UNIVERSITI TEKNOLOGI MARA

AN EVALUATION OF UNIVERSITI TEKNOLOGI MARA'S TOBACCO FREE POLICY INITIATIVE ON ACCEPTANCE, AWARENESS, AND ENFORCEMENT

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ABSTRACT

Introduction: Universiti Teknologi MARA launched the Tobacco Free Campus Initiative in January 2016 in its UiTM Sungai Buloh Campus. Despite the policy being in place for 4 years, no study has been done to evaluate the acceptance, process, and enforcement of the policy. **Objectives**: To assess the policy in its adherence to the gold standard of policy making, to evaluate the TFI policy in terms of acceptance, awareness, and enforcement, and to evaluate the implementation of the TFI policy in terms of communication and dissemination, enforcement, compliance, and programmes offered, and to evaluate the barriers and facilitators in the enforcement of TFI policy. **Methods:** The American College Health Association (ACHA)'s tobacco free campus policy guidelines were used as a checklist to see the adherence of UiTM TFI policy to the gold standard of tobacco policy. A cross-sectional survey was administered to students, staff, patients, and vendors to assess their acceptance, awareness, and perception on policy enforcement. Checklists were used to evaluate the communication and dissemination of policy, enforcement, compliance and programs offered. Lastly, a focus group discussion was conducted to evaluate the barriers and facilitators in the enforcement of TFI policy. **Results:** UiTM TFI policy adhered to the gold standard of tobacco policy by 95%. More than half of the respondents reported acceptance towards the UiTM tobacco free policy. Similarly, a majority of respondents agreed on the policy being enforced in the campus. In contrast, findings in terms of awareness were low where only 23.7% reported of having awareness of the policy. Qualitative findings also indicate low compliance of the policy. Main barrier identified was lack of support, and the main facilitating factor identified were TFI buddies. **Conclusion:** Overall awareness of the TFI policy is low, acceptance of the policy is good amongst staff and students but low amongst patients. Compliance and enforcement of the policy is also weak. Barriers and facilitating factors identified should be examined and addressed by the stakeholders to allow for policy improvement.

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CHAPTER ONE
INTRODUCTION

1.1 Research Background

Tobacco smoking is recognized worldwide as a major preventable cause of disease and is related to 6 million deaths per annum (Perez-Warnisher, Carballosa de Miguel, & Seijo, 2019). According to an estimation made by WHO, if this pattern is not reversed, it will be responsible for 10 million deaths per year by the decade 2020-2030, with 70% of them occurring in developing countries (WHO, 27 May, 2020). The extent of the public health hazard posed by cigarette smoking can be seen in these two outcomes; (1) the prevalence of cigarette smoking is so high, and (2) smoking causes so many deleterious health effects (Richard J. Bonnie, 2015). Cigarette smoking harms body organs, causes many diseases, and reduces the health of smokers (Das, 2003).

The health impacts of smoking are well described. Smoking increases the chances of many diseases including lung cancer, cardiovascular disease, stroke, and chronic lung conditions such as bronchitis among adults (Carreras et al., 2019). Studies around the globe have shown that smoking decreases life expectancy and treating smoking related disease consume considerable health resources. Smoking related diseases have been a source of economic burden to many countries whether directly, or indirectly. In high income countries, it has been estimated that around 15% of healthcare costs are attributable to smoking (Ekpu & Brown, 2015). Direct cost can be seen in the healthcare management of these diseases. They, however, represent only a proportion of the adverse impact of tobacco smoking. Indirect costs include productivity loss due to smoking related issues such as time wasted taking smoke breaks, and time loss at work due to smoking related illness, welfare benefits associated with supporting those with chronic smoking-related illness and smoking-attributable fires (Berman, Crane, Seiber, & Munur, 2014). In Australia in financial year 2004/2005, it was estimated that the productivity losses associated with smoking was $A8 billion, which far outweighed the $A1.8 billion in direct healthcare costs of smoking (Collins & Lapsley, 2008). On the other hand, Malaysia is also facing the socio-economic impacts of smoking. New Straits Times, a local newspaper in