



## A Reflection on Teenagers' Smoking in Iran

\*Sara Saadat<sup>1</sup>

<sup>1</sup>MD, Pediatric Nephrologist, Assistant Professor, Department of Pediatrics, Division of Nephrology, Dr. Sheikh Hospital, Mashhad University of Medical Sciences, Mashhad, Iran.

### *Dear Editor-in-Chief,*

Smoking is a health-threatening factor. Of those who suffer from smoking, 90% begin during adolescence (10 to 19 years old). Awareness of smoking is not enough to prevent teenagers from experiencing it, and it is necessary to develop attitudes and skills to resist the temptation or offer to smoke. In addition to determining educational tools to prevent teenagers from consuming cigarettes and other tobacco products, it is necessary to investigate the conditions that lead to the acceptance of educated material, the effect of education, the permanence of the learned material in the minds of the audience, and the conformity of education with the cultural patterns of the target groups.

**Key Words:** Deal, Iran, Smoking, Teenagers, Reflection.

\*Please cite this article as: Saadat S. A Reflection on Teenagers Smoking in Iran. Health Provid 2022; 1(1): 41-4. doi: **10.22034/HP.2022.360910.1023**

---

### *\*Corresponding Author:*

Sara Saadat, MD, Department of Pediatrics, Division of Nephrology, Dr. Sheikh Hospital, Mashhad University of Medical Sciences, Mashhad, Iran.

Email: [dr.sarasaadat90@gmail.com](mailto:dr.sarasaadat90@gmail.com)

Received date: Feb. 10, 2022; Accepted date: Mar.22, 2022

## Introduction

Smoking among youth and adolescents affects countries worldwide. Cigarette smoking is undoubtedly one of the most important yet preventable causes of premature death and disability in the world (1). Since most smokers start smoking before the age of 18, an important strategy to reduce its prevalence is preventing teenagers from smoking (2). Awareness of the long-term effects of smoking on physical health is not enough to prevent teenagers from starting to smoke. Under the influence of tobacco industry advertisements, teenagers find smoking and consuming other tobacco products attractive, liberating, classy, and indicative of intelligence and sexual power (3-5). In addition, peer pressure can lead teenagers to start and continue smoking (6). For designing an educational program to promote a smoke-free life among teenagers, the negative attitudes that encourage using tobacco among teenagers should be neutralized by attracting the participation of teenage peers who promote a smoke-free life and creating the ability to resist the pressure of smoking from peers (7).

Various factors (e.g., individual, cultural, social, and environmental factors) are involved in starting to use tobacco. The continuous use of cigarettes by a young person is not an isolated event but happens through stages that begin from adolescence as recreational use and lead to continuous consumption and addiction to tobacco in adulthood (7-10). Factors can have different effects on boys and girls and in different stages:

**Personality factors:** Lack of success in education, rebellious spirit, low self-confidence, inability to connect with others and isolation, inability to cope with peer pressure, insufficient knowledge, and wrong attitude about the dangers of smoking for health are among personality factors.

**Social and cultural factors:** Family pressures and having a weak relationship with parents are highly effective in starting smoking. This factor affects boys and girls differently. For example, smoking by parents affects girls more, while smoking by brothers and sisters affects boys more. Social pressures, including smoking friends and compliments for smoking by peers, are significant factors in teenagers' tendency to smoke.

**Environmental factors:** Social and economic deprivation (poverty), and the availability of cigarettes (selling tobacco to teenagers and their low price) are highly effective factors in continuous smoking, but not as much in the first experience of smoking. Cigarette advertising in the media has a stimulating effect and can lead young people from the stage of first smoking experience to continuous consumption. The extensive cigarette sales in public by shopkeepers and newspaper stalls and providing matches to light cigarettes are effective environmental factors in the use of cigarettes by teenagers in Iran (3, 4, 11).

## The role of schools in reducing the tendency to smoke

Schools can play an important role in preventing students from using tobacco via their location and facilities. Students spend one-third of their waking hours at school, and many believe that smoking begins following friends and peers. The first experience of smoking often occurs before the end of high school. Schools can have a positive effect on preventing and reducing smoking among students by creating an encouraging environment to strengthen anti-smoking beliefs and behaviors. When a teenager feels connected to their school, they are less likely to engage in destructive personal and social behaviors. Banning smoking for students, staff, and visitors throughout the school has been found helpful in lowering smoking rates among teenagers (3, 12-15).

## The role of parents in preventing smoking in schools

Families have a great influence on students' attitudes about smoking, and family members should actively participate in smoking prevention programs. Educational programs with interactive tasks for parents and other family members expand educational discussions on this important topic and lead to the implementation of better policies on tobacco use at home, and can even encourage adult smokers to quit smoking (4, 3, 16). In quitting smoking among students, the effect of education is 16% and laws 16%, and encouragement and persuasion 68% (17).

### Conclusion

Smoking among teenagers is raising concerns, and its increasing prevalence among adolescents is a substantial problem worldwide. Adolescence is a sensitive and singular period in life and the boundary between childhood and youth. Vigilant families should actively take care of their teenage children, knowing the special conditions of this period. When the problems of teenagers are brought up in the home environment without fear of punishment and shame and are solved through the logical solutions of parents, there is no need for the presence and interference with friends and peers. The supportive role of schools in promoting and encouraging healthy role models (students who study, do sports, and do not smoke), and strengthening anti-smoking beliefs and behaviors among students should not be neglected. In addition, at the community level, the supply and advertising of tobacco for teenagers should be limited, the price of these products should be increased, the sale of these products should be prevented, and offenders should be dealt with more seriously.

### REFERENCES

1. World Health Report 1999. Combating the tobacco epidemic. WHO Publication 1999, pp: 65-79. Accessible in: [http://www.who.int/whr/1999/en/whr99\\_ch5\\_en.pdf](http://www.who.int/whr/1999/en/whr99_ch5_en.pdf).
2. Poulsen LH, Osler M, Roberts C, Due P, Damsgaard MT, Holstein BE. Exposure to teachers smoking and adolescent smoking behaviour: analysis of cross sectional data from Denmark. *Tob Control*. 2002 Sep;11(3):246-51. doi: 10.1136/tc.11.3.246.
3. Informational and educational package for family and school against smoking. Vice President of Health, Ministry of Health, Treatment and Medical Education: Tehran; 2018.
4. Sadeghi M, Rouhafza H, Shahbaz M, Moradi H. What teenagers should know about tobacco. Pars Iliia: Isfahan, 2012. ISBN: 978-600-5828-38-2.
5. Health, CDC's Office on Smoking and. "CDC - Trends in Current Cigarette Smoking - Smoking & Tobacco Use". *Smoking and Tobacco Use*. Retrieved 2017-12-03.
6. Jamal, A. Tobacco Use Among Middle and High School Students—United States, 2011–2016. *MMWR. Morbidity and Mortality Weekly Report*, 66, 2017.
7. Namakin K, Sharifzadeh G, Miri M. Prevalence of cigarette smoking and evaluation of attitude and knowledge in its high school boys in Birjand, 2005. *J Birjand Univ Med Sci*. 2008; 15 (1)
8. Health, CDC's Office on Smoking and (2017-10-19). "CDC - National Youth Tobacco Survey (NYTS) - Smoking & Tobacco Use". *Smoking and Tobacco Use*. Retrieved 2017-12-03.
9. CDC, Preventing Tobacco Use Among Young People—A Report of the Surgeon General, 1994.
10. Meysamie A, Mahdiin Z, Seddigh L. Frequency of tobacco use among students in Tehran city. *Tehran Univ Med J*. 2015; 73 (7):515-26. URL: <http://tumj.tums.ac.ir/article-1-6913-fa.html>.

11. Singh, T.; Arrazola, R. A.; Corey, C. G.; et al. "Tobacco Use Among Middle and High School Students- United States, 2011–2015". *Morbidity and Mortality Weekly Report*, 2016; 65 (14): 361–67.
12. Bellhouse B, Johnston G, Deed C, Taylor N. *Smoke Free Schools Tobacco Prevention and Management Guidelines for Victorian Schools*. ISBN 0 7594 0349 X. Available from: <https://www.education.vic.gov.au/documents/school/teachers/health/manageguide.pdf>.
13. Uddin, R.; Lee, E-Y.; Khan, S.R. Tremblay, M.S.; Khan, A. "Clustering of lifestyle risk factors for non-communicable diseases in 304,779 adolescents from 89 countries: a global perspective". *Preventive Medicine*, 2020; 131: 105955.
14. Poshtmashhadi M., Ahmadabadi Z., Panaghi L., Zadehmohammadi A., Rafiei H. The Role Of School In Tendency To Cigarette, Alcohol And Drug Abuse In High School Students In Tehran. *Journal of Research in Behavioural Sciences*, 2010;8(15); 46-56.
15. Madani A, Aghamolaei T, Madani M, Zarei F. Prevalence of smoking and associated internal and external factors in high school students in Bandar Abbas, Iran. *J Prevent Med*. 2015; 2 (4):39-49.
16. Khader YS, Alsadi AA. Smoking habits among university students in Jordan: prevalence and associated factors. *East Mediterr Health J*. 2008;14(4):897-904.
17. Elshatarat RA, Yacoub MI, Khraim FM, Saleh ZT, Afaneh TR. Self-efficacy in treating tobacco use: A review article. *Proceedings of Singapore Healthcare*. December 2016:243-48.