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LEVEL OF EFFECTIVENESS OF ANTI-SMOKING ORDINANCE IN OZAMIZ CITY

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Research Article	ABSTRACT
Received: 17 May 2025	This study examined the implementation of the anti-smoking law and its
Revised: 31 May 2025 Accepted: 15 Jun 2025	impact on the barangays of Aguada, Tinago, and Baybay Triunfo in Ozamiz
Available: 30 Jun 2025	City. A validated researcher-developed questionnaire was employed to gather
	data from 90 individuals utilizing a quantitative descriptive approach. The
	study aimed to investigate the residents of the three barangays in Ozamiz City
Keywords:	and the efficacy of the law in that context. Most of the participants who
Anti-smoking ordinance smoking cessation	responded were young adults (14 to 24 years old), predominantly males, and
public Health	came from households with low incomes. The results also showed that
secondhand smoke	individuals thought the law worked to protect people from secondhand
	smoke, assist people to quit smoking, and support smoke-free areas. Statistics
	showed that people of different ages, genders, and socioeconomic
	backgrounds did not have very distinct ideas about what effectiveness meant.
© 2025 The Authors	The law has made significant progress, but issues such as cigarette litter and
published by Edukar Publishing	enforcement in sensitive areas persist. The study showed how crucial it is to
	enforce the law strictly, get the community involved, and give people
BY SA	individualized aid to quit smoking in order to improve public health.

INTRODUCTION

Smoking is still one of the significant dangers to public health, both around the world and in the United States. It starts with something easy, like breathing in cigarette smoke, but it can have significant health effects. Nicotine, a substance in tobacco that causes the brain to release dopamine, is what makes this addiction happen (Lee et al., 2014). However, this short-lived respite comes at a great price. According to the U.S. Department of Health and Human Services (USDHHS, 2006), smoking has been related to many ailments, including lung cancer, heart disease, and chronic respiratory disorders. Even people who do not smoke can get sick from secondhand smoke (World Health Organization [WHO], 2019). Even while smoking rates have gone down in certain places (Bergen & Caporaso, 1999), it is still a significant health problem, especially in places where enforcement and public education are still catching up. The good news is that quitting smoking is beneficial for your health both immediately and in the long term. This has made several governments work harder to prevent tobacco use.

The Philippines has implemented several legislation to keep people safe from the risks of tobacco. The Tobacco Regulation Act of 2003 (Republic Act No. 9211) and the Philippine Clean Air Act of 1999 (Republic Act No. 8749) are two of the most important. These national regulations make it illegal to smoke in public places and

limit tobacco marketing, especially in places where kids are likely to be. It is also up to local governments to do their share. City Ordinance No. 1063-14, often known as the "No Smoking of Ozamiz City," makes this duty clear in Ozamiz City. The goal of this policy is to make the area smoke-free by firmly prohibiting smoking in public, limiting access to tobacco goods, and stopping tobacco-related ads. However, as Asma et al. (2015) say, passing a law is only half the battle. The most important thing for success is getting the community involved. People are more likely to support and follow the rules when they feel like they have a say in making and enforcing them.

There are still problems to solve. The Philippine National Police says that about 50 persons are arrested for smoking each month in the barangays of Aguada, Tinago, and Baybay Triunfo in Ozamiz City. Patrols often keep an eye on these locations, which are close to the city center, although violations do happen. This prompts us to consider how effectively the law is being implemented and whether people are aware of it and adhering to it. Research from several nations suggests that smoke-free legislation can significantly decrease smoking prevalence and improve public health, contingent upon the clarity, consistency, and rigorous enforcement of the regulations (Fichtenberg & Glantz, 2002; Goodman et al., 2007; Pell et al., 2008). Enforcement and public education must be complementary(Joson & Yu, 2021) and anti-smoking efforts are most effective among students when local governments are actively enforcing the lawshile (Tupas, 2020). These data indicate that the efficacy of smoking prohibitions relies not solely on legislation but also on awareness, accountability, and community engagement.

This study aimed to gain a deeper understanding of how people in the selected barangays perceive the effectiveness of the anti-smoking law. The question still stands: Are the laws making a difference? Shahzad et al. (2020) assert that nations committed to international tobacco control accords, such as the WHO Framework Convention on Tobacco Control (FCTC), face substantial challenges in their implementation. Katanoda et al. (2014) stressed the need for a complete strategy that includes raising the price of cigarettes, making smoking indoors illegal, and changing the way people think about tobacco so that it is not seen as a normal commodity. Countries like Japan and China teach us that partial measures typically do not work, especially if they are not followed up on strongly. In the Philippines, creative municipal initiatives, such as Balanga City's one-of-a-kind law that makes it illegal to sell tobacco to those born after 2000, have demonstrated how focused, youth-centered policies can bring about lasting change (Tupas, 2020).

Statement of the Problem

The study aims to explore the level of effectiveness in the implementation. This study aims to answer the following questions:

- 1. What is the demographic profile of cigarette smokers in terms of:
 - 1.1. Age;
 - 1.2. Sex; and
 - 1.3. Socioeconomic status
- 2. What is the perceived level of effectiveness in the implementation of the anti-smoking ordinance?
- 3. Is there a significant difference in their perceived level of effectiveness in the implementation of the anti-smoking ordinance when grouped according to their demographic profile?

MATERIALS AND METHODS

This study utilized a quantitative descriptive design to collect data on the level of effectiveness. The research was classified as a descriptive design, with the goal of depicting the features and outlooks of a specific group of people—namely, cigarette smokers residing in Aguada, Tinago, and Baybay Triunfo, Ozamiz City. A descriptive design was suitable for this research study, which aimed to observe, describe, and record various components of a scenario in their natural state without altering any variables. The study was conducted in the three barangays of Ozamiz City, which are considered the top three locations with a significant number of smokers, according to data from the local government unit. The data indicated that each of the three barangays records approximately 50 smokers per day, which played a crucial role in the research setting as their interactions with the ordinance have an overall impact on the community.

Furthermore, these barangays had a diverse smoking population, with both younger and older residents engaging in the habit. The area is known for its active social life, where smoking often accompanies social gatherings,

making it a challenging habit to curb. Socioeconomic factor plays a role in smoking habits, with potentially higher smoking rates in lower-income households. Gender differences in smoking rates are also present, with men generally smoking more than women.

A researcher-made questionnaire was used to gather demographic information and assess the perceived level of effectiveness of the anti-smoking ordinance. The survey questionnaire consisted of two parts: Part one featured a demographic profile, and Part two comprised 24 questions about the respondents' perceptions of the implementation of the anti-smoking ordinance. To establish validity, the questionnaire underwent validation processes, including face validity, which the adviser assessed, and content validity, which a designated statistician evaluated. It was pilot-tested on 30 respondents and yielded a Cronbach's alpha of 0.879, indicating that the instrument was statistically reliable. The snowball sampling procedure was used to determine the respondents of the study.

RESULTS AND DISCUSSION

Profile of the Respondents

Table 1 presents the profile of the respondents in terms of age, sex, and socioeconomic status using frequency and percent distribution.

Profile Variables	Frequency	Percentage (n=90)	
Age			
Children (00-14 years)	11		
Youth (15-24 years)	73		
Children - Youth (00-24	84	93.3	
Adults (25-64 years)	6		
Seniors (65 years and over)	0		
Adults - Seniors (25-64+)	6	6.7	
Sex			
Male	75	83.3	
Female	15	16.7	
Social Economic Status			
PHP21,194 - 43,828 (Low Income)	87	96.7	
PHP43,828 - 76,669 (High Income)	3	3.3	
Total	90	100.00	

Table 1. Demographic Profile of Respondents in Terms of Age, Gender, and SES

The data shows that the majority of respondents are youth, with 93.3% of them aged 0-24 years and only 6.7% of adults aged 25 years and above. Young people start smoking to fit in with their friends or peer groups, and the availability of single-stick cigarettes makes smoking affordable and accessible for students and unemployed youth. This unequal age distribution highlights the need to prioritize younger demographics when implementing ordinances and assessing their impact. Young adults aged 18-29 are particularly susceptible to smoking initiation due to peer pressure, lifestyle trends, and the desire to conform to social norms (Centers for Disease Control and Prevention, 2012). Factors such as peer pressure, lifestyle trends, and accessibility to tobacco products contribute to the higher proportion of young smokers compared to adults in the area.

Men account for 83.3% of respondents, with females making up 16.7%. According to Tsai et al. (2008), the higher smoking prevalence among men is influenced by cultural, social, occupational, and psychological factors. Smoking is more accepted among men, while women face social stigma and health concerns that discourage them from picking up the habit (Ji et al., 2022; Merino et al., 2024). Cultural expectations around femininity, which often emphasize Health and appearance, may discourage women from smoking, as it can be seen as detrimental to both their physical Health and societal perceptions of beauty.

A substantial proportion of respondents (96.7%) belong to households with monthly incomes ranging from PHP 21,194 to PHP 43,828, while only 3.3% fall into the higher income bracket of PHP 43,828 to PHP 76,669. This aligns with the study by Hiscock et al. (2012), which revealed that lower-income individuals often face greater exposure to tobacco advertising, limited access to resources that promote smoking cessation, and financial

constraints that limit their ability to invest in healthier lifestyles or quit smoking aids, perpetuating the cycle of tobacco dependence. Overall, the data highlights the importance of focusing on younger demographics when implementing ordinances and evaluating their impact on smoking rates in the Philippines.

Perceived Level of Effectiveness in the Implementation of Anti-smoking Ordinance

The effectiveness of the anti-smoking ordinance in Ozamiz City is assessed in Table 2, which reveals its success in achieving its objectives and addressing smoking-related issues within the community.

Table 2. Effectiveness in implementation of anti-smoking in barangay Aguada, Tinago, and Baybay Triunfo

Indicators	Weighted Mean	Verbal Interpretation
Social gatherings have become more enjoyable for non-smokers because of the ordinance.	2.96	Effective
I believe that our community has been well-informed about the penalties for breaking the anti-smoking ordinance.	2.92	Effective
I am confident that I understand the specific rules and restrictions outlined in the anti-smoking ordinance.	2.89	Effective
I've found that my smoking habits have decreased as a result of the ordinance.	2.89	Effective
The ordinance has helped reduce respiratory issues among non-smokers in our community.	2.87	Effective
I've noticed a decrease in the number of people smoking near schools and playgrounds since the ordinance was implemented.	2.82	Effective
The ordinance has motivated me, or others I know, to cut back on smoking.	2.82	Effective
Since the anti-smoking ordinance was implemented, I've observed a decrease in public smoking in our community.	2.81	Effective
The anti-smoking ordinance has encouraged me, or others I know, to seek help or resources to quit smoking.	2.81	Effective
There has been a noticeable improvement in air quality in public places since the ordinance was implemented.	2.80	Effective
The ordinance has made more residents, including myself, aware of the health risks associated with smoking.	2.80	Effective
I believe the ordinance has been effective in discouraging teenagers and young adults from picking up smoking.	2.79	Effective
The ordinance has helped make social events more pleasant for non-smokers like me.	2.79	Effective
Pve seen an increase in health programs that focus on quitting smoking since the ordinance was passed.	2.78	Effective
I have observed law enforcement officials actively enforcing the anti-smoking ordinance.	2.76	Effective
The objectives of the anti-smoking ordinance are clear and understandable.	2.76	Effective
I have noticed efforts to educate our community about the anti-smoking ordinance through public awareness campaigns.	2.76	Effective
Public spaces have become more enjoyable for non-smokers like me because of the anti-smoking ordinance.	2.74	Effective
Thanks to the ordinance, designated smoking areas have been established in our community.		
I have noticed a decrease in cigarette butts and litter in public areas.	2.74	Effective

Average Weighted Mean	2.79	Effective
	2.54	Effective
I have noticed efforts to educate our community about the anti-smoking ordinance through public awareness campaigns.	2.68	Effective
The overall look of public spaces has improved, with less cigarette litter now visible.	2.70	Effective
Local businesses appear to be supportive of enforcing the anti-smoking ordinance.	2.72	Effective
I've seen an increase in health programs that focus on quitting smoking since the ordinance was passed.	2.72	Effective

Legend 1.00-1.75 Not effective at all 1.76-2.50 Slightly Ineffective 2.51-3.25 Effective 3.26-4.000 Extremely Effective

This indicator received the highest score: "Social gatherings have become more enjoyable for non-smokers because of the ordinance," with a mean of **2.96**, categorized as **Effective**. The high acceptance of smoke-free social settings strengthens support for anti-smoking laws, making enforcement easier. The high rating emphasizes the significant social benefits of the ordinance. Non-smokers now feel more comfortable in public and private gatherings, where better air quality enhances their overall experience. This improvement not only elevates the quality of social interactions but also helps normalize the expectation of smoke-free environments, promoting healthier public spaces. The findings align with research by Ulucanlar et al. (2016), which highlights the significant health benefits of reduced secondhand smoke exposure resulting from smoke-free laws. Moreover, changes in habitual smoking behaviors and social dynamics, as noted by Ritchie et al. (2009), demonstrate how the ordinance reshapes public norms and behaviors, thereby fostering a culture of health consciousness.

Furthermore, the ordinance's effectiveness in educating residents about penalties for violations is evident. Clear communication strategies and awareness campaigns have played a crucial role in fostering adherence to the regulations. Effective communication of benefits and penalties, such as smoking-related penalties, can reduce smoking-related mortality. The ordinance's focus on education and awareness promotes a well-informed community, enhancing trust and cooperation between the community and law enforcement. The Ozamiz City's "No Smoking Ordinance" has made some progress in reducing cigarette litter, but the issue persists. Strengthening community engagement is crucial for promoting cleaner public spaces. Initiatives like designated smoking litter control measures within anti-smoking laws can further support the ordinance's goals. Working together can lead to cleaner, healthier public spaces.

Despite the ordinance's overall effectiveness, the lowest-rated indicators highlight persistent challenges in enforcement, community engagement, and resource allocation. Issues such as cigarette litter, secondhand smoke exposure near sensitive areas, and insufficient cessation support indicate areas where further improvement is needed. Addressing these gaps is essential for maximizing the ordinance's long-term impact on public Health and environmental sustainability. For instance, persistent cigarette litter undermines the visual appeal of public spaces, necessitating targeted initiatives to address this issue. Moreover, the presence of smoke near schools and playgrounds poses a risk to vulnerable populations, emphasizing the need for stricter enforcement in these critical areas.

Table 3. Significant difference in Age, Sex, and SES in the perceived level of effectiveness in the implementation of the anti-smoking ordinance in barangay Aguada, Tinago, and Baybay *Age*

Pair of Variables	Mean Value	p-value	Mean Difference
Youth	-0.631	0.326	-0.130
Adult	-0.997	0.134	-0.160

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The data shows no significant difference in the perceived effectiveness of the anti-smoking ordinance across different age groups, including youth and adults. The results also indicate that age does not significantly impact individuals' perceptions of the ordinance's effectiveness, suggesting that everyone, regardless of age, is aware of the health risks associated with smoking and how the law benefits Public Health. In the study of Asbath (2024), anti-smoking campaigns had been an integral part of smoking prevention efforts among youth. There was a significant decrease in the number of students smoking after the implementation of the anti-smoking campaign, as well as increased awareness of the adverse effects of smoking.

According to the study by R. Secker-Walker et al. (2002), community-driven initiatives are effective in shaping perceptions of anti-smoking laws by addressing common concerns and fostering widespread awareness, regardless of sex. These initiatives create inclusive platforms that engage individuals of all sexes, emphasizing shared risks and benefits. Similarly, Lin et al. (2023) found that anti-smoking campaigns integrating cultural and contextual elements are effective in reaching diverse populations, ensuring that both sexes receive consistent messages about the dangers of smoking and the importance of cessation. These studies suggest that the universal design and implementation of many anti-smoking programs result in similar levels of awareness and compliance across genders, which may explain why sex or gender does not significantly influence perceptions of the effectiveness of these measures.

Pair of Variables	Mean Value	p-value	Mean Difference
Male	-0.181	0.558	-0.0700
Female	-1.286	0.074	-0.1201

The data highlights whether there is a significant difference in the perceived level of effectiveness in the implementation of the anti-smoking ordinance when grouped according to sex. The results show that, in terms of sex (male and female), one variable, the perceived level of effectiveness, has a p-value of 0.558. In contrast, the other variable, effectiveness, records a p-value of 0.074. Both p-values are greater than the threshold of 0.05, which is interpreted as "Not Significant." verbally. This suggests that there is no significant difference in the perceived level of effectiveness of the anti-smoking ordinance when grouped by gender.

Additionally, the findings revealed that sex does not significantly impact individuals' perceptions of the antismoking ordinance's effectiveness. Both males and females tend to share similar views regarding the ordinance, likely due to a shared understanding of the health hazards posed by smoking and the importance of regulations in protecting public Health. This similarity may reflect the success of public awareness campaigns and education efforts that highlight the risks of smoking across genders. Amanda Amos (2012) noted that global female tobacco use is increasingly complex due to factors such as tobacco marketing, globalization, and changes in women's societal roles. Tobacco control initiatives often lack gender-sensitive approaches, failing to address the unique challenges faced by women and girls, such as targeted advertising and secondhand smoke exposure. This highlights the need for tailored policies that incorporate gender-specific considerations to effectively address these disparities. In a study by Suriani et al. (2014), male smokers were found to hold negative opinions about national anti-smoking campaigns, which reduced the effectiveness of such initiatives in promoting quitting behaviors. This highlights the crucial role of perception in shaping behavior.

Furthermore, McQuoid et al. (2023) observed that gender-specific factors may not always significantly influence perceptions of tobacco control programs due to the universal awareness of smoking risks promoted by public health campaigns. Their findings suggest that the widespread implementation of culturally neutral and universally accessible anti-smoking initiatives has effectively reached both males and females, resulting in comparable levels of engagement and understanding. Similarly, Rethinking Tobacco Control: The Need for Gender-Responsiveness in Tobacco Control Measures (2023) argued that the common challenges faced by both genders in quitting smoking, such as addiction and health concerns, contribute to similar perceptions of anti-smoking

measures. These studies suggest that while gender-focused considerations may enhance campaign engagement, the broad nature of most tobacco control efforts ensures that gender differences do not significantly impact perceptions of their effectiveness. This universal approach likely accounts for the negligible influence of sex on opinions about smoking regulations.

Pair of Variables	Mean Value	p-value	Mean Difference
PHP21,194 - 43,828	-0.998	0.180	-0.2001
PHP43,828 - 76,669	-0.408	0.478	-0.0800

The data highlight whether there is a significant difference in the perceived level of effectiveness in implementing the anti-smoking ordinance when grouped by socioeconomic status. The results show that, in terms of socioeconomic status (Php 21,194–43,828 and Php 43,828–76,669), the variable "perceived level" has a p-value of 0.180, and the variable "effectiveness" has a p-value of 0.478. Since both p-values are greater than 0.05, they are interpreted as "Not Significant." This suggests that there is no significant difference in the perceived effectiveness of the anti-smoking ordinance across various socioeconomic groups. Individuals from different income brackets generally share similar perspectives on the ordinance's impact, suggesting that socioeconomic status does not significantly influence opinions about the anti-smoking policy.

Moreover, the findings indicate that individuals from low, middle, and high-income backgrounds equally recognize the health risks associated with smoking and understand the value of regulations aimed at curbing tobacco use. This uniformity in perception may be attributed to successful nationwide education campaigns and public health efforts designed to raise awareness about smoking's dangers and the benefits of anti-smoking measures for public Health. The widespread dissemination of information ensures that people across income levels are informed about the risks of tobacco use and the importance of laws that discourage smoking.

In another study, Dharmarajlu et al. (2024) emphasized the importance of tailored educational initiatives targeting vulnerable populations, including individuals with low family income and limited educational attainment. They argued that programs focused on enhancing knowledge about smoking's harmful effects could significantly reduce the prevalence of tobacco use and its associated health consequences. Hitchman et al. (2014) noted that socioeconomic status may not always be a significant factor in shaping perceptions of public health policies, such as anti-smoking ordinances, because awareness campaigns and public health initiatives often target all groups uniformly. Their research suggested that widespread educational efforts and technology-based interventions could help ensure that individuals across different income levels receive similar information and support, thereby minimizing disparities in awareness and perceptions. Similarly, Schoenaker et al. (2018) argued that community-driven smoking of the importance of anti-smoking regulations among diverse socioeconomic groups. This uniform exposure to public health messaging and resources may explain why differences in socioeconomic status do not significantly influence how people perceive the effectiveness of smoking policies. Collectively, these studies suggest that consistent public health efforts help bridge gaps in awareness and attitudes, resulting in comparable perceptions across all socioeconomic classes.

Conclusion and Recommendations

The results of this study indicate that the smoking bans in Barangays Aguada, Tinago, and Baybay Triunfo are highly beneficial to the community. People of all ages and colors think that the ban is a good way to keep the town smoke-free. The results indicate that significant progress has been made, but there is still more to be accomplished. Many of the people who answered were young men, which is a group that often needs more support. This highlights the importance of continuing to discuss these issues and establishing programs that genuinely engage with these communities, ensuring the law is effective. The research presents some compelling concepts for community-based initiatives that can enhance the efficacy of the law. Regular health education programs in the area keep the conversation going and teach people how bad smoking is for their health. The Philippine National Police and local health professionals can work together more effectively to ensure these rules are followed. Setting clear rules for people to follow and involving other community members in attempts to help them quit smoking can be beneficial. It's also very crucial to have good schools and institutions. As part of their health services, they can help people stop smoking and stay away from it. Students, particularly those studying crime, may conduct additional research on the impact of laws on community health and safety. Lastly, we need to learn more about what people who don't smoke think and how rules affect the health of the entire population. It's possible to create a smoke-free space if everyone works together and stays dedicated.

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Conflict of Interest

The authors declare that they have no conflict of interest in conducting this research.

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REFERENCES

Albert Bandura's Social Cognitive Theory. (2024). Simply Psychology.

Anderson, L., Ostrom, A. L., Corus, C., Fisk, R. P., Gallan, A. S., Giraldo, M., Mende, M., Mulder, M., Rayburn, S. W., Rosenbaum, M. S., Shirahada, K., & Williams, J. D. (2012). Transformative service research: An agenda for the future. Journal of Business Research, 66(8), 1203–1210.

Asma S, Mackay J, Song SY, Zhao L, Morton J, Palipudi KM, et al., The GATS Atlas. 2015. CDC Foundation, Atlanta, GA.

Arvin A Maceda. "Constitutionality of Local Tobacco Regulation: An Analysis of the Case of Philippine Tobacco Institute VS. City of Balanga". EC Pulmonology and Respiratory Medicine 11.5 (2022): 38–47.

Bafunno, D., Catino, A., Lamorgese, V., Del Bene, G., Longo, V., Montrone, M., Pesola, F., Pizzutilo, P., Cassiano, S., Mastrandrea, A., Ricci, D., Petrillo, P., Varesano, N., Zacheo, A., & Galetta, D. (2020). Impact of tobacco control interventions on smoking initiation, cessation, and prevalence: a systematic review. Journal of Thoracic Disease, 12(7), 3844–3856.

Batacandolo, P. R. B., Casa, H. L. E., Villanueva, M. D., Anabo, F. D., Ada, J. K. A., & Balbino, M. a. A. (2024). Community awareness and compliance to the municipal ordinances in the first district of Capiz, western Visayas, Philippines. International Journal for Multidisciplinary Research, 6(5).

Baquilod, M. M., Segarra, A. B., Barcenas, G., Mercado, S. P., Rarick, J., Palipudi, K. M., Asma, S., Andes, L. J., & Talley, B. (2013). Exposure to secondhand smoke among adults – Philippines, 2009. Global Health Promotion, 23(2_suppl), 48–57.

Bergen, A. W., & Caporaso, N. (1999). Cigarette Smoking. Journal of the National Cancer Institute, 91(16), 1365–1375.

Centers for Disease Control and Prevention (US). (2012). Social, environmental, cognitive, and genetic influences on the use of tobacco among youth. Preventing Tobacco Use Among Youth and Young Adults - NCBI Bookshelf.

Chirico, F., & Da Silva, J. A. T. (2023). Evidence-Based policies in Public Health to address COVID-19 vaccine hesitancy. Future Virology, 18(4), 261–273.

Chung, W., Lim, S., & Lee, S. (2010). Factors influencing gender differences in smoking and their separate contributions: Evidence from South Korea. Social Science & Medicine, 70(12), 1966–1973.

Chaloupka, F., & Warner, K. (1999). The Economics of Smoking.

Current Cigarette Smoking Among Adults in the United States. (2023). Centers for Disease Control and Prevention.

Deshpande, A., Kudtarkar, P., Dhaware, D., & Chowgule, R. (2010). Study of secondhand smoke levels pre and post implementation of the comprehensive smoking ban in Mumbai. Indian Journal of Community Medicine/Indian Journal of Community Medicine, 35(3), 409.

Epsyke, R. (2020). Enforcement of the Tobacco Regulation Act in the Philippines: An analysis of compliance and penalties. Philippine Journal of Health Policy and Management, 28(3), 215–228.

Farrelly, M. C., Davis, K. C., Haviland, M. L., Messeri, P., & Healton, C. G. (2005). Evidence of a Dose-Response Relationship Between "Truth" Anti-smoking Ads and Youth Smoking Prevalence. American Journal of Public Health, 95(3), 425–431.

Fernández, E., Schiaffino, A., García, M., Borràs, J. M., & Nebot, M. (2006). Smoking initiation and cessation by gender and educational level in Catalonia, Spain. Preventive Medicine, 43(2), 196-201.

Fichtenberg, C. M. (2002). Effect of smoke-free workplaces on smoking behaviour: systematic review. BMJ. British Medical Journal, 325(7357), 188.

Gallus, S., Schiaffino, A., La Vecchia, C., Townsend, J., & Fernandez, E. (2011). Price and cigarette consumption in Europe. Tobacco Control, 20(1), 36-41.

Golden, S. D., & Earp, J. A. L. (2012). Social Ecological Approaches to Individuals and Their Contexts. Health Education & Behavior, 39(3), 364–372.

Goodman, P. G., Haw, S., Kabir, Z., & Clancy, L. (2009). Are there health benefits associated with comprehensive smoke-free laws? International Journal of Public Health, 54(6), 367–378.

Gubner, N. R., Williams, D. D., Le, T., Garcia, W., Vijayaraghavan, M., & Guydish, J. (2019). Smoking-related outcomes before and after implementation of tobacco-free grounds in residential substance use disorder treatment programs. Drug and Alcohol Dependence, 197, 8–14.

Hayes, A. (2024, June 19). Demographics: How to collect, analyze, and use demographic data. Investopedia.

Health Effects of Cigarette Smoking. (2022, August 19). Centers for Disease Control and Prevention.

Hitchman, S. C., Fong, G. T., Zanna, M. P., Thrasher, J. F., Chung-Hall, J., & Siahpush, M. (2014). Socioeconomic status and smokers' number of smoking friends: Findings from the International Tobacco Control (ITC) Four Country Survey. Drug and Alcohol Dependence, 143, 158–166.

Hitchman, S. C., Fong, G. T., Zanna, M. P., Thrasher, J. F., Chung-Hall, J., & Siahpush, M. (2014). Socioeconomic status and smokers' number of smoking friends: Findings from the International Tobacco Control (ITC) Four Country Survey. Drug and Alcohol Dependence, 143, 158–166.

Holroyd, T. A., Oloko, O. K., Salmon, D. A., Omer, S. B., & Limaye, R. J. (2020). Communicating recommendations in public health emergencies: The role of public health authorities. Health Security, 18(1), 21–28.

Hyland, A., Barnoya, J., & Corral, J. E. (2012). Smoke-free air policies: past, present and future. Tobacco Control, 21(2), 154–161.

Ji, Y., Zhang, Y., Yun, Q., & Chang, C. (2022). Gender differences in social environmental changes associated with smoking: a cross-sectional study from Chinese internal migrants. BMJ Open, 12(11), e058097.

Jha, P. (2020). The hazards of smoking and the benefits of cessation: A critical summation of the epidemiological evidence in high-income countries. eLife, 9.

Katanoda, K., Marugame, T., Saika, K., Satoh, H., Tajima, K., Suzuki, T., Tamakoshi, A., Tsugane, S., & Sobue, T. (2008). Population Attributable Fraction of Mortality Associated with Tobacco Smoking in Japan: A Pooled Analysis of Three Large-scale Cohort Studies. Journal of Epidemiology, 18(6), 251–264.

Kaur, J., & Jain, D. C. (2011b). Tobacco control policies in India: implementation and challenges. Indian Journal of Public Health, 55(3), 220.

Laaksonen, M., Rahkonen, O., Karvonen, S., & Lahelma, E. (2005). Socioeconomic status and smoking: analyzing inequalities with multiple indicators. European Journal of Public Health, 15(3), 262-269.

Lee, H. A., Park, H., Kim, H., & Jung-Choi, K. (2014). Effect of local anti-smoking ordinance enforcement on male smoking rate: Using data from the Community Health Survey. Epidemiology and Health, e2014037.

Lightwood, J. M., & Glantz, S. A. (2009). Declines in Acute Myocardial Infarction After Smoke-Free Laws and Individual Risk Attributable to Secondhand Smoke. Circulation, 120(14), 1373–1379.

Lin, M., Chu, M., Li, X., Ma, H., Fang, Z., Mao, L., Wang, P., Chen, T., & Chiang, Y. (2023). Factors influencing adolescent experimental and current smoking behaviors based on social cognitive theory: A cross-sectional study in Xiamen. Frontiers in Public Health, 11.

Lv, J., Su, M., Hong, Z., Zhang, T., Huang, X., Wang, B., & Li, L. (2011b). Implementation of the WHO Framework Convention on Tobacco Control in mainland China. Tobacco Control, 20(4), 309–314.

Maceda, J. (2022). The City Government of Balanga's tobacco control ordinance: A step towards a healthier future. Philippine Journal of Health Research and Development, 34(2), 56–59.

McNeill, A., Gravely, S., Hitchman, S. C., Bauld, L., Hammond, D., & Hartmann-Boyce, J. (2017). Tobacco packaging design for reducing tobacco use. Cochrane Library, 2017(4).

McQuoid, J., Durazo, A., Mooney, E., Heffner, J. L., Tan, A. S. L., Kong, A. Y., Clifton, S., & Horn, E. (2023). Tobacco cessation and prevention Interventions for Sexual and/or Gender Minority-Identified People and the theories that underpin them: A scoping review. Nicotine & Tobacco Research, 25(6), 1065–1073.

Meijer, M., Röhl, J. E., Bloomfield, K., & Grittner, U. (2016). Do smoking friends hinder smoking cessation in adulthood? Results from a longitudinal study. Addiction, 111(5), 938–945.

Merino, M., Tornero-Aguilera, J. F., Rubio-Zarapuz, A., Villanueva-Tobaldo, C. V., Martín-Rodríguez, A., & Clemente-Suárez, V. J. (2024). Body Perceptions and Psychological Well-Being: A Review of the Impact of Social Media and Physical Measurements on Self-Esteem and Mental Health with a Focus on Body Image Satisfaction and Its Relationship with Cultural and Gender Factors. Healthcare, 12(14), 1396.

Noar, S. M., Benac, C. N., & Harris, M. S. (2007). Does tailoring matter? A meta-analytic review of tailored print health behavior change interventions. Psychological Bulletin, 133(4), 673–693.

Pell, J. P., Haw, S., Cobbe, S., Newby, D. E., Pell, A. C., Fischbacher, C., McConnachie, A., Pringle, S., Murdoch, D., Dunn, F., Oldroyd, K., MacIntyre, P., O'Rourke, B., & Borland, W. (2008). Smoke-free Legislation and Hospitalizations for Acute Coronary Syndrome. New England Journal of Medicine/~the œNew England Journal of Medicine, 359(5), 482–491.

Pisinger, C., Vestbo, J., Borch-Johnsen, K., & Jørgensen, T. (2011). It is possible to help smokers in the lower social classes to quit. Preventive Medicine, 52(1), 25-27.

Physical Activity and Exercise During Pregnancy and the Postpartum Period. (n.d.). ACOG.

Reid, J. L., Hammond, D., & Boudreau, C. (2010). Socioeconomic disparities in quit intentions, quit attempts, and smoking abstinence among young adult smokers in Canada. Nicotine & Tobacco Research, 12(10), 977–986.

Reitsma, M. B., Flor, L. S., Mullany, E. C., Gupta, V., Hay, S. I., & Gakidou, E. (2021). Spatial, temporal, and demographic patterns in the prevalence of smoking tobacco use and initiation among young people in 204 countries and territories, 1990–2019. The Lancet Public Health, 6(7), e472–e481.

(2017, May 16). Executive Order No. 26: Providing for the establishment of smoke-free environments in public and enclosed places (EO No. 26, s. 2017).

Rethinking Tobacco Control: The Need for Gender-Responsiveness in Tobacco Control Measures. (2023, December 6). United Nations University.

Sato, H. (1999). Policy and politics of smoking control in Japan. Social Science & Medicine, 49(5), 581-600.

Schoenaker, D. A. J. M., Brennan, E., Wakefield, M. A., & Durkin, S. J. (2018). Anti-smoking social norms are associated with increased cessation behaviors among lower and higher socioeconomic status smokers: A population-based cohort study. PLoS ONE, 13(12), e0208950.

Secker-Walker, R., Gnich, W., Platt, S., & Lancaster, T. (2002). Community interventions for reducing smoking among adults. Cochrane Library.

Shahzad, M., Shah, A., & Chaloupka, F. J. (2020, December 30). Tobacco Control Laws of South Asian Countries: A Quantitative-Comparative Analysis of Compliance with FCTC and their Effects on Smoking Prevalence.

Sobue, T. (2017). Tobacco control policy in Japan: Historical development and challenges. Japanese Journal of Cancer Research, 108(5), 1029–1034.

Tanigaki, J., & Poudyal, H. (2019). Challenges and opportunities for greater tobacco control in Japan. [~]the œInternational Journal of Drug Policy/International Journal on Drug Policy, 70, 78–86.

Taylor, G., McNeill, A., Girling, A., Farley, A., Lindson-Hawley, N., & Aveyard, P. (2014). Change in mental Health after smoking cessation: systematic review and meta-analysis. BMJ, 348(feb13 1), g1151.

Theory at a Glance – A Guide For Health Promotion Practice (Second Edition) | Demand Generation I-Kit for Underutilized, Life-Saving Commodities. (n.d.-b).

The Health Consequences of Involuntary Exposure to Tobacco Smoke: A Report of the Surgeon General. (2006). PubMed.

Tobacco Control in the Philippines. (2021b, April 14). The Union.

Tsai, Y., Tsai, T., Yang, C., & Kuo, K. N. (2008b). Gender differences in smoking behaviors in an Asian population. Journal of Women S Health, 17(6), 971–978.

Tupas, F. P., & Agreda, I. V. (2020). How to Stop Before It Starts: The Case of an Anti-Smoking Campaign for High Schools in the Philippines. Journal of Educational and Social Research, 10(3), 85.

Ulucanlar, S., Fooks, G. J., & Gilmore, A. B. (2016). The Policy Dystopia Model: An Interpretive analysis of tobacco industry political activity. PLoS Medicine, 13(9), e1002125.

Van Der Deen, F. S., Wilson, N., Cleghorn, C. L., Kvizhinadze, G., Cobiac, L. J., Nghiem, N., & Blakely, T. (2017). Impact of five tobacco endgame strategies on future smoking prevalence, population health, and health system costs: two modeling studies to inform the tobacco endgame. Tobacco Control, 27(3), 278–286.

Wakefield, M. A. (2000). Effect of restrictions on smoking at home, at school, and in public places on teenage smoking: cross-sectional study. BMJ. British Medical Journal, 321(7257), 333–337.

Waller, G., Finch, T., Giles, E. L., & Newbury-Birch, D. (2017). Exploring the factors affecting the implementation of tobacco and substance use interventions within a secondary school setting: a systematic review. Implementation Science, 12(1).

Wetter, D. W., Cofta-Gunn, L., Irvin, J. E., Fouladi, R. T., Wright, K., Daza, P., Mazas, C., Cinciripini, P. M., & Gritz, E. R. (2005). What accounts for the association between education and smoking cessation? Preventive Medicine, 40(4), 452–460.

Yamada, K., Mori, N., Kashiwabara, M., Yasuda, S., Horie, R., Yamato, H., GarÇOn, L., & Armada, F. (2015). Industry speed bumps on local tobacco control in Japan? The case of Hyogo. Journal of Epidemiology, 25(7), 496–504.

Yokoyama, A., Iwata, Y., Oe, N., & Tadaka, E. (2024). Gender analysis of stress and smoking behavior: a survey of young adults in Japan. Social Sciences, 13(3), 128.