

The narrow gender gap in hookah smoking behavior among Iranian university students

Ramin Shiraly¹, Aryan Mohamadinezhad¹

Dear Editor,

Recreational substance use among undergraduate university students has been a cause of concern globally¹. Generally, males are much more likely than females to report substance use behaviors. Nevertheless, the changing gender gap in substance use patterns should be monitored and addressed^{2,3}. Hookah use has now been widely practiced in different parts of the world, particularly among young adults⁴. There are significant health risks associated with hookah use, including periodontal, pulmonary, cardiovascular, cognitive, and neoplastic diseases⁵.

We conducted a survey on the use of recreational substances being smoked by university students in Shiraz, Iran (Approved by the Ethics Committee of Shiraz University of Medical Sciences). Eligible participants were undergraduate students (including two-year associate degree, Bachelor's degree, Master's and doctorate degrees) aged ≥ 18 years, who were studying in a university during the 2021–2022 academic year. Data were collected via a self-administered questionnaire, which included demographic characteristics and questions about self-reported current (past 30 days), one-year, and lifetime prevalence of use of smoked substances, including cigarettes, hookah, cannabis, opium, heroin, cocaine, and methamphetamine.

Overall, 3610 students from five large universities were recruited through a convenient sampling approach. Enrollment was designed to obtain a representative sample from different educational degrees and disciplinary backgrounds. The mean \pm SD age of participants was 23.0 ± 2.7 years. About half (50.6%) were female, 85% were single. Participant education level ranged from associate (31.3%) and Bachelor's (50%) degrees to Master's (11.4%) and doctoral degrees (7.3%). The most commonly used substances during the past month, in order of decreasing frequency, were hookah (34.2%), cigarette (12.7%), cannabis (0.6%), and opium (0.5%). Self-reported use of heroin, cocaine, and methamphetamines was negligible ($<0.1\%$). Past-month hookah use was more common among male than female students (42.2% vs 26.3%, $p < 0.001$), single than married students (35.8% vs 23%, $p < 0.001$), and was less common among students of doctoral degree than other degrees (5% vs 36.4%, $p < 0.001$).

One-year prevalence of hookah use among male students (61.2%) was 1.6 times higher than among female students (37.1%, $p < 0.001$), whereas the one-year prevalence of cigarette use among male students (34.9%) was 13 times higher than in female students (2.7%, $p < 0.001$) (Table 1).

This study shows a narrow gender gap in hookah use and a large gender gap in the use of cigarettes and illicit smoked substances among Iranian university students. Hookah is usually smoked in groups and may serve as a mode of communication among youth⁶. Furthermore, a popular belief among young adults is that hookah use is a less dangerous and non-addictive method of tobacco

AFFILIATION

¹ Shiraz University of Medical Sciences, Shiraz, Iran

CORRESPONDENCE TO

Ramin Shiraly, Department of Community Medicine, School of Medicine, Shiraz University of Medical Sciences, Shiraz, Iran.
Email: rshiraly@gmail.com
ORCID iD: <https://orcid.org/0000-0002-7429-0106>

KEYWORDS

students, gender gap, waterpipe smoking

Received: 21 March 2024

Revised: 11 July 2024

Accepted: 11 July 2024

Table 1. Prevalence and gender ratio of use of recreational smoked substances among university students in Shiraz, Iran (N=3610)

Cigarette use	Men* n (%)	Women* n (%)	Total n (%)	M/F ratio (95% CI)
One month	444 (24.9)	13 (0.7)	457 (12.7)	35.6 (20.1–60.9)
One year	622 (34.9)	49 (2.7)	671 (18.6)	12.9 (9.6–17.5)
Ever	1049 (58.8)	119 (6.5)	1168 (32.3)	9.0 (7.4–11.0)
Hookah use				
One month	753 (42.2)	480 (26.3)	1233 (34.2)	1.6 (1.4–1.8)
One year	1091 (61.2)	678 (37.1)	1769 (49.0)	1.6 (1.4–1.8)
Ever	1349 (75.7)	931 (51.0)	2280 (63.2)	1.4 (1.3–1.6)
Cannabis use				
One month	17 (0.96)	3 (0.16)	20 (0.6)	5.8 (1.7–19.8)
One year	47 (2.6)	8 (0.4)	55 (1.5)	6.0 (2.8–12.7)
Ever	173 (9.7)	20 (1.1)	193 (5.3)	8.8 (5.5–14.1)
Opium use				
One month	16 (0.9)	2 (0.1)	18 (0.5)	8.2 (1.8–35.7)
One year	19 (1.1)	3 (0.2)	22 (0.6)	6.5 (1.9–21.9)
Ever	79 (4.4)	7 (0.4)	86 (2.4)	11.6 (5.3–25.1)

*Gender differences were statistically significant ($p < 0.001$ for all categories).

smoking⁷. The high prevalence of hookah use among female students^{8,9} is worrying since females tend to progress more rapidly than males from initial use to addiction. Socializing/partying and peer pressure have been reported as the most common motivating factors associated with smoking hookah among university students¹⁰, which could promote hookah-sharing behaviors and encourage initiating other substances through creating exposure opportunity¹¹.

The narrow gender gap in hookah use is a matter of concern because it might be associated with other risky behaviors¹². It should, therefore, be taken more seriously than just a method of tobacco smoking.

REFERENCES

- Aresi G, Moore S, Marta E. Drinking, Drug Use, and Related Consequences Among University Students Completing Study Abroad Experiences: A Systematic Review. *Subst Use Misuse*. 2016;51(14):1888-1904. doi:[10.1080/10826084.2016.1201116](https://doi.org/10.1080/10826084.2016.1201116)
- Becker JB, McClellan ML, Reed BG. Sex differences, gender and addiction. *J Neurosci Res*. 2017;95(1-2):136-147. doi:[10.1002/jnr.23963](https://doi.org/10.1002/jnr.23963)
- McHugh RK, Votaw VR, Sugarman DE, Greenfield SF. Sex and gender differences in substance use disorders. *Clin Psychol Rev*. 2018;66:12-23. doi:[10.1016/j.cpr.2017.10.012](https://doi.org/10.1016/j.cpr.2017.10.012)
- Jawad M, Charide R, Waziry R, Darzi A, Ballout RA, Akl EA. The prevalence and trends of waterpipe tobacco smoking: A systematic review. *PLoS One*. 2018;13(2):e0192191. doi:[10.1371/journal.pone.0192191](https://doi.org/10.1371/journal.pone.0192191)
- Qasim H, Alarabi AB, Alzoubi KH, Karim ZA, Alshbool FZ, Khasawneh FT. The effects of hookah/waterpipe smoking on general health and the cardiovascular system. *Environ Health Prev Med*. 2019;24(1):58. doi:[10.1186/s12199-019-0811-y](https://doi.org/10.1186/s12199-019-0811-y)
- Haroon M, Munir A, Mahmud W, Hyder O. Knowledge, attitude, and practice of water-pipe smoking among medical students in Rawalpindi, Pakistan. *J Pak Med Assoc*. 2014;64(2):155-158
- Palamar JJ, Zhou S, Sherman S, Weitzman M. Hookah use among U.S. high school seniors. *Pediatrics*. 2014;134(2):227-234. doi:[10.1542/peds.2014-0538](https://doi.org/10.1542/peds.2014-0538)
- Khodadost M, Maaajani K, Abbasi-Ghahramanloo A, et al. Prevalence of Hookah Smoking among University Students in Iran: A Meta-Analysis of Observational Studies. *Iran J Public Health*. 2020;49(1):1-13
- Karaman NG, Çeber ÇÜ, Eraslan S. Waterpipe tobacco smoking among university students in Turkey. *Addict Behav Rep*. 2022;15:100409. doi:[10.1016/j.abrep.2022.100409](https://doi.org/10.1016/j.abrep.2022.100409)
- Braun RE, Glassman T, Wohlwend J, Whewell A, Reindl DM. Hookah use among college students from a Midwest University. *J Community Health*. 2012;37(2):294-298. doi:[10.1007/s10900-011-9444-9](https://doi.org/10.1007/s10900-011-9444-9)
- Fielder RL, Carey KB, Carey MP. Hookah, cigarette, and marijuana use: a prospective study of smoking

- behaviors among first-year college women. *Addict Behav.* 2013;38(11):2729-2735. doi:[10.1016/j.addbeh.2013.07.006](https://doi.org/10.1016/j.addbeh.2013.07.006)
12. Berg CJ, Schauer GL, Asfour OA, Thomas AN, Ahluwalia JS. Psychosocial Factors and Health-Risk Behaviors Associated with Hookah use among College Students. *J Addict Res Ther.* 2011;Suppl 2:10.4172/2155-6105.S2-001. doi:[10.4172/2155-6105.S2-001](https://doi.org/10.4172/2155-6105.S2-001)

CONFLICTS OF INTEREST

The authors have completed and submitted the ICMJE Form for Disclosure of Potential Conflicts of Interest and none was reported.

FUNDING

This project was funded by the Vice Chancellor for Research at Shiraz University of Medical Sciences (Ref No: 9720).

ETHICAL APPROVAL AND INFORMED CONSENT

Ethical approval was obtained from the Ethics Committee of Shiraz University of Medical Sciences (Approval number: IR.SUMS.MED.REC.1397.099; Date: 27 May 2018). Participants provided informed consent.

DATA AVAILABILITY

The datasets generated and analyzed during the current study are available from the corresponding author upon reasonable request.

PROVENANCE AND PEER REVIEW

Not commissioned; internally peer reviewed.

DISCLAIMER

The views and opinions expressed in this article are those of the authors.