

**2006-2007
Smoking Statistics
and Trends
in Canadian
Students**



Funding for this project was provided by:



Health Canada Santé Canada

www.yss.uwaterloo.ca

National Feedback Report

The *Youth Smoking Survey* is a Health Canada sponsored national survey of students in grades 5 through 12. School-level feedback reports were made available to all participating schools. This report provides national data based on the most recent survey (2006-07). This report also provides the most relevant and up-to-date literature and ideas on appropriate programs and services.

This survey was conducted by the Population Health Research Group at the University of Waterloo in collaboration with provincial partners.

Please note that in some cases results in table columns or rows and graphs may not add to 100% due to rounding.

We do encourage organizations to partner with local health and voluntary organizations to take action on the findings reported here.

For more information on this report, or the research project associated with it, please contact:

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The Issue

Smoking is a School Issue

- Students who take up smoking show a decrease in academic achievement and motivation.¹
- Smoking is associated with an increased risk of dropping out of high school; smoking is more predictive of dropping out than marijuana use or alcohol use.²
- Starting smoking at an early age is predictive of a number of other risk behaviours; these include fighting, and drug use.³

Smoking is a Student Issue

- 85 percent of current smokers start smoking by the age of 19.⁴
- The average age at which students smoke their first whole cigarette is 11.⁵
- What starts as a bid for independence quickly becomes dependence on tobacco. Only 5% of students who smoke think that they will be smoking in 5 years; 5 years later, 80% of them smoke heavily.⁶

Smoking is a Community Issue

- 22% of all deaths (or approximately 45,200 deaths) in Canada are attributable to smoking.^{7, 8} Smoking causes 4 times as many deaths as car accidents, suicides, homicides, and AIDS combined.⁹

Web Resources

Health Canada:
www.hc-sc.gc.ca/hl-vs/tobac-tabac/index_e.html

Lung Association:
www.lung.ca

Canadian Cancer Society:
www.cancer.ca

Physicians for a Smoke-Free Canada:
www.smoke-free.ca

Canadian Council for Tobacco Control:
www.cctc.ca

Schools Can Make a Difference...

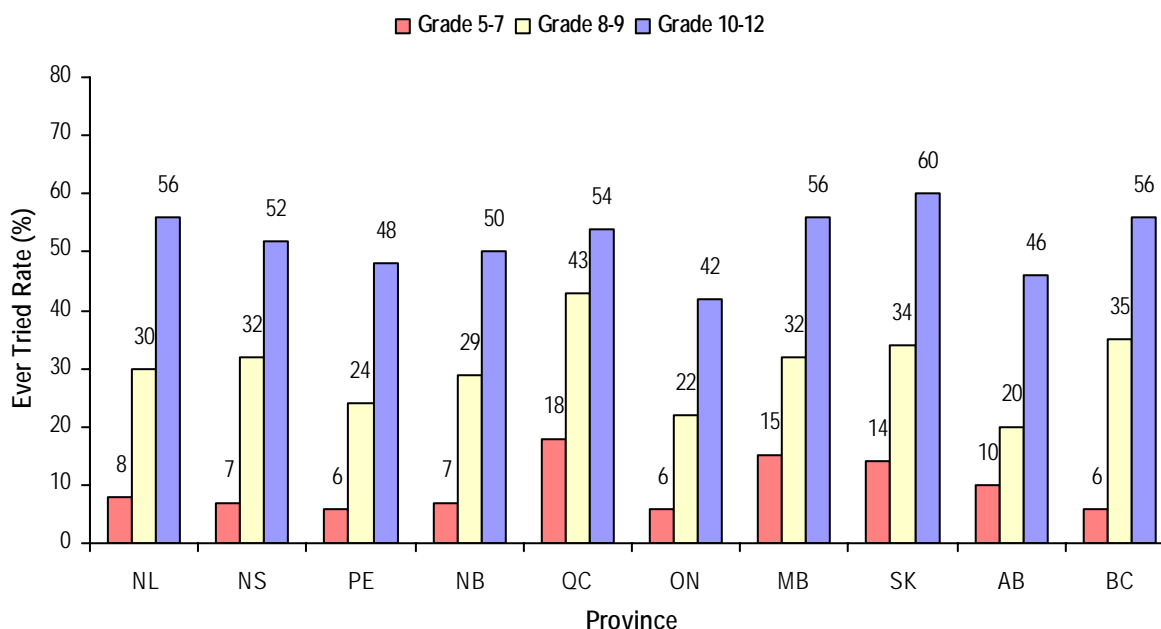
School efforts linked with those of local health and community agencies can reduce problems related to youth smoking. Research has shown that successful efforts include education (coordinated curriculum), a supportive environment (e.g., clear, enforced rules about smoking, chances for youth engagement), services (e.g., cessation), and students who know people care. See the *Youth Smoking Survey* website (www.yss.uwaterloo.ca), for a list of useful resources and websites.

Smoking by Province

Eight percent of Canadian students in grades 5 to 12 report that they are smokers. Overall, 30% of students surveyed report that they have “ever tried” smoking even just a few puffs. Fewer students report having smoked a whole cigarette (17%).

The Youth Smoking Survey (YSS) was first conducted in 1994 and repeated in 2002 and 2004. To help you get an idea of the overall prevalence of students who have “ever tried” smoking, the graph below displays provincial results from the 2006-07 Youth Smoking Survey, by the grade.

Students Who Have “Ever Tried” Smoking



Schools Can Make a Difference...

Early adolescence is a critical time for preventing smoking. Emerging evidence indicates that it is especially important to prevent or even delay smoking uptake in this age group as there are long-term health risks (e.g., lung cancer, breast cancer) associated with smoking during the process of physical maturation. Your school’s efforts to protect the future health of students can take at least two forms: (1) Equip students now with the necessary refusal skills and attitudes to stay smoke-free. (2) Provide an environment that helps students make the smoke-free choice.

How Susceptible Students are to Smoking

There is a relatively small window in life when one is susceptible to becoming a smoker. Most established smokers start experimenting with cigarettes between the ages of 10 and 18.¹¹ Once one becomes dependent it can be very difficult to quit. Therefore, it is important to intervene before students become dependent.

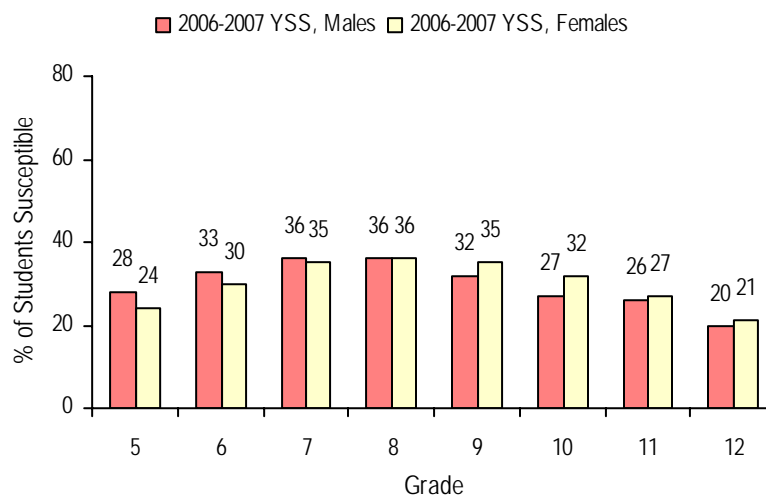
Quick Facts

The younger one starts to smoke the more likely one is to become strongly dependent on nicotine.¹⁰

Students who feel strongly that they will not try smoking in the future and who feel they can resist peer pressure to smoke are less likely to begin smoking in the future.

Students across Canada who have never smoked were asked two questions about their intentions to remain smoke-free, “Do you think in the future you might try smoking cigarettes?” and “At any time during the next year do you think you will smoke a cigarette?” We also asked one question relating to their confidence in resisting peer pressure, “If one of your best friends were to offer you a cigarette, would you smoke it?” From their answers to these questions we determined that 30% of the students who have never smoked a cigarette have low-confidence in their ability to remain smoke-free in the future, and are thus at high risk to begin smoking. The chart above displays national data from the 2006-07 YSS on the percent of students, by grade and gender, who were deemed susceptible to smoking.

Susceptibility to Smoking of Students Who Have Never Smoked by Grade and Gender



Schools Can Make a Difference...

Many experts agree that there are stages to smoking uptake including: (1) a preparation phase in which intentions and expectations regarding smoking shift, (2) early experimentation, (3) regular but non-daily smoking and (4) established smoking. Students whose attitudes and beliefs predispose them to smoking may soon start to experiment, or may have already begun. Even when smoking rates are low, smoking control efforts should focus on preventing students from becoming susceptible, preventing susceptible students from experimenting, as well as encouraging experimenters and established smokers to quit.

Peer and Family Influences

Students take up smoking for a variety of reasons. Peers and family members influence youth smoking. These influences are sometimes direct (peer pressure) but more often indirect (modelling). We asked students a series of questions relating to peers and family.

All students were asked, “*How many of your closest friends smoke cigarettes?*” 95% of smokers have friends who smoke compared to 28% of non-smokers. Non-smokers who have friends who smoke are the most susceptible to becoming smokers themselves.

Number of Friends who Smoke	% of Students Responding	
	Smokers	Non-smokers
0	5	72
1 or 2	15	17
3 or more	80	11

Students were asked, “*Do any of your parents, step-parents, or guardians smoke cigarettes?*” and “*Do any of your brothers or sisters smoke cigarettes?*” Students who have family members who smoke face a higher risk of becoming smokers themselves.

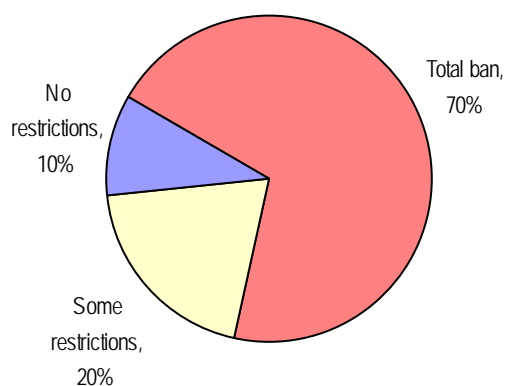
Family Members who Smoke	% of Students Responding “Yes”	
	Smokers	Non-smokers
Parents, step-parents, or guardians	67	40
Sibling(s)	51	14

Quick Facts

Even when parents themselves smoke, banning smoking in the home and speaking against smoking reduces the likelihood that youth will smoke.¹²

Second-hand smoke is a health concern if a family member smokes in the home and/or car. 22% of students reported that at least one person smoked on a daily basis inside their home. As well, 28% of students rode in a car with someone smoking during the week preceding the survey. We asked students about smoking rules at home and 30% reported that there were no restrictions or only some restrictions regarding smoking in the home.

Household Rules for Smoking

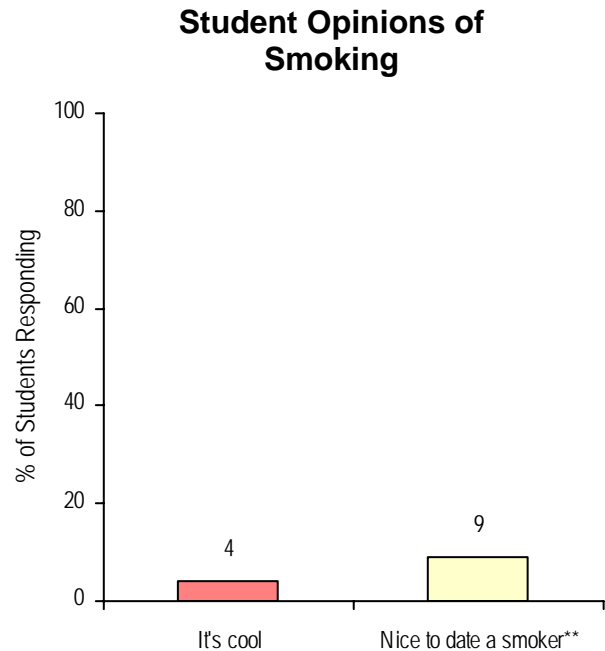
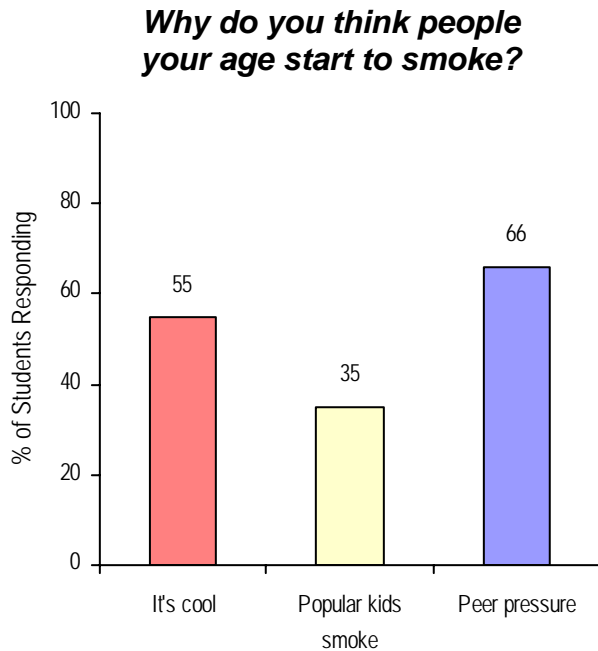


Schools Can Make a Difference...

Smoking often occurs in social situations among peers. Programs that help students to develop skills for resisting social influences can be helpful. The most successful programs teach refusal skills (through direct instruction, modelling, rehearsal, and reinforcement) and advocacy.¹³

Perceptions and Reality

We asked students, “*Why do you think people your age start to smoke?*” and offered a choice of responses. Many students believe smoking uptake is associated with peer pressure, the desire to seem popular and the perception that smoking is cool. This suggests that students perceive that others see social advantages to smoking. It is interesting to contrast this with how students themselves report their view of smoking. The charts below contrast the percentage of students who perceive their peers start smoking for social advantage with how students actually view smoking.



** Students were asked, “Is it nicer to date people who do not smoke?”; 9% responded, “no.”

Students often underestimate how supportive their peers are of tobacco control initiatives. For example, 88% of students responded “no” when asked if smoking should be allowed around kids at home. Similarly, 88% thought smoking should not be allowed around kids in cars.

Schools Can Make a Difference...

Correcting misperceptions can alter students' attitudes about smoking, especially those related to the creation of “peer pressure.” Communicating these results in the school newspaper, on a bulletin board, in an assembly or in other ways may help to show students that smoking is not as well regarded or common as they think. Remember that repeated long-term exposure to these new ideas will be necessary to change attitudes and thoughts about smoking.

What Students Know & Think about Smoking

Tobacco Education at School, Community, & Home

Tobacco control education is necessary and important. Knowledge about smoking is most often learned at school and it is at school that attitudes are often developed.

Home is another important source of information; 77% of students reported that their parents, step-parents, or guardians had talked to them about not smoking.

Students' Knowledge About the Health Implications of Smoking

Students reported the following knowledge about the health implications of tobacco use:

- 89% of students correctly indicated that smoking causes lung cancer
- 69% of students know that smoking causes heart problems
- 62% of students correctly reported that smoking triggers asthma
- 66% recognize that smoking reduces life expectancy
- 70% know you do not have to smoke for many years to harm your health
- 87% know that smoking is harmful to non-smokers
- 87% know that smoking is addictive
- 46% recognized that quitting smoking can reduce health damage

Quick Facts from the 2004-2005 YSS

Out of all youth who have "ever tried" smoking cigarettes, 50% have tried marijuana, whereas amongst those who have never tried smoking cigarettes, only 5% have tried marijuana. Similarly, students who have tried smoking are more likely to have tried alcohol than those who have never smoked (91% vs. 53%).

Schools Can Make a Difference...

Cigarette advertising has an adverse influence on youth. Pervasive in-store cigarette advertising can distort youths' perceptions regarding the use, popularity and availability of cigarettes. Research has found that youth who become familiar with cigarette advertising and packaging in stores where they frequently visit are at an increased risk for smoking, as the familiarity can dampen the health consequences associated with smoking. Cigarette availability and advertising in stores near schools suggests to the students that smoking is a widespread and a socially acceptable behaviour in the community.¹⁴ It is important for schools to promote a healthy school environment where non-smoking is the norm and develop a comprehensive health education curriculum, including training to resist social pressure from peers and tobacco industry.

Exposing the Myths about Smoking

While many students are aware of the long-term health problems associated with smoking, this knowledge is not enough to prevent smoking.¹⁵ Some adolescents believe that smoking can benefit them in the short-term. Students across Canada were asked about some common myths about smoking.

- **Myth:** smoking helps people to relax (37% of students believe this and 35% “don’t know”).
Fact: nicotine is a stimulant and smoking causes rises in pulse rate and blood pressure. Considering the short and long term social and health consequences of smoking, smoking is likely to *increase* overall stress levels.
- **Myth:** smoking can help people stay slim (20% believe this and 37% “don’t know”).
Fact: research has shown that smokers gain as much weight as non-smokers in the same age range.¹⁶ This common misperception may especially influence young females to consider smoking.
- **Myth:** smokers can quit anytime (25% believe this and 16% “don’t know”).
Fact: nicotine is highly addictive and quitting is often very difficult even for youth and adults who are motivated to quit.
- **Myth:** smoking helps relieve boredom (18% of students believe this and 25% “don’t know”).
Fact: there are much healthier activities that are truly able to reduce boredom.

Quick Facts

from the 2004-2005 YSS

Youth who have “ever tried” smoking are more likely than those who have “never tried” to believe that smoking:

- helps you to stay slim (25% vs. 16%)
- helps relieve boredom (22% vs. 10%)
- is cool (7% vs. 1%)

Schools Can Make a Difference...

... by addressing the social influences to smoke.

- Correct misconceptions about the benefits of smoking and emphasize the short-term downsides and negative social consequences of smoking.
- Consider focusing on media literacy and consumer savvy. Several successful youth led campaigns have focused on exposing tobacco industry tactics for attracting youth. See www.smokefreeottawa.com/exposedev and www.thetruth.com for examples of innovative programs.
- Provide an environment where smoking is clearly not acceptable, where smoking by older students is not visible and not convenient. Students are especially influenced by and often find a source of cigarettes in older peers.
- Encourage school staff and families to promote a non-smoking norm even if they are smokers themselves.

The School Environment

The school environment plays an important role in helping students stay smoke-free. Research shows that school-level factors influence smoking rates independent of family, economic and community factors.¹⁷ Schools are uniquely positioned to influence the health and well-being of students, ideally in partnership with home and community, but even independently.

One of the most obvious ways schools can support students to stay smoke-free is through tobacco control education. Considerable research has been done to determine the elements of successful smoking prevention curricula. Compare the curriculum and teaching time devoted to smoking prevention in your school with the elements in the box below and consider ways to improve or maintain your programs.

Quick Facts

Youth who participate in higher levels of physical activity are less likely to smoke, or they smoke fewer cigarettes. Team sport participation seems to be especially associated with decreased likelihood of smoking. Some schools have students sign contracts to not smoke while they are representing the school in a sporting event. Increasingly, sports organizations and athletic organizations are taking steps to implement tobacco-free sports policies and initiatives.

School-based smoking prevention programs should:

- include at least 10 sessions devoted specifically to tobacco use prevention
- be delivered in at least two school years (sessions may be blocked or distributed over the year)
- begin immediately before the age when uptake of tobacco is highest, usually just before the transition to middle or secondary school
- focus on short-term health and social consequences (e.g., shortness of breath and smelly clothes)
- include training in refusal skills including modelling and practice of resistance skills
- include information on social influences on tobacco use especially peer, parent and media and demonstrate that smoking is not normative for adolescents
- involve students in the delivery of the program (teacher led with student involvement works best)
- include adequate teacher training and a high level of teacher commitment to the program

Source: Health Canada and the Canadian Cancer Society -- efficacy criteria used in the assessment of smoking prevention programs.¹⁸

School Connectedness

In addition to tobacco control education, a sense of connection to the school and school rules can support students to make healthy choices. Students who feel an attachment to their school, and who consider their teachers to be supportive, are less likely to smoke or engage in other unhealthy or risky behaviours.^{19,20} Activities to build a positive school community are helpful in reducing and preventing smoking. Here is what Canadian students said about their school environment:

<i>How strongly do you agree or disagree with the following statements?</i>	Percentage of Students Responding			
	Strongly Agree	Agree	Disagree	Strongly Disagree
I feel close to people at my school.	26	58	13	3
I feel I am part of my school.	32	52	12	4
I am happy to be at my school.	33	48	13	6
I feel the teachers at my school treat me fairly.	30	54	11	5
I feel safe in my school.	37	50	9	4

Smoking Rules at School

We asked students about their perceptions of school rules on smoking:

At your school, what are the rules about smoking tobacco?

- 4% I do not think there are any rules
- 12% Smoking is allowed in some areas on school property
- 65% Smoking is not allowed anywhere on school property
- 19% I do not know

Schools Can Make a Difference...

Increasing evidence demonstrates that when youth feel connected to their school and cared for by those at their school, they are less likely to use substances.²¹ As well, youth who experience a greater connectedness to their teachers are less likely to start smoking.²² Ways in which your school can create a sense of school connectedness include supporting extracurricular activities, providing opportunities for student involvement in peer-led activities and buddy programs, advocating a positive classroom atmosphere, and encouraging teacher mentorship. We would like to know about activities in your school that make youth feel more connected to their school. Visit www.yss.uwaterloo.ca, click on *knowledge exchange*, and share your ideas!

Other Student Findings

The *Youth Smoking Survey* includes many other questions directly or indirectly related to smoking. Below is a sample of some additional findings from across Canada.

Self Esteem

We asked students a series of questions about how they feel about themselves. The percentage of students who reported that the following statements were “true” or “mostly true” is listed:

- *In general, I like the way I am* (80%)
- *When I do something, I do it well* (73%)
- *I like the way I look* (72%)

Spending Money

We asked students about the amount of money they usually have each week to spend on themselves or to save. Here’s how they responded:

Amount of money per week	% of Students Responding
\$0	19
\$1 - 10	28
\$11 - 20	18
\$21 or more	35

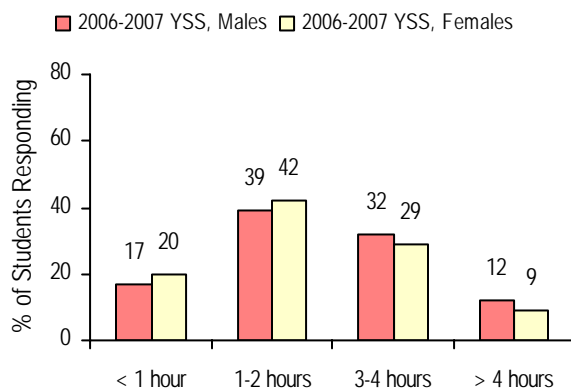
Television Viewing

Watching a lot of television has been linked to increases in smoking uptake in youth.²³ TV is also incompatible with healthier, more active choices for leisure time activities. 41% of students reported that they typically watch more than 2 hours of television per day.

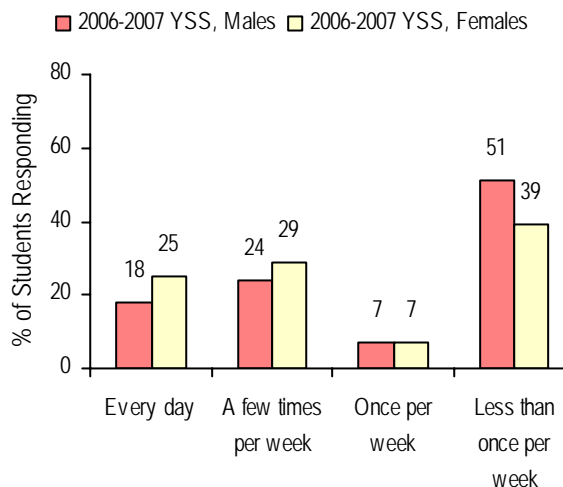
Reading for Leisure

Leisure time reading has well known benefits to students. We asked students how often they read for fun (not for school). The chart below shows how students responded.

Hours Spent Watching TV per Day, by Gender



How Often Students Read for Leisure, by Gender



Truancy/Absenteeism

Students across Canada were asked how many classes they skipped when they were not supposed to in the last 4 weeks. The table to the right shows the percentage of students who reported skipping classes by the number of classes skipped.

Number of classes skipped	% of Students Responding
0 classes	72
1 to 5 classes	22
6 to 10 classes	3
11 or more classes	2

Quitting Smoking

Quitting smoking is not an easy process for adults or for youth. Many smokers would like to quit smoking cigarettes. In Canada, 76% of smokers believe they would be able to quit smoking cigarettes if they wanted to; however, 73% have tried to quit *at least* once, and failed.

- 24% have tried to quit once
- 50% have tried to quit 2 or more times

Quick Facts

The *Canadian Tobacco Use Monitoring Survey (CTUMS)* indicates that 16% of youth aged 15-19 in Ontario smoke.²⁴ Considering the majority of smokers take up smoking in their teenage years, actions to prevent or even delay the onset of smoking will help keep students at your school healthy in the short and long-term.²⁵

Other Tobacco Products

Some students have tried tobacco products other than just cigarettes. The following list provides the percentage of students who report ever trying tobacco products other than just cigarettes.

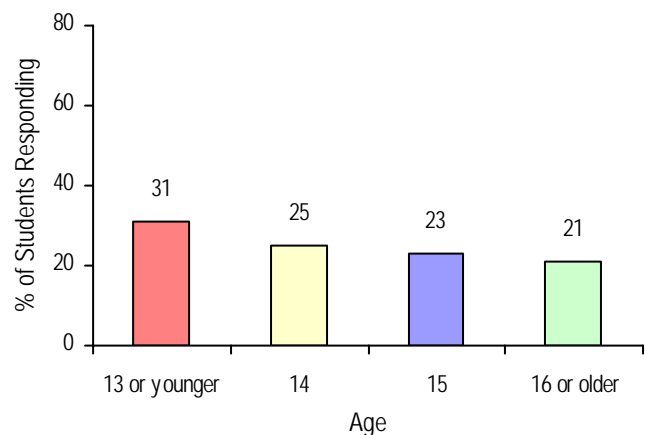
- 4% Pipe tobacco
- 19% Cigars, cigarillos, or little cigars (plain or flavoured)
- 5% Chewing tobacco
- 3% Other tobacco products (e.g., bidis, nasal snuff, oral snuff, etc.)

Alcohol

Students in grades 7 and above were asked about alcohol use. In Canada, 71% of students reported having had a drink of alcohol that was more than just a sip. The ages at which these students first had five drinks or more of alcohol on one occasion are shown in the chart to the right.

These students were also asked how often they drank alcohol in the last 12 months. In Canada, 40% reported drinking less than once a month; 14% drank once per month; 24% drank 2 or 3 times a month; and 21% reported drinking once a week or more often.

Age When Students First Had 5 or More Drinks of Alcohol on One Occasion

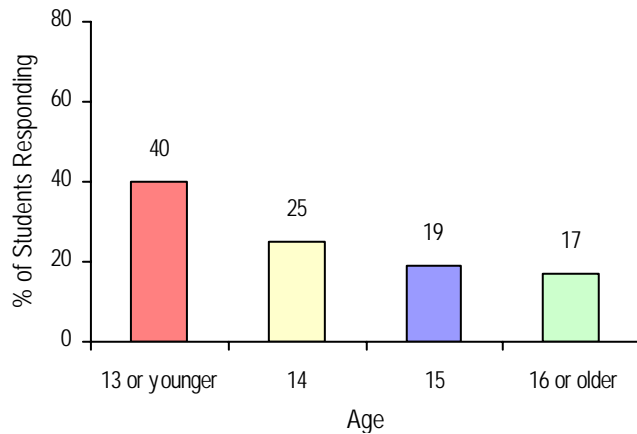


Note: Students could not report trying alcohol at an age older than their chronological age.

Marijuana

Students in grades 7 and above were asked about marijuana use. Across Canada, 30% of students reported having ever used or tried marijuana. The ages at which these students first used marijuana were as follows:

Age When Students First Used Marijuana



Note: Students could not report trying marijuana at an age older than their chronological age.

Quick Facts

Findings from the 2004 *Canadian Addictions Survey* indicate that "tobacco use among youth aged 15-19 is a powerful and effective marker of other substance use and a good indication that these youth are engaging in other risky behaviours such as hazardous drinking."²⁶

Students who have used marijuana were also asked how often they used it in the last 12 months. In Canada, 41% reported using marijuana 1 to 5 times; 18% reported using it 6 to 19 times; 26% reported using it 20 or more times in the past 12 months.

Across Canada, 9% of students who have not already tried marijuana said they would "probably" or "definitely" try it in the future. As well, 49% of students said it would be "easy" to get marijuana if they wanted to use it.

More About this Report:

The Population Health Research Group at the University of Waterloo produces individual school reports for each of the schools participating in the *Youth Smoking Survey*. However, since our ethics guidelines require that we maintain the anonymity of all participants, we are unable to provide a school specific report for you. Because of the low number of participants at your school, we could not guarantee their anonymity. As an alternative, we are providing this report of national data collected in the most recent survey (2006-07).

It is our intention to produce useable reports at a low cost. To do this we have sought the input of educators, researchers and public health practitioners. We have created a largely automated system with quality control and editing procedures to ensure that the data you receive are accurate and can be returned to your school in a timely manner.

We value your input and would welcome your feedback on this report and/or on your school's participation in this project. Please contact us on the web at www.yss.uwaterloo.ca or by e-mail at yss@healthy.uwaterloo.ca.

THANK YOU FOR YOUR PARTICIPATION.

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