

factsheet no:3

Young people and smoking

Action on Smoking and Health – March 2007

Smoking prevalence

Children become aware of cigarettes at an early age. Three out of four children are aware of cigarettes before they reach the age of five whether or not the parents smoke. ¹ The proportion of children who have experimented with smoking has fallen from 53% in 1982 to 39% in 2004. ² Experimentation is an important predictor of future use: a major US study revealed that 88% of adult smokers said they had started smoking by age 18. ³ Since 1993, girls have been more likely than boys to have ever smoked. This contrasts with the results of regional studies of children's smoking habits during the 1960s and 1970s which showed that more boys smoked than girls and that boys started earlier. ⁴ In 1982, at ASH's instigation, the government commissioned the first national survey of smoking among children and found that 11% of 11-16 year olds were smoking regularly. ⁵

Year	1982	1984	1986	1988	1990	1992	1994	1996	1998	2000	2002	2003	2006
Boys	11	13	7	7	9	9	10	11	9	9	9	7	7
Girls	11	13	12	9	11	10	13	15	12	12	11	11	10
Total	11	13	10	8	10	10	12	13	11	10	10	9	9

Percentage of regular smokers aged 11-15 by sex: 1982 – 2004, England

Note: [ONS figures](#) indicate that 20% of the UK population (59.8m) is under 16. Approximates figures for age group populations can be extrapolated from these.

During the early nineties prevalence remained stable at 10%, but by the mid nineties teenage smoking rates were on the increase, particularly among girls. Between 1996 and 1999, there was a decline in 11 – 15 year olds smoking regularly. ⁶ The reduction in smoking prevalence occurred mainly among 14-15 year olds. In 1998, the government set a target to reduce the prevalence of regular smoking among young people aged 11-15 from a baseline of 13% in 1996 to 11% by 2005 and 9% or less by 2010. Results from the 2006 survey show no change in smoking prevalence since 2003. ⁷ As in previous years, girls are more likely to be regular smokers than boys. The proportion of regular smokers increases sharply with age: 1% of 11 year olds smoke regularly compared with 20% of 15-year olds. ⁷

Year	1982	1986	1988	1990	1992	1994	1996	1998	2000	2002	2005	2006
Boys	24	18	17	25	21	26	28	19	21	21	16	16
Girls	25	27	22	25	25	30	33	29	26	26	25	24
Total	25	22	20	25	23	28	30	24	23	23	20	20

Percentage of 15-year old regular smokers, England

What factors influence children to start smoking?

Children are more likely to smoke if one or both of their parents smoke and parents' approval or disapproval of the habit is also a critical factor. ⁸ A Dutch study revealed that adolescents with both parents smoking were four times more likely to be a smoker than their peers whose parents had never smoked. ⁹ The same study also found that parental cessation whilst their children were young reduced the likelihood of adolescent smoking. Numerous studies have shown that most young smokers are also influenced by their friends' and older siblings' smoking habits. ⁸ Other influences include tobacco advertising which fosters positive attitudes towards smoking and increases the likelihood of initiation. ¹⁰ Some studies suggest that teenagers may also be influenced by viewing smoking in films. ^{11 12}

Smoking and children's health

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. ⁸ Consequently, young smokers take more time off school than non-smokers. The earlier children become regular smokers and persist in the habit as adults, the greater the risk of

developing lung cancer or heart disease. Smokers are also less fit than non-smokers: the performance in a half marathon of a smoker of 20 cigarettes a day is that of a non-smoker 12 years older. [8](#)

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. [13](#) Bronchitis, pneumonia, asthma and other chronic respiratory illnesses are significantly more common in infants and children who have one or two smoking parents. [14](#) Children of parents who smoke during the child's early life run a higher risk of cancer in adulthood [15](#) and the larger the number of smokers in a household, the greater the cancer risk to non-smokers in the family. For a more detailed overview of the health impacts of passive smoking on children see the ASH briefing: 'Passive smoking: the impact on children'. [\[View text\]](#)

Addiction

Children who experiment with cigarettes quickly become addicted to the nicotine in tobacco. A MORI survey of children aged 11 to 16 years found that teenagers have similar levels of nicotine dependence as adults, with one third of those who smoke one or more cigarettes a week lighting up their first cigarette within 30 minutes of waking up and one in twelve lighting up within the first 5 minutes. [16](#) In 2004, 66% of smokers aged 11-15 reported that they would find it difficult to go without smoking for a week while 79% thought they would find it difficult to give up altogether. [2](#) One US study found that smoking just one cigarette in early childhood doubled the chance of a teenager becoming a regular smoker by the age of 17. [17](#) During periods of abstinence, young people experience withdrawal symptoms similar to the kind experienced by adult smokers. [18](#)

Smoking Prevention

Since the 1970s, health education including information about the health effects of smoking, has been included in the curricula of most primary and secondary schools in Great Britain. 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. [19](#) High prices can deter children from smoking, since young people do not possess a large disposable income. In Canada, when cigarette prices were raised dramatically in the 1980s and the early 1990s youth consumption of tobacco plummeted by 60%. [20](#) 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. [21](#)

Children, smoking and the law

Since 1908, and currently under the Children and Young Persons (Protection from Tobacco) Act 1991, it has been illegal to sell any tobacco product to anyone below the age of 16. The Act increased the maximum fines for retailers found guilty of selling cigarettes to children to £2,500 and prohibited the sale of single cigarettes. From 1 October 2007, the legal age for the purchase of tobacco in England and Wales will rise to 18. The amendment is designed to make it more difficult for young teenagers to obtain cigarettes, since, despite the law, children still succeed in buying tobacco from shops and vending machines. In 2004, 66% of 11-15 year olds smokers reported that they bought their cigarettes from a shop, with older teenagers being much more likely to obtain their cigarettes from shops than younger children: 78% of 15 year olds compared with 28% of those aged 11-12. [2](#) During 2005 there were 89 prosecutions in England and Wales for underage tobacco sales, with 70 defendants being found guilty and 56 fined. [22](#)

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. [23](#) Successful efforts to limit underage access to tobacco require a combination of approaches that tackle the problem comprehensively.

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