative nature of methodology which will be conducted on the basis of secondary research where the results have been deduced from secondary sources and other studies. In this research method, data is collected through secondary

sources. The researcher can form a result by reading and immersing into the collected data. Journals, periodicals, newspaper articles, magazines and e-zines are all of the primary sources that are used in the preparation of this report. This study utilizes deductive reasoning which requires that data collection and analytic processes be conducted in light with additional data. The analysis therefore occurs as an open step in conceptually interpreting the data set as a whole by using analytic strategies.

### Advantages of Secondary Research

Although there are many advantages of secondary research analysis but the most significant of them is ease of use. In previous times, researcher had to explore libraries and heaps of data for finding relative literature but now the Internet has made the life of researcher much easier. The researcher is now able to access the relevant data with much ease and convenience. This method of research analysis is much more economical as compared to the primary research. The researcher, with the help of secondary research method, can get access to the required data at no or very little cost. Thus, for student's level research it is the most preferable method because it is not possible for students to perform expensive research.

Secondary research analysis method also helps the researcher to clarify the research question. Secondary research is always used to clarify the focus of the research. Secondary research is less time consuming. Secondary research can be completed in just two to three weeks because there is lot of data available on almost every topic.

#### Limitations

As far as the limitations of secondary research method are concerned, the most important limitation is the quality of research. As the primary research is usually self-governed it is

important that it should be analyzed properly before using in secondary research. It is a matter of serious concern that the researcher must evaluate the validity and reliability of information used as a secondary research.

In some cases, if the topic is too unique, researcher may find it difficult to find proper material on the topic. In such cases the researcher has to rely on secondary data which is according to his need.

Sometimes it is difficult for the researcher to find the complete research free of cost because some researcher only provide the portions of their research for free and ask payment for the complete study.

It also happens frequently that researcher can find his relevant information in a research which is too old. Research for rapidly changing industries and topics require that the research must be up to date.

As the advantages of using secondary research is much more than its disadvantages, it is suggested that this study will use the method of secondary research after managing and reducing the disadvantages related to it.

#### Conclusion

This study explores the role of leaders in reducing tobacco consumption. This research promises to be of great importance in order to formulate effective strategy for less tobacco consumption. It will also contribute to research in academic circles through the information collected as well as the research gaps created during the research. The research will adopt

secondary research method .The completion of this study is expected to culminate in a well researched paper on role of leaders in reducing tobacco consumption.

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