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Students' beliefs about smokeless tobacco use in Chabahar city: A qualitative study using focus groups

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Abstract:

BACKGROUND: Smokeless tobacco use is a public health problem. This study explored students' beliefs about smokeless tobacco use in Chabahar, Iran.

MATERIALS AND METHODS: The qualitative study was conducted using three Focused Group Discussions among 24 students aged 12–14 years in Chabahar City. Focus Group Guide Morgan was used. Qualitative Content Analysis was used to explore and extract codes and themes. The data analysis process was carried out in accordance with the stages of proposed by Graneheim and Lundman. Guba and Lincoln criteria were used for evaluating research transferability.

RESULTS: Two main themes emerged from the analysis including; beliefs of being useful and harmful. Each of these themes is divided into subthemes with useful or harmful physical and psychological beliefs. Four subthemes included: beliefs of being useful physically, beliefs of being useful psychologically, harmful beliefs physically, and harmful beliefs psychologically.

CONCLUSIONS: One of the more significant findings to emerge from this study is that many students mentioned the benefits of using smokeless tobacco to reduce toothache, relieve headaches, and bad breath. This information can be used to develop targeted interventions aimed at reducing smokeless tobacco consumption. However, more research on this topic needs to be undertaken before the association between kinds of beliefs and smokeless tobacco consumption is more clearly understood.

Keywords:

Focus group, qualitative content analysis, smokeless tobacco, students' beliefs

Introduction

Smokeless tobacco is a public health concern and is consumed in 140 countries worldwide. Among these countries, India is at the forefront of the production and consumption of this material, with two-thirds of the world consuming about 200 million people in India. Other countries such as Pakistan, Bangladesh, and Sri Lanka are also among the most consumed countries.^[1,2]

These materials are made in traditional and industrial forms and in most Southeast

This is an open access journal, and articles are distributed under the terms of the Creative Commons Attribution-NonCommercial-ShareAlike 4.0 License, which allows others to remix, tweak, and build upon the work non-commercially, as long as appropriate credit is given and the new creations are licensed under the identical terms. Asian countries, smokeless tobacco use causes various diseases such as cancers, cardiovascular diseases, and dental and oral problems.^[3-6]

There has been a big increase in smokeless tobacco consumption, particularly among students,^[7] Smokeless tobacco use among students aged 13–15 years in South and Southeast Asia has been reported 10%–20%. These percentages are variable among students in different regions of Asia, for example, in India, 2% in Himachal Pradesh and up to 55.6% in Bihar were reported.^[8] Furthermore, the consumption rate among students aged 12–14 years was 39% in Chabahar.^[9-11]

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In Iran, due to its border with Pakistan and border connections between the people of the two countries, smokeless tobacco products in different types and attractive packaging are easily available to people in the southeastern regions of the country (especially Sistan and Baluchestan).^[10-13]

Lack of basic information and in-depth information about the causes and factors of smokeless tobacco use has been one of the reasons for the ineffectiveness of these interventions. Researchers do not yet know much about consumer beliefs.^[9,10,12]

In recent years, there has been an increasing amount of quantitative research about smokeless tobacco, though quantitative research has been useful for solving many problems and difficulties, still, many questions about smokeless tobacco remain unanswered. Most of these questions are due to the complexity of societies and cultures.^[14,15] The only answer to these questions is to do qualitative research. One of the most important questions is the beliefs and experiences of people about smoking smokeless tobacco. What beliefs exist for consumers and students. In addition, this qualitative research can provide a better understanding of smokeless tobacco consumption, which is related to the beliefs of smokeless tobacco.

With regard to a large number of students are consumers, it was decided that the best method to adopt for this investigation was qualitative methods. Qualitative methods offer an effective way to explore students' beliefs about tobacco smokeless use.^[9,10]

This study explored students' beliefs about smokeless tobacco in Chabahar City as a qualitative study based on the focus group.

Materials and Methods

The qualitative study was conducted using three Focused Group Discussions (FGD) among 24 students' consumers with a mean age of (13.5 ± 0.66) years in Chabahar City. These students had consumption experiences. Each group consisted of 8 students. The trained interviewer was a facilitator of the discussions and the group discussion was friendly and intimate in a comfortable atmosphere. Furthermore, Focus Group Guide Morgan was used for this study.^[16-19]

We selected students based on the criteria of this study, which include: volunteering, history of consumption, and being a native and attending school. An attempt was made to select homogeneity individuals for each session.^[20] Meetings were held in the classroom. Before the beginning of the discussions, students completed the demographic questionnaire, then general and partial questions previously formulated by the interviewer were used in group interaction. Students were also assured that the information would be kept confidential and that they read and signed the ethical consent form. In coordination with the school authorities, the students volunteered for group discussion.^[21]

In total, three FGDs and each session lasted up approximately 45 min. The first three sessions were conducted during the week, one session per day, as well as the fourth session after 1 month, with the aim of collecting newer data and ensuring previous data with students who volunteered. At the end of the discussions, the researcher thanked the participants. Questions in the process of discussions were about smokeless tobacco and types. Students discussed their experiences with their friends and family about smokeless tobacco.

Discussions began with questions such as why do people use tobacco? What benefits or disadvantages? Why are they consuming themselves?

Here, the two researchers are used as the moderators^[22] for guided the conversation. They also took notes of important points and their observations. In this study, the data analysis process was carried out in accordance with the stages of proposed by Graneheim and Lundman. Furthermore, data analysis started at the same time as data collection and the conversations were recorded and finally written on the sheets and the content was analyzed using the content analysis approach. The findings were obtained through the collaboration of two researchers.In addition, all the materials have been reviewed, several times to get a deep understanding.^[23] The transcript was analyzed thematically, using the constant comparative method. Initial coding was performed and identified by summarizing, interpreting, and analyzing them, and finally, the themes and categories were obtained.^[13,23-25]

Lincoln and Guba criteria were used to survey the strength of this study. To ensure the acceptability of the data correctness and credibility, continuous verification and coding of the information were compiled with the help of the participants. To determine the reliability, two researchers have coded data independently and attain a high quality of compliance. There was also enough time to do the whole process. For transformable, the results were shared with two experts in the field and their opinions were applied. Participants' quotes are also written in the text.^[26]

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Results

Students aged 12–14 years with a mean and standard deviation of 13.5 ± 0.66 . The statistics showed that 41.7% of the students' "fathers were unemployed and 50.0% were illiterate, and 83.3% of the students" mothers were housewives and 58.3% illiterate [Table 1].

The themes with two subthemes in each and sample quotes from students about smokeless tobacco are reported in Table 2.

This section presents the findings of the research, focusing on the four subthemes that include details and quotes. All of the students in the discussion had a history of consumption and self-disclosure in an intimate atmosphere, with red spots on their teeth indicating that some of them were repeatedly used.

Beliefs of being useful physically

Some students reported that "their father uses these substances." Students said "That tobacco smoke is useful for toothache and that it is used to harden or strengthen teeth to prevent tooth decay and is good for headaches"

Table 1: The	e demographic	data of	the samples
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Variables	Frequency (%)
Father job	
Employee	8 (33.3)
Free	3 (12.5)
Worker	3 (12.5)
Unemployed	10 (41.7)
Types of smokeless tobacco use	
Paan	17 (70.8)
Gutkha	5 (20.8)
Biti	2 (8.3)
Father literacy	
Illiterate	12 (50.0)
Elementary, secondary	8 (33.3)
High school	3 (12.5)
Academic	1 (4.2)
Mother literacy	
Illiterate	14 (58.3)
Elementary, secondary	8 (33.3)
High school	2 (8.3)
Academic	0 (0.0)
Mother job	
Employee	4 (16.7)
Homework	20 (83.3)
Consumption times	
Only 1 or 2	13 (54.2)
Recreational	7 (29.2)
Current users	4 (16.7)
Family number	
3-5	11 (45.8)
6-7	9 (37.5)
8-9	4 (16.7)

and some said "His brother uses it and Then he goes fishing and does as much work as he can using these materials."

Beliefs of being useful psychologically

Some participants said, use it for fun and entertainment. One of them said "I use it when I'm bored to have fun to feel better."

Some students also said, "Some people use this material before they fight or argue with another person to avoid being scared." One student said, "His brother uses pan when he gets bored."

A number of students said "The girls in the house of the materials they use." Some said, "A substance called supari is commonly used by all family members." The students talked about the cheap price and the availability of it, claiming that "They could buy it with the least effort and that there were Pan, BT and Gutkah stalls in town."

Some students said that "at school, the kids are secretly brought in and used" by observing the floor and walls around the school, with the remainder of the pan visible in red, which was confirmed by the questioner.

Harmful beliefs physically

Most students believed that these substances were harmful and caused disease and even cancer. One of them said "my uncle got sick due to high consumption and addiction to these substances and went to Pakistan for treatment."

Others said "It is harmful and can cause tooth decay." On the other hand, some students believed that "Whoever uses these substances in the future will depend on other tobacco products."

Harmful beliefs psychologically

Some students feel bad about the environment being polluted. They said that "Chewing it and removing red liquid from the mouth on the floor and around the walls created ugly scenes and considered it undesirable."

The students said, "We know examples of people who became addicted to other tobacco by continuing to smokeless tobacco." Others said "It is quite implausible for anyone to use these substances and become stronger." Finally, the themes identified in these responses are shown in [Table 2].

Discussion

The main goal of the current study was to explore smokeless tobacco beliefs. The most significant findings to emerge from the current study were useful and

Themes	Subthemes	Codes	Sample quotes from students about smokeless tobacco		
Beliefs of being useful	Beliefs of being useful physically	Reduce tooth pain - improve headache - to tighten teeth and relieve bad breath	Smokeless tobacco is useful for toothache and is used to harden or strengthen teeth to prevent tooth decay and is good for headaches		
	Beliefs of	Use to get stronger and do more work	My brother uses it and then goes fishing and does more to use it		
	being useful	Parents and other family members	My father uses these substances		
	psychologically		Anyone who wants to do more will consume		
			Some people use this stuff before they fight or argue with someone else to avoid being scared		
Harmful beliefs		For fun and feel better and recreation	Sometimes we use it for fun		
			My brother uses it when he is bored		
	Harmful beliefs physically	Tooth decay Tooth loss	Anyone who consumes more loses his or her teeth and the teeth become stained and the mouth smells bad		
		Creates bad breath and black spots			
	Harmful beliefs psychologically	Addiction to other tobacco substances	I know samples of people who became addicted to smoking tobacco by continuing to smokeless tobacco use		
		Being empathic	It is quite implausible for anyone to use these substances and become stronger		
		Creating dependency	Some people tend to consume more every day. I use it every day		

Table 2: Themes, subthemes, and codes generated from the group focu	Table 2:	Themes.	subthemes.	and	codes	generated	from	the	aroup	focu
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harmful beliefs about tobacco use. Beliefs about being useful for toothache and headaches, for strengthening teeth and preventing tooth decay, and eliminating bad breath are classified as useful belief physically themes. This finding is in agreement with Madewell and Kolaja findings which showed that in India, the smokeless tobacco beliefs are believed to be a microbicide and is used to clean teeth.^[27] In addition, the current study found that beliefs such as consumption for being stronger and doing more work, consuming parents and other family members, as well as consuming for fun and feeling better and having fun were the subject of useful beliefs psychologically.

A study by Mukherjea *et al.* with focus group also found that some participants use smoke-free tobacco to help sleep and increase memory, as well as for entertainment and celebrations and entertainment while watching TV, friendly relationships are used to show generosity and culturally accepted. The results of this study also confirm our themes.^[28]

Tooth decay, tooth loss, bad breath, and black spots were classified as physically harmful, consistent with the results of the study by Nemeth *et al.*,^[29] as well as Agbor *et al.*^[30]

Addiction to other substances, being hypocritical, addictive, were classified as psychologically harmful. In a study conducted by Banerjee *et al.*, some interviewees reported that they had taken some time to consume it, and others said that if they did not have pan, they would feel uncomfortable, and others said that I should be with them, The theme presented in addiction and dependency introduced by Banerjee is quite consistent with our subtheme as harmful beliefs psychologically.^[13,31]

In this regard, Focus Group Discussion (FGD) was conducted on 78 students in two schools in the study by Mirbalouchzehi *et al.* According to the students, the reasons for the pan consumption were feeling good, feeling great and relaxed, having fun, having family problems, parental addiction, having fun, and being cheap. The findings are consistent with our research.^[32]

A study conducted by Adnan to explore beliefs about Pan consumption among adults in Nairobi, Kenya. The findings showed that 75% of respondents to the questionnaire were used to smoking without tobacco; they also considered it harmful and addictive. The results are similar to useful beliefs and harmful beliefs among users, which is consistent with our research results.^[33]

A qualitative study of male rural adolescents was conducted at three high schools in California, USA. Results showed that smokeless tobacco product characteristics, such as taste, packaging, and brand, could influence adolescent-onset and continued use. Furthermore, teenagers' curiosity and the availability of smoke-free tobacco, the experience of peer-to-peer smoking, were other reasons for smokeless tobacco.^[34] Furthermore, In our study, students also noted the availability of materials and use by friends, parents, and family. The taste had an effect on the choice of tobacco and was also used to eliminate bad breath.

The results of a qualitative study in Bangladesh showed that the hospitality tradition, curiosity, and the suggestion of the elderly were factors in the onset of tobacco use. The results also showed that many people were aware of the disadvantages of smokeless tobacco but still consuming it. The results of this study were very close to our study theme.^[35] In another qualitative study conducted in Nigeria, the findings showed that the majority of smokeless tobacco users believed that this practice had the following health benefits: wiping their eyes and nose, assisting with sleep and rest, and protecting against colds and bleeding, nose bleeds and headache treatment. Users believed that smokeless tobacco helped them not be afraid of anything. They were also believed to protect them from the evil spirits and dangerous reptiles. They also believed that smokeless tobacco had no adverse health effects and preferred smokeless tobacco compared to cigarettes.^[36]

The study in terms of usefulness beliefs is similar to the results of our study beliefs, but in the negative beliefs section of the study, some users reported no negative health consequences that were completely different from the results of our study.

In India, it is still popular among teenagers, despite restrictions on mass media advertising and bans on advertising. Given the dangers of using and proving the pathogenicity and carcinogenicity of these substances, it seems that most countries' intervention strategies have not been helpful in reducing their use.^[37-39] Some studies have suggested a change in control policy.^[2,40,41]

Due to cultural acceptance in different regions, there will be difficulties in reducing consumption. Beliefs are an important part of any culture and interventions based on the beliefs of each community are suggested. There are two different sets of beliefs in most studies that show the contrast between old accepted culture and new scientific information that has proven to be harmful and dangerous.

The current findings add to a growing body of literature on smokeless tobacco and beliefs about smokeless tobacco use. The study has gone some way toward enhancing our understanding of reasons to use smokeless tobacco.

Although the current study is based on a small sample of participants, the findings include new beliefs which can be used in making questionnaires. Researchers can also benefit from these findings in the production of educational content. The research team had access only to male students.

Conclusion

One of the more significant findings to emerge from this study is that many students mentioned the benefits of using smokeless tobacco to reduce toothache, relieve headaches, and bad breath. This information can be used to develop targeted interventions aimed at reducing smokeless tobacco consumption. However, more research on this topic needs to be undertaken before the association between kinds of beliefs and smokeless tobacco consumption is more clearly understood. It is suggested that the results of this research be used to design questionnaires and produce educational content about smokeless tobacco.

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Conflicts of interest

There are no conflicts of interest.

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