

while 58% of them in the non-medical sciences were females. $p < 0.00$. As for age of participants, the table showed that 39.9% and 40.6% of participants of medical and non-medical students were constituted in the age group from 18<20 years, while 38.8% and 55.5% of them respectively were constituted in the age group ranged from 21<25 years. Majority of participants 82.3% in the medical sciences and 89.1% of them in the non-medical sciences respectively were single $P < 0.00$. In addition majority of students in the medical and non-medical sciences are living with their families (86% and 90%) respectively $P < 0.04$. No statistical significant differences were observed between the medical and non-medical students related to their socio economic status, medical problems and practices of smoking.

Table (3): showed characteristics of smoking habits among smoker students in the medical and the non-medical sciences, majority of smokers' students stated that they have smoker's relatives 98.2% and 93.3% respectively they are including parents, brothers and sisters with no statistical significant differences were observed between them. Statistical significant differences were found between students in the medical and non-medical sciences related to their reasons of smoking, age of starting smoking and the type of tobacco used, Boredom was the more prevalent reason of smoking stated by 43.3%, followed by friends 40.0%, among students in medical sciences, while friends were considered the most common reason for smoking by 30%, followed by boredom 27.7%, and imitation 17.7% Among students in the non-medical sciences $P < 0.00$. Majority of students started smoking at age from 15<25 years in medical and non-medical sciences (85.5%, 93.3 %) $P < 0.00$. Cigarette smoking was observed more prevalent among students in medical and non-medical sciences it constituted in 79% and 82.2% of them respectively followed by shisha $P < 0.022$. More than half of students in the medical and the nonmedical sciences using smoking every day (61.1%) , 81.6% and 86.5% of smokers using <20 cigarette per day among students in the medical and non-medical sciences with no statistical significant differences .

(Table 4 and figure 3) illustrated awareness and attitudes of smokers' students in the medical and non-medical sciences toward smoking. No statistical significant difference was found between smoker students in the medical and non-medical sciences related to their awareness and attitudes about smoking with high prevalence of awareness and positive attitudes among students in the medical sciences than those in the non-medical sciences $P < 0.15$.

(Table 5 and figure 4) noted awareness and attitudes of all students in the medical and non-medical sciences toward smoking. No statistical significant difference was found between students in both groups related their awareness and attitude about smoking (52.0% and 50.8% respectively) $P < 0.414$.

Figure (5) demonstrated that 80% of students in the medical sciences compared with 72.2% of them in the non-medical sciences have a desire to quit smoking.

Table (6) showed previous smoking cessation trials & intention to quit smoking among smokers students in the

medical and non-medical sciences, no statistical significant differences were found between students in both groups related to items of students want to stop smoking, students tried to stop smoking during the last year, Reasons for decision to stop smoking, number of terriers to stop smoking and students who received advices to quit smoking. While statistical significant difference was observed between students in the medical and non-medical sciences related item of having the ability to quit smoking as stated by (81,1%) compared with (65.5%) respectively $P < 0.05$

4. Discussion

Tobacco use is increasing among young people, especially in Gulf nations such as Saudi Arabia. A compendium of tobacco consumption surveys in Saudi Arabia during the past decade (1999–2009) has shown that the prevalence estimates of tobacco use among young adults of university age range from 2.4%–37.0%^[34]. Many studies were conducted to explore tobacco use among health related college students, and most of these studies showed that cigarette smoking was prevalent among these students despite of their knowledge and realization of its dangerous effects on the human bodies^[24-25]. The prevalence of smoking among students in our study was 180 student out of 900, represent (20%) of total students. Medical students represent 19.2%, and non-medical student also 21 % and most of smokers are males represent 29.4% and female's represent 11.4%, as shown in table 1, figur1, 2.

The results of this study showed that there is no statistical significant difference was found between students in the medical and non-medical sciences related to the prevalence of smoking behavior. This may be interpreted as that there are factors affecting smoking behaviors other than knowledge and awareness of smoking hazardous effects. Rational for this result: World Day to combat smoking campaigns, which are held at universities, schools and markets through awareness about the harmful effects. The results of this study showed that there is no significant difference in prevalence in smoking behavior between medical and non-medical students, and this may be interpreted as that there are factors affecting smoking behaviors other than knowledge and awareness of smoking hazardous effects. rational for this result : World Day to combat smoking campaigns, which are held at universities, schools and markets through awareness about the harmful effects of smoking and health, and how to stop smoking, as well as advertisements in the streets in addition to television and newspapers, enhanced awareness among student, also, medical students are a group that should be more aware than young people of the same age about the health hazards associated with smoking & should not smoke as they are role model in society and it is a part of their individual responsibility to curb the problem of smoking and take care an active part in raising awareness of the health risks in the general population , If medical students are smoking then the credibility of anti-smoking messages to the public is lost.

Gender was the major factors which have significant effects on the smoking behaviors among participants. It is obvious

from the results that male students smoke more than females and this may be related to culture and social issues in Saudi Arabia, where there is strict observation conducted over females, and most of Saudis consider female smoking as social stigma. This result is congruent with many previous studies conducted in Arab and some Mediterranean countries in which smoking behaviors are more prevalent among males than females, since that they consider female smoking as an unacceptable social behavior [26, 27, and 19].

The study showed that, there are statistical significant difference regard age group in medical college most of age group ranged between 18-25 years compared with non-medical more half age ranged between 21-25, most of student single and living with family in both college, as shown in table 2. $P \leq 0.000$. This result congruent with Khader et al. [26], who reported that 85.5% of smokers started smoking at or after the age of 15 years, also, Al-Musmar, [19], found that, most of smokers were over 20 years of age. The study showed that most smokers were over 20 years of age. A reason for that may be the family pressure against smoking during adolescence. Once students get older and acquire more freedom, they start to smoke. Crofton, [28], told that, It is still a fact that adolescents need to open their eyes and ears to what is really going on their lives if they indulge in this risky behavior. This may mean using education from an early age to keep them safe rather than deny or ignore the problem. Al-Musmar, [19], reported that, the great majority of students were single (92.7%) and living with their parents (73.5%), and about half the students' families (51.9%) had average income. Also, Al-Mohamed et al, [27], reported that, Parental guidance and living with parents was protective against taking up smoking. Gfroerer et-al. [29]. Also showed that among a sample of USA college students, those who lived with their parents were less likely to have smoked in the last month compared to students who did not.

According to the results in current study, friends and boredom are the main reasons that urged both medical and non-medical student to smoke. These results are congruent with findings of previous studies reported that, friends were considered the major reason for starting smoking [25, 26, 28, 29, 30], and this necessitate establishment of developed educational programs in schools, about negative effects of smoking and methods of how to stop smoking. Additionally, these educational programs should be focused on adolescents and young adults since that this age group is at high risk of moral corruptive behaviors.

The findings of this study are consistent with results of earlier ones, where cigarette smoking is more prevalent than other types of smoking such as Hookah (Shisha) and sniffing pattern of smoking [26, 27, 28, 30], and this may be explained as that cigarette smoking is more easy to use and prepare and less expensive if used frequently.

In congruence with findings of many previous studies [24, 31, 32, 33], this study showed that medical students are more knowledgeable and aware about smoking negative effects and showed greater willingness to stop smoking than non-medical students do. This may be explained as curriculum courses of medical specializations – in general – addresses to smoking hazardous effects and how to stop smoking. It is

obvious from the results of this study that there is defect in advisory and educational roles of health and community organizations in spreading health awareness in society, and this will affect the behaviors of citizens toward smoking especially young people [29].

5. Conclusion

Findings of the present study revealed that smoker and nonsmoker students in the medical sciences students had more awareness and positive attitude than those in the non-medical sciences related to smoking with no statistical significant difference. Also, no statistical significant difference was observed between students in the medical and non-medical sciences students related to prevalence of smoking, the main reason of smoking among student are friends. Medical students have more willing for quiet smoking than non-medical sciences students.

6. Recommendations

From the results of current study, it recommend to:

- Critically integrate cessation counseling training into medical and non-medical sciences education.
- Develop educational program for people early in adolescence stage, and activate the role of medical related organization in spreading health awareness in the community.
- Introduce special courses for smoking behaviors and cessation in the curriculum for medical students to increase their awareness and encourage them to stop smoking and this boost their credibility as health care providers especially in cases of health education and consultation.
- Provide special on-campus managed services that help smokers kick this addictive habit.
- Utilize sports facilities located on campus in the exercise that the youth students to ventilate their energy in right way.
- Activate the celebration of World No Tobacco Day on 31st May each year.

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Variables	Colleges					
	Medical Sciences Colleges 469			Non-Medical Sciences Colleges 431		
	agree & Strongly agree	Disagree & Strongly disagree	I do not know	Strongly agree	Disagree & Strongly disagree	I do not know
There are many harmful chemicals in cigarettes	460	3	6	415	9	7
Passive smoking can negatively affect the health of non-smokers	452	11	6	411	11	9
Nicotine in cigarettes is not addictive to humans	137	284	48	130	235	66
Smoking causes serious diseases such as lung cancer, stroke and diseases of the mouth and tooth loss	453	12	4	408	11	12
Smoking behavior outcast by society	382	78	9	353	71	6
Smoking means of entertainment	151	298	20	146	269	16
Smoking a way to prove manhood	72	381	16	93	323	15
Smoking reason to relax the smoker	193	224	52	147	240	44
Smoking helps to concentrate and think	106	320	43	70	321	40
I allow smoking in my house	89	368	12	69	350	12
I allow my kids to smoke in the future	59	394	16	57	361	13
Should be strictly prohibited smoking in public places	325	132	12	306	110	15
Smoking personal freedom and not for others and the right to intervene	204	252	13	166	245	20
The best accompaniment friends who do not smoke	310	98	30	320	92	19
I accept to marry a man or a woman Smoker	98	340	31	79	325	27
Male students who smoke have more friends	77	292	100	104	240	87
Female students who smoke have more friends	52	310	107	93	235	103
Smoking makes male students attractive	50	382	37	63	335	33
Smoking makes female students attractive	53	371	45	59	327	45
Shisha smoking is less harmful than smoking cigarettes	152	219	98	96	216	119
Smoking harmful to health	414	43	12	365	56	10
Quitting smoking is a matter of the will	390	44	35	357	41	33
Smoking light cigarettes less dangerous than regular cigarettes	172	157	140	140	144	147
Shisha smoking in women for psychological reasons rather than an outlet for stress, exercise freedom and imitating men	199	141	129	188	119	124
Shisha smoking does not lead to addiction	108	256	105	89	221	121
Use of electronic shisha or cigarette less harmful than normal	117	151	200	105	142	183

Appendix

Awareness and attitudes of students toward smoking habit N=900