

Young People and Smoking

Smoking Prevalence

It is estimated that each year around 207,000 children in the UK start smoking.¹ Among adult smokers, about two-thirds report that they took up smoking before the age of 18 and over 80% before the age of 20.² The 2011 General Lifestyle Survey of adult smokers revealed that almost two-fifths (40%) had started smoking regularly before the age of 16.³

Among children who try smoking it is estimated that between one third and one half are likely to become regular smokers within two to three years.⁴

The annual Government survey of smoking among secondary school pupils in England defines regular smoking as smoking at least one cigarette a week. However most pupils smoke considerably more than this and in 2014 pupils classified as regular smokers smoked an average (mean) of 31.1 cigarettes a week. Occasional smokers consumed on average 5 cigarettes a week.⁵ The number of cigarettes smoked by regular smokers has fallen significantly since 2007.

The proportion of children who have ever smoked continues to decline. In 2014, 18% of 11-15 year olds (22% in 2013) had smoked at least once, the lowest proportion since the survey began in 1982 when 53% had tried smoking.⁵ In the past decade, the proportion of children who had ever smoked has more than halved from 42% in 2003 to 18% in 2014.⁵ The prevalence of regular smoking increases with age, from 0% of 11 year olds to 8% of 15-year olds.⁵

Percentage of regular smokers aged 11-15 by sex: 1982 – 2014, England⁵

Years	1982	1986	1990	1994	1998	2002	2006	2010	2012	2013	2014
Boys	11	7	9	10	9	9	7	4	4	3	3
Girls	11	12	11	13	12	11	10	6	4	4	4
Total	11	10	10	12	11	10	9	5	4	3	3

Note: ONS estimates that in 2014 around 90,000 children aged 11-15 were regular smokers (CI=80,000-110,000); about 10,000 fewer than in 2013.

The decline in smoking has been most marked among older pupils. The proportion of 14 year olds who smoked regularly fell from 13% in 2006 to 4% in 2013 (and 2014); among 15 year olds, 8% smoked regularly in 2014, compared with 20% in 2006.⁵

Percentage of 15 year old regular smokers: 1982 - 2014, England⁵

Years	1982	1986	1990	1994	1998	2002	2006	2010	2012	2013	2014
Boys	24	18	25	26	19	20	16	10	10	8	6
Girls	25	27	25	30	29	26	24	14	10	8	9
Total	25	22	25	28	24	23	20	12	10	8	8

Exposure to secondhand smoke

In 2014, nearly two thirds (64%) of pupils reported being exposed to secondhand smoke indoors or in a car. Of these, 59% experienced secondhand smoke in their own or other people's homes and 34% were exposed to smoke in a car.⁵

Use of electronic cigarettes

In 2014, the Smoking, Drinking & Drug Use survey included, for the first time, questions on children's knowledge of, and use of electronic cigarettes. In common with other surveys⁶ this survey found that regular use of e-cigarettes to be negligible (1%) and use to be strongly linked to smoking behaviour: 89% of regular smokers reported having tried e-cigarettes compared to only 11% of children who had never smoked. For further information about e-cigarette use among children in Great Britain see [ASH Fact Sheet: Use of electronic cigarettes among children in Great Britain](#).

What factors influence children to start smoking?

Smoking initiation is associated with a wide range of risk factors including: parental and sibling smoking, the ease of obtaining cigarettes, smoking by friends and peer group members, socio-economic status, exposure to tobacco marketing, and depictions of smoking in films, television and other media.⁷

Children who live with parents or siblings who smoke are up to 3 times more likely to become smokers themselves than children of non-smoking households.⁸ It is estimated that, each year, at least 23,000 young people in England and Wales start smoking by the age of 15 as a result of exposure to smoking in the home.⁷

Smoking, alcohol and drug use

There is a strong association between smoking and other substance use. As in previous years, the 2014 secondary school survey found strong overlaps of substance use. Based on those who gave valid responses, among 15-year olds, 10% reported smoking in the week before the survey, including 9% who had also drunk alcohol or taken drugs recently, or had done both.⁵

Other factors associated with smoking

As in previous surveys, the 2014 survey found that young people who played truant from school or who had been excluded from school in the previous 12 months were almost twice as likely to smoke regularly compared to those who had never been truant or excluded.⁵

Attitudes to smoking

The proportion of pupils who think it is acceptable to try smoking has decreased significantly since the question was first asked in 1999. In 2014, 26% believed it was acceptable to try smoking to see what it is like compared with 54% in 1999, while 10% thought it was OK to try smoking once a week.⁵

Children's beliefs about why people their own age smoke differed according to their own smoking behaviour. Smokers were more likely to believe that young people smoked because of its effects: for example, it helped them cope with stress or relax, or it gave them a positive feeling or helped them stay slim. Non-smokers were more likely to believe that people their age smoked because of social pressures: to look cool in front of friends, because it was exciting to break rules, or because their friends pressured them into it.⁵

Smoking and children's health

The younger the age of uptake of smoking, the greater the harm is likely to be because early

uptake is associated with subsequent heavier smoking, higher levels of dependency, a lower chance of quitting, and higher mortality.⁷

Child and adolescent smoking causes serious risks to respiratory health both in the short and long term. Children who smoke are two to six times more susceptible to coughs and increased phlegm, wheeziness and shortness of breath than those who do not smoke.⁹ Smoking impairs lung growth and initiates premature lung function decline which may lead to an increased risk of chronic obstructive lung disease later in life. The earlier children become regular smokers and persist in the habit as adults, the greater the risk of developing lung cancer or heart disease.¹⁰

Children are also more susceptible to the effects of passive smoking. Parental smoking is the main determinant of exposure in non-smoking children. Although levels of exposure in the home have declined in the UK in recent years, children living in the poorest households have the highest levels of exposure as measured by cotinine, a marker for nicotine.¹¹

Bronchitis, pneumonia, asthma and sudden infant death syndrome (cot death) are significantly more common in infants and children who have one or two smoking parents.¹¹

For more information see the ASH Research Report: [Passive smoking: the impact on children](#), ASH Factsheets: [Secondhand smoke in the Home](#), and [Smoking in Cars](#) .

Addiction

Children who experiment with cigarettes can quickly become addicted to the nicotine in tobacco. Children may show signs of addiction within four weeks of starting to smoke and before they commence daily smoking.¹² One US study¹³ found that smoking just one cigarette in early childhood doubled the chance of a teenager becoming a regular smoker by the age of 17 and a London study suggests that smoking a single cigarette is a risk indicator for children to become regular smokers up to three years later.¹⁴

In the 2014 survey of school-children in England, 53% of young people who had smoked for under one year say they would find it difficult to stop for one week compared to 85% for those who have smoked more than one year.⁵ The survey also found that 29% of regular smokers said that they wanted to give up smoking, while 56% reported that they had tried to give up. During periods of abstinence, young people experience withdrawal symptoms similar to the kind experienced by adult smokers.^{9,15}

Smoking prevention

Research suggests that knowledge about smoking is a necessary component of anti-smoking campaigns but by itself does not affect smoking rates. It may, however, result in a postponement of initiation.¹⁶ High prices can deter children from smoking, since young people do not possess a large disposable income: studies suggest young people may be up to three to four times more price sensitive than adults.¹⁷

In Canada, when cigarette prices were raised dramatically in the 1980s and the early 1990s youth consumption of tobacco plummeted by 60%.¹⁸ An American study has shown that while price does not appear to affect initial experimentation of smoking, it is an important tool in reducing youth smoking once the habit has become established.¹⁹

The National Institute for Health and Care Excellence (NICE) has issued guidance on school-based interventions to prevent the uptake of smoking among children.²⁰

Children, smoking and the law

On 1 October 2007 the legal age for the purchase of tobacco in England and Wales was raised from 16 to 18. The measure was designed to make it more difficult for teenagers to obtain

cigarettes, since, despite the law, children still succeeded in buying tobacco from shops and vending machines.

In 2008, the first time data were collected after the change in the law, 39% of pupils who smoked said they found it difficult to buy cigarettes from shops, an increase of 15% from 24% in 2006.²¹ There has also been a drop in the proportion of regular smokers who usually buy their cigarettes from a shop: from 78% in 2006 to 57% in 2014.⁵

Other measures designed to deter children from smoking include a ban on the sale of cigarettes from vending machines which entered into force in England on 1 October 2011 and a ban on the display of tobacco products in retail outlets.²²

During 2013 there were 98 prosecutions in England and Wales for underage tobacco sales, with 78 defendants being found guilty.²³ An amendment to the Criminal Justice and Immigration Act includes banning orders for retailers who persistently sell tobacco to persons under the age of 18. This measure came into force in April 2009.

In February 2014, Parliament passed an amendment to the Children and Families Bill allowing the Government to introduce regulations making it an offence to smoke in a private vehicle carrying children. This measure will enter into force on 1 October 2015 and will apply to England and Wales.

Three other amendments were passed enabling the Government to introduce regulations:

- requiring standardised packaging for tobacco products (throughout the UK),
- making it an offence to sell e-cigarettes to children under 18 - (England and Wales)
- making it an offence for an adult to buy cigarettes for anyone under 18 - proxy purchasing (England and Wales).

Standardised packaging is due to enter into force in May 2016 and the regulations on proxy purchasing and prohibiting the sale of e-cigarettes to under 18s will commence on 1 October 2015.

Legislation alone is not sufficient to prevent tobacco sales to minors. Both enforcement and community policies may improve compliance by retailers but the impact on underage smoking prevalence using these approaches alone may still be small.²⁴ Successful efforts to limit underage access to tobacco require a combination of approaches that tackle the problem comprehensively.

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