Exploring Smoking Habits and Influential Factors among Female School Students in Kathmandu

Kumari Basnet[1] | **Bhagwan Aryal[2]** | **Kalpana Khanal[3]** | **Dibya Acharya[4]**

[1]Central Department of Education,
Tribhuvan University, Kathmandu, Nepal

[2]Central Department of Education,
Tribhuvan University, Kathmandu, Nepal

[3]Kapan Multiple Campus,
Tribhuvan University, Kathmandu, Nepal

[4]Ayurveda and Alternative Hospital, Kathmandu, Nepal

Corresponding Author
Bhagwan Aryal
Email: bhagwan.aryal@cded.tu.edu.np

Abstract

This article presents a qualitative research study investigating the experiences and influencing factors of smoking among female school students in Kathmandu, Nepal. The principal author's observations prompted the research, aiming to identify why girls smoke despite societal stigma. The study utilized a descriptive narrative qualitative design, employing snowball sampling and semi-structured interviews with six students from two secondary schools in Kirtipur municipality in February-March 2024. Thematic analysis revealed key insights into the positive and negative experiences of smoking, as well as motivations such as peer pressure, relationship issues, loneliness, advertising influence, fashion, and family problems. Ultimately, the research highlights the complex interplay of social and environmental factors contributing to female tobacco use in the region. It is implied that adolescent girls are prone to smoking, therefore, they should be prioritized in tobacco cessation interventions in schools and communities, focusing on resilience, coping mechanisms, and health consequences. Easy sale of tobacco products to adolescents should be strictly monitored.

1. Introduction

Tobacco use is the leading global public health concern, resulting in over 8 million deaths annually (Oli et al., 2022). Approximately 1.1 billion people use tobacco products, causing 8 million fatalities, with 80% in poor and middle-income countries (WHO, 2023). According to WHO (2019), smoking is the second leading cause of early mortality among men, causing approximately 7.69 million deaths and 200 million disability-adjusted life years. Nepal's adult female population is the highest in South Asia, leading to hazardous behaviors like smoking, alcohol use, and drug addiction among young women.

According to the Ministry of Health and Population, Nepal, New ERA, and ICF (2022), more males use tobacco than women. Men use tobacco at a rate of 28%, whereas women only use 5%. According to the survey, both women and men who consume tobacco cigarettes are the most prevalent (4% and 27%, respectively). 17% of males smoke daily, and 11% smoke sometimes. The majority of males who smoke cigarettes (54%) smoke fewer than five cigarettes per day on average. Males use smokeless tobacco more than women (35% against 3% overall), with half of the males (50%) and just 7% of women in Nepal using any sort of tobacco (Ministry of Health and Population et al., 2022). Since 2001, the share has declined.

According to Sreeramareddy and Pradhan (2015), female smoking poses a significant public health issue, increasing the risk of non-communicable illnesses like pulmonary disease and lung cancer, and causing menstrual irregularities, which can reduce fertility and pregnancy. Asian female smokers underreport their habits, unlike Western nations, where smoking is associated with powerful women and considered morally flawed. Modern society and culture have led to a more favorable attitude towards dangerous behaviors like smoking and alcohol consumption among many females (Littlecott et al., 2023).

Smoking is primarily driven by recreational activities, peer pressure, curiosity, experimentation, pleasure, stress, imitation, relaxation, and a lack of understanding about its consequences (Tushar et al., 2019). According to Dhimal et al. (2020), teenagers' impressionability and curiosity make them vulnerable to various influences, including parental smoking, socioeconomic status, peer smoking, family/friend views, and school performance issues, leading to tobacco use. Young male and female smokers had less of a smoking prevalence difference than adults. Cigarette smoking does not differ by gender in 87 of the 151 sites where the Global Youth Tobacco Survey (GYTS) was performed between 2000 and 2007 (WHO, 2019). The narrowing of the gender difference suggests an increase in tobacco smoking among young girls.

According to Kaur et al. (2023), Southeast Asian nations account for approximately 600 million tobacco smokers in the worldwide tobacco use burden. The increasing prevalence of female tobacco usage is a major problem in Southeast Asia. Gender disparities in tobacco usage are expected to narrow in the future as low and middle-income nations like Nepal modernize where whereas the global trends indicate a decrease in tobacco usage in developed nations due to control measures, prompting tobacco corporations to increase marketing efforts. According to Grebenau (2020), the consumption of tobacco is increasing, especially

among teenagers in developing nations. The issue of tobacco use is exacerbated by ignorance about its harmful effects, significant financial investments by tobacco companies, and the media's association with smoking. According to Stephanie et al. (2022), Tobacco is the leading cause of drug dependency, surpassing alcohol, marijuana, heroin, and cocaine. The rapid increase in tobacco smoking and related mortality is concerning, as age, income, and gender are not barriers to this issue.

Nepal has one of the highest adult female smoking rates in the WHO South-East Asia Region. In Nepal, a variety of tobacco products are utilized, including smoking and smokeless (KC et al., 2022). Smoking includes cigarettes, *bidi hookah, sulfa,* and *chillum,* with *Surti*, *Khaini*, *Gutkha*, and *Paan* being the most popular smokeless tobacco products in the Terai area. A study conducted in Nepal found that 35.5% of men and 15% of women smoke tobacco products, while 31.2% of men and 4.6% of women use smokeless tobacco (WHO, 2023).

The rising trend of female tobacco use is a serious concern in the Southeast Asia region. Gender differences in tobacco use are likely to be reduced in the future in countries like Nepal (Chand et al., 2022). The problem of female tobacco use in Nepal is a pressing public health concern despite progress in reducing overall tobacco use. It remains relatively high-key aspects of the problem that include prevalence, health consequences, social and cultural factors, economic impact, marketing, and accessibility and lack of awareness (Pokharel, 2018). Adolescents and school-aged children should be the primary focus for intervention strategies to promote healthy behaviors, as unhealthy behaviors acquired during adolescence continue throughout life, causing adverse effects on individuals, families, and society. Therefore, this study aimed to explore the experience of smoking and factors influencing smoking behavior among female students in Kirtipur Municipality, Kathmandu. This study was delimited to purposively selected secondary-level female students in Kirtipur municipality of Kathmandu district, emphasizing solely on smoker girls for its qualitative approach.

2. Methods and Materials
2.1 Study Design
This study followed a descriptive narrative qualitative research design where the respondents provided their personal experience about the issue. A narrative study is a qualitative research approach that focuses on exploring and analyzing people's tales to better understand their experiences and the meanings they attach to them (Clandinin, & Connelly, 2004). This method focuses on how people generate and interpret their life experiences through narratives or tales. Researchers in narrative studies collect data through interviews, observations, and written testimonies, which are then analyzed to reveal patterns, themes, and insights into the human condition (Riessman, 2008).

2.2 Study Site and Participants
The study was carried out on six female students of two secondary-level schools (Mangal and Sahid Smarak) in Kirtipur municipality in February - March 2024. Since this research was focused on vulnerable participants due to their smoking behavior, we could

reach only a few participants. The study's sample was chosen following the snowball sampling method, where the researcher first identified one female tobacco-using student by observing. Then, she was followed to their network and identified other tobacco users who responded to the study's issue. Once the main information was repeated at the fifth participant and continued at the sixth, we concluded that the data were saturated.

2.3 Data Collection Tools and Procedure

We used semi-structured interview guidelines for information collection. The tool was developed based on previous literature and research reports. The interview guideline was constructed following related studies, reports, and articles. This in-depth guideline was mainly focused on exploring the experiences of tobacco consumption among female students; however, the interview delved into a depth exploration of the issues according to the context during the interview process. For the content validity of the tool, a discussion was carried out among experts/professors of the Health and Population Education Department, and necessary changes were made based on feedback from them.

The first author identified one tobacco-using student by continuously observing the place where she had earlier found some school students smoking (Purposively). Once, she met a girl and approached her. But she refused to answer. Then, she took help from her relative brother, who was a smoker. He managed a meeting with a smoker girl in the area who also has a network of smoking girls. Afterward, she explained the purpose of the study and their role in participating in the study. Then, we interviewed them in an informal setting and audio-recorded the interview using a mobile device with their formal consent. At the same time, we also noted down key points in writing in a notebook. Once the interview was over, the participants were asked to provide the contact information of their smoker friend who could probably participate in the interview process. They were asked to facilitate this process as well. The interview was continued through this networking until the data was saturated.

2.4 Data Analysis

We transcribed the interview from the audio recording and notes. All the information was manually analyzed, coded, and themes were identified. The thematic analysis approach was followed while presenting the information and experience obtained from the participants. The main themes and sub-themes were generated from the information. The discussion was based on the literature reviewed and comparing the data sets among the participants. The study results were presented in three main themes and 10 subthemes.

Theme	Subtheme
Experience of smoking	Positive experience
	Negative experience
Motivation and reasons for starting smoking	Peer pressure
	Relationship problem
	Effect of advertisement
	Lonely feel

	Family problems
	Fashion
Factors influencing smoking	Social factors
	Environment factors

2.5 Ethical Considerations

Verbal consent was obtained from the respondents to conduct the study and seek the relevant information and experience from the female tobacco-user students. Similarly, the participants were previously informed about the possible risks, and the procedures were designed to reduce those risks. They were assured that their identity was hidden and their information would be used only for research purposes. This was maintained throughout the process.

3. Results

3.1 Experience of Smoking

Smoking remains a prevalent public health issue worldwide, with significant negative implications for individual health and societal well-being. Despite widespread awareness of the harmful effects of tobacco use, many individuals continue to engage in smoking behaviors for various reasons. Understanding the diverse experiences and perspectives of individuals who smoke is crucial for developing effective interventions to reduce smoking prevalence and mitigate its adverse consequences.

Participants were asked about their experiences with tobacco use, including their thoughts towards it.

3.1.1 Negative Experience

Most of the girls had a negative experience after smoking, yet they smoke.

"... *According to my own experience of the time of smoking cigarettes, the respect in society is also gone, and money is spent as much. It seems that there are problems with health, mental stress increases, there is no food, sleep is not possible, relationships fade, and even girls who smoke cigarettes are viewed with a bad eye. Smoking is a bad habit."* (Participant 3).

This narrative from Participant 3 powerfully illustrates the multifaceted negative impacts of smoking. It highlights the social stigma experienced by female smokers, leading to a loss of "respect in society" and being "viewed with a bad eye." Beyond social repercussions, the participant details significant personal costs, including financial strain ("money is spent as much"), deteriorating health (mental stress, lack of food, inability to sleep), and the fading of relationships, culminating in the firm conclusion that "smoking is a bad habit

Similar to this, other participants added, "... *I have been smoking for the last three years. When I was about to start drinking and smoking, I didn't have money. I felt like I had to manage and smoke from anywhere. As a result, I had to stay away from the company of good friends, and I wanted to live in solitude, which was not beneficial for my family*

relationships. It seems that what the movie shows is not true; we should only take good things while watching movies." (Participant 5).

Participant 5's experience reveals the detrimental sacrifices and isolation that can accompany a smoking habit. Despite a lack of money, the individual felt compelled to acquire cigarettes, leading to a profound withdrawal from positive social connections ("stay away from the company of good friends") and a desire for solitude, which ultimately harmed family relationships. The narrative also includes a critical reflection on media influence, noting that the reality of smoking contrasts sharply with its portrayal in movies.

In this line, participant 6 said, "*... smoking addiction is not good, I am afraid that it will show some disease tomorrow, but I am trying to quit. It seems that there has been no negative impact so far."* This indicates an understanding of smoking's long-term risks. Despite this apprehension, the participant notes having experienced "no negative impact so far," which might explain the continued use, yet also states an active intention to quit.

3.1.2 Positive Experience

One of the participants who had earlier explained about the negativism of twisted her views and claimed that despite the common narrative surrounding tobacco, her journey as a female user had been marked by positive experiences and nuanced perspectives.

... "*I feel happy after smoking cigarettes, I don't know what positive or negative changes it has brought to my life"* (Participant 5).

This statement, also from Participant 5, presents a contradictory perspective to the commonly reported negative experiences, underscoring the complexity of individual perceptions of smoking. While acknowledging uncertainty about overall life changes, the participant explicitly states feeling "happy after smoking cigarettes," highlighting a subjective sense of pleasure or relief that can contribute to the continuation of the habit despite known negative narratives.

Overall, these responses underscore the complexity of individuals' experiences with smoking. While some emphasize the multifaceted negative impacts on health, relationships, and societal perception, others hint at subjective perceptions of pleasure or relief associated with smoking. It's essential to consider these diverse perspectives when addressing tobacco use and implementing public health interventions aimed at reducing smoking prevalence and mitigating its adverse effects.

3.2 Motivation and Reasons for Starting Smoking

The study involved participants who started smoking as teenagers, some even at under 14 due to peer pressure, family issues, stress, and broken relationships. The findings reveal a complex interplay of personal experiences, social pressures, emotional states, media influence, and environmental accessibility that contribute to smoking initiation and continuation among young females in Nepal.

3.2.1 Peer Pressure

Peer pressure plays a significant role in influencing young females to use tobacco, creating a powerful social dynamic that can override personal health considerations and

individual preferences. In this regard, some participants said about the first-time smoking experience as follows:

"...*I started taking cigarettes and drinking beer at the instigation of my friends.*" (Participant 2)

Participant 2's brief but direct statement clearly illustrates the powerful role of peer pressure in the initiation of substance use among young females. It highlights how the "instigation of friends" can be a significant social dynamic that influences an individual to begin smoking and drinking, even potentially overriding personal health considerations.

3.2.2 Relationship Problem

Breakups, especially sudden ones, can trigger a range of intense emotions, including denial, stress, and grief. These emotional responses are natural and reflect the significant impact such a loss can have on one's mental health. It's essential to acknowledge these feelings rather than suppress them. Participant 1, in this regard, said about the initiation of smoking,

"...*I was in a deep love relationship of two or four years, and it suddenly broke up, and I felt a lot of pain at that time. I started to hide myself and buy cigarettes to forget myself. I saw in the movies that such cigarettes can make someone forget their past. That's why I started buying cigarettes with the money I got from my parents.*" (Participant 1). Participant 1's narrative vividly demonstrates how intense emotional distress, specifically from a sudden relationship breakup, can trigger smoking initiation. The individual sought to use cigarettes as a coping mechanism to "forget myself" and alleviate pain, a behavior directly influenced by the misleading portrayal of smoking in movies as a means to overcome past trauma. This also reveals the use of parental money for this purpose.

3.2.3 Lonely Feel

Loneliness has been identified as a significant factor contributing to tobacco use among females.

"... *I am a young married girl. After the 12th standard, my husband went to study in Japan. Then I started feeling lonely, and I started smoking cigarettes with my peers.*" (Participant 2).

Participant 2's account links the onset of smoking to feelings of loneliness, which emerged after a significant life event—her husband moving abroad for studies. This narrative shows how emotional states and life changes can lead individuals to seek solace or companionship through smoking, often facilitated by peers, thereby underscoring loneliness as a "significant factor contributing to tobacco use among females".

3.2.4 Effect of Advertisement

The pervasive influence of tobacco advertisements has significantly contributed to the rise in tobacco use among females, shaping perceptions and behaviors across various demographics.

"*Why did I smoke before? I used to watch a lot of movies, and when I saw the hero heroin smoking to reduce their pain, I also started to smoke when I was in pain. When I used*

to see an attractive advertisement about smoking, I used to think it was better to smoke." (Participant 4).

Participant 4's statement explicitly identifies the pervasive influence of media, specifically movies and advertisements, as a direct cause for smoking initiation. The participant was swayed by cinematic depictions of characters using smoking to alleviate pain, leading to the adoption of the habit for similar emotional coping. Furthermore, the allure of "attractive advertisement about smoking" contributed to a positive, albeit misleading, perception of tobacco use.

3.2.5 Fashion

The complex interplay of fashion and tobacco use among females reveals a multifaceted phenomenon driven by societal pressures, identity expression, and cultural trends. In this case, participant 5 said, "*I live in Kathmandu for my studies. Since I saw most of my elder brother and sister and my age friends smoking cigarettes, I thought it was a fashion."*

Participant 5's experience illustrates how observational learning and the perception of social trends contribute to smoking initiation. Living in an urban environment for studies, the individual observed older siblings and peers smoking, which led to the interpretation of smoking as a "fashion." This highlights how societal pressures and the desire for identity expression can drive young females to adopt smoking behaviors.

3.2.6 Family Problem

The increasing prevalence of tobacco use among females is a significant family problem that requires urgent attention.

One of the participants illustrated … "*Ever since I found out that I was smoking in the house, there used to be a bit of a fight. If a girl who was a daughter-in-law walked into someone's house after smoking like that, it would be a disgrace in society, and there would be a discussion in the house. Because not only one smoked, so it seemed like the family smoked."* (Participant 3).

Participant 3's narrative highlights the profound familial and societal consequences of female smoking, particularly within a traditional household context. It reveals that a woman smoking, especially a daughter-in-law, can lead to internal family conflict ("a bit of a fight") and be perceived as a significant "disgrace in society," extending the stigma beyond the individual to implicate the entire family in negative social perceptions.

Within this context, participant 5 said, "*Only my sister's friends know that I smoke cigarettes, my father also smokes and drinks alcohol at home, the atmosphere at home is also the same, but the same tension affects that family where I learned to smoke when I meet with my friends."*

This shows that adolescent smoking initiation emphasizes the interplay of social, emotional, and environmental factors. Understanding these motivations is crucial for developing targeted interventions and prevention strategies aimed at curbing adolescent smoking prevalence. By addressing underlying issues such as peer pressure, relationship problems, loneliness, media influence, and familial influences, stakeholders can work towards promoting healthier behaviors and reducing tobacco use among youth.

3.3 Factors Influencing Smoking

Smoking behavior is influenced by a myriad of factors, including social and environmental ones. Within the social context, family dynamics play a crucial role in shaping an individual's attitudes and behaviors toward smoking. Moreover, the wider social circle, including friends and peers, also exerts significant influence. Environmental factors, such as the availability and accessibility of cigarettes, also contribute to the prevalence of smoking behavior. Understanding these influences is vital for developing effective interventions to curb tobacco use.

When asked how the family social environment influenced their tobacco use behavior, most of the participants blamed peer influence.

3.3.1 Social Factors

The social factors affecting tobacco use among females encompass a range of influences, including cultural norms, peer pressure, socio-economic status, and targeted marketing strategies by the tobacco industry.

Participant 5's account reveals the complex interplay of familial context, secrecy, and peer influence in smoking behavior. While the presence of a father who smokes and drinks creates a certain home "atmosphere," the participant chooses to conceal her own smoking from direct family members, highlighting a potential social stigma specific to female smoking. The reference to "tension" and learning to smoke with friends underscores the powerful role of peer groups in initiating and maintaining the habit, sometimes overriding or contrasting with direct family influence.

Similarly, participant 6 added, "*There are also friends in the village who smoke cigarettes. Sometimes on this Shivaratri, we also secretly smoke cigarettes mixed with cannabis.*"

Participant 6's statement demonstrates the direct impact of social networks and peer influence on smoking habits, even in a village setting. The presence of "friends in the village who smoke cigarettes" indicates a social environment where tobacco use is normalized. Furthermore, the narrative reveals engagement in covert poly-substance use, specifically smoking "cigarettes mixed with cannabis" during cultural events like Shivaratri, indicating a broader spectrum of peer-influenced substance experimentation.

3.3.2 Environment Factors

Environmental factors play a crucial role in influencing tobacco use among females.

... "*Even in the village, cigarettes are easily available at shops, that's why it's not so difficult to buy them. You do not know that the atmosphere of the village house is the same as where you can buy cigarettes in the shop. Nobody cares about anyone in Kathmandu, and the environment around us has not created such a difficult situation for me to smoke.*" (Participant 3).

Participant 3's statement highlights the critical role of environmental accessibility in facilitating smoking behavior. The "easy availability" of cigarettes in village shops reduces barriers to purchase. The comparison to Kathmandu, where "nobody cares about anyone," suggests a perceived lack of social oversight or judgment in both urban and rural settings,

indicating that the environment generally does not create "difficult situations" that would deter the individual from smoking.

Overall, these responses underscore the importance of addressing both social and environmental factors in tobacco control efforts. Interventions aimed at reducing smoking prevalence should not only target individual behavior but also address the broader social norms and environmental influences that sustain smoking habits. This may involve implementing stricter regulations on tobacco sales, promoting smoke-free environments, and challenging the normalization of smoking within social circles and communities. By addressing these multifaceted influences, public health efforts can effectively combat the tobacco epidemic and improve overall health outcomes.

4. Discussion

This study aimed to explore the experiences of smoking and the factors influencing smoking behavior among female school students in Kirtipur Municipality, Kathmandu. The findings reveal a complex interplay of personal experiences, social pressures, emotional states, media influence, and environmental accessibility that contribute to smoking initiation and continuation among young females in Nepal.

The participants' responses revealed a dual experience of smoking. While almost all of the girls expressed negative experiences of smoking, one of the girls expressed joy in having it. The findings mainly align with the broader public health concern of tobacco use, causing over eight million deaths annually (Oli et al., 2022) and increasing the risk of non-communicable diseases (WHO, 2023). Also, the subjective perception of pleasure or relief, alongside the negative impacts, highlights the complexity of individual experiences with smoking and suggests that for some, immediate gratification may outweigh perceived future harm. According to Khanal et al. (2023), even in the study of the e-cigarette ban in Nepal, there was found a high burden of ever use and current use of e-cigarettes was found among undergraduate students, and the participants had ample misconceptions and false beliefs regarding e-cigarette usage.

According to the Ministry of Health and Population, Nepal et al. (2022), tobacco is considered a cause of morbidity and mortality in Nepal. Compared to the world, although the number of tobacco users has decreased in Nepal, the number of female cigarette users has increased. This is a health problem for Nepal.

Similarly, we identified several key motivations for initiating smoking among the girls. Peer pressure was a significant factor that created a powerful social dynamic, overriding personal health considerations. Dhimal et al. (2020) also revealed that adolescents' manipulability and curiosity make them vulnerable to influences like smoking in their peers. According to Zulfikal et al. (2023), there are various physical, mental, and social reasons for smoking tobacco among adolescents. Onoh et al. (2023) found that the influence of peer groups on smoking tobacco and the attractive advertisement propagates the current generations to be attracted to smoking.

Breakups and emotional distress were found to be the next triggers for smoking initiation. Smoking was used as a coping mechanism for intense emotions like denial, stress, and grief. Girls who felt lonely were also prone to smoking. A pervasive influence of tobacco

advertisement was found among the smoking girls. Movies in which actors were shown smoking to reduce tension or pain influenced the girls to initiate smoking. This aligns with concerns raised by Grebenau (2020) about the media's relationship with smoking intensifying the issue, especially among adolescents in developing nations. Tobacco use was also evident to be a matter of fashion among adolescent girls. This suggests that modernization, as noted by Littlecott et al. (2023), leads to a more favorable attitude towards harmful behaviors among many females.

Although less mentioned, family issues were also found to affect smoking behavior among the girls. The study indicated that smoking by a female family member could lead to "disgrace in society" and internal conflict. However, Participant 5's experience, where a father's smoking and drinking created a certain home atmosphere, indicates how familial environments can normalize such behaviors, leading to tension that affects where smoking is learned. Sardar (2023), in a study conducted in Sunsari district, also found that close friends and family environment are the main reasons for teenagers being attracted to smoking. Sometimes, unnecessarily strict discipline and a non-humanistic approach by parents or teachers can lead to imbalanced body homeostasis in students that causes mental tension and even attraction to antisocial behaviors such as smoking (Bhandari & Aryal, 2024). Beyond this, those parents who smoke may present a poor role model to their children. As Albert Bandura's social learning/cognitive theory focuses on cognitive concepts, it explains how children and adults cognitively process social experiences and how these cognitions affect behavior and development through observation of their seniors (Aryal, 2022).

These analytics underscore the interplay of social, emotional, and environmental factors in adolescent smoking initiation. The fact that young male and female smokers show less prevalence difference than adults, and that cigarette smoking does not differ by gender in many Global Youth Tobacco Survey sites, suggests an increasing trend among young girls globally. This narrowing gender gap is particularly concerning in low and middle-income nations like Nepal as they modernize.

Beyond individual motivations, broader social and environmental factors exert significant influence on smoking behavior. Such as peer influence, easily available shops in Kathmandu, ease of buying cigarettes to adolescents, parental behaviors of smoking and drinking alcohol, and lack of social oversight or enforcement normalize tobacco use and create an atmosphere where such habits are learned and continued.

5. Conclusion

This study in Kirtipur Municipality of Kathmandu revealed that female school students engage in smoking due to a complex array of factors, including peer pressure, relationship issues, feeling of loneliness, influence of advertisements, perception of smoking as a fashion, and devastating family environments. Although participants stated negative experiences of smoking on health, economy, and social status of female smokers, some still take it as a matter of happiness. This study underscores that smoking is such a behavior that is influenced by personal, social, and environmental factors. The increasing prevalence and narrowing gap in tobacco consumption among young female students in Nepal shows a critical public health issue. The easy availability of cigarettes and the sale of these to young

people is one of the highlighted nuisances in the context. Therefore, the findings of this study carry some important implications for public health, policy, and future research aimed at reducing smoking practice among female adolescents in Nepal.

Smoking usually begins in adolescence due to peer pressure and curiosity; future tobacco cessation interventions should prioritize adolescent girls. These programs should focus on building resilience against peer pressure and teaching healthy coping mechanisms for emotional distress. Similarly, the interventions should include awareness campaigns, including specific health consequences for females, such as menstrual irregularities and reduced fertility, besides non-communicable diseases. It is necessary to counter the glamour portrayed in media, movies, and advertisements that link smoking to fashion or pain relief.

Another implication relates to preparing and implementing stricter advertising regulations. The tobacco companies should not be given any opportunity to sponsor any event, and involve stronger regulations on tobacco marketing that appeal to youth to undesirable lifestyles. Similarly, the easy availability of cigarettes and the sale of tobacco products to young people should be immediately controlled by the local authority.

Future research could employ quantitative methods to assess the prevalence of these identified factors across a larger population of female students, allowing for a broader generalization. Similarly, longitudinal research could track smoking trajectories among female adolescent students to understand how these factors evolve and impact long-term tobacco use.

6. Declaration
Conflicts of Interest
The authors declare that they have no potential conflicts of interest in the review, composition, or publication of this manuscript.

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Authors' Contributions
KB conceptualized and wrote the article, with BA contributing to the literature review, discussion, and correspondence of the publication process. KK and DA supported the interpretation and edited the final manuscript. All authors ensured consent for publication.

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