

Shisha smoking

‘Shisha’ is a tobacco mix usually containing a sweetener, as well as assorted flavourings. Shisha smoking, via a ‘hookah’ or water pipe appears to be becoming increasingly popular amongst Australian young people due to the following:

- **Much greater visibility** – with the number of ‘shisha bars’ increasing across many parts of the country
- **Shisha is seen as a ‘social activity’**
- **Many do not regard it as smoking** – if they do, it is seen as a ‘safer way’ or a ‘safe alternative’ to cigarette smoking
- **Heavily promoted with misleading and often false claims** – products marketed as ‘herbal mixtures’, ‘nicotine free’, ‘tobacco free’ and ‘tar free’

There are three commonly held beliefs around shisha smoking that need to be addressed – these are as follows:

- **Water cleans the smoke and removes tar and other dangerous chemicals**
- **Shisha smoke is less likely to cause cancer and other problems**
- **It’s a social activity and certain cultures have done it for years without problems**

Teachers need to consider the following should they be conducting any tobacco prevention activities in their classroom:

- **Shisha smoking is far more visible today and appears to be growing in popularity**
- **Shisha smoking challenges one of our key tobacco prevention message, i.e., smoking is anti-social**
- **Shisha smoking is not a safe alternative to cigarette smoking and poses a serious potential health hazard**

As such, teachers should consider raising the issue of shisha smoking and its related harms when delivering tobacco prevention messages

Background

In recent years there has been a resurgence in popularity in the use of hookahs to smoke tobacco, particularly flavoured tobacco products (often referred to as ‘shisha’ – a tobacco mix containing molasses or some other form of sweetener, as well as assorted flavourings – usually fruits such as apple and lemon). Due to the use of healthy-sounding fruit flavourings and the social way that it is usually used (i.e., in restaurants and cafes) it is often regarded as a ‘safer’ alternative to cigarettes. As a result of this recent popularity, there has been an increasing amount of research conducted examining the harms associated with the use of hookahs and what is commonly referred to as ‘shisha smoking’.

A ‘hookah’ is a water pipe and most likely originated in the Middle East in the 1500s. Water pipe tobacco smoking (WTS) is a centuries old tradition that is

particularly associated with Arabic societies and the Middle East and is now part of everyday life in a range of countries from Syria, Egypt and Turkey, through to India, Pakistan and Nepal. Known by many names across a range of cultures (hookah, shisha, goza, narghile and hubble bubble), WTS involves heating the tobacco mix, having the resulting smoke pass over or through water and directing it to a pipe for inhalation.

Water pipe products are sold in tobacconists across Australia, but anecdotal evidence suggests that smokers, particularly young people, are increasingly utilising one of the many online stores dedicated to the promotion and sale of shisha products, including pipes and the smoking mixtures (usually referred to as ‘shisha’) to access these products. We know little about the practice of water pipe tobacco smoking in Australia, but anecdotal evidence would suggest that it is increasing in popularity.

Shisha smoking

Why is shisha smoking becoming more popular?

There are a number of factors that are causing shisha smoking to become increasingly popular:

- **Much greater visibility** – the number of ‘shisha bars’ has increased greatly and shisha smoking is much more likely to be observed by young people today than in the past. These bars are usually located in nightlife areas and target 18-25 year olds, unfortunately underage young people also often frequent these areas and are highly likely to be influenced by what they observe
- **Shisha is seen as a ‘social activity’** – we have done a great job of making smoking be regarded as ‘anti-social’. Shisha smoking challenges this message as it is very much promoted as a social activity to young adults as something you do with a group of friends after you have been out for dinner or when you are out on a night on the town
- **Many do not regard it as smoking** – if they do, it is a ‘safer way’ or a ‘safe alternative’ to cigarette smoking. This is due to the method of smoking, i.e., via a hookah, with some believing that the water in the water pipe filters out the tar and other dangerous chemicals, or the fact that it is flavoured and that somehow this makes the product safer
- **Heavily promoted with misleading and often false claims** – shisha bars and more particularly, online stores often market their products as ‘herbal mixtures’, ‘nicotine free’, ‘tobacco free’ and ‘tar free’. There are certainly many shisha products available that are free of tobacco and nicotine but that does not mean they are ‘risk free’ – smoke anything and there are a range of respiratory risks involved at the very least

Is shisha smoking safer?

There are three commonly held beliefs around shisha smoking that need to be addressed – these are as follows:

- **Water cleans the smoke and removes tar and other dangerous chemicals**
- **Shisha smoke is less likely to cause cancer and other problems**
- **It’s a social activity and certain cultures have done it for years without problems**

Water cleans the smoke and removes tar and other dangerous chemicals:

The water in a water pipe is actually used to cool the smoke, thus making it easier on the throat, reducing the likelihood of hot smoke hitting the back of the throat, causing the smoker to cough. It does not remove tar. It is also important to note that even though some of the nicotine may be filtered by the water, shisha smokers are still exposed to enough to become addicted.

Shisha smoke is less likely to cause cancer and other problems:

Even though many shisha products claim to be ‘tar free’ it is important to remember that burning creates tar. When you heat the product and inhale the shisha smoke, it contains tar, potentially causing mouth and lung cancers, as well leading to possible heart disease, just like cigarette smoke. In fact, the World Health Organization (WHO) found that a single session of shisha smoking which takes approximately 45 minutes to 1 hour, yields the same amount of nicotine as more than one pack of cigarettes, and the smoker inhales as much smoke as a cigarette smoker would inhale consuming 100 or more cigarettes.

It’s a social activity and certain cultures have done it for years without problems:

Even though it is heavily promoted as a social activity, smoking in shisha bars can be particularly dangerous as it leads to the smoker inhaling more smoke, for longer periods than typical cigarette smokers. Secondhand smoke is particularly dangerous in these environments, as it not only contains tobacco smoke, but smoke from the heat source (usually charcoal, particularly in the more traditional shisha bar settings). It is also important to remember that sharing hookahs can lead to the spread of a range of infectious diseases.

Implications for health teachers

In an already crowded curriculum it can be difficult for a health teacher to cover all areas effectively and provide up-to-date, accurate and credible information. When it comes to tobacco prevention, novel ways of smoking such as shisha smoking and the introduction of electronic nicotine delivery systems (ENDs) such as e-cigarettes set new challenges for health teachers. Possibly the best way forward is to cover all of these under the one banner of ‘smoking prevention’ – thus even touching

Shisha smoking

on cannabis smoking at the same time – the simple message being ‘smoking anything is risky’.

If this is to be done, teachers need to consider the following points around shisha smoking should they be conducting any tobacco or smoking prevention activities in their classroom:

- **Shisha smoking is far more visible today and appears to be growing in popularity**
- **Shisha smoking challenges one of our key tobacco prevention message, i.e., smoking is anti-social**
- **Shisha smoking is not a safe alternative to cigarette smoking and poses a serious potential health hazard**

Resources

Shisha Lesson Plan: Comprising of three activities, this is a UK resource that can easily be adapted for an Australian audience, particularly if shisha smoking and shisha bars are an issue in your area. You will need to register as a member of Tes Connect to access the lesson plan but this only takes a couple of minutes and then you will have access to a range of resources.

<https://www.tes.co.uk/teaching-resource/Shisha-Lesson-Plan-anti-smoking-6323091>

Healthy Schools Bolton: Once again from the UK, this is a collection of resources, including some activities designed for younger audiences. If you do not want to register with Tes Connect, you are able to access the Shisha Lesson Plan from this website also. Particularly useful are a series of Shisha Awareness Posters that can be downloaded and used in classroom activities.

<http://www.boltonhealthyschools.co.uk/Home/Teachers/PrioritiesResources/SubstanceMisuse.aspx>

References

Cobb, C., Ward, K.D., Maziak, W., Shihadeh, A.L., & Eissenberg, T. (2010). Waterpipe tobacco smoking: an emerging health crisis in the United States. *American Journal of Health Behavior* 34, 275-285.

Dugas, E., Tremblay, M., Low, N.C.P., Cournoyer, D., & O’Loughlin, J. (2010). Waterpipe smoking among North American youths. *Pediatrics* 125, 1184-1189.

Maziak, W. (2014). The waterpipe: a new way of hooking youth on tobacco. *The American Journal on Addictions* 23, 103-107.

World Health Organization. (2005). *Waterpipe Tobacco Smoking: Health Effects, Research Needs and Recommended Actions by Regulators.* Advisory Note by WHO Study Group on Tobacco Product Regulation (TobReg), Rio de Janeiro, Brazil, 7-9 June 2005. ([PDF downloadable version](#))