Original Research Article

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Assessment of prevalence and knowledge, attitude and practice regarding tobacco consumption among adolescents in rural field practice area of medical college in Telangana, India: a cross-sectional study

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ABSTRACT

Background: Tobacco is a major cause of premature death and disease worldwide. Over five million people die each year due to tobacco related illness- a figure expected increase by 8 million a year by 2030. Adolescence is transitional phase of growth and development between childhood and adulthood. WHO defines an adolescent as any person between ages 10 and 19. Adolescents consist of 16% of world population. Not only being productive age group they are also vulnerable to habit formation during this age group. The study was conducted to assess the prevalence and KAP regarding tobacco consumption among the adolescents.

Methods: It is a cross sectional study where sampling was done by multistage random sampling conducted in 5 villages in the rural practice area of RVM medical college, Laxmakkapally, Telangana state.

Results: Study population consists of 149 adolescents between the age of 10-19 years. Mean age of study participants was 16.6 years. 92.6% of participants were males. 66.4% were affiliated to school or college. 94% were aware that tobacco was hazardous. Knowledge regarding passive smoking as hazardous to health was present only in 75.8% of the population. Knowledge regarding anti-tobacco messages was low as 69.1%. 65.8% knew that it was illegal to smoke in public places. 18.8% of study population was engaged in tobacco consumption.

Conclusions: Study concludes that tobacco consumption is high among the adolescents and its similar in rural Telangana as found in other states. Even though knowledge regarding hazards of tobacco consumption is high, knowledge regarding passive smoking is low. Attitude and practice regarding tobacco consumption is not satisfactory and awareness for the same is needed.

Keywords: Tobaaco, Knowledge, Practice

INTRODUCTION

Tobacco is harmful abuse substance causing morbidities and premature death. Over five million people die each year due to tobacco related illness- a figure expected increase by 8 million a year by 2030. Tobacco consumption in forms of cigarette, bidi, snuff or

chewable forms starts at early age of adolescence. Habit formation at these ages is dangerous as it affects a large number of adolescents.

Even though ill effects of tobacco are well known it continues to be one of the main habits forming and abuse substance. Government has taken many steps to reduce the prevalence of tobacco consumption by creating awareness by using mass media, putting messages on the tobacco products, putting ban on smoking in public places and increasing the tax on tobacco products. But still the prevalence tobacco consumption tends to remains high. According to World Health Organization (WHO) 30% of the adult men smokes worldwide. Smoking kills more people than acquired immune deficiency syndrome (AIDS), alcohol, drug abuse, car crashes, murders, suicides and fires combined each year. 5 million people die prematurely every year due to tobacco related diseases, and it was estimated that the rate of fatality will be doubled by the year 2020. 4-8 The amount of morbidity is much higher than this.

Adolescence is transitional phase of growth and development between childhood and adulthood. According to WHO adolescent is any person between ages 10 and 19. Adolescents consist of 16% of world population (UNICEF).

Adolescence is a important age group which as healthy adolescence leads to healthy future. Hence this study was intended to assess the prevalence and knowledge, attitude and practice regarding the tobacco consumption among adolescents.

Objective

- To study the socio-demographic profile of adolescents.
- To assess the knowledge, attitude, and practices regarding tobacco consumption among them.
- To study the prevalence of tobacco consumption among them.

METHODS

Prior to the study, ethical clearance was obtained from the ethical committee. Verbal consent was obtained from the study population.

Present study is a cross sectional study conducted in 5 villages in the rural field practice area of RVM medical college, Laxmakkapally. Study was done over a period of 3 months from January to March 2017. Multistage random sampling was done. Villages were selected randomly. Study population was selected by systematic random sampling. First house was selected using random number table and every fifth house was taken thereafter. Study population consists of people aged between 10 to 19.

The subject participated in the survey voluntarily and the data was collected anonymously, using pretested, closed ended questionnaire without any identifying information. All the student participants were assured of anonymity and confidentiality.

The questions were inspired by GYTS questionnaire. The GYTS is a standardised methodology which includes data on prevalence of cigarette and other tobacco use, question on perception and attitudes about tobacco, access and availability of tobacco products, susceptibility to initiate smoking, exposure to second hand smoke, school curricula media and advertising, smoking cessation as well as some demographic information, thereby providing a systemic approach for the surveillance of youth tobacco use among students.⁹

The global youth tobacco survey (GYTS) as a part of global tobacco surveillance system (GTSS) was developed to monitor tobacco use, elicit attitudes about tobacco, and obtain information on exposure to tobacco smoke among youth.

Study period: January to March 2017.

Statistical methods

Analysis was carried out using SPSS version 16. Continuous variables were expressed in terms of mean. Nominal variables were expressed in terms of descriptive statistics of number and percentage.

RESULTS

Study population consists of 149 adolescents between the age of 10-19 years. Mean age of study participants was 16.6 years. 92.6% of participants were males. 66.4% were affiliated to school or college.

Table 1: Demographic details.

		Frequency	Percentage (%)
Gender	Female	11	7.4
	Male	138	92.6
Currently	No	50	33.6
studying	Yes	99	66.4

Table 2 shows that 4% of adolescents were not aware that tobacco consumption is hazardous. 2% were did not know whether it was hazardous or no. Knowledge regarding passive smoking as hazardous to health was present only in 75.8% of the population. Knowledge regarding anti-tobacco messages was low as 69.1%. It is clear from above table that many adolescents are still not aware about the harm caused by tobacco. Warnings regarding tobacco consumption should be made more easily available and widespread.

Attitude regarding smoking in public places was satisfactory only in 65.8% of population. Education regarding smoking in public places should be emphasized. 21.5% people believed that smoking increases number of friends and 32.9% said that it does not affect number of friends.7.4% thought that smoking

makes them cool in front of their friends. 14.8% adolescents answered that they would like to consume

tobacco in future. 9.4% believed they will start smoking if offered free of cost (Table 3).

Table 2: Knowledge about tobacco consumption among adolescents.

		Frequency	Percentage (%)
Tobacco consumption is hazardous to health	Yes	140	94.0
	No	6	4.0
	Do not know	3	2.0
	Total	149	100.0
77 1 1 6 4 14 1 1	Yes	113	75.8
Knowledge of passive smoking as hazardous to health	No	24	16.1
to nearth	Do not know	12	8.1
	Yes	103	69.1
Awareness about anti-tobacco messages	No	26	17.4
	Do not know	20	13.4
D	Yes	110	73.8
People read anti-tobacco warning on tobacco products	No	20	13.4
products	Do not know	19	12.8

Table 3: Attitude of adolescents regarding tobacco consumption.

		Frequency	Percentage (%)
Deanle believe that takeness consumption	Yes	98	65.8
People believe that tobacco consumption should not be done in public places	No	29	19.5
should not be done in public places	Do not know	22	14.8
Number of friends affected by tobacco consumption as perceived by adolescents	Increase	32	21.5
	Decrease	68	45.6
consumption as perceived by adolescents	No change	49	32.9
Affords image of noncoined by adelegants	Makes cool in front of friends	11	7.4
Affects image as perceived by adolescents	Decreases the image	78	52.3
	No change	60	40.3
Adolescents who wants to start consumption in the future	Yes	22	14.8
	No	127	85.2
A deleggents who will consume take and	Yes of course	14	9.4
Adolescents who will consume tobacco products if provided free of cost	May be	56	37.6
products if provided free of cost	No never	79	53.0

Table 4: Practice regarding tobacco consumption.

		Frequency	Percentage (%)
Consume tobacco	Yes	28	18.8
	No	107	71.8
	Not answered	14	9.4
	Bidi	11	39.3
Form of consumption	Cigarette	8	28.6
Form of consumption	Chew	2	7.1
	Gutkha	7	25.0
	Yes	5	17.9
Attempt to quit	No	19	67.8
	Unable to quit	4	14.3

Mean age of starting tobacco consumption was 16.3 years. It started as early as 12 years of age. Mean duration of smoking was 2.33 years ranging from 1

month to as high as 5 years. Mean expenditure was 32.71 rupees ranging from 10 to 150 rupees (Table 4).

DISCUSSION

In Gujarat, global youth tobacco survey data represents the prevalence of ever used tobacco (any form) in adolescent around 19.0%. In Ahmedabad city proportion of students currently using any tobacco products was 14.5%. 10 As seen in different parts of India tobacco consumption among adolescents in rural places of Telangana is similar 18.8%. The knowledge that smoking is harmful seen in 85.2% as seen in study done in Udaipur.¹¹ We also saw similar results. Knowledge and attitude regarding smoking are not adequate. "Smoking is illegal in public places" was known to 86% of study respondents in a study done in Ahmedabad similar results were seen in our study. 10 40% of study respondents told that passive smoking/second hand smoke is harmful and 51% of study participants believed that boys or girls who smoke or use tobacco have more friends/looks in the same study. Where as in our study adolescents had better knowledge regarding passive smoking and smoking in public places.

CONCLUSION

Study concludes that tobacco consumption is high among the adolescents and its similar in rural Telangana as found in other states. Even though knowledge regarding hazards of tobacco consumption is high, knowledge regarding passive smoking is low. Attitude and practice regarding tobacco consumption is not satisfactory and awareness for the same is needed. Myths regarding tobacco consumption should be cleared. Education regarding tobacco consumption should start early age of school. Warnings and harm regarding tobacco use should reach everyone. Increased use of mass media is needed to increase the awareness among public. Need to sensitize youth of the state is warranted.

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Ethical approval: The study was approved by the

Institutional Ethics Committee

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