

Original article

Habit pattern and perceptions of harm of smokeless tobacco in Vidharba region in Maharashtra

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Abstract:

Introduction: In today's world smokeless tobacco use is disproportionately concentrated in low-income and middle-income countries like India and Bangladesh etc. Our study examined patterns of use and perceptions of harm for different smokeless tobacco products among adults and youth in vidharbha region.

Methods: Face-to-face interviews were conducted with smokeless tobacco users in the village.

Results: In present study maximum percentage of youth was found in this kind addiction. Males were found higher in addiction than in female. The low income group pattern was more addicted in this kind habits with false beliefs. Gutkha and Khaini pattern was heavily observed in this study.

Conclusions: The findings highlight the high daily use of smokeless tobacco, and the high prevalence of false beliefs about its harms.

Keywords: Smokeless tobacco, health knowledge, attitudes

Introduction:

Communicating the health risks of tobacco use remains a priority for tobacco control, particularly in low and middle-income countries that are often characterized by limited access to health information, less exposure to mass media campaigns, and lower literacy levels. In order for a tobacco control strategy to be effective, it must first be informed by the local context. To date, numerous studies have examined patterns and predictors of smokeless tobacco use in India. In today's world smokeless tobacco use is disproportionately concentrated in low-income and middle-income countries like India and Bangladesh etc. Our study examined patterns of use and perceptions of harm for different smokeless tobacco products among adults and youth in vidharbha region.

Material and methods:

This was prospective study. The sample size was estimated using standard online sample size estimation calculator. The sample was data was collected using random sampling technique. We randomly collected data of 100 subjects.

Face-to-face interviews were conducted with adult (19 years and older) smokeless tobacco users and youth (16–18 years) users and non-users. The data was collected using standard validated 10 point questionnaire.

The subjects not willing were excluded from present study.

Results:

Table 1) Study participants in present study

S.NO.	Age group (Years)	Participants
1	< 20	8
2	20- 35	34
3	35 - 50	26
4	>50	32
	Total	100

Table 2) Study participants in present study

S.NO.	Gender	Participants
1	Male	58
2	Female	42
	Total	100

Table 3) Pattern of use in present study

S.NO.	Pattern of use	Participants
1	Daily	71
2	Occasionally	9
3	Heavily	22
	Total	100

Table 4) Income group in present study

S.NO.	Pattern of use	Participants
1	Low	69
2	Middle	23
3	High	08
	Total	100

Table 5) Use of products in present study

S.NO.	Pattern of use	Participants
1	Gutkha	43
2	Mishri	15
3	Pan	24
4	Khaini	18
	Total	100

Table 5) Perception of harm of tobacco

S.NO.	Pattern of use	Participants
1	Well awareness	15
2	Knowns but ignore attitude	48
3	Planning for leaving habit	29
4	Heavily addicted	8
	Total	100

Discussion:

In present study maximum percentage of youth was found in this kind addiction. Males were found higher in addiction than in female . The low income group pattern was more addicted in this kind habits with false beliefs . Gutkha and Khaini pattern was heavily observed in this study. Among youth, daily smokeless tobacco users reported more positive attitudes and beliefs than non-daily users, and susceptible and non-susceptible non-users. In addition, false beliefs about the harmfulness of smokeless tobacco products were noted.

Tobacco use is an epidemic incapacitating the modern youth and an estimated total of 82,000–99,000 children all worldwide start smoking any given day.^[1] Chronic tobacco usage can be attributed to any abrupt and immature decision to experiment tobacco during the early adolescent period.^[1] An overwhelming majority of smokers start using tobacco before the age of 19.^[2] Even single experimentations have a 50% chance for developing into an addiction^[3] and stay proximate till late adult life.^[1]

The chances for early adoption, its gateway effect leading to more serious drugs,^[4] along with the challenges associated in prescribing a standard withdrawal, makes it one of the major cause of death globally.^[5] Tobacco has the strength to kill 250 million of children today^[6] in the current swing and a person every 6.5 sec globally.^[7] The Global Adult Tobacco Survey, India (2009–2010) reported that among the minors (15–17 years), 9.6% consumed tobacco in some form which cannot be ignored.^[8] An estimated total of 5500 adolescents start using tobacco everyday in India.^[1] The WHO predicts that deaths due to tobacco habits in India may exceed 1.5 million annually by 2020.^[9]

Refraining from the use of tobacco can add 20 years to the life of a teenager. Thus, understanding the burden of tobacco use among the adolescents helps in formulation of effective control measures targeting them.^[10] When implemented together, various national, state, and local program activities have shown to reduce and prevent tobacco usage. There are certain social and environmental factors such as religious participation and racial or ethnic pride, which are related to reduced smoking levels among youth. There are also evidences linking youth-smoking with depression, anxiety, and stress.^[11] Among the youth, students are more vulnerable to substance abuse as a faulty coping mechanism for dealing with increasing academic stress, uncertain career paths, or peer pressure.^[12]

Conclusion:

The findings highlight the high daily use of smokeless tobacco, and the high prevalence of false beliefs about its harms.

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