

## **Original Research Paper**

## **Community Medicine**

# RELATIONSHIP BETWEEN FAMILY SOCIO ECONOMIC STATUS AND EARLY AGE (MALE AGE 10- 15 YEARS) USE TOBACCO IN URBAN AREA OF GHAZIABAD.

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ABSTRACT In this paper the factors relating to the family socio economic status, Literacy, income, education, school status in that area, number of children, parent's will power which effect on the children use Tobacco early age using data of the urban children of age 10-15 years who use Tobacco. It is found that children with better economic status are use only smoking. But low economic status children use Tobacco and smoking in early age 10-15 years both in urban Ghaziabad.

## **KEYWORDS**: Parent income, literacy, education.

#### Introduction

The present study was conducted in population in field practicing Urban area v.i.z Mirzapur and G,E,F block of Pratap Vihar,Ghaziabad. which is the field practice area of Department of Community Medicine, Santosh Medical College, Ghaziabad. The climate of the city is hot and dry and is subjected to extremes of cold and heat. In summer, the mean temperature ranges from 25 degrees C to 45 degrees C and in winters between 2.5 degrees to 10 degrees C.Mirzapur and G,E,F block of Pratap Vihar area is situated in the National Capital Region, joining Noida and Delhi. It is inhabited by about 9861 individuals of various age groups belonging to 1786 families. Area has maximum percentage of Hindus. The area has poor drainage facilities and the garbage can be seen frequently to be filled along the road making the sanitation system a total menace. Most of the male inhabitants have diverse occupations ranging between service and business. Most of the females are housewives and engage most of time for their families. The present study was conducted in the Mirzapur and G,E,F block of Pratap Vihar area of Ghaziabad district spanning from May 2010 to April 2011. Out of the 10,000 population residing in urban field practice area a total of 896 males above 15 years of age were selected by systematic random sample technique. There are approximately 120 million smokers in India. According to the World Health Organization (WHO), India is home to 12% of the world's smokers. Approximately 900,000 people die every year in India due to smoking as of 2009. According to a 2002 WHO estimate, 30% of adult males in India smoke. Among adult females, the figure is much lower at between 3-5%.

According to the study, "A Nationally Representative Case-Control Study of Smoking and Death in India", tobacco will be responsible for 1 in 5 of all male deaths and 1 in 20 of all female deaths in the country by 2010. This means approximately 1 million Indians would die annually from smoking by 2010. According to the Indian Heart Association (IHA), India accounts for 60% of the world's heart disease burden, despite having less than 20% of the world's population. The IHA has identified reduction in smoking as a significant target of cardiovascular health prevention efforts.

#### 2.Objective

1. The objective of the study is to analyze the variables relating to children activities, household head income and school and social environment which cause the children use Tobacco/smoke, and identification of the variables which affect much for using Tobacco 2. To Study the relationship between family socio economic status and early age use Tobacco.

#### 3. Methodology

Sampling Methods- Cluster and Simple Random Sample Study Area- Urban Area of Ghaziyabad Study Tool-Semi Structured interview Schedule. Sample Size- Z²PQ/e²=3.84x20x80/5x5=245.76 i.e--250

Data is collected from urban area of Ghaziabad by using Cluster and Simple Random Sample techniques. This data provide the information relating to school characteristics, children characteristic, household head characteristics, and household characteristics for one 250 children from Urban of age 10-15 years, and perform as use Tobacco or not use Tobacco.

## Table-1: Distribution of Socio Economic Status of Families

Socio Economic		Inc	TOTAL				
Status	Joint	Family	Nuclea	r Family	(N=250)		
	No. %		No.	No. %		%	
Normal	28	(22.4)	72	(57.6)	100	(40)	
Low	60	(48)	40	(32)	100	(40)	
Very Low	37	(29.6)	13	(10.4)	49	(20)	
TOTAL	125 (100)		200	(100)	250	(100)	
Chi-square test	p < 0.05; df = 1						

Table-2: Distribution and correlates of early age use Tobacco with Socio Economic Status in Urban.

with	vith Socio Economic Status in Urban.									
SI. No.	Socio econom correlates (No				Not Use Tobacco No. (%)	p - value				
1	Age	10-12	(09)	9.6	90.4	p < 0.001				
	group	12-15	(26)	9.6	90.4	i ·				
		>15 (90)		39.4	60.6					
2	Sex	Sex Male (124)		20	80	p > 0.05				
		Female	(01)	.08	99.92					
3	Marital status	Married (03) Out of 125		0.7	99.3	p <0.05				
5	Religion	Muslim	s (95)	12	88	P< 0.05				
	Hindu (22)		04	96						
		Sikhs	(5)	0.2	99.8					
6	Caste	OBC	(70)	23	77	p < 0.05				
		Gen.	(40)	16.5	83.5					
		SC	(15)	27	73					

 $\label{table 3} \textbf{Table 3: Distribution of study population according to occupation.}$ 

Occupation	No.	%
Working	62	24.8
Student	188	75.2
Total	250	100

#### Table 4: Prevalence of substance abuse:

Table 4.1 Tevalence of substance abase.									
S. No.	Substance abused	No.	Percentage (%)						
1	Tobacco Smoking	70	28						
2	Smokeless tobacco	66	26.4						
3	Alcohol	23	9.2						

4	Out of 250	159	63.6
5	Total	250	100

Table 5: Distribution of study subjects according to age and substance abuse.

S.	Age	No		Substance abused								
No.	in		Alcohol		Smoking		Smokeless		Non User		Total User	
	years		No.	%	No.	%	No.	%	No.	%	No.	%
1.	10-12	104	12	6.62	22	12.15	18	9.94	140	77.34	41	22.66
2.	12-15	60	14	7.95	27	15.34	39	22.15	112	63.63	64	36.37
3.	>15	66	15	10.63	39	27.65	42	29.78	98	69.50	43	30.50
χ2		χ2 =	$2 = 4.69  \chi 2 = .041$		$\chi 2 = .049$				-			
		dt	f = 3	df = 3		df = 3						
p > .05		p < .05		p < .05								

### 4. Discussion and Summary:-

In this section, Theresults summarized in (Table 1, Table 2, Table 3 and table 4). For the using Tobacco urban children are discussed. Children were studying at school are more likely to use Tabacco. Children more use Tobacco whose parents were wealthy and studying in private school. But children of poor parents studying in government school are less likely to use Tobacco. Urban children smoking decisions increase with their bad friendship.Children who use Tobacco participation decreases by good friendship and good society people. Average age for starting smoke is approximately 14-15 years for urban. Boys participate more in economic activities than girls. In urban case as child pocket money participation increase habits of Tobbaco. The present study was conducted with the objective of assessing prevalence of alcohol and tobacco abuse and to assess the socio-demographic and other correlates on alcohol and tobacco abuse among the males above 15 years of age in an urban area of Ghaziabad. Following conclusions had been drawn from the study: Approximately half (48.10%) of the participants belongs to those whose fathers were laborer and most of the mother were house wife (88.84%).In the present study, 52.01% males abused substances either in the form of alcohol, tobacco or both. Among the substance users, 9.48% were taking alcohol, 28.12% were using smoked form of tobacco and 26.56% were using smokeless form of tobacco. The prevalence of alcohol abuse was found to be increased with age (6.62% in 10-12 years age group, and 11.70% in 12-14 years age group, except in more than 15 years age group.

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