

Parental Involvement, Parenting Style and Peer Pressure as Determinants of Adolescents' Attitude Towards Cigarette Smoking

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Abstract

Cigarette smoking is an international public health problem that has been called the most preventable cause of death. There is therefore a need have a good understanding of why young people smoke and what factors play a significant role in their decisions to start smoking. This study examined the influence of parental involvement, peer pressure and parenting style on attitude towards cigarette smoking among in-school adolescents in Ibadan. This study adopted a cross-sectional survey design to accidentally sample 240 students from four randomly selected public secondary schools in Ibadan North Local Government using a questionnaire comprising validated scales measuring peer pressure, parenting style, parental involvement and cigarette smoking attitude. Respondents' age was 15.54 ± 2.41 years. Five hypotheses were formulated and tested at .05 level of significance. It was found that adolescents who have parents that are highly involved in their extra-curricular activities are more likely to develop a positive disposition towards the act of cigarette smoking ($t(211)=2.176; p<.05$); in-school adolescents who reported high peer pressure exhibited more positive attitudes towards cigarette smoking than adolescents who reported low peer pressure ($t(200)=8.782; p<.01$). Parenting styles had no significant influence on attitude towards cigarette smoking of in-school adolescents ($F(2,212)=.783; p>.05$). Parental involvement and parenting style interacted significantly to influence attitude towards cigarette smoking ($F(2,199)=3.138; p<.05$), such that in-school adolescents with highly involved and permissive parents had the most positive disposition to smoking while those with less involved and permissive parents had the most negative disposition to smoking. Gender did not differentiate attitude to smoking ($t(213)=.969; P>.05$). High involvement in an adolescent's life, permissive parenting and peer pressure are central to adolescents' formation of positive smoking attitudes. The study recommended that parents manage their involvement in their adolescents' life to reduce the adolescent's tendency to engage in reactance by desiring anti-social behaviours such as cigarette smoking.

Keywords: Cigarette Smoking, Parental Involvement, Parenting Style, Peer Pressure

Introduction

Statistics from the World Health Organization indicates that smoking kills nearly 6 million people each year, resulting in global economic losses totaling \$100 billion. Among one

billion smokers worldwide, 50% are young people who consume 6 trillion cigarettes per year (WHO, 2017). By 2020, it is estimated that 7 in 10 deaths from smoking will occur in Low and Middle Income Countries (LMICs). If current trends continue, WHO projected that tobacco will kill more than 8 million people worldwide annually by 2030 (WHO, 2017). Whereas, nearly 80% of all adult smokers is said to have begun smoking before their 18th birthday (Chown, Kang, Sanci, Newnham & Bennett, 2008). In High Income Countries (HICs), 8 in 10 smokers had their first cigarette during adolescence, and almost all smokers in LMICs have their first cigarette before their 20th birthday (Jha & Chaloupka, 2006). This pattern is said to have shifted toward early adolescence (Chown, et al, 2008).

Cigarette smoking is an international public health problem that has been called the most preventable cause of death. It is a significant health hazard that is related to increased morbidity and mortality in many chronic diseases, such as cardiovascular disease, cancer, and chronic obstructive pulmonary disease. Therefore, smoking prevention and cessation for young adults are important national health policies in many countries. However, most of the interventions for smoking have focused more on smokers in the action and maintenance phase of smoking, with little emphasis placed on non-smokers in the pre-contemplation, contemplation and preparation stages of smoking (e.g. Leem, Han, Ahn, Lee, Kim, Chun, Yoo, Jung, 2017 & Campbell, Bohanna, Swinbourne, Cadet-James, McKeown, & McDermott, 2013). It is believed that a focus on preventive intervention, rather than curative intervention may yield more positive outcomes in the long run. There is therefore a need to have a good understanding of why young people smoke and what factors play a significant role in their decisions to start smoking. This study tries to bridge this gap in literature by laying emphasis on parental involvement, parenting styles and

peer pressure as factors that may influence attitude towards smoking among in-school adolescents.

Several psychosocial factors contribute importantly to smoking initiation during adolescence (Chown, et al, 2008). These factors shape the adolescent's subjective social norms towards smoking and go a long way in determining their attitude and susceptibility towards smoking. Attitude towards smoking is defined as an individual's disposition towards smoking. The word 'disposition' describes an array of either positive or negative feelings that one might have towards an object or subject (Galanaki, 2013). Snell (2007) has researched the young smoking population and identified five stages of adolescent smoking. According to Snell, the first stage is attitudinal, a stage in which the individual views smoking as useful to achieve some means, such as a rebellious image, to relieve stress, or to lose weight. The second stage is the "trying phase," which is largely influenced by peer reinforcement. An individual may afterwards advance to the third stage, where smoking is performed repetitively, yet on an irregular basis. The fourth stage is reached when an individual begins to smoke regularly, at least once a week. Snell's (2007) final stage is the point of no return: an addiction to nicotine and a psychological dependence on cigarettes.

Snell (2007) also identified several socio-demographic, environmental, behavioral, and personal factors in adolescents that correlate with a heightened risk of developing into a smoker. Low socioeconomic status increases the probabilities that a young person will have a positive attitude towards smoking and then begin smoking (Hiscock, Bauld, Amos, Fidler & Munafò, 2012). Adolescents transitioning between elementary and high school are also at an increased risk for beginning to smoke (Park, 2009). Easy availability of cigarettes and having at least one

older sibling who smokes increases the probability of children developing into regular smokers (Snell, 2007). To this end, effort at reducing smoking behaviour should be focused on the attitudinal stage. Several psychosocial factors that shape individual attitudes towards smoking exist. However in this study, emphasis is placed on the role of significant others (parents and peers) in the shaping of adolescents' attitude towards smoking cigarettes.

Parents have been known to influence the attitudinal dispositions of their offspring and wards. Parental involvement reflects the extent to which parents are present and interject themselves into the academic and extra-curricular activities of their children (Hornby, 2011). When understudying parental involvement during adolescence, attention should be given to the developing parent-child relationship. As a child develops into adolescence, many changes are taking place: not just for the child, but for the parent as well. An increase in parent-child conflict can often be expected in early adolescence due to teenager's striving for independence (Edgar-Smith and Wozniak, 2010).

Parenting style represents standard strategies that parents use in raising and training their children and wards (Miller & Volk, 2002). It is broadly defined as the degree of responsiveness and demandingness of parents towards their offsprings. Various dimensions of parenting styles have been found determine whether adolescents develop and engage in anti-social behaviour (Zaddach & Chavira, 2006). Adolescents whose parents' styles are authoritarian or permissive are more likely to exhibit anti-social behaviour than adolescent's whose parents' style is authoritative (Crockett & Petersen, 1987). However, there is evidence that an authoritarian-type parenting style may discourage adolescents from taking engaging in anti-social behaviour (Jensen & Arnett, 2015). Parenting styles of fathers during adolescence is very vital. The type of parenting exhibited by fathers in their children's lives is especially crucial because fathers, being

the head of the home, are looked up to for mentorship and guidance. The warmth and support from mothers is also important for the moral and emotional development of adolescents.

Peer pressure describes the social pressure to adopt certain behaviors in order to conform with and be accepted by a peer group (Dodge, Dishion & Lansford, 2006). Peer groups are an important influence throughout one's life, but they are more critical during the developmental years of adolescence. There is often a controversy about the influence of a peer group versus parental influence, particularly during adolescence. The power of the peer group becomes more important when the family relationships are not close or supportive (Preveaux, Ray, LoBello, & Mehta, 2004). If the parents are largely unavailable, the children may turn to their peer group for emotional support. Most children in this situation are not discriminatory about the kind of group they join. They will often turn to a group that accepts them, even if the group is involved in illegal or negative activities. For some young people, the need for affiliation or closeness is often greater than the need to "do the right thing" (Nicholson, 2015).

This study aims at examining the influence of parental involvement, peer pressure and parenting style on attitude towards cigarette smoking among in-school adolescents in Ibadan metropolis. The specific objectives of the study are to;

1. Examine the influence of parental involvement, parenting style and peer pressure on attitude towards cigarette smoking among in-school adolescents in Ibadan metropolis
2. Identify demographic differences in attitude towards cigarette smoking among in-school adolescents in Ibadan metropolis

METHOD

Research Design

This study adopted a cross-sectional survey design. The rationale behind this option was based on the usage of standardized questionnaires for data collection of characteristics among a specific population at a particular point in time. The independent variables include peer pressure, parenting style and parental involvement while the dependent variable is attitude towards cigarette smoking.

Research Setting

The study was conducted in four randomly selected public secondary schools in Ibadan North LGA. Ibadan North is located in the busy metropolitan center of the ancient Ibadan city, with her headquarters in Agodi. The schools four schools randomly selected are located in ward 1, ward 3 (2 schools) and ward 4. All the selected schools were run by the State government, hence, had a very similar structure and policy, this helped to equate the characteristics of the participants across board.

Population of the Study

The population of the study comprised of senior secondary school students in the selected secondary schools in Ibadan North LGA. This was justified by the fact that most senior secondary school students are in the period of adolescence.

Sample and Sampling Technique

Multistage sampling technique was used to obtain a representative sample size of 240 students for the study. The simple balloting technique was employed in selecting four secondary schools

from the list of government public schools obtained from Ibadan North LGA secretariat. Students of Senior Secondary School Two (SS2) were purposively selected for this study. This was because the researchers identified them as being in the middle of senior secondary education and experiencing similar pressures as those in SSS3 (the school authorities would not allow access to SSS 3 students to avoid distracting them from preparing for their final school leaving certificate examination). Further, simple random sampling technique was used to select four (4) arms in SSS 2 and accidental sampling used to select 15 students from each of the 4 class arms of SSS2 to administer the questionnaires to; such that 60 students were administered in each of the four schools.

Research Instruments

A questionnaire comprising of five sections was utilized in eliciting relevant information relating to the participants of the study. It is made up of five sections, A to E.

Section A

This section consisted of items used in eliciting relevant demographic characteristics of the participants. The items in this section included gender, age, family type etc.

Section B: Peer Pressure

Peer pressure was measured using a well-validated measure of peer pressure developed and validated by Clasen & Brown (1987). The peer pressure inventory (PPI) was designed to assess the perception of pressure in a number of domains, including peer social activities, misconduct, and conformity to peer norms etc. responses are made on a 4-point scale. Responses to all 11 items are summed up to yield the final composite score, with a range from 10 to 48. High scores

(scores above the mean) on the scale indicated higher dispositions to conform to peer pressure while low scores (scores below the mean) on the scale indicated fewer dispositions to conform to peer pressure. It has a Cronbach alpha which ranged from 0.69 to 0.91 for all measures.

Section C: Parenting style

The Parenting style scale used was developed by Darling and Toyokawa (1997). The scale measures three parenting domains: Emotional responsiveness, Demandingness and Psychological autonomy. The highest score among the three domains indicates the parenting style used in bringing up the adolescent. High emotional responsiveness ($\alpha=.81$) indicates permissive parenting. High scores (scores above the mean) on Demandingness ($\alpha=.79$) indicates authoritarian parenting. High scores on Psychological autonomy ($\alpha=.83$) indicates authoritative parenting. The scale is in likert form with scoring ranges from strongly agreed, agree, strongly disagree, and disagree. The inter-item reliability of the scale is 0.82 adapting the scale and revalidation yielded a Cronbach Alpha of 0.83 and a Guttman split coefficient of 0.83.

Section D: Parental Involvement

Paulson and Spota's (1996) parental involvement scale was used to measure parental involvement. This is a 22-item scale measuring parental involvement in students' academics and extra-curricular activities. It adopts a 5-point response scale ranging from 1 "strongly disagree" to 5 "strongly agree". The scale's measurement is dichotomized into high involvement depicted by higher scores and low involvement depicted by low scores. The questionnaire was developed based on a review of the parental involvement literature using subscales of values towards achievement (8 items) ($\alpha=.76$), interest in schoolwork (9 items) ($\alpha=.79$), and involvement in extra-curricular activities (5 items) ($\alpha=.83$). Internal consistency values, as measured using

Cronbach alphas, ranged from .67 to .86 for adolescents' and parent's reports of parental involvement (Paulson & Spota, 1996).

Section E: Attitude Towards Smoking

Adolescents' attitude to smoking was measured using the 18-item Attitude to Smoking (ATS-18) scale developed and validated by Etter et al (2000). Responses are measure using a 5-point likert format ranging from strong agree to strongly disagree. The ATS-18 has three subscales that measure perceptions of adverse effect (10 items), perceptions of psychoactive benefits (4 items) and perceptions of smoking pleasures (4 items). Higher scores depict high disposition towards smoking and lower scores depict less disposition towards smoking. The ATS-18 is a valid and reliable instrument which has been used in both research and clinical settings with internal consistencies of .90, .75 and .89 for the three subscales respectively.

Procedure

The researchers visited the selected schools alongside a letter of introduction from the Department of Psychology, University of Ibadan. Verbal consent of the participants was obtained before questionnaire administration. During questionnaire administration, an introduction to the study was made as well as verbal instructions for completing the questionnaires. Participants were encouraged to ask clarification questions during the giving of instructions and completion of the instruments. They were also assured of their anonymity and confidentiality. About ten minutes was allowed for all the respondents to complete and return their questionnaires.

Data Analyses

Following the completion of the data collection, the questionnaires were coded, scored and inputted in SPSS program for analysis. Both descriptive and inferential statistics were employed in the analysis. T-test for independent measures, Oneway ANOVA and Three way ANOVA were used to test the hypotheses.

RESULT

Hypothesis One

In-school adolescents with less involved parents will significantly exhibit positive attitude towards cigarette smoking than their counterparts with more involved parents. This hypothesis was tested using t-test for independent measures. Results are presented Table 1

Table 1: T-test showing influence of parental involvement on attitude to cigarette smoking

	Parental Involvement	N	Mean	SD	df	t-value	P
Smoking Attitude	High	109	65.12	12.91	211	2.18	<.05
	Low	104	61.46	11.60			

Results from Table 1 show that there was a significant difference in attitude towards cigarette smoking between in-school adolescents with highly involved parents and their counterparts with less involved parents [$t(211)=2.176$; $p<.05$]. Based on the results, in-school adolescents with highly involved parents [$X=65.12$; $SD=12.91$] exhibited positive attitude towards cigarette

smoking than adolescents with less involved parents [$X=61.46$; $SD=11.60$]. The hypothesis stated was not supported.

The results imply that adolescents who have parents that are highly involved in their extra-curricular activities are more likely to develop a positive disposition towards the act of cigarette smoking. The result is contrary to societal expectations that students of highly involved parents would not be involved in such vices as cigarette smoking. However, the involvement of parents in the day-to-day activity of their adolescent children is not necessarily extended to the children's escapades outside the home where peer pressure and other factors may play significant roles in enhancing dispositions towards smoking. Thus the involvement of parents may not be deterrence to smoking if such involvement does not extend beyond the home. This stance is supported by Chen, Ho, Wang & Lam (2018) who also found that parental knowledge of adolescent activities, disapproval of adolescent smoking, and home rules were negatively linked to adolescent smoking through the mediation of attitude and subjective norm.

Hypothesis Two

In-school adolescents who report high peer pressure will significantly exhibit negative attitude towards cigarette smoking than their counterparts who report low peer pressure. This hypothesis was tested using t-test for independent measures. Results are presented Table 2

Table 2: T-test showing influence of peer pressure on attitude to cigarette smoking

	Peer Pressure	N	Mean	SD	df	t-value	p
Smoking Attitude	High	116	68.81	9.76	200	8.78	<.01
	Low	86	55.83	11.17			

Results from Table 2 show that there was a significant difference in attitude towards cigarette smoking between in-school adolescents who experienced high peer pressure and their counterparts who experienced low peer pressure [$t(200)=8.782$; $p<.01$]. Based on the results, in-school adolescents who reported high peer pressure [$X=68.81$; $SD=9.76$] exhibited more positive attitudes towards cigarette smoking than adolescents who reported low peer pressure [$X=55.83$; $SD=11.17$]. The hypothesis is supported.

In other words, exposure to high peer pressure can be said to be responsible for a positive attitude towards cigarette smoking. This result is justified by assertions that noted that during the period of adolescence, adolescents become more loyal to their peers than to their parents, even at the expenses of engaging in immoral or anti-social behaviours. Thus, adolescents become exposed to various levels of peer pressure within their peer groups and those of them who associate with peers who smoke are more likely to be influenced into smoking. Snell (2007) asserts that majority of adolescents who associate with smoking peers often experience the first two stages of smoking; going through the next three stages - repetitive trials, regular smoking and addiction - depends largely on the perceived benefits derived from stage one and two.

In line with these results, Lebedina Manzoni et al. (2008) found a strong association between the smoking habits of close friends and those of the youth. Simons-Morton, Haynie, Crump, Eitel, Saylor (2001) found positive independent associations with smoking and drinking for direct peer pressure and associating with problem-behaving friends. Kim et al. (2018) also found that smoking by best same-sex friend and the proportion of smokers in the peer group was positively associated with current smoking at each time point. Adebisi, Faseru, Sangowawa and Owoaje (2010) found that peer influence is an important source of introduction to tobacco use while selling of tobacco to adolescents in youth aggregation areas is common in Ibadan.

Hypothesis Three

In-school adolescents with permissive parents will exhibit more negative attitude towards cigarette smoking than their counterparts with neglectful, authoritative and authoritarian parents.

This hypothesis was tested using One Way ANOVA. Results are presented in Table 3.

Table 3: ANOVA summary table showing influence of parenting styles on smoking attitude

Parenting Styles	Sum of Squares	df	Mean Square	F	P
Between Groups	241.61	2	120.81	.78	>.05
Within Groups	32711.801	212	154.30		
Total	32953.41	214			

Results from Table 3 show that parenting styles did not have a significant influence on attitude towards cigarette smoking among in-school adolescents ($F(2, 212)=.783$; $P>.05$). This implies that attitude towards cigarette smoking among in-school adolescents remained relatively unchanged irrespective of the style of parenting adopted by their parents.

The results imply that attitude towards cigarette smoking was not influenced by the parenting style adopted in raising the children/wards. As such parents who adopt permissive parenting, authoritarian parenting and authoritative parenting styles do not have enough control over attitudes that their children develop towards cigarette smoking. This may be due the parents inability to control peer association which often occurs beyond the home environment. As earlier mentioned, adolescents are more loyal to their peers than their parents. This result conforms to

the findings of O'Byrne, Haddock and Poston (2002) and Burton, Ray & Mehta (2003) study who found that parenting style is not a significant risk factor for smoking experimentation.

Hypothesis Four

There will be a significant main and interactive influence of peer pressure, parental involvement and parenting style on attitude towards cigarette smoking. This hypothesis was tested using a three way ANOVA. Results are presented in Table 4a and 4b.

Table 4a: 2x2x3 ANOVA summary table showing main and interactive influence of peer pressure, parental involvement and parenting style on smoking attitude

Source	Sum of Squares	df	Mean Square	F	P
Peer Pressure (A)	5949.76	1	5949.76	55.69	<.01
Parental Involvement (B)	317.53	1	317.53	2.97	>.05
Parenting Style (C)	508.14	2	254.07	2.38	>.05
A * B	320.30	1	320.30	2.99	>.05
A * C	33.33	2	16.66	.16	>.05
B * C	670.52	2	335.26	3.14	<.05
A * B * C	228.73	2	114.37	1.07	>.05
Error	20086.64	188	106.84		
Total	29540.88	199			

Table 4b: Descriptive of Parental Involvement * Parenting Style

Parental Involvement	Parenting Style	Mean
Low Involvement	Permissive	59.68
	Authoritative	64.19
	Authoritarian	60.98
High Involvement	Permissive	64.75
	Authoritative	64.10
	Authoritarian	61.40

Dependent Variable: Smoking Attitude

Results from Table 4a show that peer pressure had significant main influence on attitude towards cigarette smoking among in-school adolescents [$F(1, 199)=55.69$; $P<.01$]. However, parental involvement and parenting style did not have a significant main influence on attitude towards smoking among in-school adolescents [$(F(1, 199)=2.97$; $P>.05$; $(F(2,199)=2.378$; $P>.05)$ respectively]. Further results show that parental involvement and parenting style interacted significantly to influence attitude towards cigarette smoking [$F(2, 199)=3.138$; $P<.05$].

The descriptive analysis in Table 4b shows that in-school adolescents with highly involved and permissive parents reported the highest mean (64.75) on attitude towards smoking while in-school adolescents with less involved and permissive parents reported the lowest mean (59.68) on attitude towards smoking. This implies that adolescents with the initial parental categorization have a higher disposition to engage in cigarette smoking while those with the latter parental categorization have a lower disposition to engage in cigarette smoking.

The findings highlight the importance of parenting in the moral development of their children/wards. The fact that high parental involvement and permissive parenting interacted significantly to yield positive dispositions towards smoking shows that parenting may not be sufficient to influence behaviours such as attitude towards cigarette-smoking, additional parenting practices which enable parents to be actively involved in the academic and extracurricular activities of their children/wards may have significant influence on attitude formation and behavioural dispositions during moral development of the children/wards. The results showed that adolescents with less involved and permissive parents were the most likely to be engaged in cigarette smoking due to their negative attitude towards smoking.

Similar results were obtained by Wen, Tsai, Cheng, Hsu, Chen and Lin (2005) who assessed parental influence on smoking behaviour by high school. Results showed that adolescents of smoking parents with low Tender Loving Care (TLC) had the highest smoking rates and those of non-smoking parents with high TLC had the lowest. The difference was more than twofold in boys and more than fourfold in girls. When either parental smoking status or TLC alone was considered, parental influence was similar to peer influence in boys, but larger than peer influence in girls. However, when smoking status and TLC were considered jointly, it became larger than peer influence for both groups.

Hypothesis Five

Male participants will exhibit negative attitude towards cigarette smoking than female participants. This hypothesis was tested using t-test for independent measures. Results are presented in Table 5

Table 5: T-test showing influence of gender on attitude to cigarette smoking

	Gender	N	Mean	SD	df	t-value	p
Smoking Attitude	Male	106	64.29	11.80	213	.97	>.05
	Female	109	62.65	12.96			

Results from Table 5 show that gender did not have a significant influence on attitude towards cigarette smoking among in-school adolescents [$t(213)=.969$; $P>.05$]. This implies that attitude towards cigarette smoking among in-school adolescents remained similar among male and female in-school adolescents. The hypothesis was not supported.

This implies that attitude towards cigarette smoking between male and female in-school adolescents were not significantly different. The result could be justified by the fact that the

study did not measure actual cigarette smoking behaviour which may have yielded significant gender differences due to societal expectations. However, unlike actual smoking behaviour, attitude towards smoking is a covert expression as is therefore not limited by gender differences or social norms.

CONCLUSION

It is evident from the findings of this study that parents and peers are very central to the formation of adolescents' attitude towards cigarette smoking. Over involvement in an adolescents life appears to be a major factor that makes the adolescent more vulnerable to developing a positive disposition to cigarette smoking. This aligns with the tenets of the reactance theory (Pennebaker and Sanders, 1976), which postulates a tendency to engage in a particular behavior basically due to an unpleasant perception that their freedom of choice is being threatened; it helps to prove that their free will has not been compromised. In the same vein, adolescents of highly involved parents perceive that the parent tries to take charge of every part of their lives, hence, develop a desire to engage in a socially unacceptable behavior such as smoking, just to prove a point to the over-involve parent that they are actually in charge of their own life's affairs.

To this end, parents need to note that setting and consistently enforcing unrealistic rules, mounting pressures on every aspect of their adolescent child's life, nagging always about the kinds of friends their kids are associating with and generally monitoring everything the adolescent does will only increase the risk that their children will smoke and become involved in other risky behaviors. Being too involved only infers that the parents do not trust the adolescent

to make the right choices for him/herself. Minimal parental involvement helps the adolescent to build a sense of mutual trust and responsibility, knowing that they bear the consequences for their life choices and a desire to be applauded by their parents motivates them to make the best choices. However, this does not encourage parents to be neglectful of their adolescents, rather, they need to devise methods of monitoring them without their conscious notice and create a good rapport with them such that their suggestions and advices do not come as an imposition but as a wise counsel from a loving parent.

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