

Original Research

Habit In Family- A Determinant Of Habit In Child – A Study

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ABSTRACT

Background: To study the correlation between chewing habit in children and habit in family members in school students of east Bhopal. **Materials and Method:** Seven schools in east Bhopal city having a total of 971 students in class IX to XII were surveyed. Students were given a structured questionnaire to fill, followed by complete dental check up. SPSS software was used to analyze the results. **Result:** A total of 106 students; 103 boys and 3 girls had the chewing habit. 84 students chewed plain areca nut, 15 chewed gutkha and 04 chewed paan masala. Significant correlation was obtained between chewing habit in family and chewing habit in the child ($p < 0.005$). **Conclusion:** Proper education about ill effects of the habit and banning these products for under 18 year individuals along with education program for entire society should be compulsory.

Introduction

Areca nut is the fourth most commonly used psychoactive substance in the world after caffeine, alcohol and nicotine. This habit has a major social and cultural role in communities throughout the Indian subcontinent, South-East Asia and parts of the Western Pacific.¹ Its use is considered benign and socially acceptable among most Indians. Traditionally also plays an important role in religious, social and cultural functions. Also it has an important role in the ancient Indian medicine (Ayurveda).²

Areca nut chewing, by itself or in combination with scents, condiments or sweeteners is an accepted practice in parts of the western Pacific & many South & South East Asian countries include India.^{3,4}

Commercially areca nut is available as both processed and unprocessed forms, with tobacco (Gutkha) and without tobacco (Pan Masala). These products are easily available in small, attractive, colorful and inexpensive sachets at every hawker's corner.

Promoted by slick, high profile advertising campaigns and aggressive marketing, pan masala and gutkha has become very popular with all sections of Indian society, including school students. These areca nut products have been strongly implicated with the recent increase in the incidence of OSMF, especially in the young, even after a short period of use.⁵ Bhopal ranks highest in the age - adjusted rates of cancers for both tongue and mouth.⁶

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GENDER	CHEWING HABIT		TOTAL NUMBER OF STUDENTS
	YES	NO	
Male	103	639	742
Female	03	226	229
Total	106	865	971

Table 1: Demographic Data

HABIT IN FAMILY	FREQUENCY	PERCENT
Yes	591	60.9
No	380	39.1
Total	971	100.00

Table 3: Habit in family

HABIT SUBSTANCE	NUMBER OF STUDENTS
Plain areca nut (sweetly supari)	84
Gutkha	15
Paan masala	4
TOTAL	106

Table 2: Chewing Substance

CHEWING HABIT IN STUDENT	HABIT IN FAMILY		TOTAL
	YES	NO	
Yes	82	24	106
No	509	356	865
Total	591	380	971

(p value <0.005)

Table 4: correlation between chewing habit of student family members and chewing habit in child

Therefore, if areca nut chewing habit among the school students could be identified early and the students with habit are counseled and educated regarding the consequences of such habit, rate of occurrence of OSMF can be checked. With this objective in mind, this study was conducted among the school children of Bhopal.

Materials and Methods

The study was conducted in seven schools from east Bhopal city. A total of 971 students of participated in the study. The students were from class IX to XII. These students were given a structured questionnaire to fill, followed by a dental check - up. SPSS software was used to analyze the recorded data. Data was analyzed by Chi – square test.

Results

A total 971 students participated in the study; out of which 742 were male students and 229 were female students. 71 students were under age of 14 yrs, 331 students belong to 14-15 yrs of age, 430 to 16-17 yrs and 139 to 18 yrs and above age group.

Chewing habit was found in 106 (10.9%) students. Habit was more prevalent among male students with 103 male students (97.17%) having chewing habit. Among the chewer most prevalent chewing substance was plain flavored areca nut (84 students chewed) followed by gutkha (15 students), paan masala (4 students).

Total 591 students have chewing habit present in their family. Out of 106 students who had chewing habit, 82 students had their family members indulged in the family. The correlation between presence of chewing habit in children and family members indulged in the habit was highly significant (p<0.00).

Discussion

In the present study the percentage of students with regular chewing habit (10.9%) is comparable. Surveys conducted in schools and colleges in several states of India have reported that 13 – 50 % of students chew pan masala and gutkha on a regular basis.⁷ The chewing habit was more prevalent in boys (97%) as compared to girls; similar results were seen in study

conducted by Joseph N et al.⁸ Reason for less involvement of female in habit is attributed to the social restrictions prevalent in India that prevent women, to a certain extent from indulging in deleterious oral habits. Though these habits are considered a taboo, there seems to be more relaxation of these norms for men and thus there are more chances that males get addicted to the habit.⁹

77% of the chewers had their family members chewing areca nut or tobacco products. Environmental factors plays an important role in molding practices as studies have found that about 50% of the students commenced the habit with the family.³ Situations where the parents ask their children to purchase tobacco or areca nut product from nearby shop and use tobacco and areca nut as home remedy for certain health problems bring its own stamp of authenticity regarding safety of these products and weaken the seriousness of side – effects of tobacco products among children.

Conclusion

The evidence for the high prevalence of using areca nut & tobacco products, especially in the youth, was recently reported in the Global Youth Tobacco Survey. Usage of areca nut use at an early age increases the risk of development of OSMF and hence increases chances of developing a malignancy increases to a greater extent. Due to Easy availability of areca nut products at low priced, use of these products by family members and lack of knowledge about harmful effects of these products, student continues to use of areca nut or tobacco products.

These products should be banned for less than 18 years of age and proper knowledge about the harmful effect of areca nut in school curriculum should be made mandatory.

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