

Assessment of Gutka Ban in Maharashtra: Findings from a Focus Group Discussion

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ABSTRACT

According to Global Adult Tobacco Survey (GATS) India 2009-2010, around 8.3% (13.4% among male and 2.5% among female) of people in Maharashtra are gutka users. Gutka consumption not only causes oral cancer, but has also been linked with development of oral submucous fibrosis, a precancerous lesion. Considering its harmful effects, gutka and pan masala were banned by Maharashtra Government from July 19, 2012 disallowing their sale, manufacture, distribution and storage. Though the ban has come into enforcement, the evidence stating the extent of its implementation is sparse. The objectives of the study were to learn about perception of gutka ban, impact of the ban on gutka consumption, changes in the trend of tobacco related products consumption, availability of gutka to the public on demand and economic effects of the ban on users.

A Focus Group Discussion was conducted among current and ex-gutka users on January 24, 2013 at Healis Sekhsaria Institute for Public Health, Navi Mumbai, India. A total of 11 male, ex-gutka users from different professions, participated in the discussion. The FGD lasted for 40 to 45 minutes. The verbal consent for participation in the FGD was taken from the respondents.

The findings showed that with enforcement of the ban, 3 out of 11 respondents completely stopped consumption of gutka or any other tobacco product, whereas the rests switched to other tobacco products. All the respondents were aware about gutka ban and agreed that its a good step to reduce its consumption; however, most of them felt that the ban has not been implemented properly. According to them, the vendors still manage to sell gutka to their known regular customers. Since the ban has helped in compelling most of the users to quit gutka, it clearly implies that enforcement of ban with proper implementation is required to diminish gutka consumption among people.

Keywords: Gutka, Pan masala, Ban, Oral cancer, Oral submucous fibrosis, Mumbai, Gutka users.

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INTRODUCTION

Gutka is an industrially manufactured form of betel quid, containing crushed areca nut, tobacco, catechu, slaked lime and sweet or savory flavorings or sandalwood fragrance.^{1,2} Although oral use of any tobacco product can cause oral cancer, gutka consumption can additionally cause oral submucous fibrosis, a precancerous lesion.³ The disease can develop fibrous bands in the mouth, causing mucosa to lose

their elasticity and eventually decreasing the opening of mouth. Furthermore, the disease stands with a high potential to turn malignant, the risk being 400 times higher compared to nonusers.⁴

According to Global Adult Tobacco Survey (GATS) India 2009-10, around 13% of males and 3% of females uses gutka in India. When compared for Maharashtra, around 8.3% (13.4% among male and 2.5% among female) of people are current gutka users. What is more alarming is, its increased consumption among youth, the prevalence being 8 to 10% among 15 to 44 years of age group.⁵ Also, the consumption was found to be most common in uneducated and low socio-economic group.¹

Gutka and pan masala were banned in Maharashtra from July 19, 2012 disallowing their sale, manufacture, distribution and storage. With this ban, Maharashtra became the fifth state to ban gutka and the first one to ban pan masala in India. The ban has been enforced under the provision of centrally enacted Food Safety and Standards (Prohibition) Act, 2006 (FSSA), Section 30(2)(a) Food Safety and Standards Regulations in so far they relates to Food Safety and Standards (Food Products Standards and Food Additives) Regulations, 2011 (Regulation 3.1.7)⁶ and Food Safety and Standards (Prohibition and Restrictions on sales) Regulations, 2011 (Regulation 2.3.4)⁶ that bans any food product known to contain harmful adulterants like tobacco and nicotine. Under Indian laws, gutka and pan masala considered as food items. Supreme Court judgment has stated that 'Since pan masala, gutka or supari are eaten for taste and nourishment, they are all food items'. Besides this, though pan masala does not contain tobacco, laboratory tests conducted by FDA almost always found magnesium carbonate in it. Therefore the pan masala has also been banned in Maharashtra. While the Act allows these food products to be banned for a period of 1 year only, it can be extended further, year on year before the ban lapses.¹

But the announcement of the ban alone does not solve the problem. Its implementation is equally important in successfully reducing the consumption of gutka.

The objective of this study is to assess the effect of implementation of ban, to learn about perception of gutka ban, impact of the ban on gutka consumption, changes in the trend of tobacco-related products consumption, availability of gutka to the public on demand and economic effects of the ban on users.

MATERIALS AND METHODS

A Focus Group Discussion (FGD) was conducted among current and ex-gutka users on January 24, 2013 at Healix Sekhsaria Institute for Public Health, Navi Mumbai, India.

Recruitment and Data Collection

The FGD was carried out by the first author, who had previous experience of conducting FGD and two researchers acted as note takers of the discussion. The participants were approached personally and a brief introduction about the organization and the study was provided. About 40 people who were approached, 11 gave their consent to attend the Focus group discussion and among them FGD was conducted.

FGD was carried out by using a standard FGD guide. In addition to taking notes, a tape recorder was used to record all conversations. A verbal consent of the participants was taken for taking down notes and for tape recording of all the conversation. The FGD lasted for 40 to 45 minutes. The themes listed in Table 1 were discussed.

Data Analysis

All tape recorded interviews were transcribed by the researchers and computerized in the word document format. The analysis included a thorough reading of the texts, resulting in the identification of significant statements and phrases, including all those referring to the themes of the discussion.

The ethical research approval was obtained for conduction of this study from the Institutional Review Board of Healix Sekhsaria Institute for Public Health.

RESULTS

The participants were from Mumbai city having different age groups and backgrounds (Table 2).

Demographics of the Participants

A total of 11 ex-gutka users participated in the discussion. All the participants were males engaged in different professions. Their age varied within the range of 19 to 43 years and the mean age calculated was 28 years. Of the 11 respondents, six were married and rests were unmarried.

Tobacco Habit

Most of the respondents started consuming gutka at the age of 15 to 17 years.

All the respondents used to consume gutka before the ban. After the ban was enforced, out of 11 respondents, 3 users stopped the consumption of gutka or any other tobacco product whereas 8 users switched to other tobacco products. The most common tobacco products consumed include

tobacco flakes which are marked under various brand names and also the custom-made product like 'Mawa' which consist of areca nut, lime and tobacco. One of the respondents used to have betal quid (pan) and gutka but after the ban, he had stopped consuming both of them.

Table 3 demonstrates the type, frequency and preparation method of the tobacco product being used currently by the respondents.

Three respondents mixed lime with tobacco and one respondent added mixing areca nut (supari) with tobacco and lime for preparation of the tobacco flakes for consumption. Three respondents also smoked cigarettes, out of which two smoked once in a week and one admitted smoking occasionally.

All the respondents were aware about the gutka ban and they are agreed that it's a good step to reduce its consumption. They are also suggested to ban all tobacco products as it will help in reduction of its use. Among all the respondents, five quit gutka after the ban was imposed; other two quit it on the advice of their friends; two respondents had a tooth loss and thereafter they quit this habit and one respondent quit gutka consumption after his friend got stomach cancer.

Current Trends in Gutka and/or Tobacco-Related Products

Three respondents knew about the places where gutka is available even after the ban. These places are located in the city area at a distance of few meters to half a kilometer from

Table 1: Themes of the FGD guide

- Tobacco consumption habit
- Knowledge about gutka
- Past history of tobacco consumption
- Knowledge on the gutka ban
- Knowledge on current trends in gutka and/or other tobacco-related products
- Perception of users on the gutka ban
- Knowledge on the health effects of gutka/tobacco-related products

Table 2: Demographics of the participants

Respon- dent no.	Age (in years)	Gender	Occupation	Marital status
1	26	Male	Laborer	Married
2	19	Male	Plumber	Unmarried
3	20	Male	Waiter	Unmarried
4	43	Male	Security guard	Married
5	27	Male	Catering	Married
6	22	Male	Clerk	Unmarried
7	24	Male	Recycler	Unmarried
8	40	Male	Canteen owner	Married
9	31	Male	Driver	Married
10	31	Male	Courier boy	Unmarried
11	29	Male	Peon	Married

their workplace or residential area. The vendors sell these products to their regular customers. One of the respondents mentioned that they wrap it in plastic bags to keep it from being noticed while another respondent mentioned that vendors stock it in or just outside their house. Also, the price of gutka has increased—a packet which was initially available for 2 rupees was now being sold for 5 rupees.

Most of the respondents felt that with the ban on gutka, availability and demand of other tobacco products increased in the market. Even though there has been increase in the prices of these tobacco products, its consumption rates have not decreased.

Perception on Gutka Ban

All the participants stated that the ban should stay as it will help them not to start gutka use again. Most of them felt that the ban has not been implemented properly. According to one of the respondents, a vendor in his vicinity sells to around 100 known customers a day.

Three of the participants said that gutka manufacturing units should be completely shut down for the firm implementation of the ban. Two of them felt that without community's support the complete ban on gutka cannot be accomplished. According to one of the respondent, black marketing of the gutka product should be stopped for stringent application of the ban.

Out of 11 respondents, 9 admitted that they are saving the money, which they initially used to spend in purchasing gutka.

However, for one respondent, the money which was used for gutka is now being used for other tobacco products.

Some of them said that government is in the huge loss after the ban as they used to put heavy taxes on gutka and had huge earning from it.

DISCUSSION

The result of the FGD clearly pointed out that ban on gutka is effective in terms of reducing its consumption. It has helped few of the respondents to quit all types of tobacco products completely, though some of the respondents have switched to other tobacco products and/or non-tobacco products. All the vendors and gutka users were aware about the ban on gutka and also supported the ban. Respondents also mentioned that it was a good step to reduce its consumption, therefore the ban should continue and the ban should shift on to the other tobacco products as well. The respondents also stated that, although the gutka is not sold openly, few vendors still manage to sell gutka with high prices but only to their known regular customers.

An endeavor to assess the enforcement of ban was done by rapid surveillance, conducted in the low socioeconomic community of Mumbai, in mid-August 2012. During this surveillance, 2 months immediately after the ban was imposed, it was reported by shop owners that gutka is still available in bulk at higher prices and in the shops located at the interior regions of the community. The cost of gutka was increased beyond the written price and it was sold to regular

Table 3: Type and frequency of current tobacco use

Respon- dent no.	Tobacco product used			Duration for which a packet last	Any other product used	Frequency of other product used	
	Type	Frequency/ day	Weight of one packet				Preparation method
1.	Branded tobacco flakes	2-3/day	5 gm	Mix lime (chuna) and tobacco (tambaku)	A week	No	NA
2.	Has quit gutka and does not use any tobacco product.						
3.	Branded tobacco flakes	4-5/day	–	Mix lime (chuna) and tobacco (tambaku)	4-5 days	Cigarette	Once/week
4.	Has quit gutka and does not use any tobacco product.						
5.	Branded tobacco flakes	2/day	25 gm	Mix a pinch of tobacco (tambaku) with lime (chuna)	A week	Cigarette	Once/week
6.	Mawa	2-3/day	–	Mix supari, lime (chuna) and tobacco (tambaku)	NA	No	NA
7.	Branded tobacco flakes	–	–	Mix lime (chuna) and tobacco (tambaku)	A packet a day	No	NA
9.	Branded tobacco flakes	2-3/day	5 gm	Mix lime (chuna) and tobacco (tambaku)	4-5 days	No	NA
10.	None	NA	NA	NA	NA	Cigarette	Rarely
11.	Branded tobacco flakes	–	–	Mix lime (chuna) and tobacco (tambaku)		No	NA

NA: Not applicable

customers' only.⁷ Thus, the findings of this study coincide with the results of the focus group discussion.

The focus group discussion also revealed that most of the users started consuming gutka at very early age. Even though ban on gutka is a good initiative by Government of India to reduce its consumption, its firm implementation can only help in achieving the goal. Since the ban has helped in compelling most of the users to quit gutka, it clearly implies that enforcement of ban with proper implementation is required to diminish gutka consumption among people.

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