

ATTITUDES AROUND SMOKING INITIATION IN KATHMANDU, NEPAL

Morgan Dewey^{1*}, Luana Gnatenco^{1*}, Aisha Alkandari², Narayan Mahotra³, Prashant Paneru³,
Madiha Abdel-Maksoud^{1,2**}, Ali Musani^{1**}

¹University of Colorado School of Medicine

² University of Colorado School of Public Health

³Institute of Medicine Nepal

Introduction

The burden of chronic respiratory disease in Nepal is higher than any other country in the region. In 2019, the most recent year listed by the WHO, chronic obstructive pulmonary disease caused 94.5 deaths per every 100,000 individuals. Yet, the smoking epidemic is still under-researched in Nepal. This research seeks to understand the Nepalese peoples' attitudes towards smoking, in order to develop sustainable, culturally appropriate smoking cessation programs in Nepal.

Methods

Participants were recruited from the outpatient multispeciality clinics at the Tribhuvan University Teaching Hospital in July 2023. Participants (n= 250) met eligibility requirements if they were 18+ years of age and had used a tobacco product in the last 15 years. Participation was voluntary and both verbal and written consent was obtained. The 46-question survey was administered verbally using interpreters and answers were entered into Qualtrics. Data analysis was conducted using R, and results are reported as numbers and proportions.

Results

Participants included 231 (92.4%) males, 18 (7.2%) females, and one participant who identified with neither (0.4%). Of the participants, 36 were 18-24 years old (14.4%), 82 were 25-39 (32.8%), 64 were 40-54 (25.6%), and 68 were 55-89 (27.2%). Approximately 69% of participants were married, and 17% didn't attend school at all. Peer pressure by friends or family (Friends smoking by 78%, and family smoking by 21%) was given as a reason for smoking initiation, and curiosity was selected by 48%. The most popular reason for delaying smoking initiation was lack of peer pressure (friends do not smoke (66.8%)). Reasons to not smoke or to stop smoking were most commonly better health (90.4%), saving money (26.0%), and social or family pressure (41.2%).

Discussion

The large number of male participants supports previous results that men are three times as likely to smoke as women. Social pressures were the most dominant factors that accounted for smoking initiation. Similarly, lack of social pressure resulted in delayed smoking initiation. The results of our cross-sectional study suggest a potential for public health interventions to reduce social pressure to smoke and introduce measures which emphasize both saving money and improving health.

Source of Funding

Denver Rotary Club and Global Chest Initiatives

*Co-first authors

**Co-senior authors

