The main results of this study revealed that most of the sample monks were 21-40 years of age. They were in monkhood less than 10 years. Majority of them finished secondary school. Half of them were in " Naktamtee " level of the religious education. The smoking rate among these monks was 53.4%. They smoked 6-10 cigarettes per day. Most of them started smoking when they were 16-20 years of age which were before they entered their monkhood. The main reasons for their smoking were that they wanted to try to smoke by themselves, they were living in the family which their father were smoking. It was found that the predisposing factors, namely the knowledge, attitude, belief and value about smoking, the duration of monkhood, the formal and the religiuos education were significantly related to smoking behavior. The reinforcing factors: living in the smoking family, the rejection of head of monks a monastery about smoking were also related to the smoking behavior. However, the relationship between the enabling factors and the behavior were not found.

In summary the results of this study can be used to develop both the smoking control program and the antismoking campaign program for Thai Buddhistic monks.

Master of Science (Public Health)
major, in Health Education

Thesis Supervisory Committee

Nirat Imamee M.P.H., Ph.D.
Prakit Vateesatokit M.D., ABIM., FRCP.
Prapapen Suwan M.S., Ph.D.

Date of Graduation 4 May B.E. 2536 (1993)

ABSTRACT

Smoking is one of the major risk factors of

Kanchana Srinual

Factors Influencing Smoking Behavior

among Thai Monks in Ratchaburi Province

Thesis Title

Name

as the public health problem of the world. The 1992 Annual Report of Song (Monks') Hospital of Thailand showed a high mortality rate of smoking - related diseases among monks. Thus, the main objective of this survey research was to study factors influencing smoking behavior among Thai monks in Ratchaburi province. The PRECEDE Framework concept was used in identifying the variables to be studied in this research.

smokers and passive smokers'health problem. It is realized

Twenty five temples were randomly selected from Buddhistic temples in Ratchaburi province. All smoking and non-smoking monks in the 25 temples were then included in the study. A self-administered questionnaire was devised to collect data. Two hundred and sixty six questionnaires were completed and analysed.