

MATERNAL HEALTH LOCUS OF CONTROL, SMOKING AND OTHER HEALTH BEHAVIOUR IN PREGNANCY

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Maternal smoking is associated with infant mortality and morbidity and is most prevalent among younger women of low social class and low educational attainment. But it is unclear whether maternal smoking is associated with other health compromising behavior and health beliefs. A survey of 1203 pregnant women in the UK assessed smoking status, smoking stage of change, fetal health locus of control, alcohol consumption, folic acid intake, and use of vitamin and iron supplements.

Compared to ex and never-smokers, smokers were more likely to: be unmarried ($p<0.001$); be living with someone who smokes ($p<0.001$); be of lower social class ($p<0.001$); have high external FHLC scores ($p<0.05$) and have finished education by 16 years of age ($p<0.001$). Pregnant smokers (especially those in the precontemplative stage) were less likely to increase folic acid intake, less likely to take vitamin and iron supplements ($p<0.001$) and less likely to feel personally responsible for the health of the fetus ($p<0.005$).

These findings suggest that infants of smokers may be placed at an intrauterine disadvantage, not only in terms of smoking, but also in terms of nutrition. This supports the argument that pregnant smokers should be targeted with information during antenatal care that both educates them about the dangers of maternal smoking and addresses their health beliefs. The results also suggest that pregnant smokers need advice on adequate nutrition during pregnancy.

SMOKING INTENTION IN MALE AND FEMALE YOUNG ADULTS

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Cigarette smoking seem to be one of the primary preventable cause of mortality and morbidity (Crawford, 2001). These findings increased the development of smoking prevention and health promotion programs (Biener, McCallum, Keeler and Nyman, 2000). A better comprehension of the determinants of smoking intention seems to be important to increase the efficacy of these intervention programs (Nguyet et al., 1998).

The aim of the present study was to identify the predictors of smoking intention in male and female young adults. This research wants to analyse whether the intention to adopt this risk behavior was associated with the variables from the Theory of Planned Behavior (TPB) (attitudes toward behavior, subjective norms, perceived behavioral control), risk perception, self-efficacy and self-esteem.

Method

A sample of about 300 young smokers completed the Italian version of a questionnaire based on Ajzen's TPB (1991), the Rosenberg Self-Esteem Scale (Rosenberg, 1965) and the General Self-efficacy Scale (Sibilia, Schwarzer and Jerusalem, 1995). The data have been subjected to multiple regression analysis.

Results

Risk perception and subjective norms (family influences) emerge as significant predictors of smoking intention ($p<0.05$). Self-esteem influences the intention to quit smoking ($p<0.05$). Perceived behavioral control seems to be a significant predictor of smoking behavior ($p<0.01$). Gender differences will be presented.

Conclusions

A better comprehension of smoking intention determinants in young males and females could contribute to increase the efficacy of smoking prevention and health promotion programs. Further research is needed to lend additional support to our findings.

REDUCING SMOKING IN SMOKERS NON INTENDED TO QUIT

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OBJECTIVE: Although the acquitted smoking related damages to the individuals' health, about one third of the population do smoke and half of the smokers have not any intention to quit. The general objective of this study was to promote a reduction of smoking in those who do not intend to quit, in order to make them aware of the benefits of reducing their habit and to promote their progression to the intention stage. The more specific objective was to verify the efficacy of a food integrator as adjuvant in smoking reduction among healthy smokers not determined to quit.

METHOD: Fifty healthy regular smokers, 17 men and 33 women, mean aged 39.24 years, participated in a single blind experimental study. Twenty-seven of them were randomly assigned to the experimental group (EG) and 23 to the control group (CG). The EG used the oral spray food integrator as an adjuvant in smoking reduction, while the CG used a placebo. 70.4 percent of smokers in EG reduced their smoking at the end of the 14 days treatment, while 52.2 percent in CG showed similar results. This reduction involved the men more than the women in both the groups.

CONCLUSION: Results of this study seem encouraging, as they showed the possibility of helping smokers not determined to quit to reduce the number of cigarettes, without experiencing those symptoms that usually discourage any attempt to quit. A follow up study has been designed to assess both maintenance of reduction and progression towards intention to quit.

LEVEL OF SELF-DETERMINATION IN ADULTS QUITTING SMOKING

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Self-Determination Theory (SDT) assumes that psychological health and well-being are intimately related to individual's autonomy or self-determination (Deci & Ryan, 2000; Ryan & Deci, 2000). In particular, individual's self-determination has been associated with health care behaviors, such as "quit smoking". In an ongoing research project, we have tried to understand smoking cessation by examining the degree to which the individual shows an autonomous (intrinsic and internalized reasons) versus controlled (extrinsic and coercive reasons) regulation of behavior in this domain. The aim of the present study was to characterize the motivational orientation (in particular the degree of autonomy) of a group of smokers entering a clinical cessation program. The degree to which a person's motivation for not smoking is relatively autonomous, will bear important implications for planning intervention, with high levels of autonomy facilitating optimal outcomes. We evaluated self-determination for not smoking using TSRQ (Williams, Cox, Kouides, & Deci, 1999; Ryan & Connell, 1989) sub-scales: autonomous orientation, controlled orientation, and a motivation applied in a sample of adults in a clinic trial for smoking cessation. Perceived competence, which is also emphasized by this theory, (SDT) was also assessed using related questionnaires (the PCS). We constructed Portuguese versions of these instruments, and analyzed alpha reliabilities. Moreover we examined differences in initial motivations, related to social, physical and psychological individual characteristics, such as sex, age, fargerstom test, number of cigarettes per day, number of years smoking.

Results will be discussed in light of SDT theoretical framework.