



TOBACCO ADDICTION: EXPLORING PERCEPTION OF TOBACCO USERS AT SELECTED AREA OF JODHPUR

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ABSTRACT **INTRODUCTION:** Tobacco chewing is a major health problem throughout the world. According to NFHS-III, in India, 55.8% male, 10.8% female in the age group of 12 to 60 years have been found to be consuming tobacco. Tobacco users tend to underestimate their own personal risk of becoming addicted or suffering health effects from tobacco. The current work intended to explore perception of tobacco users regarding tobacco addiction. **METHOD:** This qualitative study was conducted among tobacco users residing at Pratap Nagar, Jodhpur, Rajasthan. Study participants were recruited through purposive sampling technique. Face-to-face interview and audio recorded interview were conducted. Total of 12 interviews were included in the data analysis. Interviews were transcribed and analysed using Colaizzi's framework. Level of trustworthiness was established by using the criteria of Lincoln and Guba. **RESULTS:** Result shows Mean age of subjects was 52.2±13.09 years. More than half (58.4%) of subjects were males. Four major themes and 18 subthemes were extracted i.e. reason and source for initiation of tobacco addiction, reason for continuous use of tobacco, barriers in tobacco cessation and motivators for tobacco cessation. Influence of colleagues and curiosity to taste tobacco were identified as main factors to start tobacco chewing whereas health concern and unnecessary financial burden were the main motivators for taking successful quitting attempt. **CONCLUSION:** Tobacco addiction is a grave public health Problem. There is strong need to clarify misconceptions regarding tobacco use and its benefits by implementing effective tailored tobacco quitting awareness programs.

KEYWORDS : Tobacco users, perception, Tobacco addiction

INTRODUCTION:

Tobacco is the most widely distributed and commonly used drug in the world, today. Tobacco is used in many form by various means like chewing, smoking, snuffing and sucking etc. It kills nearly seven million people worldwide each year. Despite the facts, that the harmful effects of tobacco chewing and smoking are widely known still many people don't even think about to quit its use. ¹Tobacco users tend to underestimate their own personal risk of becoming addicted or suffering health effects from tobacco in comparison to others. These inaccurate risk perceptions can inhibit quitting. ² The prevalent misconception related with Smokeless Tobacco (SLT) is that it is considered as safer over smoking which could be on the grounds of its usage in terms of initiation and persistence. More than 28 chemicals have been drawn out from SLT which are carcinogens In case of SLT, nicotine has property to get absorbed directly into the body through the mucous membranes in the mouth or nose. Furthermore, the levels of nicotine in blood are similar in case of SLT users as well as smokers, and it remains in the bloodstream for longer duration ³

In India 28.6% of adults aged 15 and above (26.7 crore) use tobacco in any form, 19.9 crore adults in rural areas and 6.8 crore adults in urban areas use tobacco. Every Fifth adult (19.9 crore) uses smokeless tobacco and every tenth adult 10.0 crore) smoke smokes tobacco 3.2 crore adults resort to dual use of tobacco. The data revealed that Overall tobacco users in India account for 28.6%, but in Rajasthan it is 24.7%; smokeless tobacco users are 21.4% in India and 14.1% in the state, and dual users (using both smoke and smokeless tobacco) are 3.4% in India and 2.6% in Rajasthan (GATS - 2016-17).⁴ Easy availability and low cost of SLT are key factors promoting SLT use by women. One factor influencing SLT use among disadvantaged women is the desire to suppress hunger while performing difficult and laborious tasks.⁵

Understanding of perception of tobacco users regarding tobacco addiction can be used for selecting and developing tobacco treatment skills and programs for tobacco cessation and health promotion. Tobacco addiction is considered as a major health concern, has extravagant impact on growing economy and high expenditure on health. In Jodhpur the overall prevalence of Tobacco users (chewing and smoking) in the age group 15 year and above is 43.6% in males and 37.6 % in females. It is crucial to extract the principle cause why do people initiate and continue the tobacco and if they want to quit what are the barrier. With this viewpoint researchers planned to carry this study with an aim to explore perception of tobacco users regarding tobacco addiction.

METHODS

This qualitative study was conducted among tobacco users residing at Pratap Nagar, Jodhpur, Rajasthan.

Research design: Qualitative

Research Setting : Pratap Nagar, Jodhpur, Rajasthan

Sample and sampling technique: This study was conducted among tobacco users who were recruited through purposive sampling. The sample size calculation was based on data saturation. Data saturation was obtained after 10 interviews but being on safe side, I included 2 more interviews so that no new data can be left after data collection. So, In this study, total informants were 12.

Selection criteria: Those who consumed chewable form of tobacco since last 6 month.

, willing to participate and were present at the time of data collection.

Ethical Considerations

Ethical approval was obtained from the Institutional Ethics Committee of the AIIMS, Jodhpur. Informed written consent was taken from the study subjects after giving proper explanation of the purpose of the study. Confidentiality of data was maintained and the study participants were given full autonomy to withdraw from the study at any time.

Data collection tool and method: Semi structured Open-ended questions by face-to-face interview and audio recording was done. There was total 13 open ended questions were asked during interview schedule. Interview was done under calm and quit environment. Interview schedule was started with general question and flexibility was maintained.

Validity and reliability: Level of trustworthiness was established by using the criteria of Lincoln and Guba i.e. Credibility (Audio recording and individual transcription confirmed that all the information was captured accurately), conformability (participants were approached after secondary data analysis and they confirmed that the findings were suggestive of the statement they gave during the interview), dependability (Audio recording and supervisory checking), transferability (Thick description of the data findings from the participants were stated along with the direct quotations under the theme with line number)

Data analysis & Interpretation: Colaizzi s framework (1978) was used in the study to analyse the data.⁶

Data is analysed into two steps

- ✓ Data preparation: Done by reviewing and transcribing verbatim recorded spoken words into texts. Participants were given code so that the anonymity of the participants can be maintained.
- ✓ Thematic analysis: Proper subthemes and themes were identified by using the Atlas .ti 8 software –a powerful tool for qualitative data analysis.
- ✓ Bracketing was done before the data collection through peer review and self-review technique of bracketing.

RESULTS

Half (50%) of tobacco users were with in age group 45-60 years. Mean age of subjects were 52.2±13.09 years. More than half (58.4%) of subjects were males. About 50% of chewers were having their own business mainly work of handicraft and shoe making. Almost half 41.7% of subjects have monthly income between Rs.20,001 to 30,000. Majority (83.3 %) of the tobacco chewers were following Hindu religion.

Table 1:

Personal variable	f (%)
Age (years)	
15-30	1(8.3)
30-45	1(8.3)
45-60	6(50)
>60	4(33.4)
Mean age±SD	52.2±13.09
Gender	
Male	7 (58.4)
Female	5(41.6)
Occupation	
Home maker	4(33.3)
Private job	2(16.7)
Own business	6(50)
Govt Job	0
Monthly family income in Rs.	
≤10,000/-	3 (25)
10,001-20,000/-	2 (16.7)
20,001-30,000/-	5(41.7))
30,001-40,000/-	2 (16.7)
Religion	
Hindu	10 (83.3)
Muslim	2(16.7)

Tobacco chewing habit and quitting attempts

75% of subjects started tobacco chewing at age ≥20 years. 41.7 of tobacco users were chewing tobacco since last 10-20 years. A large number of chewers i.e.66.7 % consumed more than 5 grams of tobacco per day. All tobacco users tried to quit habit of tobacco chewing at one or other point of time in life but quitting attempts were unsuccessful. Nearly 41.7% of tobacco chewers had>5 attempts to quit tobacco chewing.

Figure 1 depicts that half of tobacco users learned their habit of tobacco chewing from their friends

Table 2:

Variable	f (%)
Age of starting the tobacco chewing (in years)	
<20	3(25)
≥20	9(75)
Duration of tobacco chewing (years)	
<5	1 (8.3)
5-10	4 (33.3)
10-20	5(41.7)
20 year	2 (16.7)
Estimated amount of tobacco consumption per day	
<5 gm	4 (33.3)
≥5 gm	8 (66.7)
Ever tried to stop/quit tobacco chewing	
Yes	12 (100)
If yes then it was successful or not	
Not successful	12 (100)
Number of attempts taken for quitting	
<5 times	7 (58.3)
>5 times	5(41.7)

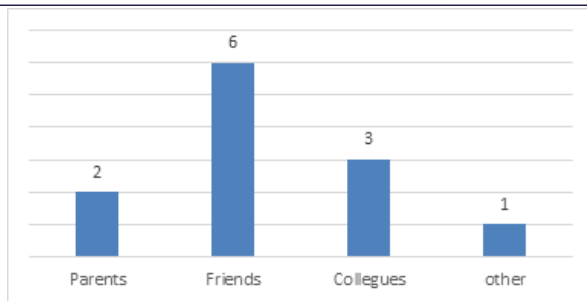


Figure 1: Source of initiation of tobacco chewing (N=12)

Perception of Tobacco users

4 Themes and 18 subthemes were extracted after categorizing the codes from the significant statements of the Participants. Tobacco chewers perceived that source of initiation of their tobacco chewing habit was Influence of colleagues; family and peer group whereas reason of initiation was Replacement of another substance use and to get relief from illness like gas in stomach, curiosity to taste tobacco. There were some factors which served as facilitators for taking successful quitting attempt for tobacco chewing such as High Health risk, unnecessary financial burden due to tobacco use, Spoiling of Personal, environmental hygiene and Spoiling of home etiquettes as perceived by tobacco chewers. Participants perceived that the main impetus behind use of tobacco was its stimulating and relaxing effect which helps in doing their day to day work easily.

Tobacco addiction: Source and reason of initiation

Compulsive and habitual i.e. recurrent use of chewing form of tobacco like Gutka, Zarda is tobacco addiction .As tobacco addiction is not a single step process. It is a slow developing habit which converts into addiction by frequent use of tobacco .So in current tobacco users everyone had learned and developed their habit of tobacco chewing from some person and their was some cause of starting their habit .

Most of the informants perceived that source of initiation of their tobacco chewing habit was due to Influence of colleagues and reason to start was curiosity to taste tobacco. Other perceived reason of initiation was Replacement of another substance use and to get relief from illness like gas in stomach and source was family and peer group.

Reason for continuing use of tobacco

When someone uses any addictive substance with time that person will become addicted to that and continue the use of that substance due to addiction but there is always some reason also in that study participants perceive that they used tobacco due to its stimulating effect and they get energy from it which helps in doing their day-to-day work easily. Other perceived reason are tobacco chewing helps to relieve /avoid stress and they continue its use due to other Inadequate recreation sources and get accepted in Peer group .

Tobacco addiction: Barriers in quitting

Every current tobacco chewer expressed desires to to quit their habit of tobacco chewing and even they had taken attempts to quit their habit but those attempts were unsuccessful. They perceive that there were several obstacles which create hindrance in quitting. Tobacco chewers perceived that Physiological problems like gas ,pain in teeth and laziness create problem in quitting their habit ,Easy availability ,Inadequate deaddiction facilities and Psychological problems are some other barrier .

Tobacco addiction: Motivator for taking quitting attempt

Tobacco chewers perceived that there are some factors which can serve as a facilitators for taking successful quitting attempt for tobacco chewing are Side effects of tobacco chewing such as staining of teeth and hands, bad breath, and making one's home dirty from spitting which leads to Spoiling of Personal and environmental hygiene

Family also served as a reason for many current tobacco users to become committed to non-chewers. Some participants did not want their children to see them chewing tobacco or wanted to avoid their children's exposure to their habit of tobacco chewing in order to preserve home etiquettes. Others cited personal experiences of seeing loved ones die of tobacco-related illnesses and wanting to protect their loved ones from similar trauma due to perceived High Health risk of tobacco use. Other perceived that it causes unnecessary wastage of money which leads to financial burden.

Table: 3 Perception of tobacco users

Objective	Themes	Subthemes
To explore perception of tobacco users regarding tobacco addiction.	Theme :1 Tobacco addiction : Source and reason of initiation	<ul style="list-style-type: none"> • Curiosity • Replacement • To get relief from illness • Influence of colleagues • Role of family • Role of peer group
	Theme :2 Reason for Continuing use of tobacco	<ul style="list-style-type: none"> • Helps to relieve /avoid stress • Gives stimulating effect • Inadequate recreation sources • Peer acceptance
	Theme :3 Tobacco addiction : Barriers in quitting	<ul style="list-style-type: none"> • Easy availability • Inadequate deaddiction facilities • Physiological problems • Psychological problems
	Theme :4 Tobacco addiction : Motivator for taking quitting attempt	<ul style="list-style-type: none"> • High Health risk • Financial burden • Spoiling of Personal and environmental hygiene • Spoiling of home etiquettes

DISCUSSION

Tobacco is most easily available and widely accessible consumed substance especially in developing countries. It is a major risk factor for a number of diseases affecting all age groups across the geographical boundaries. ¹Tobacco users tend to underestimate their own personal risk of becoming addicted or suffering health effects from tobacco in comparison to others. These inaccurate risk perceptions can inhibit quitting. The current work intended to explore perception of tobacco users regarding tobacco addiction.

The present study results show that mean age of the subjects under study was 52.2±13.09 years. Tobacco chewing was more prevalent among males. Major proportion of tobacco chewers were Hindu. These findings align with a study conducted by Kumar et al where about 51% of subjects were males with mean age of 49.5±17.5 years. ⁷

A prominent number of tobacco chewers started consuming tobacco during early adulthood. Main source of initiation was peers and friends. These results are in alignment with the evidence generated by Mandal et al and researchers. ⁵Contrary to this Pradhan PMS study showed that the age of initiation of tobacco chewing among study subjects was 13.80 years. ⁹ Peer pressure and elder influence were reported as main sources behind initiation of tobacco chewing in studies conducted by Kumar et al and Pradhan PMS. ^{6,10}

In current study tobacco chewers perceived that source of initiation of their tobacco chewing was Influence of colleagues, family and peer group. Reason of initiation was to get relief from illness like gas in stomach, curiosity to taste tobacco. Similar results had been reported in various studies conducted throughout the nation shows that Curiosity, peer pressure and influence of family members were the main reasons behind trying tobacco. ^{9,12,13}

In current study tobacco chewers perceived that Physiological problems are the barrier in quitting tobacco. Similar results reported by Joshi et al where Key barriers to smoking cessation were physical addiction and smokers' concern of withdrawal symptoms if they attempted quitting. ¹³

Various factors which serve as facilitators for taking successful quitting attempt for tobacco chewing were concern of Health, unnecessary financial burden due to tobacco use, Spoiling of Personal and environmental hygiene and spoiling of home etiquettes. Similar results reported by studies conducted by M.Gierisch Jennifer et al and Joshi et al. Which shows that factors which motivate tobacco users to quit smoking are Side effects of smoking, such as staining of teeth and hands, bad breath, and making one's home dirty from cigarettes,

concern about their own and health of family members and friends, cost of cigarettes. ^{11,14}

Strength of the study:

As it is a qualitative study that provide more valid and reliable findings and opportunity for clarification and exploration of the significant findings from the viewpoint of the participants.

Computer assisted software was used for analysis which is more accurate method for qualitative data analysis.i.e. atlas ti.

Reconfirmation by participants i.e. content was validated from the participants as analysis was done under collazis framework.

The direct quotation from the tobacco users was coated to ensure the transferability of the findings

Limitations

The results of the present study must be interpreted in view of its limitations. The study was conducted at a single setting among sample chosen by Purposive sampling technique. The results may not be generalized to whole India because of varied geographical locations and mixed inhabitants.

Recommendations:

Community based tobacco cessation activities need to be conducted in this region to explain the adverse effects of tobacco consumption Focused group discussions should be held in the target group so that the tobacco users may quit the habit and non-users do not take up the habit. Health education and behavior change communication by medical and paramedical personnel to dispel the misconceptions.

CONCLUSION

Tobacco addiction is a grave public health problem. There is strong need to clarify misconceptions regarding tobacco use and its benefits by planning and implementing effective tailored tobacco quitting awareness programs at an individual and mass level.

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