

## KNOWLEDGE AND AWARENESS OF TOBACCO HAZARDS IN TEENAGERS OF VILLAGE WADAD

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### ABSTRACT

**Background:** India is the second largest consumer of tobacco products and third largest producer of tobacco in the world. Most people are unaware that even the smallest level of tobacco use is dangerous. According to the National Survey on Drug Use and Health, more than 80 percent of all adult smokers begin smoking before the age of 18; and more than 90 percent do so before leaving their teens. With this background the present study is designed & conducted in small village of Wardha district. **Aim and Objectives:** Aim of the study was to assess the knowledge & awareness of tobacco hazards in teenagers in village Wadad. Objectives were to determine the knowledge of tobacco products & to assess the awareness of tobacco hazards in teenagers of village Wadad. **Material and Method:** All the girls and boys in between the age group 13 to 19 were selected for the study. A survey

based questionnaire was prepared & get validated. Their responses were collected & analysed. **Result:** After scrutiny of population of village Wadad, 100 teenagers were found in between age 13 to 19 years. All were responded to the survey based questionnaire. 95 % have knowledge of tobacco. Only 50% were aware about the different products of tobacco. 97.89% were aware about bad effects of tobacco. But only 40% teenagers knew about passive smoking and its ill effects. 57.89% were aware about get rid from it. It is observed that television is the most effective source to spread awareness. **Conclusion:** Teenagers are high risk group to get habit of tobacco consumption. Effects of passive smoking are not well known to society. It is need to make society aware about this.

**KEYWORDS:** Smoked tobacco, Teenagers, Hazards of tobacco, Passive smoking.

## INTRODUCTION

Tobacco use is a major health and social problem worldwide. About 4.9 million deaths per annum occur globally which are tobacco related & estimated to rise 10 million by 2030.<sup>[1]</sup> Among the ill effects of tobacco use, the proportion of cancer in male and female is 56.4% and 44.9% respectively. Nine lakh people die annually due to tobacco. Smoking causes 90% of lung cancers and other lung diseases; there is one tobacco related death every eight seconds.<sup>[1]</sup>

Each year a great amount of money are being wasted in smoking, although it is quite obvious that smoking habit is dangerous and injurious to health but still a large number of people especially teenagers are attracting and getting involved in smoking habit day by day. Some reasons of this addiction are obvious such as influence of friends or community member as teenage is an enjoyable period of life span which offers all delights, it can be positive and negative as well. Some teen's do experimental smoking just for taste in friends gathering but this experience enters in their life as a regular experiment.

Between the age group of 14 to 18 years a person is most likely to attract towards the smoking habit and become an addict for the rest of his or her life. This age represents the growth of maturity where teens make choices for their life style and plan where they want to see themselves in the future. This is the age where the inspiration is at the maximum level and adolescents are more conscious of their personality, styles and making up their role models. On the other hand, this is the age where factors like stress, attention disorder, psychological pressures and conflicts from parents play an important role in impacting the individual personality and most of the teens are seen fighting with these kind of problems due to lack of parental interest, or sometime over protectiveness of parents. According to the National Survey on Drug Use and Health, more than 80 percent of all adult smokers begin smoking before the age of 18; and more than 90 percent do so before leaving their teens.<sup>[2]</sup> Evidence also shows that smoking can be a first step toward other substance abuse. Stopping or delaying that first step will reduce the risk that kids will progress to use other harmful substances.<sup>[3,4]</sup>

In the Indian context, tobacco use implies a varied range of chewing and smoking forms of tobacco available at different price points, reflecting the varying socio-economic and

demographic patterns of consumption. Tobacco is consumed in a variety of, both smoking and smokeless forms, e.g. bidi, gutkha, khaini, paan masala, hookah, cigarettes, cigars, chillum, chutta, gul, mawa, misri, etc. India is the second largest consumer of tobacco products and third largest producer of tobacco in the world. In order to facilitate the implementation of the tobacco control laws, bring about greater awareness regarding harmful effects of tobacco and fulfil obligation(s) under the WHO Framework Convention on Tobacco Control (WHO FCTC), the Government of India launched the National Tobacco Control Programme (NTCP) in the country.<sup>[3,4]</sup>

As per India's Cigarette and Other Tobacco Product Act 2003 (COTPA), selling tobacco to minors or selling of tobacco by minors (under the age of 18) is legally forbidden and violation of the same is a punishable offence. Same applies to selling of tobacco containing items within 100 yards radius of any educational premises.<sup>[5]</sup> The prevalence of smokeless tobacco use in India is the highest in the world. In India, using smokeless tobacco is not only common among males, but also among females and youth. According to the World Health Organization (WHO), tobacco use is one of the major preventable causes of premature deaths and disease in the world.

Thus, there is an urgent need for more active and complete awareness among Indians about the health risks of tobacco—smokeless as well as smoked tobacco. Most people are unaware that even the smallest level of tobacco use is dangerous (Gupta et al., 2005), in part because this is not the case with other behavioural health risks, such as eating habits and the consequences of a sedentary lifestyle. Keeping these views in mind surveillance study was done to assess the knowledge & awareness of tobacco hazards in village Wadad.

#### **AIM OF STUDY**

The aim of the study was to assess the knowledge & awareness of tobacco hazards in teenagers of village wadad.

#### **OBJECTIVES OF STUDY**

Objectives of study were

1. To determine the knowledge of tobacco products in teenagers of village Wadad.
2. To assess the awareness of tobacco hazards in teenagers of village Wadad.

## MATERIAL AND METHOD

The proposed study was carried out in village Wadad which is 7 km away from Sawangi. All the girls and boys in between the age group 13 to 19 were selected for the study. The study was carried out after obtaining permission from the Institutional Ethics Committee (IEC), DattaMeghe institute of medical sciences (Deemed university) Sawangi (Meghe), Wardha, with approval letter No. DMIMS(DU)/IEC/2014-15/1222.

### Study Design

The study was cross sectional study. Permission was taken from the principal of Sane Guruji Mahavidyalaya of village Wadad to conduct the study as most of the sample in village Wadad can be contacted in college. Remaining girls & boys were interviewed during home to home visit under village adoption programme. All the teenagers were personally interviewed on the basis of questionnaire. Before interviewing the verbal consent of the participants was taken.

### Exclusion Criteria

1. The subjects below age 13 & above 19 were excluded from the study.

### Methodology

The selected teenagers in between aged 13 to 19 years were interviewed to assess their knowledge & awareness regarding tobacco hazards. A well structured questionnaire was prepared & got validated containing questions related to demographic configuration and related to

1. Different types of tobacco products
2. Techniques of using products
3. Ill effects of products
4. Sources of information regarding tobacco hazards
5. Ways to get rid of this habit.

## OBSERVATIONS

During survey we found 100 girls & boys within the age group 13 to 19 years. All were responded to questionnaire.

**Table 1: % of respondents according to age.**

Age	% Of Respondents
13 yrs	5%
14 yrs	30%
15 yrs	35%
16 yrs	10%
17 yrs	11%
18 yrs	4%
19 yrs	5%

In Table 1, age wise % of respondents were shown out of which 5% students belong to 13 yr age group, 30% belong to 14 yr age, 35% belong to 15 yr age, 10% belong to 16 yr age, 11% belong to 17 yr age, 4% belong to 18 yr age and 5% respondents belong to 19 yr age group.

**Table 2: % of respondents according to gender.**

Gender	% Of Respondents
Male	35%
Female	65%

In Table 2, gender distribution is given in which 35% respondents were male and 65% respondents were female.

**Table 3: % of respondents according to socioeconomic status.**

Socioeconomic Status	% Of Respondents
LOWER	95%
MIDDLE	5%
HIGHER	00%

In Table 3, socioeconomic status is given in which majority of respondents i.e. 95% belonged to lower economic status and 5% belonged to middle class families.

**Table 4. % of Respondents according to their knowledge about tobacco.**

Knowledge about tobacco	% Of Respondents
YES	95%
NO	5%

In Table 4, Respondents' knowledge regarding tobacco is given and majority i.e. 95% known what tobacco is, where as 5% Respondents did not have knowledge regarding this.

**Table 5: % of Respondents according to knowledge regarding effect of tobacco.**

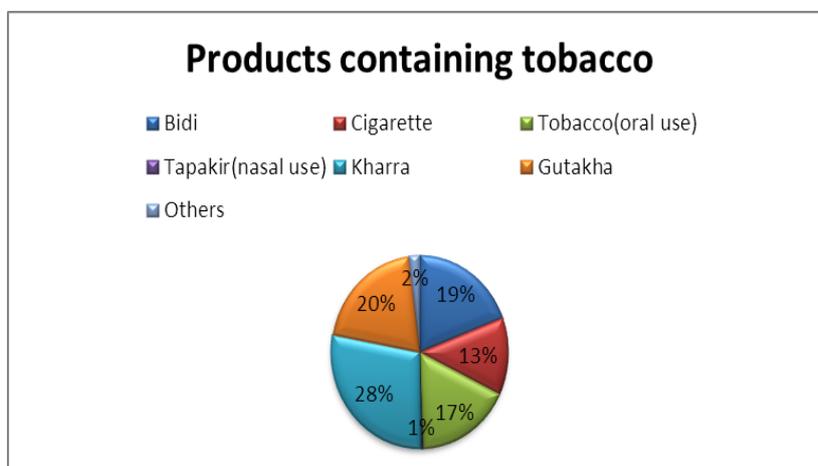
Effect Of Tobacco	% Of Respondents
GOOD	2.11%
BAD	97.89%

In Table 5, knowledge of Respondents about tobacco effects is given in which 2.11% said good effect while majority i.e. 97.89% Respondents said bad effects.

**Table 6: % of Respondents according to knowledge regarding tobacco containing products.**

Products Containing Tobacco	% Of Respondents
Bidi	50.53%
Cigarette	33.68%
Tobacco(Oral Use)	45.26%
Tapakir(Nasal Use)	1.05%
Kharra	73.68%
Gutakha	52.63%
Others	5.26%

In table 6, Respondents' knowledge regarding tobacco products is given. 50.53% knew bidi, 33.68% knew cigarette, 45.26% knew tobacco (oral use), 1.05% knew tapakir (nasal use), 73.68% knew kharra, 52.63% knew gutakha and 5.26% knew some other products.

**Graph 1: % of Respondents according to knowledge regarding tobacco containing products.****Table 7: % of Respondents according to the use of tobacco containing products.**

Use Of Tobacco Containing Products	% Of Respondents
Yes	1%
No	99%

In Table 7, % of Respondents who use tobacco containing product is given in which only 1% used such products while 99% did not use tobacco containing products.

**Table 8: % of Respondents according to knowledge regarding ill effects of tobacco.**

Ill Effects Of Tobacco	% Of Respondents
Lung Cancer	23.16%
Oral Cancer	54.74%
Bronchitis	5.26%
Others	28.42%

In Table 8, Respondents' knowledge regarding ill effects of tobacco is given. 23.16% Respondents knew lung cancer as ill effect of tobacco, 54.74% knew mouth cancer, 5.26% knew bronchitis and 28.42% knew many others were ill effects of tobacco.

**Table 9: % of Respondents according to knowledge regarding ill effects of passive smoking.**

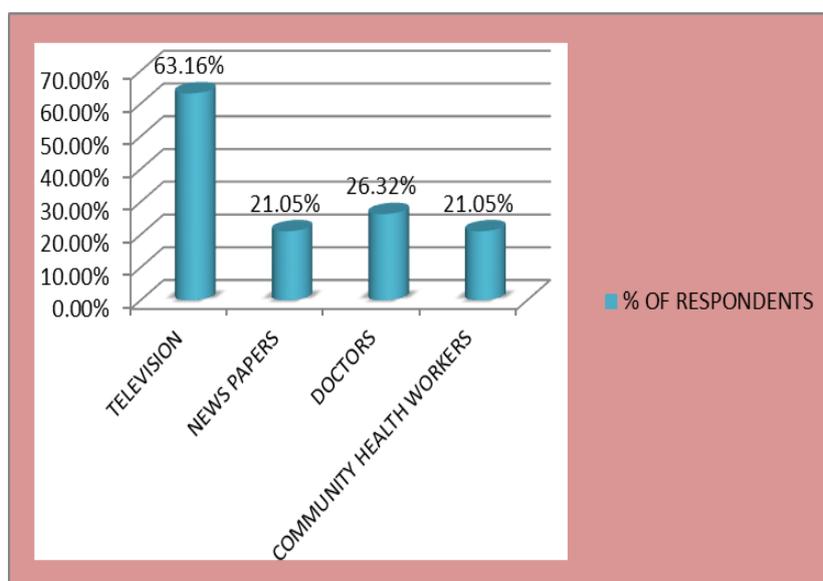
Knowledge Of Passive Smoking & It'S Ill Effects	% Of Respondents
Yes	40%
No	60%

In Table 9, Respondents' knowledge of passive smoking & its ill effects is given. 40% Respondents knew about passive smoking & its ill effects while 60% Respondents did not have idea regarding passive smoking.

**Table 10: % of Respondents getting knowledge through different sources.**

Source of Knowledge About Ill Effects About Tobacco	% of Respondents
Television	63.16%
News Papers	21.05%
Doctors	26.32%
Community Health Workers	21.05%

In Table 10, source of knowledge about ill effects of tobacco is given. 63.16% got from TV, 21.05% got from NEWS papers, and 26.32% got from doctors while 21.05% Respondents got knowledge from community health workers.



**Graph 2: % of Respondents getting knowledge through different sources.**

**Table 11: % of Respondents according to knowledge about getting rid of tobacco eating habit.**

Knowledge About Getting Rid Of The Habit	% Of Respondents
Yes	57.89%
No	42.11%

In Table 11, showed Respondents knowledge for getting rid of tobacco habits is given. 57.89% knew while 42.11% Respondents not knew any methods to get rid of such habits.

## DISCUSSION

Our study was conducted to evaluate awareness of teenagers about tobacco and its hazards in village Wadad. In this study 95% respondents knew about tobacco and rest 5% did not have idea about tobacco. Similar findings were found in study conducted by Taran SJ et al.<sup>[6]</sup> having result as 80.1% knew tobacco and 19.9% did not have any idea of tobacco. Out of 95 students who were aware regarding tobacco 97.89% students knew effect of tobacco was bad and rest 2.11% thought that it was good for health. Similar result found in study conducted by Taran SJ et al<sup>[6]</sup> as 89.6% and 10.4% respectively. In another study 83.8% students not found any advantage in taking tobacco.<sup>[7]</sup>

As per our study 50.53% respondents knew bidi, 33.68% knew cigarette, 45.26% knew tobacco (oral use), 52.63% knew gutkha and 5.26% Respondents knew other tobacco containing products. The same results were supported by the study by Taran SJ et al.<sup>[6]</sup> They found that 52.3% knew bidi, 54.5% knew cigarette, 66.3% knew tobacco (oral use), 67.4% knew gutkha and 18% students knew other tobacco products.

In our study awareness regarding ill effects of tobacco was studied and result found were 23.16% respondents knew lung cancer as ill effect, 54.74% knew oral cancer as ill effect, 5.26% knew bronchitis while 28.42% respondents knew other ill effects. Similar study was performed by Dongre AR et al<sup>[8]</sup> found result as 61.8% knew cancer as side effect, 38.2% knew poor oral health as side effect. Sreedhar M et al<sup>[9]</sup> similar study supported this. In their study they found 35% knew lung cancer as ill effect, 30% knew oral cancer as ill effect, 25% knew oral diseases as ill effect and 10% knew other side effects. Yadav A et al<sup>[10]</sup> study result found 92.50% knew lung cancer as side effect, 97.50% knew mouth cancer as side effect. D. Imtiaz, S.D. Kandpalet al<sup>[11]</sup> found result as 26% of boys and 24.4% of girls knew that tobacco consumption causes lung cancer. 42% adolescents were aware that consumption of

tobacco causes oral cancer. Taran SJ et al<sup>[6]</sup> found result as 86.2% knew illness as mouth cancer, 84.8% knew illness as Precancerous condition and 55.9% knew illness as lung cancer.

In our study awareness regarding passive smoking and its ill effects were studied and found result as 40% respondents knew passive smoking and more than half i.e. 60% respondents had no idea about passive smoking and its ill effects. Taran SJ et al<sup>[6]</sup> found similar result as only 9.3% respondents knew about passive smoking while 90.7% didn't have any idea regarding passive smoking. Yadav A et al<sup>[10]</sup> performed surveillance study and found that only 23% students knew passive smoking was also injurious to health. Phinse Mappalakayil Philip et al<sup>[12]</sup> found result as 98% students were aware of the ill effects of the second hand smoke i.e. passive smoking. Sreedhar M et al<sup>[9]</sup>, awareness of Passive smoking was only known by 26%, and out of which 21% knew about ill effects due to Passive smoking.

In our study source of knowledge about ill effects about tobacco was studied and result found were 63.16% respondents got knowledge from television, 21.05% got from news papers, 26.32% got from doctors and 21.05% got from community health workers. Similar study performed by Taran SJ et al<sup>[6]</sup> found result as most common source of information about tobacco hazards was Television (73.2%) followed by Newspaper (49.9%), Social media (47.5%), Internet (44.3%) and acquaintances (21.8%). Yadav A et al<sup>[10]</sup> found result as 182 (91%) students of the study population get awareness about bad effect of tobacco. Friends, relative and teacher alone educate about bad effect of tobacco in 25 (12.5%), 15 (7.5%), 13 (6%) students respectively. Combined effect of TV, news paper, internet and cinema is very useful mode for spreading the knowledge among the students. 92.85% (130/140) students get education by combined use of mass media, hoarding on smoking's bad effects educate only 5% (10/140) of students. Dongre AR, et al<sup>[8]</sup> performed study and found that the major sources of information for non-users were school teachers and community-based organizations. Overall, their major sources of information were Television/Radio (37.1%), School teachers (30.4%), Parents (15.6%) and friends (11.4%).

## CONCLUSION

Present study was done to assess knowledge & the awareness of teenagers regarding different aspects of tobacco like different products which contains tobacco, ill effects of its consumption, passive smoking and its ill effects, important methods to eliminate the habit. We observed that many of teenagers did not know regarding ill effects of tobacco, elimination of habit. Many of respondents were not aware regarding passive smoking. As

prevention of tobacco consumption in child age is easier compared to adults. So they have to be aware regarding tobacco at primary level in schools, through different social Medias.

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