

An explorative study on Tobacco uses among Adolescent

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Abstract

The phase of adolescence is a tough period for every human being. Adolescence marks a stage of rapid alter be it biological, psychological, emotional, or social. As this is a critical stage of every human's life many detrimental behaviors starts such as consuming a poor diet, use of tobacco, violence, etc. which can lead to direct health problems, lasting disorders, or poor health later in life. In the present study, an attempt has been made to provide a forward picture of the consumption of tobacco among adolescence especially in rural areas of Assam. For the study, an exploratory method was adopted. Data has been collected using a self-structured interview schedule. From the study, it has been found that several factors influence the use of tobacco among adolescents.

Keywords: Explorative, Study, Tobacco, Uses, Among, Adolescence

Introduction

Adolescence is when the very worst and best impulses in the human soul struggle against each other for possession.

G. Stanley Hall

Adolescence is the developmental stage between childhood and adulthood. Theoretically, a child is described as an adolescent when he or she achieves puberty. The World Health Organization (WHO) has defined 'adolescents' as persons in the 10 to 19 years age group. Adolescence is generally divided into three stages of development- early (10-13 years), middle (14-15 years), and late adolescence (16-19 years) stages. Adolescence is a period of challenges and potential. An adolescent has wide physical, emotional, and intellectual prospects. At the same time, they faced immense challenges on account of his rapid growth and development. It is usually seen that risk-taking behaviors begin to noticeable from middle adolescence onward. Some of those behaviors are discussed as follows-

- **Drug addiction:** The adolescence phase is a period of massive challenges. Many teens in this crucial stage begin to use a drug; which is a very risky proposition. Even small degrees of substance maltreatment like alcohol, marijuana, inhalants, etc. can bring hazardous consequences. Constant patterns of drug use in adolescence are a sign that problems in that teen's environment exist and need to be addressed instantly. At the initial stage drug may be taken out of curiosity, for getting fun, relief from pressure, etc. then it may result in total addiction on the use of the drug.
- **Juvenile delinquency:** Juvenile delinquency is defined as the flouting of the law by individuals less than 18 years of age. There are two types of juvenile delinquency; the first includes acts that would be measured crimes if they were committed by an adult such as murder, assault, and robbery. The second type includes status offenses actions that are unlawful for an adolescent to commit such as curfew, violations, running away from home, purchasing alcohol and truancy, etc.
- **Psychological disturbances:** Mental health disorders in adolescence are a momentous problem, pretty common, and acquiescent to treatment or intervention. The most common mental illnesses in adolescents are anxiety, mood, attention, and behavior disorders. At least one in five youth aged 9–17 years currently has a diagnosable mental health disorder that causes some degree of mutilation; one in 10 has a disorder that causes significant impairment.
- **Depression:** Depression and Anxiety disorders are the most common mental health disorders of adolescence. Depression is associated with protracted states of physical fatigue, emotional disappointments, and grief about circumstances that may not always be recognized. Depression and bipolar disorder affect 14.3% of youth age 13-17. There are 11.7% of the adolescents who

met the criteria for major depressive disorder or dysthymia, a less severe but more importunate depressive disorder. There is a nearly two-fold increase in mood disorders from 13 to 18, from 8.4% to 15.4% (child mind, 2017).

- **Peer group relationship:** Peer group relationship plays an extensive role in the life of an adolescent. At this age, a teen goes away from their parents and elders and spend much time with members of their peer group. It is sure to exist a difference in the opinions, views, likings, and disliking of the elders and adolescents. It is here that the intricacy arises. The adolescents find themselves the victims of the various demands of social and cultural norms of adults and their peer group and they repeatedly became confused and mystified concerning any decision making.

Review

Tobacco use is the most important cause of avertable death worldwide and a probable 250 million children and adolescents in developing countries die prematurely because of tobacco consumption (Das et al., 2017). There are a number of factors that influence the use of tobacco by adolescents. Some of these are the family history of tobacco use by elders, peer influence, experimentation, and easy access to such products along with personality factors and underlying emotional and psychosocial problems (Kumar et al., 2014). Tobacco is chewed after meals for better digestion, given to ease toothache, pain in the abdomen and to induce vomiting in suicidal insecticide poisoning (Dongre, et al., 2008). Furthermore, there is an association between socio-demographic factors and tobacco use in youth in the country (Grover et al., 2020). Psychosocial factors have an important role to play in the initiation of this habit. It has been observed that a large number of adolescents pick up this habit from their family members or peers. Advertisements of tobacco products and promotional campaigns by the manufacturers also play an important role in the initiation of the habit by adolescents (Chadda & Sengupta, 2003).

Rationale of the study

In the 21st century, tobacco use in adolescents is ubiquitous everywhere. The World Bank has reported that nearly 82000 to 99000 children and adolescents all over the world begin smoking every day. About half of them would persist to smoke to adulthood and half of the adult smokers are expected to die prematurely due to smoking-related diseases. If current smoking trends continue, tobacco will kill nearly 250 million of today's children. The world health organization estimates that 70% of premature deaths among adults are due to behavioral patterns that emerge in adolescents including smoking, violence, and sexual behavior. Studies reveal that 23.7% of death among men and 5.7% of the deaths among women aged 35-69 years are due to tobacco attributable illness.

The tobacco companies are now assertively targeting their advertising strategies in developing countries like India. There has been a rapid increase in trade and use of smokeless tobacco products in recent years in the country, which is a matter of serious concern to the health planners.

Adolescents are the most susceptible population to begin tobacco use. It is now well established that most of the adult users of tobacco start tobacco use in childhood or adolescence. During the last three decades, a number of epidemiological surveys have been conducted in different parts of India to study the pervasiveness of tobacco use by adolescents. It is important to comprehend different factors that influence and encourage young teenagers to start smoking or to use other tobacco products. Therefore there is a need to study the pattern of tobacco uses among adolescents.

Objectives of the study:

1. To study the pattern of tobacco uses among adolescence in rural areas.
2. To provide a forward picture of consumption of tobacco among adolescence in rural areas.

Method and procedure: In the present study, the investigator used the exploratory method which is qualitative in nature. It is that method of investigation which attempts to describe and interpret what exists at present in form of conditions, practices, processes, trends, effects, attitudes, beliefs, etc. For the study,

the investigator selected a sample of 100 adolescents using the snowball sampling method. A self-structured interview schedule has been prepared by the researcher for data collection. The interview schedule consists of both open and closed-ended questions.

Findings and discussion: In the present study data has been analyzed using simple percentage method keeping in view the objectives of the study. From the study, it has been found that in the study area 70% of adolescents use tobacco on a daily basis. When the investigator asked them about the types of tobacco they use 80% of the adolescent said they use only smokeless chewing tobacco like Shikhar, Kamala Pasand, Vimal Pan Masala, Rajnigandha Pan Masala, etc. and 20% of the adolescent use to smoke cigarettes on the daily basis. Half of them that means 10 adolescent smoke more than two cigarettes in a day. From the study, it has been found that the initiation of tobacco starts at the age of 11 or 12 years in the case of 40% of adolescents.

Using tobacco in public places is common in rural areas. Most of the adolescents about 60% of them use tobacco in public places, especially smokeless tobacco. 70% of adolescents use tobacco even they know that using tobacco is dangerous to health. Some of them feel that tobacco relieves tension, headache, etc. Most of them thought to quit tobacco because of health warnings and lacks of money to purchase those products but they failed because using tobacco became their habit. From the study, it has been found that most of the adolescents are using tobacco because of having seen parental and friend addiction. Their family members openly smoke in front of them. Moreover, out of 100 adolescents half of them said that using tobacco is allowed in their home; 'Supari' (betel nut) is easily available in every house. From the present study the investigator has been found that most of the adolescents buy tobacco products using their School Tiffin money and some of them get the money from their mother. Tobacco is easily available in local shops.

Suggestions: Tobacco using by adolescents is a worldwide problem. It cannot be solved effortlessly. However, we can take some actions to decrease the extent of tobacco users. It is found from the study that smokeless tobacco products are easily available in most of the houses and local shops of rural Assam, therefore to reduce tobacco uses among adolescents smoking and smokeless tobacco products should be prohibited in all families. Because the easy availability of tobacco products is one of the main factors of tobacco addiction. The government, society, and NGOs can take a leading role in this regard. Furthermore, Tobacco should be banned in local shops. There is a need to increase the role of media regarding the hazards of tobacco. Strict action against using tobacco products in public places, such as workplaces, schools, hospitals, restaurants, hotels, parks, etc. should be taken in concern. Above all, there is a strong need to take steps that make it harder for adolescents to use tobacco, such as raising tobacco prices and enforcing laws that prohibit the sale of tobacco to children.

Conclusion: In India, there has been a growing trend in tobacco use among adolescents, especially more in smokeless forms. The present study revealed that most of the adolescent uses tobacco. The easy availability of tobacco products is the foremost reason to initiate tobacco use. Tobacco use was found to be noticeably higher among adolescents who had seen their family members and friend's addiction. From the study an interesting finding has come out, some of the adolescents said that using tobacco while they do study can help them to concentrate more. Therefore, they use tobacco during the study.

The present study was limited to 100 adolescents of the Barpera district of Assam. Therefore findings of this study may not correspond to other areas of Assam. But this study shows that tobacco use in adolescents is reaching a pandemic level. Therefore, there is a strong need to take effective steps, especially on launching community awareness programs for the adolescents and public to educate them about the consequences of tobacco use.

References

- Adolescents: Results from the national comorbidity survey replication-adolescent supplement (NCS-A). *Journal of the American Academy of Child and Adolescent Psychiatry*, 49(10), 980–989. <https://doi.org/10.1016/j.jaac.2010.05.017>
- Chadda, R., & Sengupta, S. (2003). Tobacco use by Indian adolescents. *Tobacco Induced Diseases*, 1(1), 8. <https://doi.org/10.1186/1617-9625-1-8>
- Dongre A, Deshmukh P, Murali N, Garg B. Tobacco consumption among adolescents in rural Wardha: where and how tobacco control should focus its attention? *Indian J Cancer*. 2008 Jul-Sep;45(3):100-6. doi: 10.4103/0019-509x.44065. PMID: 19018113.
- Das, N., Tasa, A. S., & Medhi, A. H. (2017). Pattern of tobacco use among adolescents in urban slums of Jorhat, Assam. *International Journal Of Community Medicine And Public Health*, 4(11), 4232. <https://doi.org/10.18203/2394-6040.ijcmph20174835>
- Grover, S., Anand, T., Kishore, J., Tripathy, J. P., & Sinha, D. N. (2020). Tobacco Use Among the Youth in India: Evidence From Global Adult Tobacco Survey-2 (2016-2017). *Tobacco Use Insights*, 13, 1179173X2092739. <https://doi.org/10.1177/1179173x20927397>
- Georgiades, K., & Swendsen, J. (2010). Lifetime prevalence of mental disorders in U.S.
- Kumar, V., Talwar, R., Roy, N., Raut, D., & Singh, S. (2014). Psychosocial Determinants of Tobacco Use among School Going Adolescents in Delhi, India. *Journal of Addiction*, 2014, 1–6. <https://doi.org/10.1155/2014/170941>
- Mental Health Disorders in Adolescents | ACOG*. (n.d.). Retrieved May 2, 2021, from <https://www.acog.org/clinical/clinical-guidance/committee-opinion/articles/2017/07/mental-health-disorders-in-adolescents>
- Merikangas, K. R., He, J. P., Burstein, M., Swanson, S. A., Avenevoli, S., Cui, L., Benjet, C., Sharma, R., Grover, V., & Chaturvedi, S. (2010). Tobacco use among adolescent students and the influence of role models. *Indian Journal of Community Medicine*, 35(2), 272–275. <https://doi.org/10.4103/0970-0218.66891>
- Silva, J. D. (2010). Psychological Analysis of Addicted Adolescents of Goa State. *University*. <http://hdl.handle.net/10603/165412>