

Knowledge, Attitude, and Practices of Tobacco Vendors toward Selling Tobacco Products to Young Children and Adolescents in Central Delhi

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ABSTRACT

Background: Tobacco consumption by youth is a serious public health problem. Regulation on tobacco sales has been given enough attention in our country, but very less information exists about the knowledge and attitude regarding tobacco laws by tobacco vendors.

Aim and objective: To study the knowledge, attitude, and practices of tobacco vendors regarding the selling of tobacco to children and adolescents up to 18 years of age in the Central Delhi area.

Materials and methods: A total sample size of 60 tobacco vendors was selected by random sampling method. The procedure and objectives of the study were explained to them and written informed consent was obtained. A casual interview of the tobacco vendor was taken and answers given by them were recorded using a questionnaire. After completing the data, statistical analysis was performed.

Results: The mean age of children and adolescents visiting tobacco shops was 11.83 years and the minimum age was 8 years. It was reported that 19 (31.7%) vendors always asked the age of the child while none of them asked for proof of age. Forty-two (70%) of them reported these children and adolescents visit their shop alone while 18 (30%) reported that they visit with friends. *Khaini* was the commonest form of tobacco bought/consumed by children and adolescents. Twenty-seven (45%) vendors reported that these children consume tobacco publically.

Conclusion: Despite knowing various anti-tobacco laws, tobacco vendors are selling harmful tobacco products to children and adolescents.

Keywords: Attitude and practice, Children and adolescent, Tobacco products, Tobacco vendor.

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INTRODUCTION

Tobacco abuse is one of the major problems that have affected modern society heavily. It is not limited to any one area or country alone but has widely afflicted the world.¹ India is the world's second-largest producer as well as the second-largest consumer of tobacco. Various studies have shown that the tobacco habit in adolescents is affected by numerous environmental, social, and psychological factors. The easy availability, obtainability, and affordability of tobacco products are the main reasons for the increasing level of adolescent's tobacco use.^{2,3}

Tobacco use can be divided into two categories: smoked and smokeless. Tobacco is used in smoking forms like cigarettes, cigars, bidis, or by using various devices like *hookah* (water pipe), *chillum*, *chhutta*, or *dhumti*. Smokeless forms of tobacco include betel quid chewing, *mishri*, *khaini*, *gutka*, snuff, and as an ingredient of pan masala. A different pattern of tobacco uses in India, like in the form of smoking, chewing, or applying has led to tobacco consumption as a more complex problem in our country than in any other country in the world.¹

It is observed that tobacco use is increasing with increasing age. As reported in the study done by Soni and Raut, initiation may occur at an early age in areas with a high prevalence of tobacco use.¹ Tobacco vendors' behavior plays an important role in reducing the exposure of these harmful tobacco products among children. If the tobacco vendors question the minor or ask for identification, they are less likely to purchase tobacco products, because of the fear of being caught or informed to the parents by tobacco vendors.⁴ Few studies have been conducted on tobacco vendors'

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knowledge and attitude regarding various anti-tobacco laws and their implementation.^{5,6} Studies have been done on tobacco vendors' perspective on selling tobacco to the adult population, but no studies are conducted which focuses on tobacco vendors' perspective on selling tobacco to the minor age group. This study was conducted to obtain the knowledge, attitude, and practices of tobacco vendors regarding the selling of tobacco to children and adolescents up to 18 years of age in the Central Delhi area and objectives were to study the various forms of tobacco being bought by these children visiting tobacco shops, to study the attitude of children and adolescents visiting tobacco shops, and to know the experience of tobacco vendors regarding tobacco use among these children.

MATERIALS AND METHODS

A cross-sectional study was conducted among 60 vendors from tobacco selling shops in the Central Delhi area. A pretested and validated semistructured questionnaire in Hindi and the English language was formed and the same was used to collect the information from tobacco vendors. The procedure and objectives of the study were explained to the tobacco vendors and written informed consent was obtained. They were assured that the answers given by them will be kept confidential and anonymous. A casual interview of the tobacco vendors was taken and answers given by them were recorded using the semi-structured questionnaire. After obtaining the data from tobacco vendors, the data were compiled and statistical analysis was done.

Data were analyzed using the Statistical Package for the Social Science-21 (SPSS-21). All statistical levels were made at $p < 0.05$.

RESULTS

All the tobacco vendors included in the present study were males. The age range of tobacco vendors included in the study was 35–65 years with a mean age of 46.5 years. The mean duration since when they were working as tobacco vendors was 25.8 years with a minimum duration of 12 years and a maximum duration of 50 years.

None of the tobacco vendors included in the study asked for valid age proof documents from children and adolescents visiting their tobacco shop. Only 19 tobacco vendors asked the age of children while the rest ignored that too (Table 1). Among all the tobacco vendors who participated in the study, 42 (70%) of them reported that children visited their shop alone while 18 (30%) reported these children visited their shop with friends. Seventeen

(28.3%) tobacco vendors said that *Khaini* was the commonest form of tobacco bought or consumed by children while the cigarette was the least preferred form of tobacco (10%) (Table 2).

Twenty-two (36.7%) tobacco vendors reported that children and adolescents buy tobacco for their relatives while 38 (63.3%) reported that they buy them for themselves. It was observed that 27 (45%) vendors reported children and adolescents up to 18 years of age consumed tobacco publically, i.e., near their shop while 33 (55%) vendors denied this. There was a statistically significant correlation between the younger age group of children visiting tobacco shop and their consumption of tobacco publically, i.e., near tobacco shops ($p < 0.05$). It was reported that children of younger age consume tobacco products near tobacco shops in less number compared with older age children. The majority of tobacco vendors (96.7%) reported that boys visit their shop more while two of them reported that girls visit more (Table 3).

Among all the tobacco vendors who participated in the study, 46 (76.7%) vendors reported that they had been requested or commanded/threatened by children and adolescents to sell tobacco to them while 14 vendors (23.3%) denied this. Forty-two (70%) vendors had given tobacco to these children after being requested or commanded/threatened by them, four (6.7%) of the tobacco vendors had not given it while for the rest it was not applicable as they were neither requested nor commanded/threatened by children. Thirty-five (58.3%) vendors reported that they refused to sell tobacco to children and adolescents while 25 (41.7%) never refused to sell tobacco to them.

DISCUSSION

The harmful effects of tobacco are highest in those who initiate use of tobacco at an early age and continue for a longer period.² The prognosis of tobacco-related harmful health effects is poorer in these groups. This leads to an urgent need to intervene and protect this fragile and vulnerable group from falling prey to this habit.⁷ To the best of our knowledge, no such study has been done to know the attitude and practices of tobacco vendors regarding the selling of tobacco to children and adolescents in the Central Delhi area.

A total of 60 tobacco vendors in Central Delhi were included. The age range of tobacco vendors who participated in the study was 35–65 years. The mean age of the youngest children visiting their shop was 11.83 years and the mean age of the commonest age group visiting their shop was 17.3 years (Table 4). Muttappallymyalil et al. conducted a study in Kannur, Kerala, among 14–18 years old children and observed that >50% started tobacco habit at the age of 12 years; 38.5% of them started at the age of 13 years and remaining at the age of 14 years.⁸ A survey conducted by Global Youth Tobacco Survey (GYTS) in Odisha showed that about 30% of the tobacco users initiated at the age of 10 years or earlier.⁹

Table 1: Frequency and percentage of tobacco vendors asking the age of children and adolescents up to 18 years of age who came to buy tobacco

| | No. of tobacco vendors | Percentage |
|---|------------------------|------------|
| Tobacco vendors did not ask the age of children and adolescents | 41 | 68.3 |
| Tobacco vendors asked the age of children and adolescents | 19 | 31.7 |
| Total | 60 | 100.0 |

Table 2: Commonest form of tobacco children and adolescents up to 18 years of age buy/consume

| | No. of tobacco vendors | Percentage |
|-------------------|------------------------|------------|
| <i>Bidi</i> | 14 | 23.3 |
| Cigarette | 6 | 10.0 |
| <i>Gutka</i> | 12 | 20.0 |
| <i>Khaini</i> | 17 | 28.3 |
| <i>Pan masala</i> | 11 | 18.3 |
| Total | 60 | 100.0 |

Table 3: Gender frequency and percentage of children and adolescents up to 18 years of age visiting tobacco shops

| | No. of tobacco vendors | Percentage |
|-------|------------------------|------------|
| Boys | 58 | 96.7 |
| Girls | 2 | 3.3 |
| Total | 60 | 100.0 |

Table 4: Various ages of children and adolescents up to 18 years of age visiting tobacco shops

| | Youngest age visiting tobacco shop (in years) | Commonest age visiting tobacco shop (in years) |
|----------------|---|--|
| Sample size | 60 | 60 |
| Mean | 11.83 | 17.30 |
| Std. deviation | 2.817 | 1.381 |
| Minimum | 8 | 15 |

Among all the tobacco vendors who participated in the study, the majority of them (41, 68.3%) never asked the age of the children. The majority (70%) of the vendors reported that children and adolescents visited their shop alone while others reported their visit with friends. Seventeen (28.3%) of the tobacco vendors said that *Khaini* was the commonest form of tobacco bought or consumed by children followed by *Bidi* (14, 23.3%), *Gutka* (12, 20%), *Pan Masala* (11, 18.3%), and Cigarette (66, 10%) (Table 2). Jakhar et al. studied the prevalence of tobacco use among 14–18 years old school children showed a higher incidence (77.78%) of smokeless tobacco use than smoking form in Jaipur city.¹⁰ Rattan et al. conducted a study among 8–15 years of school children in rural Haryana which reported that 1.6% children used smoking form, 2.4% children used smokeless form, and 1% children used both the forms.¹¹ There was a statistically significant correlation between the commonest age group of children visiting tobacco shops and the commonest form of tobacco children buy/consume. *Khaini* was the commonest form of tobacco bought or consumed by most children and adolescents. These trends indicate that smokeless tobacco use is increasing among the younger population. Children were using pan masala or *Gutka* as a mouth freshener or as processed betel nut without knowing the ingredients and hazards.¹² Most of these young children bought tobacco for themselves (38, 63.33%). Twenty-seven (45%) vendors reported that children consume tobacco publically, i.e., near the shop while the rest 33 (55%) denied this. It was observed that as the age of the children increases, more children reported consuming tobacco publically. Jakhar et al. reported that public places (54.81%) were the most commonplace followed by the school (29.63%) and homes (13.33%) where tobacco products were consumed among 14–18 years old school children in Jaipur.¹⁰ Another study conducted by Singh et al. among 10–18 years old school children in National Capital Territory (NCT) observed that tobacco use was mainly done in public places (80.9%) followed by the school (8%) and home (6%).¹³

The present study reported boys (96.7%) were more visiting tobacco shops compared to girls (3.3%). Various studies have reported that, among males and females, males outnumbered as ever tobacco user. It is because males in Indian culture enjoy a higher level of freedom than females regarding their individual behaviors, both from the family and society.^{9,14–16}

The present study shows that there is increasing uptake of tobacco products in children and adolescence from various tobacco selling shops. This study also depicts a lack of awareness about anti-tobacco laws among the vendors in the Central Delhi area. This indicates the obligation for implementation and reinforcement of various anti-tobacco laws among tobacco vendors. It can be concluded that despite the ban on selling tobacco products to minors and knowledge of the harmful effects of tobacco products on children, tobacco consumption still remains one of the challenging issues among children.

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