

“QUIT SMOKING”

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Introduction

Christine Ann Rose claims, the act of smoking involves breathing and exhaling fumes from burning plant material. Although many different plant materials, including hashish and marijuana, are smoked, tobacco is the one that comes to mind when people consider this behavior. Nicotine, an addictive substance included in tobacco, has psychological effects that can be both invigorating and soothing.

According to new research, (Smoking | Definition, Types, Effects, History, & Facts, 2022) smoking cigarettes is a major problem all over the world. We see many youngsters and elders smoking on the street, in schools, in markets, and in entertainment places, which has become fashionable now. However, many people suffer from bad health as a result of smoking, and scientists estimate that smoking results in millions of early deaths annually. Most body organs suffer harm as a result of smoking. Additionally, it is also a source of many diseases.



Photograph: Jeff Chiu/AP / The Guardian (<https://shortest.link/7YN1>)

Thus, I am considering developing a thesis and mobile application as a project that will aid us in our efforts to quit or stop smoking. As we know we are surrounded by technology and smartphones and they have now become an integral part of our lives because they give us access to everything, we could possibly need, including news, entertainment, communication with friends and loved ones, etc. I am aware that using mobile applications to stop smoking is not a foolproof approach, but we can at least make an effort to quit smoking.

History

In research from Tobacco-Free Life, people have been consuming tobacco and products related to it since 6,000 BC. The once-exclusively American plant is now known as tobacco, or *Nicotiana tabacum*, and is a close relative of the deadly nightshade. Upon setting foot on the new continent in 1492, Columbus was received with open arms by the Native American tribes he came across. They presented gifts of fruit, food, spears, and other things, as well as dried leaves from the tobacco plant. Those leaves were tossed overboard since they weren't edible and had a distinctive aroma, despite the fact that Native Americans had been smoking them for more than 2000 years for therapeutic and religious purposes.



tobacco-history-columbus-native-americans

Columbus quickly learned, however, that the inhabitants prized dried tobacco leaves since they frequently traded for them and offered them as gifts. The first people to notice smoking in Europe were Rodrigo de Jerez and Luis de Torres. In Cuba, Jerez develops the habit, which he then brings back to Spain.

European Tobacco History

The Holy Inquisition quickly detained Jerez and imprisoned him for over 7 years because his neighbors were so terrified by the smoke emanating from his mouth and nostrils. However, smoking quickly established itself as a habit in both Spain and Portugal, likely due to the large number of sailors at the period. Portuguese seafarers planted enough tobacco around almost all of their trading outposts in the fifteenth century for their own consumption and as presents. Tobacco was commercially grown in Brazil by the middle of the 20th century, and it quickly became a highly sought-after item that was exported between ports in Europe and the Americas.

Nearly every nation in Europe had access to the tobacco plant by the end of the 16th century, as had tobacco consumption. Doctors asserted that tobacco had therapeutic benefits and it was used for smoking or snuffing depending on personal inclination. Some, like Nicolas Monardes in 1571, even went so far as to compile a book listing 36 distinct illnesses that they claimed tobacco could treat.

The American tobacco industry's past

Sometime after the Revolutionary War, tobacco products started to become widely used in the US. In 1776, the revolutionaries used tobacco as security for the debts they were receiving from France because, as you will soon discover, war and tobacco go hand in hand.

Although J.E. Liggett and Brother, an American company founded in St. Louis in the 18th century, swiftly adapted the technology, Philip Morris was the first to start selling hand-rolled Turkish cigarettes. In spite of cigarettes steadily displacing chewing tobacco as the most popular tobacco product in the 19th century, chewing tobacco was still very popular. James Bonsack's creation of the cigarette-making machine in the early 19th century marked the beginning of cigarettes' true renaissance in popularity.

According to new research (2000 Surgeon General's Report Highlights: Tobacco Timeline | Smoking & Tobacco Use | CDC, n.d.-c. Office on Smoking and Health, National Center for Chronic Disease Prevention and Health Promotion) early in the 19th century, cigarettes were first made available in the United States. Prior to this, tobacco was largely utilized in snuff, pipes, and cigars. By the time of the Civil War, smoking had become more prevalent. Cigarettes were the first item to be subject to government tax in the eighteenth century.

They soon gained notoriety as a major tobacco product in the US due to the expansion of the cigarette manufacturing industry. The early anti-smoking effort was also sparked by the populist health reform movement. Between 1880 and 1920, moral and hygienic concerns, rather than health concerns, were the main drivers of this effort. The milder flue-cured tobacco blends used in early 20th-century cigarettes made smoking easier and boosted the bloodstream absorption of nicotine. Army surgeons hailed smoking as a means of relieving pain and promoting relaxation in the injured during World War I. In the late 1940s and early 1950s, smoking was initially connected to lung cancer and other illnesses. Excessive cigarette smoking

and lung cancer were found to be causally related in nineteenth century, according to a scientific study team led by the Surgeon General. In England, smoking's causal involvement was highlighted in the 1962 Royal College of Physicians study.

Cigarette sales were significantly impacted by anti-smoking messages, but they were stopped when cigarette advertising on radio and television was outlawed in 1969. The 1972 Surgeon General's report was the first in a line of scientific studies to link environmental tobacco smoke (ETS) to health risks for people who don't smoke. Due to the public health risk of ETS exposure, Arizona was the first state to specifically ban smoking in a variety of public settings in 1973. By the middle of the 1970s, the federal government started administratively controlling smoking inside of government buildings. The Army and Navy stopped giving soldiers smoke in their rations in 1975. In 1979, smoking restrictions were imposed across the board for federal buildings, and the White House outlawed smoking in 1993.

Increase in Cigarette Use

The popularity of cigarettes peaked during the First and Second World Wars. Tobacco companies sent millions of cartons of cigarettes to soldiers fighting on the front lines, creating hundreds of thousands of passionate and hooked smokers as a result. Even the C-rations, which were mostly food and supplements in addition to cigarettes for the soldiers, contained tobacco goods. In an effort to feminize the habit and make it more appealing to women, tobacco corporations began extensively marketing to women in the 1920s and developed brands like "Mild as May."

Today, there is more regulation of tobacco and tobacco products. Companies are now required to explicitly mark their products as having a negative impact on a person's health after losing innumerable legal battles. Additionally, cigarette advertising is tightly controlled and limited. Even still, tobacco firms generate billions of dollars in revenue annually while damaging other people's health. Around 1 billion people use tobacco worldwide, according to estimates. A greater effort needs to be made to inform individuals, especially teenagers and young adults, about the hazards of smoking because the harm produced by this addiction and its promoters amounts to trillions of dollars in health costs and environmental harm.

Background/ Problem Statement

The most popular tobacco products around the turn of the 20th century were cigars, pipe tobacco, and chewing tobacco. Despite the fact that cigarette smoking was starting to rise sharply, mass cigarette production was still in its infancy. According to the ninth edition of the Encyclopaedia Britannica, although tobacco use was believed to have certain harmful effects on the body, there were also believed to be some therapeutic advantages. Many academics and medical professionals at the time promoted the use of smoke for benefits including improved mood, boredom relief, and improved performance.



Created by Rin, A. (2018, September 11). SMOKING KILLS

Some Startling Information About Smoking's Risks

- | | |
|--|---|
| <ul style="list-style-type: none">• Tobacco is lethal.• Your mortality risk goes up as a result.• One cigarette can reduce your life expectancy by 11 minutes. | <ul style="list-style-type: none">• Smoking is a severe cause of sickness and a killer.• Smoking has an impact on fertility.• It makes you breath terrible. |
|--|---|

Contrarily, tobacco smoking was acknowledged as a highly addictive substance and one of the most serious causes of illness and death by the start of the twenty-first century. Because smoking rates significantly increased in developing countries in the latter half of the 20th century, it was expected that the annual number of smoking-related deaths would increase rapidly in the 21st century. For instance, in the late 1990s, the World Health Organization (WHO) predicted that tobacco usage was responsible for almost four million deaths annually. Approximately five million people were added to this estimate in 2003, six million in 2011, and eight million annually were projected to be added by 2030. It was anticipated that developing nations will account for 80 percent of those fatalities. Indeed, despite the fact that smoking rates were falling in many western European, North American, and Australian nations as well as in Australia, tobacco usage was on the rise throughout Asia, Africa, and South America.

Risk of smoking

If you smoke, you run the risk of developing cancer in nearly every body part. such as the Bladder, Blood (acute myeloid leukemia), Cervix, Colon, and rectum (colorectal), Esophagus, Kidney, and ureter, Larynx, Liver, Oropharynx (containing sections of the throat, tongue, soft palate, and tonsils), Pancreas, Stomach, Trachea, bronchus, and lung. Smoking increases one's risk of developing cancer and other diseases, as well as that of their survivors. If no one smoked, there would be a 4/10 reduction in cancer mortality worldwide.



Smoking is to blame for the vast majority of tobacco-related deaths. Each year, tobacco usage causes premature deaths in humans. Besides, smoking causes many diseases, such as Lung cancer, stroke, chronic obstructive pulmonary disease (COPD), eye disorders, tuberculosis, diabetes, sleeping disorders, mental health, etc. caused due to excessive smoking finally leads to death. According to a study, a higher number of women has been suffering from lung cancer than breast cancer. One of the biggest health issues in the globe for many years has already been tobacco use. About a million of people were killed by it throughout the 20th century, the majority of whom lived in wealthy nations today. According to some projections, one billion people may die from tobacco-related illnesses in the 21st century as the health costs of smoking shift from high-income to low-to-middle-income nations. Moreover, smoking decreases fertility, decay of our teeth, and increases mouth stink.

According to Health Risks of Smoking Tobacco, The little air sacs and airways in your lungs are harmed by smoking. Lung function continues to deteriorate as long as a person smokes, and the harm begins as soon as they start smoking. Even so, it could take a while before the issue is obvious enough to allow for the diagnosis of lung illness. Chronic obstructive pulmonary disease, for example, can develop from significant lung disorders caused by smoke damage (COPD). In addition, smoking can make some lung conditions, such as asthma, worse and raise the risk of lung infections like pneumonia and tuberculosis.

Emphysema and chronic bronchitis are both part of COPD, one of the main causes of death in the United States (discussed below). The severity of each ailment varies from person to person,

but the majority of persons with COPD have both of them. Due to damage to the lungs' tiny airways, COPD makes it challenging for the lungs to deliver oxygen to the body's other organs. The most frequent cause of COPD is unquestionably smoking. The more you smoke and the longer you smoke, the greater the risk. Early indications of COPD can include noises in the chest (such as whistling, rattling, or whistling), shortness of breath during exercising, and mucous coughing. In particular, if a person keeps smoking, COPD frequently gets worse over time. Although some medications may help with symptoms, there is no known cure for COPD.

People who smoke for an extended period of time frequently experience chronic bronchitis. Due to the excessive mucus production caused by this illness, the patient must attempt to cough it out. The cough becomes persistent, and the airways swell with inflammation. Sometimes the symptoms can improve, but the cough keeps returning. Scar tissue and mucus can clog the airways over time, which can result in serious lung infections. Although there is no known treatment for chronic bronchitis, stopping smoking can help keep symptoms under control and prevent further harm.

The walls separating the lungs' tiny air sacs deteriorate in emphysema, resulting in larger but fewer sacs. As a result, less oxygen gets into the blood. These sacs may eventually degrade to the point where an individual with emphysema finds it difficult to breathe, even when at rest. Emphysema patients are susceptible to a wide range of additional conditions involving impaired lung function, including pneumonia. Patients frequently require an oxygen mask or breathing tube in the final stages of the disease. Emphysema cannot be cured, although it can be managed and slowed down if the smoker gives up smoking.

Reason for smoker's cough and impact on heart and blood vessels

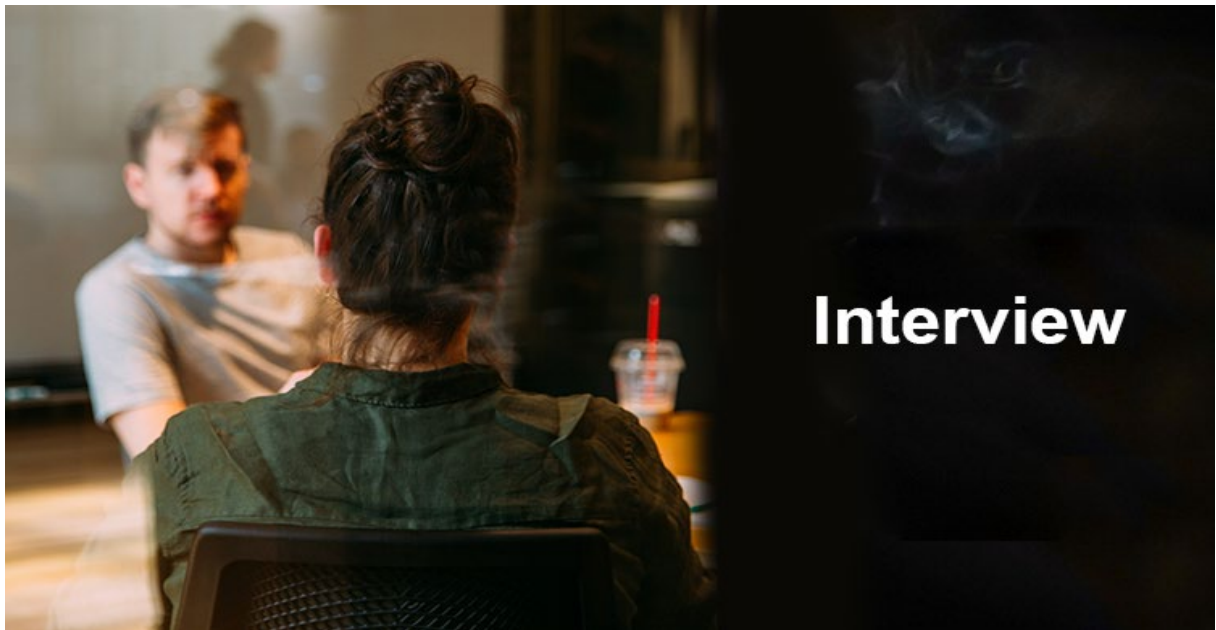
The upper airways and lungs may become irritated by tobacco smoke's many compounds and particles. The body produces mucus and causes a coughing fit in an effort to expel these compounds when a person breathes them in. Many factors contribute to the frequent morning cough experienced by smokers. Usually, microscopic hair-like structures in the airways assist in removing toxic substances from the lungs. As a result, some of the mucus and other particles in the smoke remain in the lungs and airways. However, tobacco smoke delays this sweeping effect. Some cilia heal and resume functioning while the individual is sleeping. The lungs are attempting to expel the irritations and mucus that accumulated from the previous day when a

person coughs upon waking up. Your risk of heart disease and stroke increases as a result of cigarette use because it harms your heart and blood vessels. The inability of the heart's arteries to provide the heart muscle with enough oxygen-rich blood is known as coronary heart disease, and smoking is a key contributing factor. Heart attacks are primarily brought on by CHD, which is also the main killer. Smoking increases blood clotting risk, elevates blood pressure, and reduces exercise capacity. For heart attacks and strokes, each of these poses a danger. For peripheral arterial disease, smoking is a substantial risk factor.

The arteries that supply the brain, organs, and limbs with blood become clogged with plaque in PAD. This makes you more susceptible to heart disease, heart attacks, and stroke. An aortic aneurysm is more likely to occur if you smoke. The main artery delivering blood from the heart to other organs has a balloon-like bulge in it called the aorta. The aorta's wall weakening is what causes it. Aortic aneurysms can enlarge over time, and if they burst, they could be fatal. Peripheral vascular disease, also referred to as smoking, is a condition when there is inadequate blood flow to the arms and legs. Walking may be painful as a result, and open sores that don't heal may result. Smoking might make it harder for the body to heal from injuries because it alters blood flow. For this reason, many medical professionals refuse to perform certain procedures on patients unless they quit smoking.

The reproductive health of women can suffer from smoking. Women who smoke, for instance, are more likely to experience difficulties getting pregnant. Smoking during pregnancy can result in health issues that could harm the unborn child as well as the mother. Smokers are also more prone to experience sudden infant death syndrome in their offspring both during and after pregnancy. Anywhere in the body that smokes might lead to blood vessel damage. An essential component of male erections is blood flow in the penis. For men, erectile dysfunction is more common when they smoke. As smokers puff more and for longer periods of time, their risk rises. Smoking can also have an impact on sperm, which can lower fertility and raise the possibility of miscarriages and birth abnormalities.

Interview/Opinions



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It's not your choice to smoke. Instead of the other way around, smoking controls the smoker. Having said that, I interviewed some of my colleagues and acquaintances to better understand or learn about their thoughts on smoking. And according to their perceptions, each person's reasoning for smoking was different. I have explained each and everyone's interview or opinions as mentioned below:

Smoker 1: Although I'm not sure when or why I first started smoking, I believe that a handful of my buddies forced me to do so. They frequently presented me with drinks and smokes. Most of the time, I ignored it, but with time, I started to smoke, and now I regularly consume several cigarettes and a lot of alcohol. After over a year, I'm still filled with excitement and enthusiasm, and I don't know why, but it motivates me to work hard. I'm enjoying it and it feels like bliss.

Smoker 2: I remember that three to four years ago, one of my friends advised me to choose cigarettes, drugs, or alcohol if you are in problems. Since then, I've been taking it every day or two, and at first, I felt incredibly at ease and energized. However, I am currently experiencing extreme fatigue, a lack of energy, diabetes that I have discovered, as well as anxiety and stress.

Smoker 3: Since I started smoking at the age of 16, it has been close to 12–14 years. Many times, I considered giving up. Even though I used numerous sources, I was unsuccessful. I visited the doctor a few days ago because I was experiencing physical discomfort and a feeling of weakness. I discovered at that time that I had early-stage lung cancer. This news completely startled me. However, my doctor advised me to take some safety measures, which I am doing.

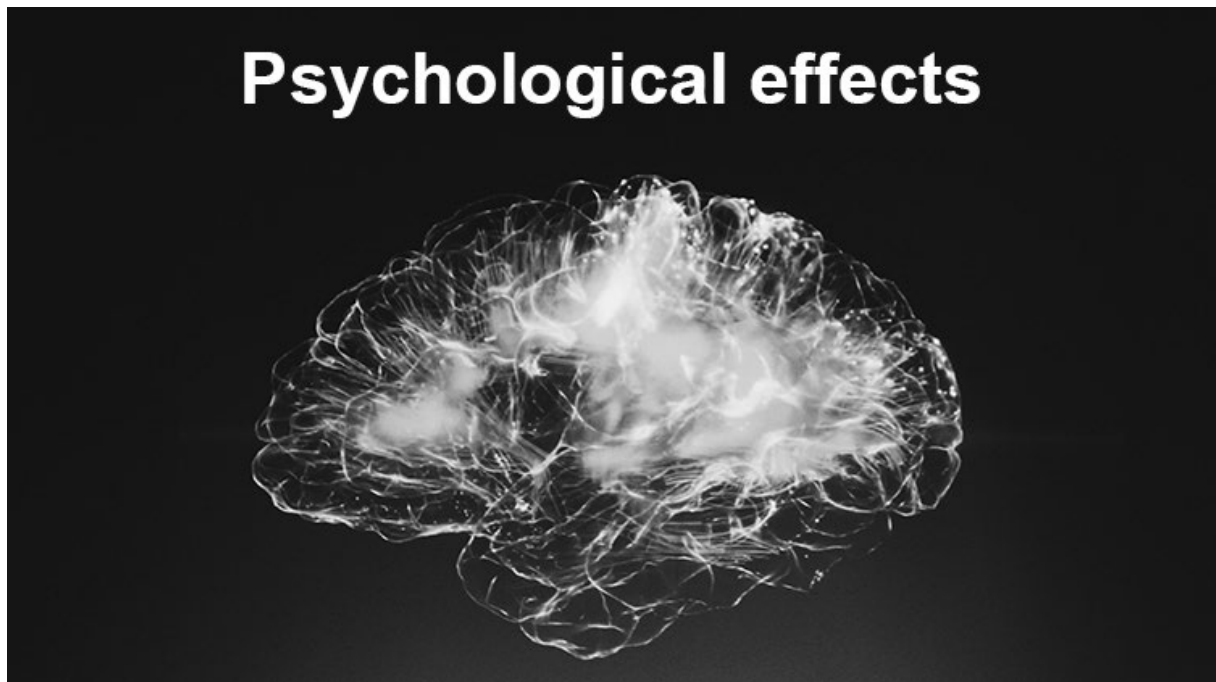
Smoker 4: I am 62 years old man and I have been smoking for 30-35 years. There are no specific reasons to start smoking. Initially, I used to eat tobacco, later I started smoking as it was easy to use and feels good. I know, it is hazardous to the human body and even, there are many advertisements and cautions on the television, in newspapers, and also on cigarette packets, though I smoke and thanks to god, I do not have any health issues to date.

It is my personal opinion that I do not have any issues. But I would suggest the young generation avoid smoking as it can be harmful to them as nowadays, foods are not that foster compared to earlier.

Smoker 5: I am 28 years old woman, studying master's here in Germany for one and half years. To be honest, because of my friends I started taking alcohol and cigarette. Many times, I use electric cigarettes as well. Honestly, I am planning to leave smoking at least, because smoking is far more dangerous than alcohol as I take alcohol 2-3 times in a month. I smoke 2-3 cigarettes in a day. Additionally, smoking cigarettes can lead to impotency, pregnancy and period issues, cancer and many more. So, I think this kind of mobile app can be useful.

Thus, I conducted a few more interviews. In the end, I discovered that everyone had some sort of health concern, and when I questioned them about this application, they were pleased that it might be useful for them as well as others.

Psychological effects



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According to WHO, everyone who smokes cigarettes has a different reason for doing so. Smoking, for instance, lessens their tension or makes them happier. People who suffer from mental illness are two times more likely to use tobacco. People who smoke tobacco are more susceptible to psychological illness. There are common and dangerous mental health conditions, which have been mentioned below:

1. Anxiety and depression are two mental health illnesses that, according to estimates, affect almost 12% of the population.
2. Mental illnesses such as bipolar and psychotic disorders. Almost none of them are impacted by them. the general populace but have a significantly bigger impact on the standard of living and daily functioning of people common mental illnesses and have more major consequences on families and caregivers.
3. A mental health disorder will affect more than one in ten people in the general population at some point.

4. Those with severe mental illnesses make up two out of every three smokers. About twice as many people with serious mental health disorders smoke as those in general.
5. Smoking is one of the leading causes of the premature death of people with mental problems. Adults with any type of mental disease have a lifespan that is 5–10 years shorter. Adults with severe mental illness have a 15 to 20-year reduced life expectancy.
6. Smoking tends to exacerbate emotional health disorders. It worsens psychiatric symptoms and levels of stress and anxiety.
7. Smoking reduces your ability to take medications for mental disorders. Some medications may be affected and lose some of their effectiveness by it.

In our humanity, there are some myths, that quitting smoking raises a person's risk of developing a mental illness. Smoking makes it easier for those with serious mental illnesses to handle their issues. Smoking is a form of self-medication for those with mental illnesses. If those who take medication for mental health disorders didn't smoke, their drug dosage would need to be increased. Mental health issues may make it difficult for tobacco users to handle the symptoms of nicotine withdrawal while trying to quit.

Contrarily, it is true that giving up cigarettes has a good effect on mental health. It improves mood and can help with symptoms since it lowers levels of stress, anxiety, and despair. In fact, smoking can interfere with some medications used to treat mental health issues and lessen their effectiveness. Again, this is wrong because quitting smoking actually enables persons taking some antipsychotic drugs to cut their dosage by up to 25%. As a result, taking these treatments has fewer side effects and long-term hazards. Smokers with mental health difficulties are capable of stopping smoking with the right motivation and assistance. A combination of pharmaceutical and non-pharmacological therapies can be used to treat the symptoms of nicotine withdrawal.

The tobacco business is disseminating false information

The tobacco industry is spreading lies about the link between smoking and mental illness. The industry has employed a variety of tactics to market tobacco products to people with mental health conditions, including funding studies that promoted misconceptions about how difficult it is for people with mental health conditions to quit smoking; however, these studies were

poorly designed, and later, more reliable studies contradicted these findings; donating or offering cheap cigarettes to mental health facilities; making financial contributions; and forging relationships with organizations. Arguments that smoke-free policies in mental health facilities are "inhumane" are used to weaken their support, and marketing strategies that are specifically aimed at people with mental illnesses are developed. Adequately targeted anti-smoking mass media efforts, together with effective tobacco prevention and control programs and regulations shielded from corporate influence, can help lower the disease burden among people with mental illness.

Benefits

Giving up smoking provides some benefits for persons who suffer from mental health issues. an advantage for mental health some antipsychotic drugs' dosages are decreased fewer chances of relapsing into drug and alcohol use, health advantages right away smoking cessation significantly lowers the risk of heart disease, stroke, and cancer. After just one year of cessation, the risk of a heart attack also sharply declines.

Complete withdrawal issues

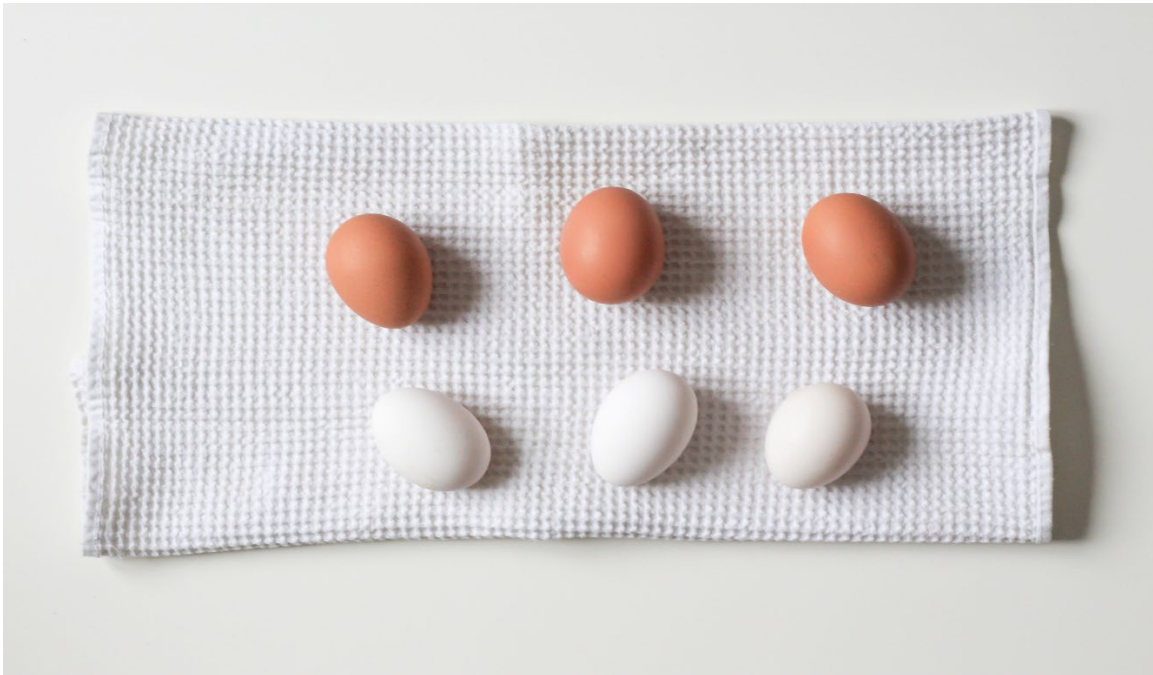
People with mental health issues are more prone to developing a nicotine addiction and smoking. Nicotine may momentarily mask the negative symptoms of a mental illness. When compared to non-users, nicotine withdrawal symptoms are typically more severe among tobacco users with mental health disorders. Those who have trouble quitting smoking may experience more challenges. For instance, individuals might not have access to healthcare, insurance, or support for quitting, or they might reside in stressful situations with low annual household incomes.

In fact, those issues with smoking laws with such a mental aspect can be resolved without additional help. Simple smoke-free legislation does not have the same impact on those with mental health issues. They will follow us out of here.

- Reducing smoking among those who have mental illnesses should be a priority for policymakers, whether through health systems or other means.
- Specialists should be given first attention. There is no alternative course of action that would more effectively close the life expectancy difference.

- Smoke-free mental health services can be offered by removing the exceptions for mental health services from smoke-free laws and guaranteeing the full implementation of the WHO Framework Convention on Tobacco Control. As a result, disparities in the treatment of patients with mental health disorders would be prevented, and mental health professionals would be shielded from the damaging effects of secondhand smoke.
- Campaigns to raise awareness among mental health professionals can dispel common misconceptions regarding patients' readiness and capacity to quit smoking that a sizable majority of medical professionals' hold.
- Professionals in mental health can integrate smoking-cessation interventions into their services with interventions that are specifically designed for this patient group thanks to training in cessation counselling.
- By addressing a significant segment of the population and informing the general public, tobacco pack warnings of potential risks can be increased to include risks to mental health.
- Combining pharmaceutical and non-pharmacological therapies can improve the success of quitting. Supportive behavioral programs are among the nonpharmacological therapies, while pharmaceutical interventions include varenicline, bupropion, and nicotine replacement therapy.
- The prevalence of smoking in this population can be significantly reduced by higher tobacco taxes, which can also help with stopping. Taxation policies are more likely to be endorsed if they specify exactly how the money will be used and what advantages would accrue to those with mental health issues.

Comparative Analysis



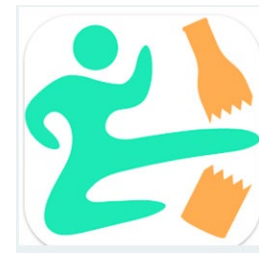
Photography: NordWood Themes. Free to use under the Unsplash License. (shorturl.at/huyZ5)

In order to better understand the causal mechanisms involved in the production of an event, characteristic, or relationship, a comparative analysis is mostly done for explanatory purposes. Usually, it does this by varying the explanatory variable or variables more (or less). Simply comparing and contrasting two or more objects in a systematic manner is comparative analysis. Comparison methods can concentrate on overly simple similarities or differences, or on two comparable entities with significant differences that turn out to have unexpected similarities. Comparative analysis' primary objective is to systematize research on many topics so that its findings can be extrapolated to reveal connections between them.

In order to clarify or define the differences between my mobile application and others, I have utilized the comparative analysis method in this topic. For this process, I have used five other existing applications called EasyQuit, Cigarette Counter, and Tracker, and my application is named Quit Smoking. By doing so, we are able to distinguish between the many ways that Quit Smoking programs are used. Below is the table explained with the five comparisons and components to elaborate clearly:

Notification

EasyQuit: Notification on the mobile home screen is not available



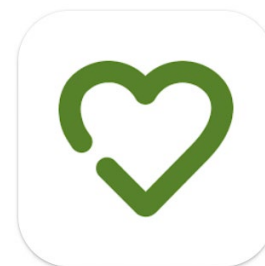
Cigarette Counter and Tracker: Notification on the mobile home screen is not available



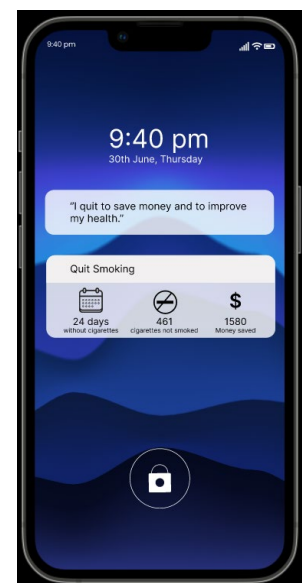
QuitSure: Notification on the mobile home screen is not available



Smoke Free - quit smoking now: Notification on the mobile home screen is not available

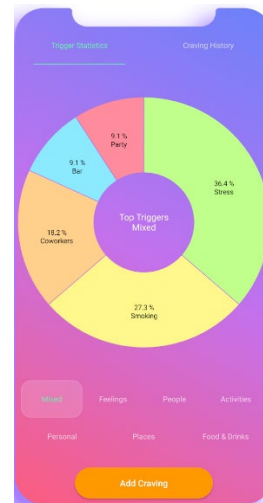


Quit Smoking: Notification on the mobile home screen is available

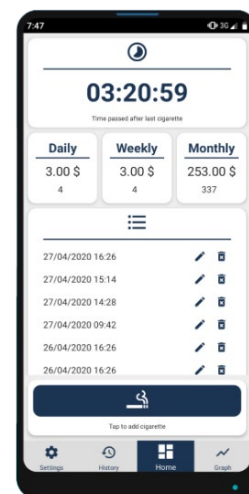


Tracker

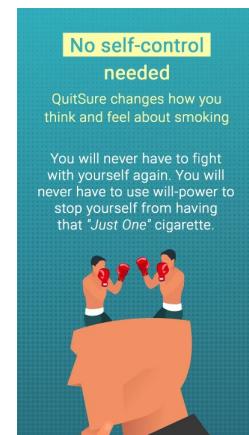
EasyQuit: This app has many features like money you save, motivational health statistics about your body and how it improves without alcohol, and personal motivations with a reminder function.



Cigarette Counter and Tracker: This app helps you to keep track of your smoked cigarettes and spent money



QuitSure: It does not have money or time kind of the tracker, but good advice from the well-known experts



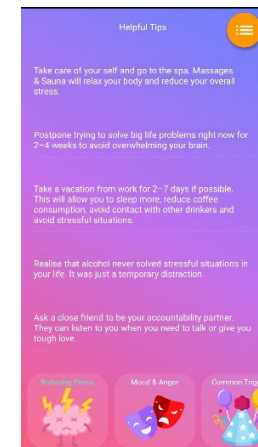
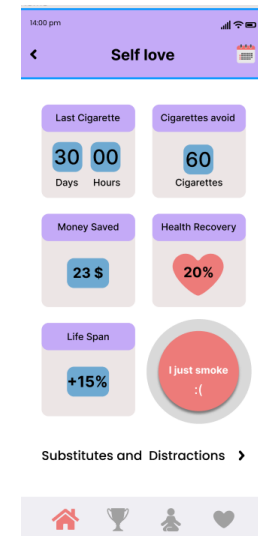
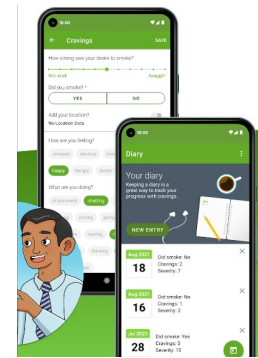
Tips/ Advice

Smoke Free – This app helps to keep a record of your health, diet, etc.

Quit Smoking: It helps you to check record of saved money, how many cigarettes you stop in a week, etc.

EasyQuit: This app has tips section to advice you on quit smoking

Cigarette Counter and Tracker: This app does not have a tips section



Award/ Motivation

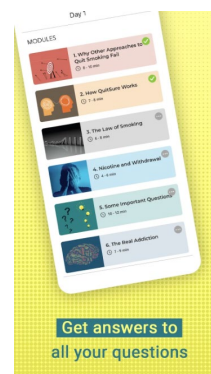
QuitSure: This app mostly focuses on advice or answers to your questions. So, this is its main or core option.

Smoke Free - quit smoking now: This application has advice from doctors, and experts options.

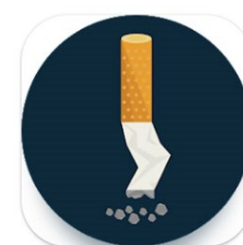
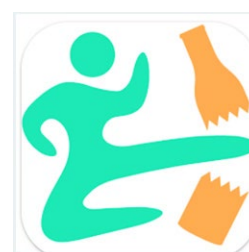
Quit Smoking: This mobile application does not have tips or advice from any experts or doctors, though you will find some suggestions.

EasyQuit: This app does not have award section but, it has goal achieved and saved money options

Cigarette Counter and Tracker: It does not have this menu.



Quit Smoking



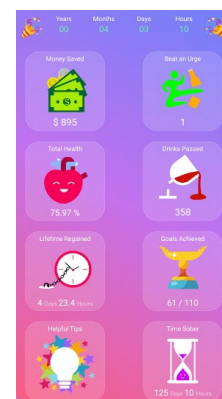
QuitSure: It does not have this menu.

Smoke Free - quit smoking now: It has award system in the form of badges

Quit Smoking: This option is available. It will help to keep you motivated

EasyQuit: The "EasyQuit" software can assist you in quitting drinking either instantly or gradually. It includes a lot of features to help you stay motivated, like reminders, financial savings, and statistics about your body's health and how it improves without alcohol.

Focus/ Aim



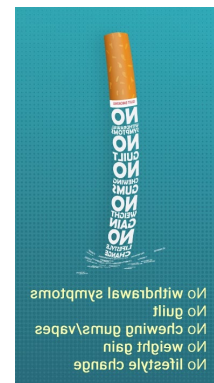
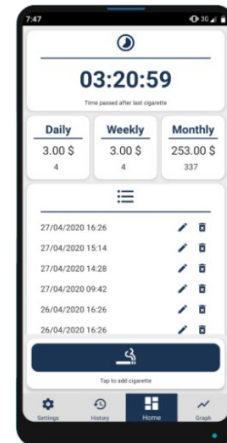
Cigarette Counter and Tracker: The simplest method to track spending on cigarettes is to use a cigarette counter. You may monitor your cigarette use on a daily, weekly, and monthly basis. Simply tap when you smoked to count and record the number of cigarettes. To record a cigarette, utilize the widget or app. You may get a daily, weekly, and monthly overview from the cigarette counter. Charts can be used to monitor your smoking behavior.

QuitSure: Using the most recent advancements in psychology and behavioral science, a potent stop smoking program was created. It was developed by ex-smokers based on input from our 500,000 clients. It gently dissolves your mental addiction and makes you smoke-free.

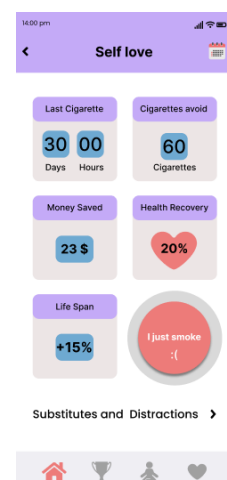
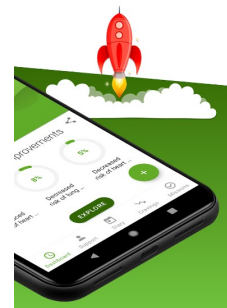
Smoke Free - quit smoking now: Use the most effective quitting strategies available to you, including 40+ scientifically proven stop smoking tactics. Smoke Free can help you stop smoking, increasing your chances of success and eradicating your tobacco cravings for good.

You may stop smoking for good with the assistance of Smoke-Free's expert counsel. Top experts in smoking cessation are available to you for one-on-one assistance and to answer your questions.

Quit Smoking: It focuses mainly on breathing, cigarette tracking and motivation. Our main aim is to spread awareness in society so that, we can save our young generation.



A stop smoking plan that works



Solutions

Some general solutions

It can take time and effort to stop using cigarettes. The hardest and most crucial part of quitting smoking is maintaining it. You must choose not to use tobacco now each and every day. Every day that you refrain from using tobacco or smoking is a small success. Over time, these all add up to a significant win.

From the information provided above, we now understand what smoking is, as well as its causes and consequences. The methods for quitting smoking will now be studied or explained in this area. There are numerous strategies to stop smoking, some of them are listed below:

1. Chew at least eight to nine pieces of nicotine gum per day for the first five to six weeks. Chew nicotine gum slowly until you can taste the nicotine or notice a slight sensation on your tongue. Put the chewing gum down between your cheek and gum and stop chewing after that.
2. Whenever you feel the urge to smoke, attempt to put it off while eating as many fruits and vegetables as you can. As an illustration, consider carrots, radish, tomato, cucumber, root beets, apple, oranges, banana, watermelon, almonds, and dry fruits.
3. In addition to being healthier for your health, drinking a lot of water can help you stop smoking. Try to consume 5 to 6 liters of water every day throughout this time.
4. To further combat the want to smoke, consider calling your friends, family, or other close people. Additionally, you can watch movies, play video games, or do any recreational activities.
5. Walking or jogging, exercising, or Zumba dancing are all excellent ways to stay in shape, stay healthy, and resist the need to smoke.
6. Since we enjoy music, listening to it can be a good solution.

About mobile application

Thus, we have discussed or mentioned few options to ignore or quit smoking. Now, let us discuss an application which is the main part of my thesis, and I am designed and created a prototype of mobile application using Figma to quit smoking using digital way. In fact, the main goal of this project is to let the human race stop smoking and spread awareness in society with the help of mobile applications as nowadays, everyone has a smartphone. This mobile application is intended for people who want to quit smoking. Additionally, this application to quit smoking has a three-month, or 90-day, duration. After quitting smoking, they can use this app to track the changes in their body over the course of a day, a week, a month, or even a year. how many of them will be able to regain their hearts, minds, and lungs' health.

The user can see how much money they were able to save by not purchasing cigarettes during this time. See how much money they saved by quitting smoking by watching their pockets fill up. Additionally, the top of the list or winner will receive some sort of reward at the conclusion or end of the target period. It also contains some recommendations for users, including information on why quitting is difficult, the benefits of stopping, and other helpful articles.

Moreover, the guided breathing and meditation section, where users choose a meditation song and begin to breathe in accordance with the circles that the app displays for inhaling and exhaling, is the one feature that can be particularly helpful for users.

Conclusion

In light of the aforementioned subject, I believe that smoking is a huge monster that we must confront in order to exterminate. We must do this not only with the aid of some general solutions and mobile applications but also with the aid of our own understanding, as even greater use of technology can be harmful to us.

Bibliography

1. Christine Ann Rose. (n.d.). *Encyclopedia Britannica*.
<https://www.britannica.com/contributor/Christine-Ann-Rose/6100>
2. *smoking* | Definition, Types, Effects, History, & Facts. (2022b, September 27). *Encyclopedia Britannica*. <https://www.britannica.com/topic/smoking-tobacco/The-goals-and-strategies-of-public-policy-on-smoking>
3. *Tobacco-Free Life*. (2016, June 16). *History of Tobacco in the World — Tobacco Timeline*. <https://tobaccofreelife.org/tobacco/tobacco-history/>
4. *2000 Surgeon General's Report Highlights: Tobacco Timeline | Smoking & Tobacco Use* | CDC. (n.d.-d).
https://www.cdc.gov/tobacco/data_statistics/sgr/2000/highlights/historical/index.htm
5. Rin, A. (2018, September 11). *SMOKING KILLS — but you know that already, don't you?* Medium. <https://medium.com/mosaic2/smoking-kills-but-you-know-that-already-dont-you-3a6fab9ab5ff>
6. *Health Risks of Smoking Tobacco*. www.cancer.org/healthy/stay-away-from-tobacco/health-risks-of-tobacco/health-risks-of-smoking-tobacco.html
7. *National Kidney Foundation of Michigan*. (2022, May 12). *Tobacco and Smoking*.
<https://nkfm.org/conditions/tobacco-and-smoking/>