

THE SMOKERS IN THAILAND: WHY DO THEY START AND QUIT?



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The latest national smoking survey in Thailand was done in 1991. Smoking questionnaires were a part in the National Health Examination Survey⁽¹⁾. In spite of having the two tobacco control laws, being among the most stringent legislation in the world, still the rate of smoking was high among the younger age groups. It is interesting to look closely at the survey data to find the facts behind this bad sign.

WHY DO THEY START SMOKING?

THE AGE OF INITIATION

The mean age is 19.5 years for both sexes, 18.4 for males and female smokers begin at a much later age of 25.3 year. People without schooling start to smoke at later age of 21.9, apparently with less peer pressure than those who go to schools and colleges. Among various occupations students begin smoking earlier (14.2 years) and the unemployed and house wives / household workers have an older age of smoking initiation, 21.7 and 24.9 respectively.

These findings indicate that Thais start to smoke later than young people in industrialized countries. A study of the U.S. Center for Disease Control⁽²⁾ found that 75 percent of adults who smoke regularly smoked their first cigarette prior to their eighteenth birthday and had become regular smokers by that time.

REASONS FOR INITIATION

For both sexes the highest proportion of reasons for smoking initiation is peer and friend persuasion (37.6 percent) and second highest if 'want to try' (34.3 percent). The other reasons are 'to be socialized' (8.0 percent), 'to relieve stress' (5.8 percent), 'to accommodate working condition', e.g. to expell mosquitoes while working in the paddy field, (4.0 percent), 'imitating v.i.p. or actor' (3.1 percent), 'want to be smart' (1.7 percent), and others (4.7 percent). In males the ranking conforms to this pattern. On the other hand in females the reason 'want to try' (30.2 percent) is the highest, followed by 'peer and friend persuasion' (22.6 percent), 'to relieve stress' (13.1 percent), and others.

The highest proportion (37.6 percent) of reasons for smoking onset is persuasion by friends and peer pressure among the youth of Thailand, more or less the same as in other culture. Adolescence is a dynamic period of development when young people have to cope with physical, psychological, social and sexual changes. Adolescents begin to draw away from

parents while developing intense relationships with peers from whom they seek approval. Peer pressure is used by children to encourage each other to smoke, and far outweighs any fear of long term health risk. This is particularly so as young people generally feel themselves to be healthy and may not yet be able to associate current behavior with future consequences, something which comes with greater maturity.

The second highest proportion (34.3 percent) of reasons for smoking initiation is experimentation. Theoretically within the domain of pharmacologic processes and conditioning the determinant of smoking onset is that initial psychopharmacologic effects encourage transition from experiment to regular use. Adolescents normally have the desire to experiment with behavior associated with adulthood. It may be heightened by the fact that is generally to smoke – a means of expressing independence and opposition to adult authority.

The reason 'to be socialized' has a low proportion of only 8.0 percent. In Thailand antitobacco campaigners have been somewhat successful in minimizing positive characteristics attributable to smokers and smoking. It has been emphasized, by interviews and educational materials, that smoking and offering cigarettes is not a gesture of good will and hospitality. Thailand is a Buddhist country and we advocate that offering cigarettes to monks is a great sin. During 1990-1991 I gave a research grant to find prevalence of smoking among different occupations of the Thai women of Bangkok. The highest (47 percent) rate was found among prostitutes, comparing to female national average smoking prevalence of only 3.8 percent. Since then we have been repeatedly advocated that only Thai girls with bad reputation smoke.

The reason 'imitating v.i.p. or actor' being a small proportion (3.1 percent) is a good sign. In Thailand the Broadcasting Administration Board has a regulation that heroes or heroines in Thai television series would never smoke and would not drink inappropriately. In the printed media seldom role models, i.e. actors, politicians, and high ranking officials, appear with smoking habit, I myself have organized a group of elementary school students to write to the smoking v.i.p. asking them to refrain from the behavior while being interviewed by the media and also writing to the newspaper editors to select the picture of the v.i.p. while not smoking since it would be a bad example for our children. However, some foreign films shown in our local television channels have their stars glamorizing smoking. They ought to stop helping tobacco companies addict another generation. The transnationals are desperate to

recruit new blood and one of the most influential ways to reach children is through their entertainment idols. By associating smoking with teen idols, the tobacco industry reaches million of impressionable children in a way no other form of advertising can.

Another reason 'want to be smart' also has a small proportion. In Thailand one consistent strategy in the public education campaign is 'it is smart not to smoke'. This is very well known phrase which appears in every media and has become a household word.

WHY DO THEY QUIT?

Proportion of reasons for quitting in both sexes were 'find out that smoking is not good' – 53.0 percent, doctor's advice –13.2 percent, fear of disease –12.8 percent, to save money –3.1 percent, spouse's request –1.4 percent, parent's request –1.1 percent, children's request –0.9 percent, friend and relative's request –0.4 percent, and others –12.1 percent. This ranking is the same in males as in females.

Looking at people with different levels of education the reason 'find out that smoking is not good' has the lowest proportion (39.7 percent) in the people with no schooling as compared to other groups. The reason 'doctor's advice' has the highest proportion (19.9 percent) in the people with no schooling comparing to others with different levels of education.

It is noteworthy that there is little effect, leading to quitting, from the persuasion of spouses, parents, offspring, friends, and relatives. Economic reason influences few smokers because cigarette price is still relatively low in Thailand and they are quite affordable.

The reason 'fear of disease' might be due to the same reason as 'doctor's advice' and 'find out that smoking is not good.' They should reflect the impact of public education and tobacco control advocacy. We have been using all possible opportunity to advocate that tobacco products are bad and tobacco merchants are villains. In one afternoon I saw in a newspapers that the director of Thailand Tobacco Monopoly paid a call on the Supreme Commander, who was the head of the coup de tat, to present to him a big lot of cigarettes to be given to the soldiers and border policemen as a New Year gift. The following day I called a press and asked them what we mean in giving a New Year gift to someone ; did it mean we love them ? The press corps answered yes. I asked then did it mean we want them to be happy and healthy. They answered 'certainly doctor'. Then I showed them the news of the Supreme Commander. After they read them all I asked whether the newspapermen love our

police and soldier, whether we would like them to be strong and healthy. The press corps answered affirmatively. Then I asked the final question that should we give cigarettes to our soldier and police. Finally I said next year I hope the Tobacco Monopoly should use its huge benefit to buy fruits and other nutritious products as a New Year gift so that our heroes would be a strong fence for the nation. The news came out in all newspapers on the following day. The Supreme Commander might feel embarrassed but my job was done – the public got the idea that cigarettes were bad stuff.

THE ENVIROMNENT

There have been several factors influencing the initiation, the maintenance, and the giving up of smoking in Thailand.

PREVENTION OF SMOKING IN CHILDREN

1. *Non-existence of vending machines for cigarettes.* There had been no cigarette vending machines because the Tobacco Product Control Act 1992 was enacted before foreign cigarettes were allowed into the country legally. Before the market opening the Thailand Tobacco Monopoly did not attempt to promote sale by putting up the vending machines. They could not adequately produce to cope with the demand.

2. *Selling age limit of 18.* An article in the Tobacco Product Control Act 1992 states that nobody can sell tobacco product to a person aged less than 18. Violation would be fined 2000 Bahts (80 USD). Retailers are provided stickers, to be placed on the cigarette sale racks, stating that the tobacco products would not be sold to persons under 18 years of age.

3. *Retailers in the vicinity of schools are not given license.* The Ministry of Public Health requested and received approval from the Excise Department that license would not be given to cigarette retailers whose shops are located within 200 meters of schools.

TOTAL BAN ON TOBACCO ADVERTISING AND PROMOTIONS

Thailand first had a total ban on advertising of all tobacco products in all media since February 10, 1989 through a ministerial announcement according to the Consumer Protection Act. Before that time the Thailand Tobacco Monopoly had had minimal advertising activities, mostly in few outdoor billboards and point-of-sale boards. In 1992 the Tobacco Product

Control Act was enacted with articles prohibiting advertising in all media, banning promotional activities including free sampling, exchanges, premiums, redemption, etc. There are only 2 exemptions – a live telecast from abroad and advertising in printed media that are produced abroad and imported without specific distribution for Thailand. Sponsorship of events is considered illegal if tobacco logo appear because the term ‘advertisement’ in this law is ‘any act that enable people to see, hear, or know the content of , for commercial purpose’.

This stringent prohibition makes Thailand environment free of tobacco product logo. It is good for the children to grow up without such pollution.

FULL AVAILABILITY OF TOBACCO-CONTROL INFORMATION

All the media, printed and electronic, have never been ‘censored’ by the tobacco industry since they have never received financial rewards from them. For a very brief period in 1987-88 before the advertising ban four daily newspapers and one television station carried few advertisements for Marlboro, Salem and others, ironically, even though they were not legally available in the country at that time.

Because of the total ban on advertising and promotion the media have not been financially dependent on tobacco. Thus they portray themselves as do-gooders by publishing interviews and articles relevant to tobacco control activities.

WEAK GOVERNMENT ACTIONS

With undreamt-of achievement in the passage of the two tobacco control laws – the Tobacco Product Control Act 1992 and the Non-smokers’ Health Protection Act 1992, being among the most stringent in the world and envied by many, Thailand should do much better if good enforcement is attempted. Although the tobacco control advocacy has been actively and efficiently carried out by the non-government organizations the present responsible public sector has been weak, retarded, and ignorant.

1. No *national smoking control program* is established. Concerted efforts of multisectoral and multidisciplinary sectors should be consolidated. Unfortunately there are no collaboration between the Ministry of Public Health and the Ministry of Education to formulate an effective smoking education program in schools.

2. The responsible government service *lacks vision*. It concentrates on 'hardware' rather than 'software' , being interested in building its premise, acquiring office equipments, etc. There are no knowledgeable people among the staff.
3. Actions are only *ad hoc and piece-meal*. The only activities are-the annual parade and exhibition on the World No-Tobacco Day, running a smoking cessation clinic with only a few attendants in each monthly sessions, and organizing training seminars with no definite future action for the trainees.
4. The government sector is *ignorant of the tobacco industry tactic*. Thus the multinationals have been circumventing the law by several marketing strategies, i.e., publicity, sponsorship, and in many instances direct advertising in certain media. Cable televisions, viewed by subscribers, show formula-one racings, Asia badminton tournaments with cigarette logo and the government authority does not know that an illegal act has occurred.
5. *Law enforcement is weak* or almost no action at all in attempting implementation. There has been no planning of action whatsoever. Since the enactment of the laws in 1992 there were only 2 or 3 arrests of smoking in the public place, by the police and not the responsible health officials, and no action against the proprietors of the public places, advertising, and promotion. Although the laws could have some effect upon the general public but the cunning tobacco industry always violates either sneakily or circumvents them without being caught.

All these weaknesses would somehow negate the strength of the legislations and the excellent media advocacy of the non-government organizations.

If Thailand is to progress on the tobacco control front, it will need a strong, active, and wise government sector to cope with the looming tobacco logo-polluted environment.

References

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