

WATER-PIPE SMOKING (BARAKU) USE AMONG YOUTHS IN THAILAND

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Abstract

The water-pipe (Baraku) is now a popular tobacco smoking technique among youths worldwide. It is becoming popular in Thailand as well. Many Thai youths know about and use water-pipe smoking in their daily lives. The motivations of using water-pipe smoking among Thai young people are curiosity, friends' persuasion, and social interaction during night trips and parties. Some youths use a water-pipe regularly on a daily basis and have misperceptions of its health effects. Thai youths are misled about the serious health effects created by water-pipe smoking by many sources including word-of-mouth advertising, and marketing via the Internet, especially social networking sites. Therefore, an appropriate health educational program for young people should be initiated by health care providers and related organizations. Responsible organizations should enforce legislation, announce the policy, and find strategies to decrease water-pipe tobacco smoking among Thai youths.

Keywords: Baraku, Hookah, Shisha, Thailand, Water-pipe smoking, Youth

บทคัดย่อ

การสูบบุหรี่ผ่านน้ำ (บาราคุ) เป็นการสูบบุหรี่ชนิดหนึ่งที่กำลังได้รับความนิยมอย่างแพร่หลายในหมู่วัยรุ่นไทย วัยรุ่นไทยจำนวนมากรู้จักและสูบบุหรี่ผ่านน้ำเป็นประจำทุกวัน แรงจูงใจในการสูบบุหรี่ผ่านน้ำของวัยรุ่นไทยประกอบด้วย ความอยากรู้อยากลอง การถูกชักจูงจากเพื่อน การเข้าสังคมและสังสรรค์ในเวลากลางคืน วัยรุ่นบางคนสูบบุหรี่ผ่านน้ำเป็นประจำทุกวันและมีการรับรู้ที่ผิดเกี่ยวกับโทษของบุหรี่ชนิดนี้ต่อสุขภาพ วัยรุ่นไทยถูกทำให้เข้าใจผิดเกี่ยวกับโทษที่ร้ายแรงต่อสุขภาพของการสูบบุหรี่ผ่านน้ำจากหลาย ๆ แหล่ง เช่น การบอกเล่าแบบปากต่อปาก การโฆษณาชวนเชื่อทางอินเทอร์เน็ต และเครือข่ายทางสังคม ดังนั้นควรมีการริเริ่มโปรแกรมการให้ความรู้แก่วัยรุ่นไทยโดยผู้ให้บริการทางสุขภาพและองค์กรที่เกี่ยวข้อง องค์กรที่รับผิดชอบควรมีการผลักดันกฎหมาย ประกาศนโยบาย และคนหากลยุทธ์ในการควบคุมการสูบบุหรี่ผ่านน้ำของวัยรุ่นไทย

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INTRODUCTION

Nowadays, the dangers to health of tobacco smoking has been globally acknowledged. The danger is greatest for high-risk groups of people, especially children, teenagers, and pregnant women. These groups have become the focus of efforts to prohibit smoking. As Thailand has been a Party to the WHO Framework Convention on Tobacco Control since November 8, 2004, public advertisements of tobacco smoking, of all varieties, have been seriously controlled by various aggressive actions. For example, tobacco advertisement, promotion, and sponsorship have been banned. The packaging and labeling of the tobacco also requires pictorial and texts warning of the health risks of smoking. On packs of cigarettes at least 55 percent of the front and back principal display area must contain these warning labels. Moreover, in terms of particular smoke free places, smoking is prohibited in all indoor public places except for designated smoking areas in international airports (WHO, 2005; Tobacco Control Law, 2012).

With all of these efforts to control tobacco smoking among Thai people, the cigarette consumption in Thailand has gradually been reduced. The percentage of Thai people older than 15 years old consuming cigarettes in the year 2001 was 22.5. It fell to 19.5 percent in 2004 (the year that the tobacco control law began to be enforced), 18.9 percent in 2006, and was down to 18.1 percent in 2008 (Health Information System Development Office, 2013). Similar to the reduction in cigarette smoking, the attitude and perception of people toward cigarette smoking also

changed. Some new cigarette smokers are aware of the hazards of cigarettes and hesitate to start using them.

The new popular trend of smoking among Thai youth

Instead of cigarette smoking, the emerging method of tobacco use is water-pipe tobacco smoking. Water-pipes for tobacco smoking have been used by 100 million people all over the world in their everyday lives and it is now becoming increasingly popular among adolescences and young adults, especially high school and university students (Harvard Medical School, 2008). Surprisingly, that the lowest age for initiation into water-pipe tobacco smoking is 8 years old and the average initiation age is 16 years old (Korn et al, 2008). For Thailand, the average of initiation age of water-pipe smoking use is 12 years old. 81 percent of Thai young people know about water-pipe smoking and 34 percent of them smoke water-pipes every day (Thai Health Promotion Foundation, 2013).

How to use a water-pipe?

People in different parts of the world may know water-pipe smoking by different names which vary according to the region of the users. Water-pipe tobacco smoking is known as “shisha”, “borry”, or “goza” for people in Egypt and Saudi Arabia, “narghile”, “nargile”, or “arghile” for people in Israel, Jordan, Lebanon, Syria, “hookah” for people in Africa and the Indian subcontinent, and “hubble bubble” for people in many regions (Maziak et al.,

2004). For Thai people, they call water-pipe tobacco smoking “**Baraku**” or “**Mora-ku**” (Wikipedia: Thailand, 2013).

Around four hundred years ago, water-pipe smoking was initiated in India during the reign of Emperor Akbar. A physician, Hakim Abul Fath, introduced water-pipe smoking to the Emperor so that the harm of tobacco would be reduced when the smoke passed through a small receptacle of water. This caused the world-wide spread of an unsubstantiated belief about the water-pipe reducing the harm to users which is still common today (WHO, 2005).

The most popular type of water-pipe smoking is Maassel. Maassel contains sweetened and flavored smoke (Mint, apple, watermelon, peach, banana, Strawberry, etc) produced by the moist tobacco which is put on the head of water-pipe and lit by charcoal. Once the smoker inhales through the hose, a vacuum above the water is created (WHO, 2005).

By the mechanism of water-pipe smoking, the smoker may actually be exposed to the numerous toxicants in the smoke more and longer than cigarette smoking. One session of water-pipe smoking typically lasts 20-80 minutes during which the smoker may take 50-200 puffs of smoke. A water-pipe smoker would inhale smoke 100 times more often than by smoking cigarettes (WHO, 2005). A study found that after one session of water-pipe smoking the level of blood nicotine would increase up to 250 percent and the cotinine level to 120 percent. (American Lung Association, 2007)

Why water-pipe becomes popular?

Even though water-pipe smoking origi-

nated in the Middle East, it is rapidly spreading to other parts of the world including the U.S.A., Brazil, and European countries especially among younger populations such as college and university students, as well as other young persons (Maziak, 2004; WHO, 2005). Just as in other regions of the world, water-pipe smoking is now expanded in Asia. Using Baraku is now also a popular activity for Thai youths. The reasons for water-pipe smoking among Thai youths are curiosity, friend’s persuasion, social interaction, and stress reduction (Setchoduk, 2012).

One study in Lebanon found that some private university students smoked water-pipes because they believed that it is less harmful than cigarette smoking and almost all current water-pipe smokers were satisfied with its tasty characteristics (Chaaya et al, 2004).

The particular situations in which Thai youths use water-pipes include during night trips, while drinking alcohol, and when partying with friends. Some of them smoked when they had stress or when having too much free time. Some pubs, bars, cafés, public houses, restaurants, or other entertainment places provide the various flavors of Baraku as part of a menu of entertainment (Setchoduk, 2012).

Baraku bars and cafés in Thailand are usually located near colleges or universities which is similar to Europe and North America (Harvard Medical School, 2008). In addition, many web pages or social networks have been created for selling the equipment, materials, and products associated with water-pipe smoking and there is currently no control over these transactions. Moreover, the information from

commercial marketing via social networks and the Internet are often distributed to the smokers with implicit or explicit safety-related claims which have helped to cause the spread of water-pipe smoking in all countries around the world (WHO, 2005). As the preferred method of tobacco consumption and once addicted, some smokers buy the equipment for water-pipe smoking via the Internet to smoke at home without any concern about its adverse health effects. As a new trend, some shops offer delivery of water-pipe products and materials to the smokers' dormitory or house (Thai Health Promotion Foundation, 2013).

How does water-pipe smoking affect health?

Many research studies have already proven that water-pipe tobacco smoking has health related effects just the same as cigarette smoking. Smoking water-pipe causes the smoker to be exposed to the same toxicants as cigarette smoking including nicotine and carbon monoxide (CO), cancer related substances, and can contribute to periodontal disease, respiratory illness, and babies being born with low birth weight, (Cobb et al, 2011; Harvard Medical School, 2008; Maziak et al, 2004; Akl et al, 2010). In addition, water-pipe tobacco smoking was associated with an increase of blood pressure, heart rate, and cardiovascular problems (Al-Safi et al., 2009; Harvard Medical School, 2008).

Different from the cigarette smoking, water-pipe smokers may share their mouthpiece with each other so that there is more risk for communicable disease infections

caused by the spreading of infectious agents among the smokers (Sarrafzadegan et al, 2010).

What are the Perceptions of Baraku among Thai youths?

Young people are using Baraku regardless of its health effects (Setchoduk, 2012). Some water-pipe smokers (47%) perceive that Baraku is a tobacco free product or herb so that the smokers will not get addicted to Baraku. In the same way, 56 % of Baraku smokers believe that Baraku has very few health related effects compared with cigarette smoking (Thai Health Promotion Foundation, 2013). Some smokers thought that the poisonous smoke concentration was reduced by water filtration and by the filtration device at the mouthpiece (Chaaya et al, 2004). Surprisingly, female Thai youths have a positive attitude toward Baraku because of its impressive smell and sweet taste. Moreover, female youths also believe that Baraku use has a better image than cigarette use (Thai Health Promotion Foundation, 2013).

The misunderstanding of the health effects of Baraku are distributed by word of mouth among the groups of adolescences and young adults or the staff of entertainment places which may advertise or communicate the wrong message to the users causing the mistaken belief that Baraku is safe to use. Moreover, the appearance of sweetened and flavored water-pipe tobacco also misleads many smokers into thinking that it has less harmful effects on their health than other forms of smoking.

How can the emergence of water-pipe smoking be controlled?

Regarding the health effects of water-pipe smoking and the misperceptions about water-pipe smoker mentioned above, there still is no specific policy for prohibiting water-pipe smoking or Baraku use in Thailand. The marketing and advertisement of water-pipe smoking must be controlled including warnings of its negative health effects on its' package. The packaging or labeling of water-pipe smoking tobacco is produced in such a way that it appears to be so attractive and harmless. Tag lines such as "tobacco free", "strikingly fresh", "variety of taste and smell" adorn the packages and glorify its use. The advertisements for water-pipe smoking are also without any information about its serious negative health effects which may be misleading to the smoker, especially adolescents and young adults to whom the worse health effects of water-pipe tobacco smoking are hidden.

According to the Tobacco Control Law, cigarette smokings in most indoor places is utterly prohibited. Baraku or water-pipe smoking is also considered as one kind of tobacco smoking because it contains nicotine and the second hand smoke is dangerous to surrounding people. Baraku smoke is similar to smoke from cigarettes but smoking Baraku is allowed in many entertainment places without any control (Thai Health Promotion Foundation, 2013).

Thus, a health education program for adolescents and young adults should be adopted. Paying particular attention to primary schools, secondary schools, colleges,

and universities for both primary prevention for the students who have never touched it, as well as secondary prevention for the students who have already started to use it.

The most effective methods for adolescent and young adult learning need to be used. Health educational activities, programs, and/or materials for prevention and reduction of water-pipe smoking among adolescents and young adults should include the use of peer-educators conducting in-classroom presentations or other kinds of presentations instead of older adult educators, encouraging the students and other young people to identify the risks of water-pipe smoking and use healthy alternatives, put the information about water-pipe smoking in health promotion presentations, spread the message related to the facts and health risks of water-pipe smoking, and participate with the students on water-pipe use prevention campaigns in order to correct the myths about water-pipe smoking (The BACCHUS Network, n.d.).

CONCLUSION AND SUGGESTION

Water-pipe tobacco smoking has now spread worldwide within various groups of people as a social trend, particularly among adolescents and young adults in the university, regardless of misunderstandings about its adverse health effects. Concerning the negative health impact of water-pipe tobacco smoking,, the Thai government and other responsible organizations should create legislation that produces policies and actions that lead to water-pipe

tobacco control. Moreover, health care providers must be educated about this new trend of smoking in order to give proper health education to high-risk populations. Lastly, a sustained health promotion campaign about the dangers of water-pipe tobacco smoking should be initiated by the health care providers to attempt to avert the target population from participating in the smoking of water-pipe tobacco.

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