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HEALTH BEHAVIOUR IN
SCHOOL-AGED CHILDREN

WORLD HEALTH ORGANIZATION
COLLABORATIVE CROSS-NATIONAL STUDY



SELF-REPORTED EXPOSURE TO CIGARETTE PACK WARNINGS IN SCHOOL AGED CHILDREN AND PERCEPTIONS OF SMOKING RELATED HARM

Presenting author: Eimear Keane

**Co-authors: Michal Molcho, Colette Kelly, Fenton Howell,
Saoirse Nic Gabhainn**



**OÉ Gaillimh
NUI Galway**

BACKGROUND

- Internationally, reducing the prevalence of smoking is a priority
- Warnings placed on cigarette packs is one form of health communication to educate the population regarding the risks of smoking.

Aims

- To describe self-reported levels of (1) perceptions of smoking related harm and (2) exposure to cigarette packs/warnings
- To examine the association between exposure to cigarette packs/warnings and perceptions of smoking related harm whilst controlling for demographic factors and smoking status





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HBSC METHODOLOGY

HBSC is an international alliance of over 400 adolescent health experts based in 44 countries who collaborate to develop and execute the HBSC survey.

Every 4 years, the HBSC network collects data on 11, 13 and 15 year olds' health and well-being, social environments and health behaviours.

Data are collected through school-based questionnaires; minimum of 1,500 students of each age group per country. The 2013-2014 international dataset includes 219,810 students.

To date, more than 1 million young people have participated in this survey.

The findings from HBSC are used at both a national and international level to:

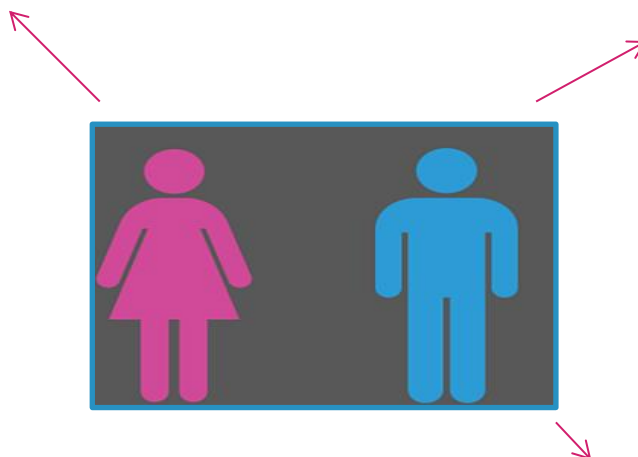
- gain new insight into young people's health and well-being
- inform policy and practice to improve young people's lives

VARIABLES OF INTEREST

RISK PERCEPTION

1. Smoking causes lung cancer
2. Smoking increases the risk of having a heart attack
3. Smoking is addictive
4. Tobacco smoke is toxic
5. Smoking is the leading cause of death
6. Smoking clogs your arteries
7. Smoking doubles your risk of stroke
8. Smoking causes wrinkling and early aging
9. Smoking can cause a slow painful death
10. Smokers die young

Agree/ Disagree



SOCIO- DEMOGRAPHICS

Age

Gender

Social class

CURRENT SMOKING STATUS

LEVEL OF EXPOSURE

When was the last time you saw or looked at a cigarette pack:

- (1) In the last 6 months
- (2) More than 6 months ago/never

How often in the last 6 months have you read the warnings on a cigarette pack:

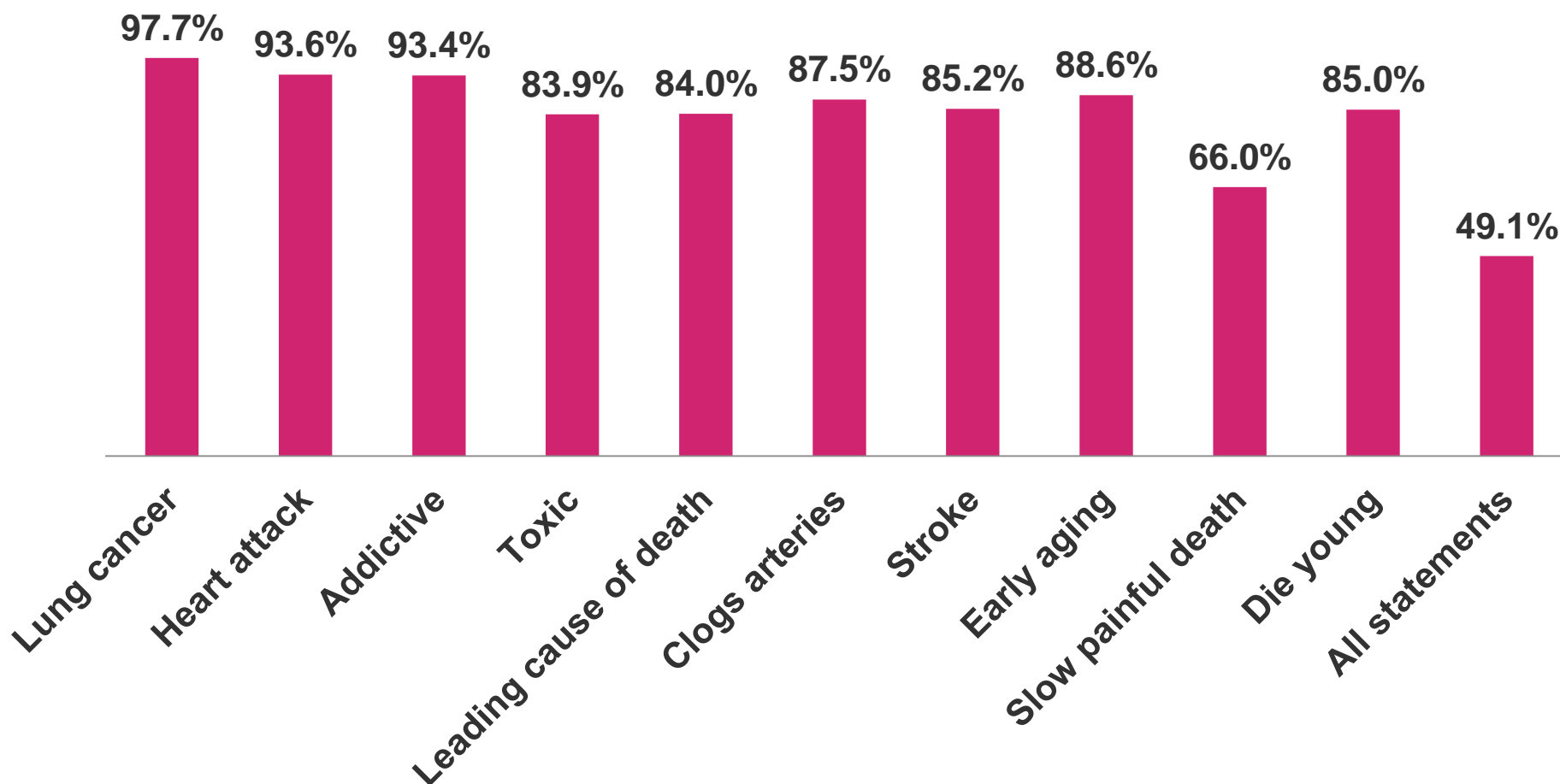
- (1) Never
- (2) Infrequently
- (3) Frequently

RESULTS: 5047 children aged 14-17 years

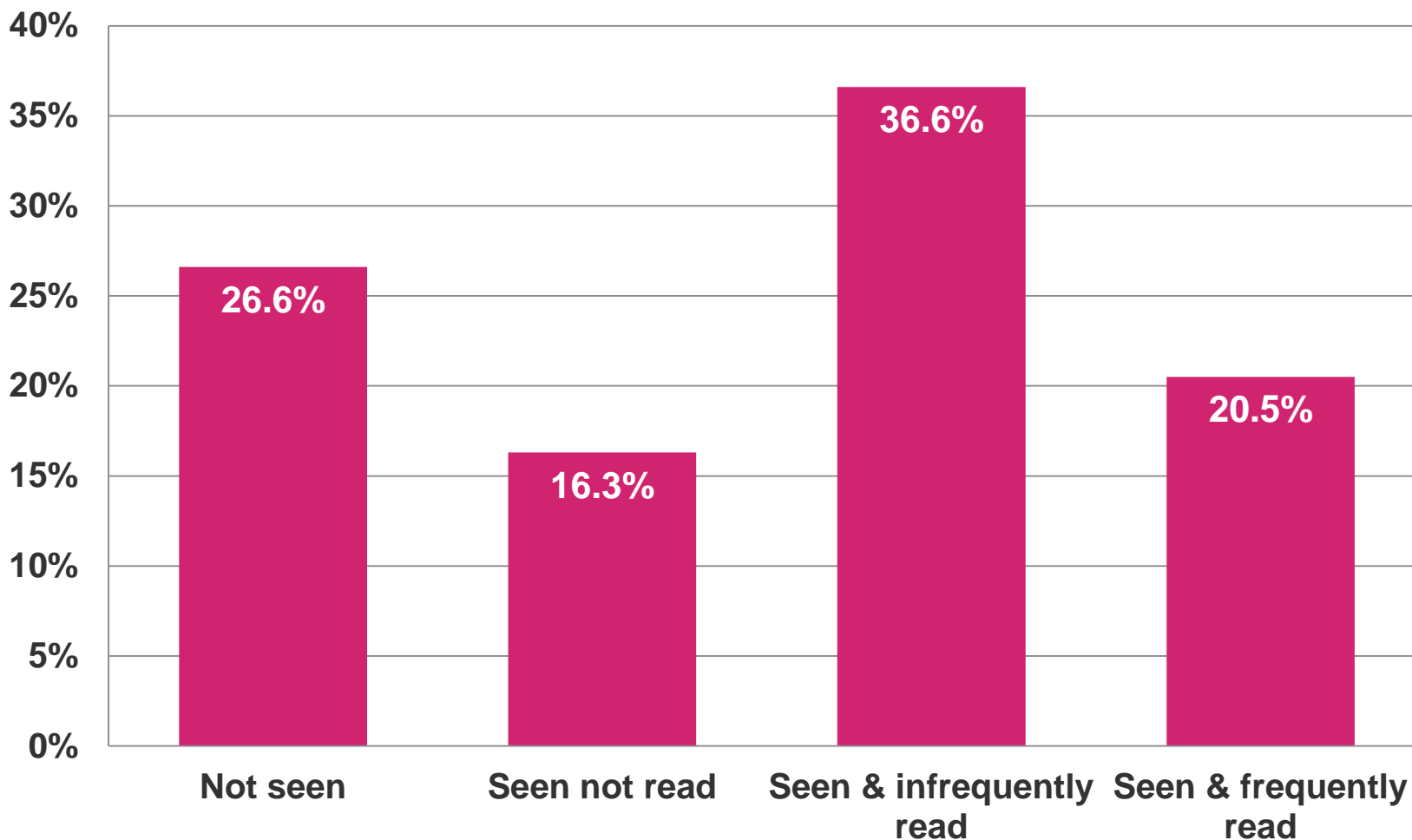
PREVALENCE OF SMOKING: 12.2%



Percentage of children who agreed with each risk perception statement



WHO HAS SEEN A CIGARETTE PACK IN THE LAST 6 MONTHS?



WHO HAS SEEN A CIGARETTE PACK IN THE LAST 6 MONTHS?



		Not seen	Seen not read	Seen & infrequently read	Seen & frequently read	P-value
Age group	14-15 years	28.9%	16.4%	34.8%	19.9%	0.000
	16-17 years	23.6%	16.3%	39.0%	21.2%	
Gender	Boys	25.7%	18.1%	36.1%	20.1%	0.020
	Girls	27.2%	15.0%	37.1%	20.8%	
Social class	SC 1-2	29.8%	16.8%	34.4%	19.0%	0.000
	SC 3-4	23.6%	16.2%	38.9%	21.3%	
	SC 5-6	22.4%	14.9%	41.0%	21.8%	

FINAL LOGISTIC REGRESSION MODELS CONTROLLING FOR DEMOGRAPHIC FACTORS AND SMOKING STATUS



- Children who reported lower levels of exposure to cigarette packs and cigarette pack warnings were less like to agree to the statements
 - tobacco smoke is toxic
 - smoking causes wrinkling and early aging
 - smoking can cause a slow painful death
 - all statements.
- Non-smokers had a significantly increased odds of agreeing to each of the individual risk perception statements when compared to smokers.
- Non-smokers were 73% more likely to agree to all ten statement than smokers (1.73, 95% CI 1.30-2.30).

FINAL LOGISTIC REGRESSION MODELS CONTROLLING FOR DEMOGRAPHIC FACTORS AND SMOKING STATUS



			OR (95% CI)
Agreed with all statements	Level of exposure	Not seen	1.07 (0.85 – 1.35)
		Seen not read	0.80 (0.67 – 0.95)
		Seen & infrequently read	0.77 (0.65 – 0.92)
		Seen & frequently read	ref
	Smoking status	Smokers	ref
		Non-smokers	1.73 (1.30 – 2.30)

- This study found that a large proportion of children are exposure to cigarette packs but not all children read the warnings.
- Children in this study were not fully informed about the risks of smoking, especially those who currently smoke.
- However, knowledge and smoking behaviour are modifiable.
- Thus, further health education is necessary to fully educate our children regarding the risks of smoking.