



# Are shisha policies an attack on culture?

## **It's Still Tobacco**

February 2018



# NO.

Shisha cafes in the UK are mainly run by ethnic minority groups, often those of Middle Eastern origin, and shisha tobacco use is seen as a cultural activity linked to the Middle Eastern experience.<sup>1</sup> A common argument from the shisha tobacco industry is that any policy directed towards shisha tobacco is a discriminatory attack on culture.<sup>2</sup> How valid is this argument? We outline four reasons why shisha policies are not an attack on culture.

## 1. Shisha tobacco use is now spread across many cultures in the UK.

Accumulating research shows that shisha tobacco use is no longer solely confined to those of Middle Eastern or south Asian ethnicities, especially among young people and young adults. For example, in a large study over 2000 secondary school students in south east London, over 30% of those from white ethnicities had used shisha tobacco, which was marginally lower than those from black (44%) and other (43%) ethnicities.<sup>3</sup> In another study among six universities in the UK, about one in ten students of white ethnicity had tried shisha tobacco.<sup>4</sup> Furthermore, a recent street survey among adults in southeast London found that a quarter of respondents of white ethnicities had tried shisha tobacco at least once.<sup>5</sup> This shows that shisha policies are likely to affect a range of cultures, not simply those of Middle Eastern or south Asian cultures. In fact, when looking at absolute numbers, shisha policies actually affect more people from white ethnicities than from ethnic minority groups.

## 2. Shisha tobacco use among young people is not part of any traditional culture.

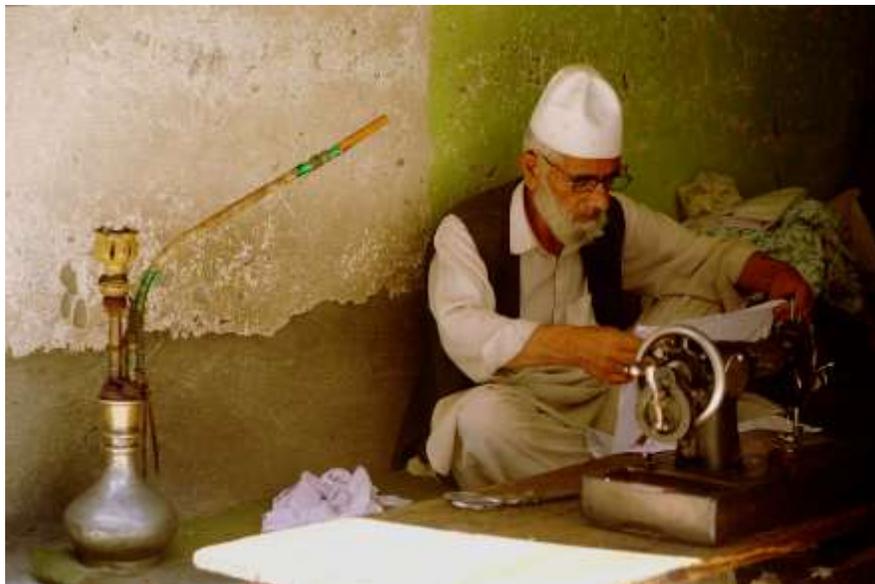
Nowadays, shisha tobacco use is mainly concentrated among young people.<sup>6</sup> This pattern of use has never been historically documented in societies where shisha tobacco use considered cultural (e.g. Middle Eastern and south Asian societies). Rather, people who used shisha tobacco in countries such as Egypt and India were elderly, male, and living in rural areas of the country.<sup>7</sup> In that regard, shisha cafes and the thriving shisha youth culture seen today is new for all countries worldwide. This is supported by a recent study among ethnic minorities who used shisha tobacco in Canada, where cultural traditions were only shown to play a minor role in the attitudes towards shisha tobacco.<sup>8</sup> Rather, the narrative of shisha tobacco being a cultural tradition stems from the media and marketing, rather than shisha tobacco users themselves.

### 3. Areas where shisha tobacco is considered “traditional” have, ironically, some of the strongest shisha policy laws worldwide.

Shisha tobacco use has shown a global resurgence, and ironically it's the countries where shisha tobacco is seen as “cultural” which have the strongest shisha tobacco policies. For example, in parts of India and Pakistan, shisha cafes are banned from operating in public and people can only use shisha tobacco in their own homes.<sup>9,10</sup> In the Gulf countries and in Turkey, there are zoning laws in place which only allow shisha cafes to operate a certain distance away from schools and residential areas.<sup>11</sup> Shisha tobacco is completely banned in parts of Malaysia,<sup>12</sup> and in all of Kenya,<sup>13</sup> Rwanda,<sup>14</sup> and Tanzania.<sup>14</sup> So anyone who claims that shisha policies are an attack on culture should be mindful that very few “traditional” cultures are accepting the growth in shisha tobacco use.

### 4. Fears of attack on culture should not prohibit efforts to promote public health measures and reduce inequalities among the most vulnerable.

Shisha tobacco use kills half of its users prematurely and poses a major risk to the health of young people.<sup>15</sup> From an ethical and historical standpoint, fears of cultural discrimination should not stand, and have never stood, in the way of protecting vulnerable population groups. Whether it is screening for tuberculosis among those of south Asian ethnicity,<sup>16</sup> or doing increased testing of HIV among those of black African ethnicity,<sup>17</sup> the public health approach has always been to reduce unacceptable inequalities in smaller segments of society and that sometimes means reaching out to ethnic groups. Any fears of shisha tobacco policies adversely targeting cultures emphasises the importance of engaging these cultures early in the decision making process.<sup>18</sup> Only with local buy-in will such policies succeed.



# REFERENCES

1. Roskin J, Aveyard P. Canadian and English students' beliefs about waterpipe smoking: a qualitative study. *BMC public health*. 2009;9:10.
2. National Association of Shisha Bar Owners. A survey of 200 "Shisha/Hookah" bar/cafes/lounges [online]. Available at: <http://bit.ly/2mN614s> [Date of access 18 January 2018]. 2013.
3. Jawad M, Power G. Prevalence, correlates and patterns of waterpipe smoking among secondary school students in southeast London: a cross-sectional study. *BMC public health*. 2016;16:108.
4. Jawad M, Choai E, Brose L, et al. Waterpipe Tobacco Use in the United Kingdom: A Cross-Sectional Study among University Students and Stop Smoking Practitioners. *PLoS one*. 2016;11(1):e0146799.
5. Jawad M, Power G. Waterpipe tobacco and electronic cigarette use in a southeast London adult sample: a cross-sectional analysis. *Journal of public health (Oxford, England)*. 2016;38(2):e114-121.
6. Maziak W, Taleb ZB, Bahelah R, et al. The global epidemiology of waterpipe smoking. *Tobacco control*. 2015;24 Suppl 1:i3-i12.
7. Jawad M, Abass J, Hariri A, et al. Waterpipe smoking: prevalence and attitudes among medical students in London. *The international journal of tuberculosis and lung disease : the official journal of the International Union against Tuberculosis and Lung Disease*. 2013;17(1):137-140.
8. Hammal F, Wild TC, Nykiforuk C, Abdullahi K, Mussie D, Finegan BA. Waterpipe (Hookah) Smoking Among Youth and Women in Canada is New, not Traditional. *Nicotine & tobacco research : official journal of the Society for Research on Nicotine and Tobacco*. 2016;18(5):757-762.
9. Zavery A, Qureshi F, Riaz A, Pervez F, Iqbal N, Khan JA. Water Pipe (shisha) Use and Legislation Awareness Against Shisha Smoking Among Medical Students: A study from Karachi, Pakistan. *Journal of community health*. 2016.
10. Vermal S. After Gujarat, Punjab to bring legislation to ban hookah bars. Times of India [online]. Available at: <http://bit.ly/2DJIRFj> [Date of access 18 January 2018]. 2017.
11. Jawad M, El Kadi L, Mugharbil S, Nakkash R. Waterpipe tobacco smoking legislation and policy enactment: a global analysis. *Tobacco control*. 2015;24 Suppl 1:i60-i65.
12. MalayMail Online. Fatwa committee declares shisha 'haram' for Muslims [online]. Available at: <http://bit.ly/2EVxS9Z> [Date of access 18 January 2018]. 2013.
13. Mwangi W. Kenya to ban shisha over health risks. The Star [online]. Available at: <http://bit.ly/2FUJEDa> [Date of access 18 January 2018]. 2017.
14. Kimuyu H. Rwanda bans shisha smoking following Tanzania's lead. Daily Nation [online]. Available at: <http://bit.ly/2Dgg6HC> [Date of access 18 January 2018]. 2017.

15. Waziry R, Jawad M, Ballout RA, Al Akel M, Akl EA. The effects of waterpipe tobacco smoking on health outcomes: an updated systematic review and meta-analysis. *International journal of epidemiology*. 2016.
16. Public Health England. Tuberculosis screening [online]. Available at: <http://bit.ly/2ETb22T> [Date of access 18 January 2018]. 2014.
17. Public Health England. HIV Testing in England: 2017 report [online]. Available at: <http://bit.ly/2ySmqZs> [Date of access 18 January 2018].
18. City of Westminster. Equality Impact Assessment Tool: Reducing the Harm of Shisha: Towards a Strategy for Westminster (2015) [online]. Available at: <http://bit.ly/2FTGPIM> [Date of access 18 January 2018].