COMMUNITY-BASED PREVENTION AND CESSATION OF TOBACCO USE AMONG YOUNG ADOLESCENTS

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Abstract: Background: The present study has a comprehensive background provided by UMF, Romania and Davidson College, USA joint research, containing the conceptual model of the research and some preliminary results.

In our approach, we assume that smoking is a problem of adaptation as a form of activity, through which teenagers artificially seeks spiritual balance and reach positive feeling. Often the adolescents’ risk behavior is only a component, but it can become also a tool in the process of their search for identity.

The tobacco can be qualified as a psychoactive substance as cause’s changes in thinking, mood, emotion and even behavior. Therefore, smoking prevention must be a task for social and community units’ functions.

Objectives and methods: Our study on the prevention through community is based on the one hand on our experience in the study of addiction, and on the other hand on the analysis of the obtained preliminary data. The main goal it's not the communication of the quantitative results, instead we intend to formulate the theoretical conclusions that can be deriving from our analyses. We do this with the intention of providing to the young researchers the conceptual model and the research design, in order to be able to design their own research. Furthermore, we believe that only prevention programs that are adapted to the local conditions and socio-cultural environment will prove a relevant efficiency.

Conclusions: The cultural features differences of the target group should be considered in the prevention, by mobilizing those community resources which are rooted in the collectively shared desires, fears, daily practices, rituals, and values.

Keywords: smoking habits, attitude towards smoking (active - passive smokers), design of community-based prevention, conceptual model, multilevel planning

Theoretical background and conceptualization

In our approach, we assume that smoking is a problem of adaptation as a form of activity that artificially seeks spiritual balance and provides a positive feeling. Often the adolescents risk behavior is a component, but it can become also a tool in their search for identity.

The tobacco can be qualified as a psychoactive substance which causes changes in thinking, mood, emotion and even behavior (Demetrovics 2007). Thus, smoking prevention must be a task for social and community forums’ functions. Since smoking is related to the search for identity the prevention must involve the individuals’ family and community life as well (Albert-Lőrincz 2009). Recently, the role of community in identity forming was overshadowed; therefore we aim to develop this idea through our research.

In our approach we analyze the efficiency of the prevention systems through the examination of the individual in the context of its environment. We emphasize the importance of the persons' ethnic and socio-cultural living environment. At the same time, it is needed the striving to enhance the person's natural web of relations.
Since the social progression is a function of the young generation's skill of adaptation and mental health capital, we have to place a great accent on the prevention of deviant behavioral patterns. Prevention is none other than health development, the establishing of healthy lifestyle needs and practices (Huebner et al. 2004). Therefore, the prevention, even in the case of drug prevention, it is not just about drugs, but more propagates health as a value. Prevention assumes continuous, non-action, long-term activities which sub-goal is a drug-free life (Racz 2007). Giving adequate reasons and through commitment, we exercise influence on the young’ beliefs, targeting pro-health attitudes and positive health behavior.

In recent years, we noticed a change in the approaches related to the research of the drug consume problematic, and qualitative analyses received more place. In our work, besides empirical studies, we recourse to interviews, narrative analysis, the interviews contents’ analysis, that allow deeper and more information about the background factors of the phenomenon. Based on these we elaborated a systematic interpretation frame for explaining tobacco use in adolescence. The figure 1 represents our vision regarding those factors which determine the attitude and behavior under the influence of psychoactive substances.

**Figure 1. Operationalization of consumer behavior**

In our conception in prevention is always needed to be considered – as shown in the representation above – several dimensions with an impact. Effective prevention systems approach can be made only when the individual is examined in the context of its environment. The behavior is determined by the personality structure, the modality of the personal representations regarding the smoking, family influences, and by the reaction modality from the local communities toward the teenagers’ smoking.
In the light of our researches and bibliographical references we could summarize the steps of the elaboration of an efficient prevention program in the following points:

- starting problem (in what kind of ambience we deal with it, in what time-frame)
- determination of the target group
- evaluation of status and necessity
- the analysis of the health-protecting traditions of the local community and its integration into the program
- definition of goals (operationalization and the selection of indicators)
- the selection of the program and its adaptation to the local peculiarities
- budget, resources
- experts
- searching of cooperating partners in the local community
- the elaboration of the evaluation
- the implementation of the program
- evaluation (efficiency test)
- necessary changes and restart

**Recommended methods:**

- focus groups: to create possibility for a better understanding of the drug-related problems, for the discussion and understanding of experiences and to understand how these influence the behavior
- mass media analysis with the students, teachers (for instance, how the commercials influence us, what messages to TV-programs and movies promote)
- environment analysis: creation of the „problem-tree”, „objective-tree” about the problems and treatment possibilities which exist in our environment
- self discovering trainings, for example to identify the own natural needs
- skill-developing training.

A specific topic of the prevention programs is the verification and the study on the efficiency. The most comprehensive study of the drug-prevention programs among the adolescents has been realized by Tobler (cited by Rácz 2007). Rácz, based on Tobler considers that the main elements of the efficiency are the peer-group influence and interactivity.

As we presented above, our research team has a systematic vision regarding the drug consuming among teenagers. This vision is reflected in the conceptual models on which our research is based. In following we present the design and the research plan of the Romanian-American cooperative project.\(^1\) We do this with the intention of serving the young researchers who need to see the conceptual model, the research design to be able to design their own

\(^1\)Davidson College (USA) and University of Medicine and Pharmacy from Tg. Mureș just are starting a five-year project entitled “Building Capacity for Tobacco Research in Romania”. The entire project is composed by seven topics. The main goals are: 1. to study the smoking habits among children and teenagers from different communities, pregnant women, residents in social institutions, patients; 2. to implement school-based and community-based prevention and cessation programs; 3. to analyze the economic impact of smoking; 4. to apply air quality monitoring for SHS exposure; 5. policy advocacy.
research. We are positive that the success of a research depends on the stringency during the elaboration of the conceptual model of the study. Figure 2 represents those research dimensions that we are studying through questionnaires, interviews, and content analyses in this Romanian-American project.

**Figure 2. Conceptual model utilized in the investigation of attitude and behavior of adolescents regarding smoking**

In our research these dimensions are analyzed according the following steps.

- **Step 1.** We analyze attitudes toward smoking in different socio-economic, ethnic contexts;
- **Step 2.** We evaluate the opinion of the persons responsible to the education of adolescents (teachers, local decision-makers, parents). We examine of local communities: health protective traditions, community practices (people aged over 60 years).
- **Step 3.** Community prevention and school mental health
  - Actions in order to influence habits, patterns of behavior – value, opinion, behavior;
  - Coalition: health and social-services, churches, civil organizations;
  - Mass-media – mental health related messages communication;
  - Laws, regulations – local decision makers: town hall;
Creating health-friendly environment (smoke free);
School prevention programs and peer-support; counseling;
Cessation support;
Skill-development; training: self-knowledge – self-management; free-time activities;
Supporting the at risk groups.

This methodology was elaborated based on our experience of more then two decades related to the study of addiction, and on preliminary data provided by the Romanian-American research project.

The activities of the presented project circumscribe an integrated prevention plan. The integrated prevention presented by us is a value-transmitting, health-oriented, continuous strictly verified system of effects which is based on several scenes and several intervention possibilities. Its purpose is the maintenance of the total abstinence among the adolescents as long as possible, the elimination of drug-consumption, the avoiding of regular consumption. It requires the grounding in the childhood, the healthy socialization, supporting and developing attitude from the parents’ side, the positive peer-group effect, community relations, an independent life consolidated with firm values. The clear definition of the future social position, expectation and role-structure is necessary, and so are the problem-handling instruments, which can contribute to the responsible actions and relaxation. The satisfied psycho-social and mental necessities ensure efficiency, flexibility and control-ability for the individual. So will he/she be able to benefit of the health-preconditions offered by the society to cope with difficulties and challenges and to live a pleased, fulfilled life.

The novelty of our methodological approach

Regarding the research methodology we mention that the whole sample will contain around 1400-1500 teenagers, with age between 13-15 years, from different socio-economical and cultural-ethnical environments from Transylvania. The research was conducted on a random sample, stratified by community belonging teens. We used three criteria for sample selection:

- geographic area: Mures, Harghita, Cluj, Bihor, Covasna counties,
- social environment: district (central, peripheric), small city, village,
- ethnic: Romanian and Hungarian schools (in these are available Roma and other ethnic adolescents as well).

We are speaking about a cross-sectional study, the sample are pupils from the 7th and 8th grade of primary schools. Our research questions are:

✓ How does the local community influence the health behavior i.e. smoking habits of teenagers?
✓ How can transfer values between different generations?
✓ How to involve teens in community activity?

We assume that consumer habits and motivation of the specific consumption shows differences depending on the local community and that the prevention should be performed specifically differentiate.

The methodological approach is based on the knowledge of local community's custom order, of the self-defending rituals. The difficulty is that the healing traditions of the
community customs’ law, values, have gone into oblivion. Therefore, the first step in preventing is to bring to the surface those characteristics of the community which strengthen the sense of belonging, bring traditions to life. This requires that the person live, the more personal, family and community identity. The past and the present synthesis is required, and the continuity of the roots, the foundation of a sense of belonging, so that strengthen the feeling of perspective or to circumscribe vision. The characteristic sensitivity, perspective of attractive future exceeds the present difficulties. A community tradition, drawing on such situations in life, life lessons should be directed to the attention of adolescents, which promotes living their personalities unfold. As a first step it is necessary to reveal the community habits and looking for options for action, which can mobilize the resources of archetypal adolescents, lend themselves to the conditions of individualization (Jungian perception: initiation, sitting inside the hero, in contrast - shadow, anima-animus - balancing differentiation and autonomy) as a reality (Jung 1993). Thus, prevention is not taken place only in the classroom, but could be a natural part of life.

The central objective is the strengthening of the protective factors on the level of the individual, the family and community, which requires the creation of predisposing and allowing conditions. The individual should have a proper look on his life (knowledge, attitude) and should possess resources, the system of beliefs and the rules of his environment and the services must be health-focused.

The compensation of risk-factors includes – on the level of the individual, the family and the community – the insurance of the strengthening factors. It is not sufficient the elimination of the predictive factors, the strengthening is also important, the awarding of the positive health-behavior, on principle and practical level. Vitally important is the social responsibility, the investments for health-development, the community partnerships (Thornicroft, Tansella 2006).

In the case of efficient prevention programs the multilevel planning is absolutely necessary (Green, Ottoson 1994). The execution or implementation should have as starting point the idea that the health-development is a life-program. So the prevention should be as comprehensive as possible and should target the general well-being. It should mean universal improvement in the field of life quality, the compensation of risk factors and the strengthening of protecting factors and coping potential. In the same time it must be of a wide-spectrum ensuring the coping with stress, the self-esteem, the confrontation with negative feelings, the elaboration of the self-acceptance. In its methods it should encourage the environment-based approach, the modification of the micro and macro-environment. It should have an impact on the decision-makers, on the politicians (measures aiming health-preserving, well elaborated countrywide strategy), the media (what it commercializes and promotes, the alcohol should not be part of nice, exotic environment), on the education (mental hygienic attitude) should rely on individuals and should encourage to further researches.

The intervention aiming the compensation of risk-factors should target on micro level the individual or the family, on macro level the larger communities, the whole population. The compensation of risk-factors includes - on the level of the individual, the family and the community - the insurance of the strengthening factors. It is not sufficient the elimination of the predictive factors, the strengthening is also important, the awarding of the positive health-
behavior, on principle and practical level. Vitally important is the social responsibility, the investments for health-development, the community partnerships.

**Conclusion**

In present we are doing preliminary examinations, we only dispose the data provided by the pilot questionnaires (form 106 students), and information gathered through three focus groups formed by helpers (social workers and psychologists), regarding community based prevention.

The conceptual model and the community prevention presented in this study are based on almost two decades of our experience related to the addiction and the preliminary results of the Romanian - American project.

What has been outlined so far is that: one of the most important aspects of smoking prevention among adolescents is their empowerment through the actions of the local community and the multi-level tobacco control communication. This can be achieved through:

- **orientation**: it requires communication between generations and the transmission of traditions designed to develop health;
- **motivation**: satisfaction of basic needs, positive emotions, pro-social habits, getting involved in the community, values supply;
- **modeling**: modeling skills, offer pro-social behavior models, help in self-determination and in development of interpersonal skills.

**References**


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