

Effect of Tobacco Laws and Regulations on Advertising and Sales of Tobacco Products in Selected Local Governments in Ibadan Metropolis

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Abstract

The risks of cigarette smoking to public health make it one of the biggest public health issues in the world, and improved understanding of cigarette smoking behaviors is necessary. With countless warnings from manufacturers and advertisers of tobacco products, the rate of smoking in Nigeria has been on the increase. The main objective of this study is to examine the effect of tobacco laws and regulations on sales and consumption of tobacco products in Nigeria. The population of the study was 258 while the sampling size was 60. Questionnaire was administered randomly on selected respondents in tobacco retail shops in the five local government areas of Ibadan metropolis, Oyo State, Nigeria. Findings revealed that there is significant relationship between advertising and sales of tobacco products [X^2 calculated (9.6) > X^2 tabulated (3.841)] and that there is significant relationship between tobacco control bill and consumption of tobacco products [X^2 calculated (13.06) > X^2 tabulated (3.841)] in the five selected local government councils in Ibadan metropolis. It is concluded that with the stringent laws and regulations on advertising and sales of tobacco products, yet, the sales of tobacco product are on the increase. It is therefore recommended that communication should be strengthened to discourage more users, encourage present consumers of tobacco products to quit smoking habit, and that a cessation programme be introduced to reduce the total number of tobacco users by the Federal Ministry of Health.

Key words: Tobacco, Laws and regulations, Advertising, Smoking, Habit.

1.0 Introduction

Despite the fact that tobacco smoking is a preventable cause of early mortality and disease for almost 1.4 billion people worldwide, over 8 million people die each year from tobacco-related illnesses, according to the Global Adult Tobacco Survey (GATS) 2020. The National Tobacco Control Act of 2015, which was enacted on May 25, 2015, governs smoke-free areas, tobacco advertising, promotion, and sponsorship, packaging and labeling, preventing tobacco industry involvement, and tobacco product disclosures. The sale of single sticks is one of the other areas

that is governed. The rules on tobacco product packaging and labeling were effective 18 months after they were published in the Federal Government Gazette.

The World Heart Federation, the University of Newcastle in Australia, and the World Health Organization estimate that 1.9 million individuals worldwide pass away from tobacco-related heart disease each year (Adewumi, 2020). According to the World Health Organization, smoking tobacco increases the risk of and mortality from coronary heart disease (2018). Of the world's 56 million annual deaths, the disease accounts for 16.6 percent, whereas smoking is responsible for 1.62 million deaths from coronary heart disease. One-fifth of all fatalities from heart disease can be attributed to this. Tobacco-related deaths in Nigeria are 28,876 each year, according to Marco Castradori, a Research Associate at the Centre for the Study of Economies of Africa (CSEA), Abuja, Nigeria. A total of about 737,366 illnesses are projected to occur each year, of which 127,859 of them are attributed to smoking. In 2018, the percentage of Nigerians who smoke was approximately 2.5 percent. Only 0.3 percent of girls and 5.4 percent of males were found to smoke cigarettes on a regular basis. Older men accounted for the highest proportion of smokers.

Cigarette smoking and other tobacco products are advertised in many media outlets by the tobacco industry. For many years, it was one of the least-restricted kinds of advertising. There is a law in Nigeria prohibiting tobacco advertising and marketing, except for tobacco makers and merchants, who are allowed to advertise to "consenting adults" in accordance with the National Tobacco Control Act (2015). Tobacco sponsorship and publicity are subject to the same loophole that allows sponsorship aimed at "consenting" adults, but there are some restrictions on both. Packaging for tobacco products is obliged to show health warnings on at least 50% of the primary display areas. Manufacturing and import companies must provide government agencies with information about the components and emissions of their products as required by law. Tobacco products, including single cigarettes and small packets of cigarettes, cannot be sold over the internet or in any other small quantity. The vending machine sales are prohibited by law. Tobacco products may not be sold to anyone under the age of eighteen in the United States. The objective of the paper is to:

Examine how Nigerian tobacco laws and regulations affect the advertising and sales of tobacco products.

2.0 Background of the Study

According to Aregbesola, (2011), tobacco usage is one of the major preventable causes of mortality. Lung cancer, hypertension, emphysema, cardiovascular disease, myocardial infarction, prostate cancer, colorectal cancer, breast cancer, congenital malformation, coronary heart disease, bladder cancer, peptic ulcer, high blood pressure, and esophageal cancer are all linked to smoking. Asthma, strep throat, and other respiratory disorders can develop in youngsters who are exposed to second hand smoke. According to Joshua (2021), the main

ways that young people are introduced to tobacco usage for the first time are through advertising and subliminal smoking promotion in movies, music videos, and product placements. It was also stated that films and music videos have been utilized by the tobacco business in an attempt to attract and coerce young people into smoking. As in the United States, India, Canada, and other western nations, Joshua (2021) believed that some forms of content regulation should be available to children.

Tobacco advertising rules in Africa have become increasingly restrictive, yet film remains one of the only outlets where millions of adolescents are exposed to smoking imagery without limits. CAPPA found this to be the case. The Nigerian Advertising Practitioners Council was urged to implement the National Tobacco Control Act of 2015 and the National Tobacco Control Regulations of 2019 in recognition of the importance of doing so for the country.

3.0 Conceptual Framework

3.1 History of Tobacco Legislation in Nigeria

There are several ways to smoke and inhale tobacco in Nigeria, including rolled cigarettes, shredded tobacco in pipes, and finely ground snuff. Tobacco use in Nigeria has a lengthy history of control, according to Ukweze, Ogbuabor, and Okiche (2018). At least three thousand years, according to the British American Tobacco Nigeria (BATN, 2010), has passed since the smoking of tobacco began. Although it was first discovered by Christopher Columbus in 1492, old Central American temple carvings suggest that tobacco was chewed there as far back as 1,000 BC. International Tobacco Company, a subsidiary of PM Incorporated, and Nigeria Tobacco Company are three of the country's tobacco firms. Nigeria Tobacco Company was once a BAT subsidiary but is now known as BATN.

According to various small-scale studies, smoking is prevalent within a range of general demographic segments. In Nigeria, there is little oversight of tobacco use and the results of tobacco control efforts. The Federal Ministry of Health performed two surveys in 1998 and 2001, finding that 17.1% of adults over the age of 15 smoked and 18.1% of adolescents aged 13 to 15 did as well, respectively. In addition, the Federal Ministry of Health found that between 2001 and 2006, annual cigarette usage rose by 4.7%. Women and men between the ages of 15 and 49 who reported using tobacco products were found to make up fewer than 1% of the population, according to the Nigeria Demographic and Health Survey (NDHS, 2008).

The Tobacco Smoking (Control) Decree 20, issued on 20 October 1990, was the government's initial effort at passing tobacco prohibition legislation. In 2001, the country passed the Tobacco (Control) Act, 1990 CAP, T 16, marking the change from military to democratic governance. Smoking was prohibited in designated areas, such as schools and stadiums, under the terms of the act. In addition, all cigarette and sponsorship advertisements had to include cautionary messages.

The federal government created a National Smoking Cessation Committee in 1999, which led to a reassessment of tobacco control in the United States. As a result of these initiatives, the Advertising Practitioners Promotion Council of Nigeria (APCON) outlawed tobacco advertising in 2002. Nigeria ratified the World Health Organization Framework Convention on Tobacco Control (WHO FCTC) on October 20, 2005, after it was initially signed in 2004. In Nigeria, the Honorable Minister of Health established an inter-ministerial group on tobacco reduction in June 2006.

Tobacco control efforts have included participation by state governments as well. Smoking in public places has been prohibited in the Federal Capital Territory (FCT) since May 31, 2008, while Cross River State, in the country's South-South division, approved a law restricting media advertisements for tobacco products. There is a 10,000 fine or a term of imprisonment of not less than one month and not more than three months for anyone caught smoking in a no-smoking area, according to the Lagos State government, which also states that the penalty for violating the ban include both fines and jail time (Thisday Newspaper, 2014).

Tobacco control is a joint endeavor by CSOs and the government, thanks to a strong coalition formed by CSOs. In order to promote public awareness of the substantial health, environmental, and economic risks caused by tobacco use, they've been organizing a variety of programs across the country" (GATS, 2012). In May of this year, President Goodluck Jonathan signed into law the National Convention on Tobacco Control (NCTB 2009).

3.2 Laws on Tobacco Usage in Nigeria

Decree No. 20 of 1990 was the first significant attempt to legislate tobacco control. The Decree's significance stems in the fact that it is Nigeria's only rule on tobacco use and advertising. In light of the law's unique situation, it is necessary to spend some time examining its provisions. In accordance with Schedule 1 of the Decree, no one may "engage in or continue in tobacco smoking" in those locations. A theater, a movie theater, or a stadium; a workplace; public transportation; a lift; a medical facility; a school; or a nursery institution. (a) It's not permitted to smoke in the following public places:

(a) Newspapers (b) Magazines (c) Radio (d) Television (e) Cinema (f) Billboards (g) Handbills are prohibited from advertising tobacco products to the general public under Section 2. In addition, the advertising states that "tobacco smoking is harmful to your health." According to section (2), "any other body corporate shall sponsor or advertise their products at any sports event sponsored and promoted by them." Section 3 of the Decree, for example, lays forth the parliamentarians' intent. Sections 4 and 5 of the Decree's penalties apply to those who violate its Sections 1, 2, and 3. These are the parts in full: "Any person who promotes, sells, offers for sale any tobacco product other than in accordance with the terms of this Decree is guilty of an offence under this

Decree and shall be liable, on conviction, to a fine of not less than N5,000," they read. If a corporation, firm, or other group of individuals commits an offense in violation of this Decree, then each of the following individuals is liable: (a) the corporation's directors, managers, secretaries, or other similar officers; (b) the firm's partners or officers; (c) the association's managers; or (d) anyone claiming to act in any of the foregoing capacities.

Goodluck Jonathan, Nigeria's former president, signed the National Tobacco Control Bill 2009 into law on May 27th, 2015. Tobacco and tobacco products in Nigeria will be effectively regulated and controlled by this law, which will ensure that they are produced, sold, promoted, labeled, manufactured, advertised, and sponsored in an efficient manner. Among the most notable aspects of the Bill are:

- Tobacco Control Act of 1990 CAP. T16 Laws of the Federation is repealed.

For the first time ever, the Framework Convention on Tobacco Control is completely domesticated. • (FCTC).

- Furthermore, it established the National Tobacco Control Committee.

It will take six months for the National Tobacco Control Act 2009 to come into effect once it was signed into law.

- Tobacco packets for sale in Nigeria must bear the message "Sales only in Nigeria" on the label.
- Each tobacco product made in Nigeria for export must be marked "Manufactured in Nigeria for Export".
- Name and license number of manufacturer, wholesaler, importer, or exporter; Serial number, date, place and nation; plainly visible "tax" stamp or marking are required on every packet of cigarette.
- There is a ban on the sale of cigarettes to minors.
- In addition, vending machines are prohibited from selling tobacco goods.
- Smoking in single-stack form is prohibited under the law
- The minimum number of cigarettes in a pack must be 20.
- There will be no cigarette mail-outs to customers.
- At least 50% of the primary display spaces must be covered by warning labels or health messages.
- A pictogram could be included in the health warnings and messages if the Health Minister decides to do so. There is a ban on any and all forms of tobacco advertising or sponsorship or promotion of any kind.
- Schools, public transportation, and workplaces are among the places where smoking is prohibited.

- Forbidding the selling of tobacco products in places designated as nonsmoking within the 1,000 meter radius.
- Gives the government the ability to reclaim tobacco-related obligations through lawsuit.

3.3. Relevant Laws and Regulations:

The relevant laws and regulations of tobacco in Nigeria are: The Consumer Protection Council Act, the Trademarks Act Cap. T13 LFN 2004, the Copyright Act Cap. C28 LFN 2004, the Advertising Practitioners Council of Nigeria (APCON) now advertising Regulatory Council of Nigeria (ARCON) Code of Advertising and Promotion guidelines, the NAFDAC Act Cap. N1 LFN 2004, the Spirit Drinks Regulations Cap. 2005, the Wine Regulations Cap. 2005, the Pre-Packaged Food (Labeling) Regulations Cap. 2005, the Advertising Practitioners Registration Act, the Merchandise Marks Act Cap. M

4.0 Theoretical Framework

The following theories are made use of in this paper

- (i) Social cognitive theory
- (ii) Theory of planned behaviour
- (iii) The Hierarchy of Effects Theory

Social cognitive theory: According to social cognitive theory, people can learn from one another by seeing, listening to, or modeling. By claiming that behavior is caused by a complex web of connections between elements of the environment, behavior, and brain function, it expands upon behaviorism. Social cognitive theory establishes the self-efficacy requirement for behavior change, and it also applies to smokers.

Theory of Planned Behaviour - The theory of planned behavior (TPB) contends that people's attitudes, societal pressure, or, more particularly, their subjective norms and beliefs of their level of control over the conduct, have an impact on their behavioral intents and behaviors (Ajzen, 1991). McEachan, Conner, Taylor, and Lawton (2011) conducted a meta-analysis to investigate the TPB's usefulness in predicting intentions and behavior across a number of health behaviors. The idea, particularly perceived behavioral control, was found to be a strong predictor of smoking intentions and practices in other 1992 studies. TPB and cessation research have discovered the significance of behavioral intentions in subsequent quit efforts as well as the role of attitudes and norms in the intention to quit smoking (2008).

According to McEachan, Conner, Taylor, and Lawton's (2011) meta-analysis study, the TPB is useful for forecasting intentions and behavior for a number of health behaviors. Another idea was examined by Godin, Valois, Lapage, and Desharnais (1992), who discovered that it successfully predicted smoking intentions and behaviors, especially perceived behavioral control. The importance of behavioral intentions in subsequent quit attempts as well as the

predictive value of attitudes and norms in intention to quit smoking have been highlighted in other studies looking at the TPB and cessation (Rise, Kovac, & Moan, 2008).

The Hierarchy of Effects Theory - Lavidge and Steiner developed the Hierarchy of Effects Theory in 1961 as a way to explain how advertising influences consumers' decisions to buy or not buy a product. The theory is a sophisticated advertising technique that uses a well-crafted message to establish brand recognition over time (Kenton, 2018). To put it simply, the idea is relevant since it is utilized to structure a specific product's advertising message.

5.0 Methodology

In Ibadan, Oyo state, Nigeria, a survey of tobacco users in five local government districts was conducted. Oyo State's capital, Ibadan, is home to Nigeria's third-largest metropolitan region by population. There were 258 participants in the study, and 64 were randomly selected for the study. At each of the five local governments, a questionnaire and interview were conducted to gather data. Random sampling was used to pick 60 out of 64 respondents in various tobacco retail establishments in all local government areas in the Ibadan metropolitan to complete the questionnaire. This is a 94% success rate for the questionnaires that were administered. According to Table 5.1 National Population of 2006 data for the five local government councils in the Ibadan metropolitan, the population of the study consisted of 1,343,147 individuals.

Table 5.1: Population of Local Government Areas in Ijesa Land

| No | Local government | Population | Sample Size | Random Sampling |
|----|-------------------|------------------|---|---------------------|
| 1 | Ibadan North | 308,119 | $\frac{308,119 \times 258}{1,343,147} = 59$ | $\frac{59}{4} = 14$ |
| 2. | Ibadan North East | 331,444 | $\frac{331,444 \times 258}{1,343,147} = 64$ | $\frac{64}{4} = 16$ |
| 3. | Ibadan North West | 154,029 | $\frac{154,029 \times 258}{1,343,147} = 30$ | $\frac{30}{4} = 07$ |
| 4. | Ibadan South East | 266,457 | $\frac{266,457 \times 258}{1,343,147} = 51$ | $\frac{51}{4} = 12$ |
| 5. | Ibadan South West | 283,098 | $\frac{283,098 \times 258}{1,343,147} = 54$ | $\frac{56}{4} = 14$ |
| | Total | 1,343,147 | 258 | 64 |

Source: National Population Commission of Nigeria (2006 Population Census Figure)

The sample size was determined by using Paller-Calmorin and Calmorin formula to determine the sample size from the population as follows:

$$S_s = \frac{NV + [Se^2(1 - p)]}{NSe + [V^2 p(1 - p)]}$$

$$NSe + [V^2 p(1 - p)]$$

Where Ss = Sample size

N = Total number of population

V = Standard value (2.58) at 1% level of probability 0.99 reliability

Se = sampling error (0.01)

P = largest possible proportion (0.50)

$$\frac{1,343,147 \times 2.58 + [0.01^2(1 - 0.50)]}{1,343,147 \times 0.01 + [2.58^2 \times 0.50(1 - 0.50)]}$$

Sampling size = 258

6.0 Research Questions and Hypotheses

Two hypotheses were formulated and tested by using mean, percentage and Chi-square at 0.5 level of significance. The respondents answered the following questions:

- (i) Do you smoke?
- (ii) Which type of tobacco do you use?
- (iii) Do you think that the ban on tobacco advertising will affect the sales of tobacco products?
- (iv) Do you think that the Tobacco Control Bill will reduce tobacco consumption?
- (v) Do you envisage any dangers in tobacco smoking?

Results and Discussion

Table 6.1: Respondents Data

| Age Bracket | No | Gender | | % | Religion | | No |
|--------------------|-----------|-----------|----------|------------|--------------|-----------|-----------|
| | | Male | Female | | Christianity | Moslem | |
| 18-25 years | 6 | 5 | 1 | 10.0 | 2 | 4 | 6 |
| 26-40 years | 34 | 31 | 3 | 56.7 | 15 | 19 | 34 |
| 40 years and above | 20 | 19 | 1 | 33.3 | 8 | 12 | 36 |
| Total | 60 | 55 | 5 | 100 | 25 | 35 | 60 |

Source: Researcher compilation

As shown in table 6.1, the age bracket of 18-25 years constitutes 10 percent of the total sample population while 26-40 years constitutes 56.7 percent; and 40 years above constitutes 20 percent respectively. The table also shows the female sample population of 4 (6.7 %) and male

56 (93.3%). Christian respondents were 24 (40%) while Moslem respondents were 36 (60%) of the sample population.

Table 6.2: Question - Do you think that the ban on tobacco advertising will affect the sales of tobacco products?

| Response | Frequency | Percentage (%) |
|--------------|-----------|----------------|
| Yes | 18 | 30.0 |
| No | 42 | 70.0 |
| Total | 60 | 100 |

Table 6.3: Question - Do you think that Tobacco Control Bill will reduce tobacco consumption?

| Response | Frequency | Percentage (%) |
|--------------|-----------|----------------|
| Yes | 16 | 26.7 |
| No | 44 | 73.3 |
| Total | 60 | 100 |

Test of Hypotheses

Hypothesis One: There is no significant relationship between tobacco advertising and the sales of tobacco products

Table 6.4: There is no significant relationship between tobacco advertising and the sales of tobacco products.

| Response | Observed | Expected | Residual | (O-E) ² | (OE) ² /E |
|--------------|-----------|----------|----------|--------------------|----------------------|
| Yes | 18 | 30 | -12 | 144 | 4.8 |
| No | 42 | 30 | 12 | 144 | 4.8 |
| Total | 60 | | | | 9.6 |

X² calculated value = 9.6 (1 Df at 0.05 alpha level)

X² critical value (X² Tab) = 3.841

Decision Rule: If X² calculated is greater than X² tabulated, reject H₀ and accept H₁. X² calculated (9.6) > X² tabulated (3.841), therefore hypothesis H₀ stated in a null form is thereby rejected, and H₁ is accepted which indicates that there is significant relationship between tobacco advertising and the sales of tobacco products.

Hypothesis Two: There is no significant relationship in the Tobacco Control Bill and consumption of tobacco products in Nigeria

Table 6.5: There is no significant relationship in the Tobacco Control Bill and consumption of tobacco products in Nigeria

| Response | Observed | Expected | Residual | (O-E) ² | (O-E) ² /E |
|--------------|-----------|----------|----------|--------------------|-----------------------|
| Yes | 16 | 30 | -14 | 196 | 6.53 |
| No | 44 | 30 | 14 | 196 | 6.53 |
| Total | 60 | | | | 13.06 |

X^2 calculated value = 13.6 (1 Df at 0.05 alpha level)

X^2 critical value (X^2 Tab) = 3.841

Decision Rule: If X^2 calculated is greater than X^2 tabulated, reject H_0 and accept H_1 . X^2 calculated (13.06) > X^2 tabulated (3.841), therefore hypothesis H_0 stated in a null form is thereby rejected, and H_1 is accepted which indicates that there is significant relationship in the Tobacco Control Bill and consumption of tobacco products in Nigeria.

Discussion of Results

The study's findings showed a significant relationship between tobacco control legislation and consumption of tobacco products in the five selected local government areas of the Ibadan metropolis, as well as a significant relationship between tobacco advertising and sales [X^2 calculated (9.6) > X^2 tabulated (3.841)]. Research has proven that tobacco advertising and promotional activities lead to more people starting to smoke, according to the Tobacco Factsheet article that was published in the Premium Times. While Henriksen, Schleicher, Feighery, and Forthmann (2010) came to the conclusion that point-of-sale advertising encouraged young people to start smoking, Lovato, Linn, Stead, and Best (2003) found that tobacco advertising and promotion increased the risk that adolescents would start smoking. According to Ekwujuru (2013), countries with strict anti-tobacco legislation are facing the effects of increased tobacco smuggling, which fuels soaring sales and purchases of illegal goods as well as the funding of criminal organizations.

Conclusion

It has been determined that tobacco laws and restrictions have no appreciable impact on tobacco use or sales. Despite the strict restrictions and regulations governing tobacco product promotion and sales, tobacco product sales are rising. The study also showed that subliminal smoking messages and advertising are used to get young people to start using tobacco products

(Joshua, 2021). Smokers use a variety of arguments to support their smoking behavior and habit. It should be highlighted that smokers put non-smokers at risk for health problems because they smoke passively when they inhale tobacco vapor. Furthermore, it has been established that secondary smoking is just as harmful as initial smoking. Both smokers and non-smokers are impacted by secondary smoking, which has a somewhat high risk of lung cancer. Few people are aware of the specific health concerns associated with tobacco use, according to studies, therefore those who use it need assistance to stop. According to a survey conducted in China, just 38% of smokers are aware that smoking can lead to coronary heart disease and only 27% are aware that it can lead to stroke (WHO, 2015).

Recommendation

The following recommendations are suggested:

- The public should be better informed about quitting tobacco use by using a variety of media. A key strategy for lowering the number of smokers is to educate the public about the risks of smoking.
- The Federal Ministry of Health's Tobacco Control Unit needs to be enhanced in order to create a comprehensive national tobacco-cessation program that is based on WHO FCTC Article 14 recommendations.
- From primary, secondary, and tertiary schools, a rigorous campaign should be run to inform students of the risks associated with smoking.
- Tough anti-tobacco ads and graphic pack warnings with images to lower the number of youth smokers and boost the number of smokers who give up.
- By encouraging individuals to protect non-smokers and persuading them to quit, mass media efforts can also decrease tobacco consumption.

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