



PATTERNS OF TOBACCO CONSUMPTION AMONG YOUTH

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Abstract

Almost all tobacco use begins during adulthood stage. The young individuals progress from smoking occasionally to smoking every day. Of every three young smokers, only one will quit, and one of those remaining smokers will die from tobacco-related causes. Most of the young people have never considered the long-term health consequences associated with tobacco use when they start smoking; and nicotine, a highly addictive drug, causes many to continue smoking well into adulthood, often with deadly consequences. Peer influences, imagery and messages that portray tobacco use is a desirable activity and environmental cues, including in both traditional and emerging media platforms, all encourage young people to use tobacco. These influences help attract youth to tobacco use and reinforce the perception that smoking and various forms of tobacco use are a social norm-a particularly strong message during adolescence and young adulthood. Many initiatives have been put into place to help counter the influences that encourage young people to begin tobacco use. Coordinated, multi-component interventions that include mass media campaigns, comprehensive community programs, comprehensive statewide tobacco control programs, price increases, and school-based policies have also proved effective in preventing onset and use of tobacco among youths. Hence, the present study has made an attempt to understand the factors that influence the young ages between ten to thirty years, to initiate and continue smoking. This research study also examines the social, environmental, advertising and personal influences that encourage the adults to initiate and sustain tobacco use.

Key Words: Tobacco consumption, Youth, Smoking, Stress, Illness, Quit smoking

Background

Tobacco use is the leading cause of preventable deaths in the world. Its usage is a major public health challenges in India with 275 million adults have consumed different tobacco products. India is also the second largest producer and consumer of tobacco in the world, second only to China. The prevalence of tobacco uses among adults (15 years and above) is 35%. The prevalence of overall tobacco uses among males is 48 per cent and that among females is 20 per cent. Nearly two in five (38%) adults in rural areas and one in four (25%) adults in urban areas use tobacco in some sort of form.

India has played a leadership role in global tobacco control activities. With the

growing evidence of harmful and hazardous effects of tobacco, the Government of India has enacted various legislations and comprehensive tobacco control measures such as the Cigarette Act (Regulation of Production, Supply and Distribution) in 1975. The statutory warning "Cigarette Smoking is Injurious to Health" has mandatorily displayed on all cigarette packets. Besides, enacting comprehensive tobacco control legislation, India is among the first few countries to ratify WHO the Framework Convention on Tobacco Control (WHO – FCTC) in 2004.

The results of a number of descriptive studies and focus group discussions suggested that many teen smokers have motivated to quit smoking. An important conclusion of several studies regarding adolescent smoking that the important to intervene to keep occasional smokers from becoming daily smokers. It has been estimated that 74% of occasional teen smokers and 65% of daily users have desired to quit, although some studies suggested that among those who have attempted to quit low.

Research has shown that most pediatricians feel confident and prepare to address issues regarding environmental tobacco smoke with their patients, yet fewer feel comfortable advising pediatric patients and their parents on how to stop smoking. An important recent trend, however, has increased in the number of such smoking cessation programs now available for youths. Offering the cost effectiveness of smoking cessation interventions for adults, and the large number of addicted teenagers, research on cessation programs tailored to youths should be a high priority. Even though, in order to effective enforcement of tobacco control law by Government and also to strengthening the tobacco control provisions still remain a big challenge.

Factors influencing tobacco consumption and demand

Demand for tobacco is primarily derived from consumer demands for cigarettes. Tobacco grown in different countries or different regions in a country varies in type and quality. It is not a homogeneous product. The four top countries China, the United States, India and Brazil, have produced about two-thirds and the top twenty countries have produced more than 90% of the world production in 1997 (Jacobs et al, 2000). Several recent studies have shown that parental disadvantage is also a strong predictor of children's smoking and alcohol usages. Parental smoking and paternal alcohol usages have little independent influence on off-spring drug use (Macleod et al, 2008). At high level of parental monitoring, environmental influences predominant in the etiology of adolescent smoking, but at low levels of parental monitoring, genetic influences have assumed far greater importance. Indeed, smoking specific parenting practices may be easier to influence than are more general parenting styles, it has tempted to conclude that the intervention should focus only on these more specific aspects of parental behavior (Chasin et al, 2005).

Tobacco consumption and Health-Economic factors

The economic cost of smoking have been estimated in many countries, but mainly in the industrial countries, the high prevalence of smoking (developed countries) could lead to higher economic cost in the future since most of the smoking-related illness would occur many years after smoking. Two general approaches have

been used in estimating the economic cost of smoking. The prevalence approach values the present cost associated with existing cases of smoking-related diseases. In contrast, the incidents approach values, all of the future cost associated with the new cases of smoking-attributable diseases during the reference year. The former provides an estimate of the current economic burden of smoking, while the later is more useful for evaluating intervention that might interrupt the development of smoking-related illnesses.

Some evidences support the conclusion that a smoker spends more than a non-smoker on medical cost, and thus, imposes a net cost of non-smokers. The differences between estimation of medical cost associated with smoking can be attributable largely to the selection of diseases to be included. Diseases that are found to be associated with smoking have grown as research on smoking continues. Previous estimates of medical cost associated with smoking perhaps have underestimated the “true” cost since none of the studies has included the entire list of diseases that could now be attributable to smoking. Furthermore, the cost of smoking in earlier studies have not included the time and transportation cost associated with smokers obtaining medical care for smoking-related illnesses. Intangible cost associated with smoking-related diseases such as suffering and pain have also not included in estimation. Estimating the net cost a smoker imposes on non-smokers has been a difficult task both conceptually and empirically.

Anti-tobacco advertisements and its effects

There are different views about the impact of cigarette advertising on tobacco consumption. In the public health, community argues that advertising has a positive effect on demand for cigarettes. The advertisement is particularly effective in recruiting young smokers. Studies that used the aggregated data generally found at most a small effect of advertisement on cigarette demand. Studies using cross-sectional data concluded that advertisement has a significant positive effect on consumption, which increased both the market share of the advertised brand and the market size of the cigarettes in general. Studies on the effect of advertisement bans yielded an inconclusive result and those on counter advertisement found that a comprehensive set of tobacco advertisement bans can reduce cigarette consumption and a limited set of tobacco will have little or low effect (Saffer and Chaloupka:1990). They estimated that cigarette consumption would fall by 6.3% if all 22 OECD countries had comprehensive bans.

Based on the above contents, the researcher has made an attempt to study the patterns of tobacco consumption among youth including its influencing factors for usage and its negative impact on them in the particular study area.

Literature Review

Reviews of existing studies in the area of investigation enable the researcher to familiar with the trends of research practices and directions of the findings.

Gupta and Ray, (2004) demonstrated that tobacco problem in India is more complex than probably that of any other country in the world because of the diverse

patterns of tobacco consumption such as smoking, chewing, applying, sucking, gargling, etc. and a large consequential burden of tobacco related diseases and deaths.

Chaudhary, (2001) tobacco use increases with adolescent ages. It has been seen that in areas with a high prevalence of tobacco use, initiation may occur at early ages.

Hill et al, (2004) suggested that to reduce risks for daily smoking among adolescents, it is important to encourage parents to stop or reduce their own smoking. In addition, the data indicate that parents can reduce their children's risk of daily smoking initiation by reducing family conflict, by maintaining strong bonds with their children, by setting clear rules, and by closely monitoring their children's behaviours.

Macleod et al, (2008) studied that parental disadvantage is also a strong predictor of children smoking and alcohol use. An association appeared to be mediated through the great experience of childhood behavioral and cognitive problems among the disadvantaged. Parental smoking and alcohol use had little independent influence on off-spring to consume alcohol and drug usages.

According to ecological theory, **Wiium, (2009)**, the school environment is critical to the cognitive and emotional development of the child, factors that have been linked to adolescent smoking. Students who feel alienated from school and those with low academic achievements, the odds of smoking have been reported to be high.

Statement of the Problem

The researcher has selected the present study due to the increasing number of tobacco consumers among the youth in the area, and need to understand the factor that prevent them from quit the use of tobacco. Through this study, the researcher aims to learn the factors that encourage the usage of tobacco and causes which initiation of this habit. The researcher also aims to find the attitude of the youth towards the Anti-Tobacco advertisements on cigarette packets and in public places.

Objectives of the Study

The following objectives have been formulated for the present study that is, (a) to know the socio-economic conditions of the respondents; (b) to know the factors that promotes the use of tobacco among youths; (c) to know the perception by youths towards the Anti-Tobacco advertisements; and (d) to understand the health related issues of the respondents by smoking.

Methodology

The researcher has adopted descriptive research design for the present study in order to describe the research problem more effectively. The researcher has used the non-portability sampling method to collect the primary data, so that he has selected the respondents by the application of purposive sampling procedure. The universe of this study is all the male tobacco consumers between the age-group 10 to 30 years who reside at Chidambaram locality in Cuddalore District of Tamilnadu State. The researcher has selected nearly fifty (50) tobacco users as the necessary sample respondents among the universe of the study.

A structured interview schedule has been administrated by the researcher for the collection of primary data. The tool has constructed keeping in view of the objectives of the study. It has finalized based on the pilot study and pretest that has

been undertaken before the commencement of the primary data collection from the selected respondents. The interview schedule has consisted of close-ended questions which have been divided into four major parts such as, socio-economic profile, promoting factors for tobacco, perception of youths towards the Anti-Tobacco advertisements, and health related issue by tobacco. A two-point and three-point rating scale have only been used to measure the opinion on their tobacco consumption. After the data collection, the data have been classified, tabulated, and interpreted in terms of simple percentage calculations to know more about the results of the study. Only 50 tobacco consumers among youth in Chidambaram town have covered in the present study. Hence, the conclusion may not be generalized to other areas. This is the scope and limitations of the study.

Major Findings

The collected primary data have been interpreted by way of systematic procedure to understand the patterns of tobacco consumption among youth in Cuddalore district.

I. Socio-Economic Profile

Table-1: Distribution of the Respondents by their Socio-Economic Status

N=
50

Variable	Sub Group	Frequency	Percentage (%)
Age Group	15 – 19	13	26
	20 – 24	15	30
	25 – 30	22	44
Education	Secondary	09	18
	College	16	32
	Dropouts	25	50
Marital Status	Married	16	32
	Unmarried	34	68
Occupation	Students	13	26
	Unemployed	18	38
	Employed	19	36
Income Per Month (Rs.)	5000-10000	09	18
	10000-15000	07	14
	15000-20000	03	06
	No Income	31	62

From the analysis, the table-1 explained that the three-fourth (74%) of the respondents come under the age group of 20-30 years. In respect of education, the half (50%) of the tobacco consumers are dropouts even their school level, followed by nearly two-third (68%) of the respondents are unmarried. Regarding occupation, the significant strength (38%) of the tobacco consumers are presently unemployed and 26 per cent of them are currently pursuing their education that is students. It is continued

that, the notable strength (62%) of the respondents do not earn any income, because they are students and unemployed individuals in the study.

II. Promoting Factors for Tobacco

Table-2: Distribution of the Respondents by their Tobacco Consumption

N=50			
Variable	Sub Group	Frequency	Percentage (%)
Tobacco User in the Family	Father	16	32
	Siblings	8	16
	Relatives	26	52
Age at Smoking	10 – 15	19	38
	15 – 20	17	34
	20 – 25	12	24
	Above 25	02	04
Nature of Smoking	Frequent smoker	17	34
	Occasional smoker	15	30
	Rare user	18	36
Number of Cigarettes per Day	1 – 3 sticks	12	24
	3 – 5 sticks	15	30
	5 – 8 sticks	08	16
	More than 8 sticks	15	30
Smoking even in Illness	Yes	05	10
	No	38	76
	Sometime	07	14

From the field survey, the table-2 revealed that the half (52%) of the respondents said that their close relatives have the smoking habit in their family, followed by 32 per cent of them fathers also have the same habit. In respect of age at smoking, the two-third (72%) of the respondents have started the tobacco usage at very early ages that is from 10 to 20 years. The study noted that the significant strength (34% and 30%) of the respondents are being as a frequent smoker and occasional smoker of tobacco respectively. It is significantly noted that the two-third (70%) of the respondents have used 1-8 cigarettes per day regularly. It is continued that, the notable strength (76%) of the respondents have not consumed tobacco while they are under sick.

Table-3: Distribution of the Respondents by their Feeling of Tempt to Smoking

N=50			
Variable	Sub Group	Frequency	Percentage (%)
Feeling of Tempt to Smoking	Always	07	14
	Often	90	18
	Rarely	19	38
	Never	15	30

Smoking due to Influence of Others	Always	17	34
	Sometime	23	46
	Rarely	09	18
	Never	01	02
Psychological Reasons for Smoking	Pleasurable	12	24
	Smoking relaxed me	08	16
	I liked its taste	10	20
	I smoked to fit with others	20	40

From the field investigation, the table-3 explored that nearly one-third (38%) of the respondents have rarely tempted to smoking when people around them smoke, followed by 30 per cent of them have never felt temptation for smoking. It is continued that, nearly half (46%) of the respondents have smoked sometimes due to influence of others. Almost half (40%) of the respondents have started to smoke to fit with others which may be siblings, friends, classmates, colleagues, and co-workers, followed by 24 per cent of them have smoked because they find it pleasurable, and 20 per cent of the respondents have smoked because they liked its taste.

Table-4: Distribution of the Respondents by Reasons for Start and Increase Smoking

N=50

Reason	Very much (%)	To some extent (%)	Not at all (%)
Reasons for Start Smoking			
Family problems	-	32	68
Stress	-	28	72
Peer pressure	22	48	30
Influence of smoking relatives	44	40	16
Causes for Increasing of Smoking			
Depression	-	26	74
Stress	10	34	56
Anxiety	02	40	58

Based on the data, the table-4 found that the half (48%) of the respondents have smoked to some extent due to their peer pressure, followed by 22 per cent of them have smoked mostly very much due to peer pressure. The study noted that almost half (44%) of the respondents have influenced by their smoking relatives at very much level for their smoking habit, followed by 40 per cent of them smoke to

some extent by their relatives respectively. Moreover, the majority of the respondents do not smoke at all due to their stress and familial problems as per the field data.

Further, the study observed the variation of smoking habit by the smokers in the time of depression, stress and anxiety. About one-fourth (26%) of the respondents have smoked to some extent when they are under depression, followed by 34 per cent of the respondents have used cigarettes to some extent due to under stress. Among the respondents, 40 per cent of them have smoked to some extent at the time of anxiety. Even though, it understood from the above table that majority of the respondents have not engaged in smoking habit even when they are under stress, depression, and anxiety.

Table-5: Distribution of the Respondents by their Nature of Quit Smoking
N=50

Variable	Sub Group	Frequency	Percentage (%)
Try to Quit Smoking	Always	03	06
	Sometime	16	32
	Rarely	14	28
	Never	17	34
Asked by Family Members to Quit Smoking	Always	17	34
	Sometime	22	44
	Never	11	22
Try to Quit Smoking due to Influence of Others	Often	02	04
	Rarely	26	52
	Never	22	44

From the survey analysis, the table-5 depicted that the one-third (34%) of the respondents have never tried to quit smoking and do not want to stop their smoking habit, followed by 32 per cent of them only have tried sometimes, and 28 per cent of them have rarely tried to quit smoking. It is continued that, the majority (44%) of the respondents responded that their family members and friends have asked them sometimes to quit smoking and 34 per cent of them replied that they have always asked to quit smoking by their family members and friends. Further the study observed that nearly half (52%) of the respondents have rarely tried to quit smoking due to influence of others, followed by 44 per cent of them have never tried to quit smoking due to others.

Table-6: Distribution of the Respondents by their Reasons to Quit Smoking
N=50

Response	Very much (%)	To some extent (%)	Not at all (%)
Reasons to Quit Smoking			
Peer pressure	-	36	64
Familial problems	-	34	66
Stress	-	10	90

Not able to quit	30	34	36
Influence of Anti-Tobacco Advertisements			
Reduced intake of tobacco	10	16	74
Start thinking of quitting smoking	4	46	50
Changed to safer brands	2	32	66

Based on the field investigation, the table-6 revealed that more than half (64%) of the respondents have not tried to quit smoking due to their peer pressure and only 34 per cent of them have tried to some extent to quit smoking due to peer pressure. The above table found that the significant strength (66%) of the respondents have never tried to quit smoking because of familial problems, followed by 34 per cent of them have tried to some extent to quit smoking due to familial problems. Majority (90%) of the respondents felt that stress has no influence for them to quit smoking. It is continued that, about 36 per cent of them have never tried to quit smoking because they are unable to quit, and 34 per cent of them have tried to some extent to quit even if they are unable to quit.

Further, the study result observed that the three-fourth (74%) of the respondents have not at all reduced their intake level of tobacco due to Anti-Tobacco advertisements. It is continued that, half (50%) of the respondents have not at all started to think to quit smoking even after seen the Anti-tobacco advertisements, followed by 46 per cent of them have started to think to quit smoking to some extent level due to influence of Anti-Tobacco advertisements. Moreover, it noted that the notable strength (66%) of the respondents have not at all changed their smoking habit into safer brand even after the Anti-Tobacco advertisements, followed by 32 per cent of them have changed their smoke into safer brand to some extent due to influence of Anti-Tobacco advertisements.

III. Perception on Anti-Tobacco Advertisements

Table-7: Distribution of Respondents by Attitude on Anti-Tobacco Advertisements

N=50

Variable	Sub Group	Frequency	Percentage (%)
Attention to the 'NO SMOKING' Logos	Always	13	26
	Often	24	48
	Rarely	11	22
	Never	2	4
Anti-Tobacco Advertisements as Relevant and Important	Very much	29	58
	To some extent	14	28
	Not at all	7	14
Opinion on Viewing the Anti-Tobacco	Useless	7	14
	Ignoring	31	62
	Fed-up	12	24

Advertisements			
Noticing of Anti-Tobacco Advertisements on Cigarette Packets	Always	23	46
	Often	18	36
	Rarely	9	18
Anti-Tobacco Advertisements as an Effective on Quit Smoking	Very much	15	30
	To some extent	19	38
	Never	16	32

From the field investigation, the table-7 indicated that the half (48%) of the respondents have often given attention to the 'NO SMOKING' logos and advertisements, followed by 26 per cent of them have always paid attention, and 22 per cent of them have rarely given attention on it. It is continued that, more than half (58%) of the respondents felt that the existing Anti-Tobacco advertisements provided by Government as relevant and important, followed by 28 per cent of them felt to some extent that Anti-Tobacco advertisements are important and relevant. Further, the findings depicted that more than half (62%) of the respondents have ignored the Anti-Tobacco advertisements whenever they have seen, followed by 24 per cent of them have felt fed-up about it. Hence, almost all the respondents do not have any positive attitude towards the Anti-Tobacco advertisements. Besides, nearly half (46%) of the respondents have always noticed the Anti-tobacco advertisements on the cigarette packets, followed by 36 per cent of them have often noticed it. Moreover, the study explored that nearly one-third (38% and 30%) of the respondents felt that the Anti-Tobacco advertisements have given an effective way to motivate people to quit tobacco to some extent and very much level respectively and 32 per cent of them have never felt that it as an effective to quit smoking habit.

IV. Awareness on Illness by Tobacco

Table-8: Distribution of the Respondents by their Awareness on Illness by Tobacco

N=50

Variable	Sub Group	Frequency	Percentage (%)
Knowledge on Diseases	Yes	24	48
	No	26	52
Awareness on symptom of Diseases	Very much	2	4
	To some extent	17	34
	Never	31	62
Awareness on Ill-Effects by Diseases	Very much	2	4
	To some extent	15	30
	Never	33	66

Based on the field analysis, the table-8 denoted that the half (52%) of the tobacco consumers do not have enough knowledge about any of the diseases related to smoking, and the other half (48%) of them aware about the diseases due to smoking. Hence, most of the respondents in the study do not have enough knowledge on the health aspects as well as the illnesses due to smoking. It is continued that, the more than half (62%) of the respondents never aware anything about the symptoms of diseases caused by tobacco, followed by 66 per cent of them never aware anything on the ill-effects of the diseases caused by tobacco consumption in the study.

Conclusion

The researcher has taken the present study to understand the factors that promote the youth to initiate smoking habit. From the study, it observed that huge number of the tobacco users have started their smoking habit at early ages due to multiple reasons, but in most cases the tobacco users have started smoking to have a favorable and pleasurable company with others. The introductions of Anti-Tobacco advertisements have provided a great help to eradicate the smoking habit among the people by circulating various awareness through different advertisements. It clearly understood that, if not all, huge portion of the respondents have not adversely affected by the Anti-Tobacco advertisements towards their smoking habit. Majority of them have not given much attention to the advertisements; however, most of them opined that Anti-Tobacco advertisements are very much relevant and important to motivate people to quit smoking. With regards to the health related status of the respondents taken for the study, huge majority of them do not have much knowledge about the diseases caused by tobacco smoking. The researcher though the study suggested that the hospitals and other voluntary agencies must concentrate on how to educate people about the various health related problems, and also to encourage them to quit tobacco consumption habit.

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