ASHES, Vol. 18(13) – Factors associated with cigarette smoking among men in five South Asian countries

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Tobacco kills over 8 million people worldwide every year, or up to half of the people that use it, and remains one of the leading causes of early death. It can cause cancer, heart disease, a decline in reproductive health, and other diseases. Despite having a similar smoking prevalence rate to some other regions, South Asia has a large population, and thus many smokers and many people dying from tobacco. Smoking in South Asian countries is also seven times more prevalent among men than women. This week, ASHES reviews a study by Md Shariful Islam and colleagues that examined factors associated with cigarette smoking among men in five South Asian countries.

What was the research question?

What factors are associated with cigarette smoking among men in Afghanistan, India, Maldives, Nepal, and Pakistan?

What did the researchers do?

The researchers analyzed survey data from 125,716 men aged 15-49 years from Afghanistan, India, Maldives, Nepal, and Pakistan. The survey asked participants if they had smoked any cigarettes within the past week, along with questions about their age, marital status, place of residence (i.e. urban, rural), region (states), education, occupation, and wealth. The survey also asked participants how much they watched television, listened to the radio, and read newspapers, which are unique risk factors for cigarette smoking in South Asia. The researchers used chi-square and multivariate logistic regression analysis to analyze associations.

What did they find?

Cigarette smoking prevalence varied across the five countries with Maldives having the highest prevalence (41.2%) and Pakistan having the lowest (20.1%). In the combined analysis, older age, lower education, lower wealth status, living in

an urban area, and involvement in any occupations (i.e., as opposed to being unemployed) predicted cigarette smoking (see Figure). Country-specific factors not associated with cigarette smoking were age and wealth status (Afghanistan), occupations (Nepal and Pakistan), and education (Pakistan).

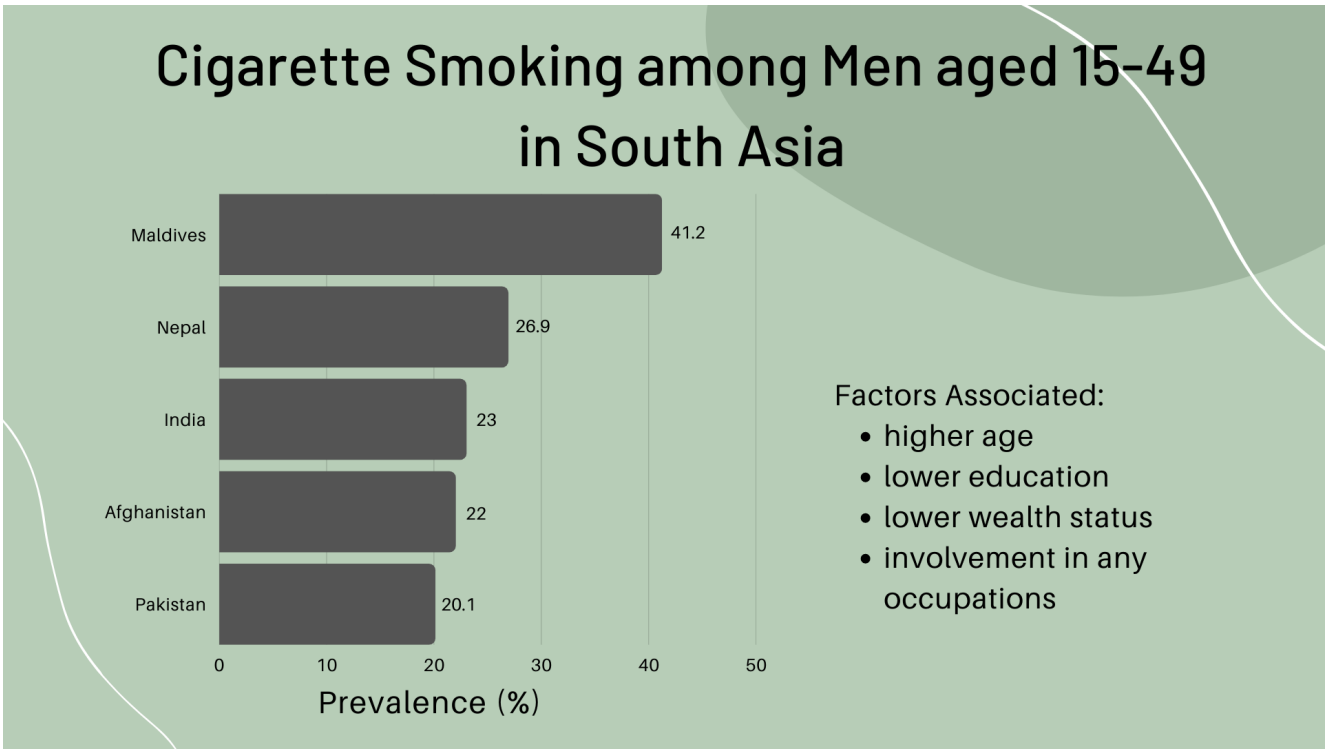


Figure. National level prevalence of cigarette smoking among men aged 15-49 in five South Asian countries (N = 125,716) and statistically significant predictive factors. Adapted from Figure 2 in Shariful Islam et al. (2022).

Why do these findings matter?

By examining the country-specific factors associated with cigarette smoking, researchers can start to suggest smoking interventions that are more tailored for each country. Furthermore, interventions should target high-risk individuals, such as those with lower education levels, identified across all South Asian countries. These findings can also inform public health programs for younger individuals to provide accurate and honest information about smoking and prevent these individuals from engaging in future dangerous smoking behaviors. For example, clear data to support the ineffectiveness and dangers of smoking as a means of coping with stress should be emphasized.

Every study has limitations. What are the limitations of this study?

The study draws from cross-sectional data, so causal relationships cannot be determined. Additionally, some conclusions were drawn about South Asian

countries without including all South Asian countries. Also, despite a large data set, the study only included men between the ages of 15-49 and may have failed to identify risk factors for individuals outside of this age range.

For more information:
SmokeFree offers tools and tips for quitting and maintaining abstinence from smoking tobacco. The Centers for Disease Control and Prevention also provides research and tips about cigarettes and how to quit. For more details about addiction, visit our Addiction Resources page.

— Taylor Lee

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