

# Analytical report on smoking cigarettes essay examples

[Technology](#), [Development](#)



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## **Introduction**

Many people have fallen victims of cigarette smoking. Statistics have shown that it accounts for more than 400, 000 deaths per year in America, and nearly 100, 000 in the United Kingdom (West and Shiffman 18). As far as the global population is concerned, cigarette smoking accounts for the deaths of five million people per year. In the developed nations, cigarette-smoking accounts for 12-13% of life-years lost avoidably. Recent research has shown that a quarter of smokers who fail to stop the habit of cigarette smoking die an average of 20 years earlier than comparable non-smokers (Jiloha 41). This calls for good parenting skills to prevent children especially adolescents from indulging in cigarette smoking. Good parenting is essential in lowering the prevalence of the cigarette smoking as well as the socioeconomic effects of the habit in the community. Cigarette smoking has adverse effects especially on the people who start the habit/behavior at a tender age.

## **Cigarette smoking: A worldwide view**

Most people view smoking as a lifestyle, alongside the lack of exercise and unhealthy eating. However, cigarette smokers tend to become addictive due to the presence of significantly high levels of nicotine in the cigarettes. This realization has led to the establishment of health agencies or rather bodies that focus their attention on curbing the behavior especially among the addicted cigarette smokers. Although most interventions by health agencies and professional bodies help only a minority of smokers, they are expensive compared with other medical treatments and health benefits of stopping smoking are considerable (Viscusi 92). These interventions are therefore among the most expensive elements of any healthcare system. Most estimates of the cost per life-year saved by the established smoking cessation are between \$1000 and \$2000 (West and Shiffman 20). The large proportion of people who smoke cigarettes cause the overall intervention costs to be an economic burden to the community.

One of the most notable aspects about cigarette smoking is the composition of a puff of cigarette. All cigarettes deliver nicotine to the lungs. A puff of cigarette results in rapid absorption of nicotine in to the user's blood stream. This leads to a rapid delivery of a high-concentration mass or rather ' bolus' of nicotine to the brain by the arterial circulation (Jiloha 53). For every puff that the smoker takes, the process repeats itself. Other substances that a puff of cigarette delivers to the body include carbon monoxide, Benzo(a)pyrene, nitrosamines, additives, aromatic hydrocarbons, free radicals and polonium. Nicotine, the most important component of a cigarette is very addictive. The free radicals from the cigarette are ionized

particles that may cause atherogenesis while polonium is a radioactive element, which is also carcinogenic.

Many cigarette smokers, both men and women, choose the so-called 'light' or 'low-tar' brands since they believe that they have low quantities of tar and nicotine, according to the labels of such brands of cigarette, they deliver as little as a tenth of the tar and carbon dioxide of other brands.

Unfortunately, in fact the labeling is very misleading. Each smoker appears to have a preferred level of nicotine intake and always adjusts the way he or she smokes to achieve their level of satisfaction.

Once one begins smoking cigarette, he/she develops a certain pattern of the behavior. The majority of smokers smoke every day. In England, approximately 90% of adolescent smokers smoke daily (Brigham and Koop 15). In the U. S., the proportion of non-daily smokers has increased to around 25%. This is highest in the states, which has the lowest smoking prevalence as well as most active tobacco control policies. However, the application of various regulations that prevent smoking in indoor public areas have partly led to the increase in the prevalence of smoking. Another factor that has led to the increase of cigarette smoking especially among the adolescents and young adults is the social acceptability of smoking. West and Shiffman assert, " About 70% of smokers smoke their first cigarette of the day within 30 minutes of waking, relating to a high ' nicotine hunger'" (25).

### **The vulnerability of adolescents**

Teenagers are the most vulnerable group as far as cigarette smoking is concerned. In the U. S and the U. K, smoking commonly begin in individuals

ranging from thirteen to sixteen years of age (Brigham and Koop 18). Most of them indulge in cigarette smoking due to some complex reasons. One of the reasons is peer influence. Additionally, distant role models e. g. movie and music stars may influence the teens into the behavior due of the lack of rational thinking on the part of the teens (Diclemente et al. 102). Some traits in an individual determine the vulnerability of the person in question to smoking cigarettes. In many developed countries, people with an antisocial personality as well as lack of engagement with social values are more likely to take up smoking.

Evidence on the influence of parental smoking is not clear as it might be expected. Some research has suggested that the influence is not one of direct role models, but may be related to permissive attitude to smoking. However, there is also evidence that becoming a regular smoker is linked to genetic susceptibility. The heritability of take-up of regular smoking in most of the Western countries has been estimated at around 50% (Tate 65). These statistics are comparable to that for alcoholism.

Attitudes to smoking and beliefs about the risks and benefits of smoking are quite closely linked to smoking behavior in most young people in the world. However, interestingly, they are not particularly useful as predictors of smoking behavior. This suggests that either the attitudes and beliefs in question have little causal influence but, rather, fall into line with the behavior once it has started, or there is a rapid change just before the onset of smoking behavior. There may be a critical period during early adolescence when new attitudes and motivations are forming, which could in theory be targeted by social interventions aimed at reducing smoking uptake.

## **Effects of smoking**

Cigarette smoking is a cause of several psychiatric disorders. They include mood disorders, schizophrenia, as well as poly-substance abuse.

Poly-substance abuse is mostly associated with depressed adolescents. A lot of research has been carried out concerning this subject unveiling some of the most important issues concerning poly-substance abuse in adolescent male suffering from depression. The research has provided data on the prevalence of the disorder in young men, which has exhibited an increasing trend in the recent past (Diclemente et al. 115). Additionally, it has brought to people's attention the relationship between the two i. e. depression and poly-substance abuse in young-adolescents. Poly-substance abuse has also been found to differ depending on the level and severity of an individual's depression. It is widely thought that smoking cigarettes is particularly closely linked to schizophrenia, but the dominant factors are the severity of the psychiatric disorder and whether the patient is institutionalized.

Smokers are particularly likely to experience problems with drugs and alcohol. The link with alcohol abuse and alcoholism is particularly strong, leading some to suggest that heavy smokers should be screened for alcoholism. Similarly, although drug abuse is rare in absolute sense, heavy smokers tend to indulge in substance/drug abuse.

Cigarette smoking is also associated with criminality and some antisocial behavior. Adolescent smokers are more likely than non-smokers to engage in antisocial behavior, develop some antisocial attitudes besides to truant from school. In adulthood, there is a strong correlation between having a criminal conviction and being a smoker (Diclemente et al. 120).

Long-term smoking has disastrous effects on most body systems. In extreme cases, it leads to the death of the addicted smoker. Smoking also cause long-term disability, both in those that are eventually killed by the habit of cigarette smoking and those who ultimately die from other cause. The average smoker who fails to stop can expect to develop diseases of old age many years earlier than the non-smoker.

One of the major causes of death among cigarette smokers is lung cancer. In the U. S., the disease causes the death of 150, 000 people every year (Viscusi 101). Smoking cigarette is one of major causes of cancer, specifically lung cancer in many nations. Indeed, lung cancer was almost never seen before manufactured cigarettes became popular in the early 1900s (Ibid). Since then it has reached epidemic proportions. The risk of lung cancer is 15 times greater for a smoker than it is for a non-smoker (Tate 88). The average 20-cigarettes-per-day smoker dies ten years earlier and spends more of his or her life with disability than the average non-smoker.

## **Conclusion**

As discussed above, cigarette smoking begins at the teenage stage of development. Some of the effects of the behavior include the development of diseases such as cancer, a high cost of intervention to the victims, indulgence in poly-substance abuse and the development of antisocial behavior. For the children who have already started smoking cigarettes, parents should take all the necessary intervention measures to prevent their children from becoming nicotine addicts. This plays a pivotal role in enhancing the wellbeing of all the members of the community especially the

adolescents. It also lowers the economic burden of dealing with the effects of the cigarette smoking.

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