## A Survey on Tobacco Use and Awareness on Tobacco Related Health Hazards among Teenage Students

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According to the World Health Organization (WHO), tobacco use is one of the major preventable causes of premature deaths and disease in the world. In Sri Lanka, tobacco is consumed in two forms: smoking and chewing. Chewing tobacco is used mainly as a complement to betel chewing. Smoking is mainly practiced in the form of cigarettes, beedi, and cigars. The aim of this study was to identify the tobacco habits and awareness on tobacco related health hazards in school children of 15-18 years of age.

A group of 763 students (290 males and 473 females), aged between 15-18 years, studying in randomly selected schools from the Theldeniya education zone participated in the study. Data was collected using a self administered questionnaire with both open ended and multiple choice type questions.

Among the sample, 20.8% (159 students) had used tobacco products at least once which included 40% male (116) and 9.1% females (43) students. The gender difference was statistically significant (p < 0.001). Among the male students who use tobacco products, 56.9% chewed tobacco with betel leaves while 24.1% were smokers. Another 16.1% were using both forms of tobacco and all the female users were tobacco chewers. Accordingly, when the total sample was considered, 16.8% chewed tobacco leaves while 6.2% were smokers. All smokers were males. The relationship between the gender and the type of tobacco products used, was statistically significant (p < 0.001). Elders in the family who use tobacco were the main influence for the children to start using them (56%). Friends also had strong impact on the boys (41%) but not much on the girls. Boys were almost equally interested in pleasure (48%) and experimenting (47%) while using tobacco products, whereas girls were mostly experimenting (84%). Stress relief and/or peer pressure did not seem to be an important factor among the current study sample. All students were able to name at least one tobacco related health problems.

When the total sample was considered 52.9% did not have any family members using tobacco products. However, when only the tobacco users were considered, it was 81.1%. This relationship was statistically highly significant (p < 0.001). The type of tobacco products consumed by the family members appears to have an impact on the tobacco use by the children. When the tobacco using family members were considered, 87.2% chews it with the betel quid. Since betel chewing is considered as a habit associated with the Sri Lankan culture, it is not categorised as a bad or hazardous habit like smoking by many people. Instead, it may be even encouraged by some adults. It is also freely available in most of the households and there are no legal or social restrictions even for minors to acquire them. Therefore, these findings may be useful in implementing tobacco control policies in Sri Lanka.