



**hbsc**  
HEALTH BEHAVIOUR IN  
SCHOOL-AGED CHILDREN  
WORLD HEALTH ORGANIZATION  
COLLABORATIVE CROSS-NATIONAL STUDY

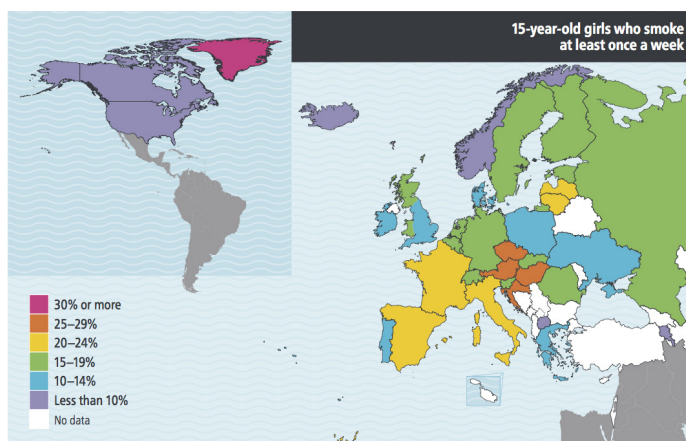
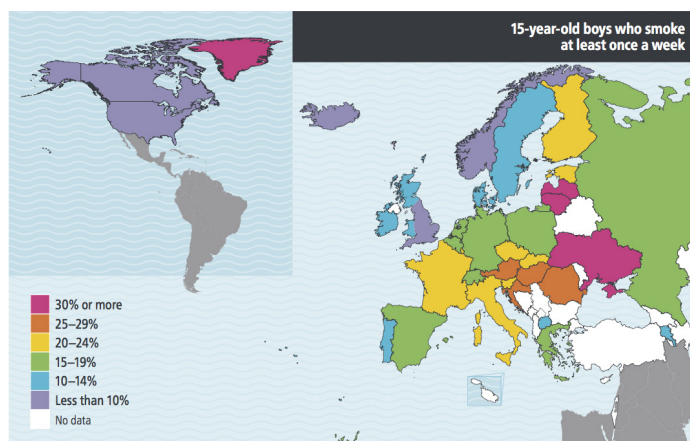
# WORLD NO TOBACCO DAY 2014

Tobacco is the leading cause of preventable death in the world, imposing a large burden on societies. Smoking behaviour is typically established during adolescence; most adult smokers had their first cigarette or were already addicted to nicotine by age 18. The duration of smoking and number of cigarettes required to establish nicotine addiction are lower for adolescents than adults, so addiction is established more quickly.

In 2010 the Health Behaviour in School-Aged Children (HBSC) study reported that across Europe and North America, 18% of 15 year olds children smoked at least once a week. This figure varied dramatically across countries, with the highest smoking prevalence found among Greenlandic girls (61%) and the lowest among Armenian girls (1%). Among boys, the highest prevalence of smoking was found among Greenlandic boys (53%) and the lowest among Canadian boys (8%). In most countries it is clear that the gender gap in smoking that was historically reported is disappearing, with girls in some countries smoking more than boys.

Marked country differences are also found in relation to early initiation (smoking at the age of 13 or younger) with 63% of Estonian boys reporting early smoking initiation compared to just 4% of Armenia girls.

While adolescent smoking is still of a concern, in most of Europe smoking is declining. Figures 1 and 2 demonstrate a consistent decline in adolescent smoking in Northern and Western Europe between 1998 and 2006 among both genders, with the level of smoking remaining consistent between 2006 and 2010. A similar trend is demonstrated in Southern Europe, although with a slight increase between 2006 and 2010, making the smoking prevalence in 2010 in this region comparable to that of Northern and Western Europe. However, smoking in Eastern Europe presents different trends with an increase between 1998 – 2002, decrease between 2002-2006 and a slight increase since, resulting in smoking levels in that region that are higher compared to all other regions.



# HBSC key findings factsheet

Regional trends in smoking vary by gender. In Northern and Western Europe, more girls than boys reported daily smoking already in 1998, but in both regions girls' smoking declined dramatically, converging into lower smoking prevalence that are similar to those of boys.

In Southern Europe, a steep increase is evident in girls' smoking between 1998 -2002, with further decline since, resulting in slightly lower prevalence in weekly smoking in 2010 compared to 1998. However, similar trends are not visible in Eastern Europe, with boys' smoking slightly declining and girls' smoking still higher than they were in 1998.

HBSC also aimed to explore inequalities in smoking, with one study reporting educational inequalities are associated with increased risk for daily smoking, and while smoking in Northern and Western Europe is declining, educational disparities are increasing, suggesting that quitting efforts are not effective across all groups in society.

Figure 1: Smoking trends of 15 year olds in Northern Europe

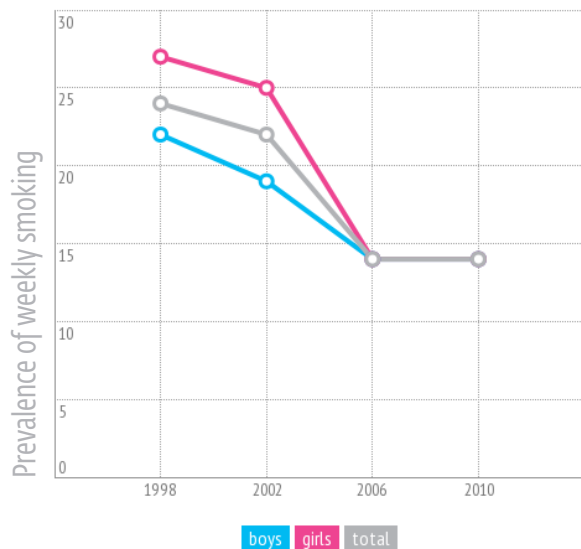


Figure 3: Smoking trends of 15 year olds in Southern Europe

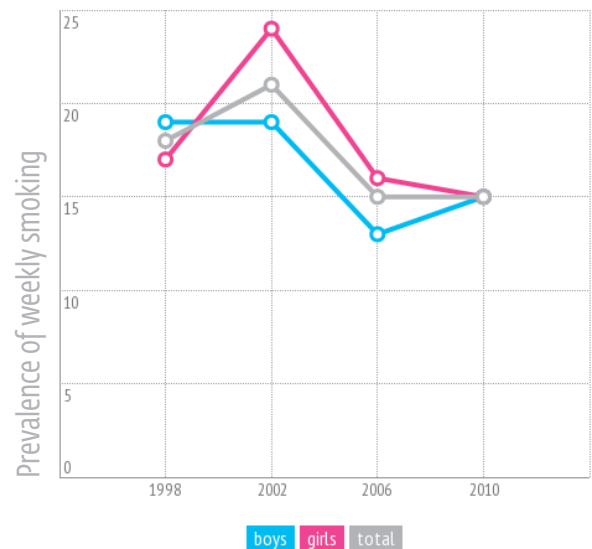


Figure 2: Smoking trends of 15 year olds in Western Europe

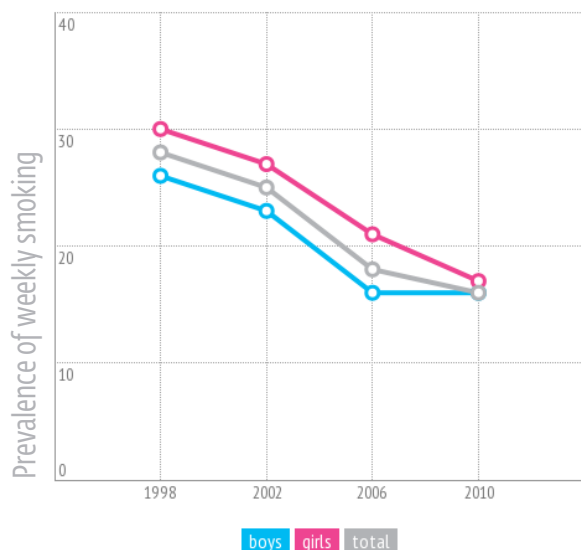
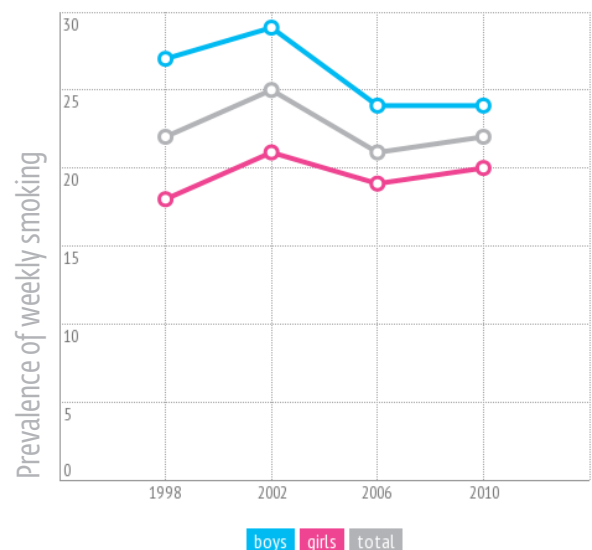


Figure 4: Smoking trends of 15 year olds in Eastern Europe



HBSC is a World Health Organization study on the health and well being of children and adolescents across Europe and North America. The study collects data from children in schools every four years and has been running for 30 years. The next phase of data collection takes place during the current academic year and will include comparable data from over 40 countries.