

# Smoking in girls aged 11-12 years in North Wales

## Final research and scoping report

Kelly Evans, Social Change UK

Executive Summary



## Executive summary

### Introduction

This report was commissioned by Public Health Wales and The North Wales Tobacco Control Alliance to investigate smoking prevalence in 11-12 year old girls and uncover current attitudes and behaviours in this age group to smoking and tobacco use across the North Wales region.

Desk research was conducted first to help inform the primary research stage. We found that although there was a lot of research on youth smoking, very few studies looked at girls in the 11-12 year age group – the age at which many studies suggest girls start to smoke. Prevalence was investigated through the use of postal questionnaires that were sent to all schools in North Wales. This exercise was conducted to help measure the number of 11-12 year old smokers in each county and provide a benchmark for future evaluation.

Following this survey, five focus groups were conducted in areas with higher levels of deprivation and high adult smoking prevalence. These focus groups were designed to explore in depth current knowledge, attitudes, behaviours to smoking. Only 11-12 year old girls took part in the focus groups.

### Main findings

A study found that 12 years was the average age at which children try smoking in Wales [4]. Smoking prevalence in North Wales among 11-16 year old girls is also estimated to be higher than the national average [4].

Our research found that across North Wales, there is a prevalence rate of 2% in 11-12 year old girls. This is consistent with previous estimates for prevalence in this age group. Wrexham had the highest prevalence rate out of all of the areas in North Wales at 5% - more than twice the regional rate.

All participants in the focus groups were aware of a family member that smokes. In the survey of year 7 girls, 38% said that one or more parent smokes. Girls in Wrexham recorded the highest percentage of parents who were smokers (45%). Participants in the focus groups became upset and emotional when they considered the harm to parents and relatives. The opposite view was shared when discussing the impact on strangers with some describing people who smoke as silly, bad and stupid. Many participants laughed at the consequences of smoking on one woman who developed cancer as a result.

The focus groups also found that participants in Wrexham were more likely to know a friend that smokes than in other areas in North Wales. Most girls said that they wouldn't be friends with someone who smoked and if a friend started to smoke they would either help them to quit or isolate them.

All participants had a basic (and in some instances, an advanced) awareness of the health consequences of smoking, but we found that there was a lower understanding and awareness of the effects of second hand smoke. Girls considered the consequences of smoking as unappealing – especially the more superficial consequences such as impact on their appearance.

All of the participants did not identify themselves as children when we carried out this research so discussions on the impact of smoking on children led many to talk about babies and children younger than them. At this age, girls are concerned about body image and weight and many felt that smoking would hinder rather than enhance their appearance. The reason given by participants in the focus groups for why girls their age smoke was to be popular or look cool. In the survey, the girls who admitted to smoking said they did so because it helped with stress, because their friends smoke, it looks cool and because it helps them to maintain or lose weight.

There is a link between girls with low aspiration and smoking (including e-cigarettes). Girls who had ambition to be a dancer, a teacher, an actor or wanted to work with children or pets could not see how smoking fitted with those plans. There was also a link between those girls in this age range who do not take part in activities outside of school and smoking. Girls who went to dance classes and took part in sports did not smoke and felt that it would hinder their performance/enjoyment.

Participants in the Wrexham focus groups had a strong awareness of e-cigarettes and 'vaping'. Most participants were aware of where to purchase them and they are aware that they contain nicotine. When discussing e-cigarettes in Wrexham, most girls said that they had tried them and they were aware of at least five flavours to choose from. Focus groups in Denbighshire and Flintshire were more aware of the health concerns surrounding e-cigarettes compared to those in the Wrexham focus groups.

E-cigarettes are easy to obtain – either from parents or outlets on the high street. Girls have brought or obtained e-cigarettes from shops, friends and parents and even pizza places are selling them with a policy of not selling to under 7's. The girls who had tried e-cigarettes in Flintshire and Denbighshire had tried their parents/ siblings e-cigarette and were less aware of where else they can be purchased.

Participants described e-cigarettes as "just heat". Most participants considered them to be "better" than smoking cigarettes or not as bad. The few participants who thought they were not good for you described seeing or hearing stories about the dangers of e-cigarettes (such as fire and power failure) and this was enough to put them off trying. Some girls after trying cigarettes also felt 'conned' as the flavours did not taste as they had imagined.

Girls who were aware of celebrities who smoke also viewed them in a bad light due to their habit. Most girls who appeared confident in the focus groups said that they would challenge their boyfriend if he started smoking and some said that they wouldn't pick a boy who smoked. The participants also noted that if they found themselves in a relationship with a smoker, they would attempt to discourage them from smoking. Challenging parents however was seen as a lot harder. Most felt that they couldn't challenge their parents or family members with many choosing other techniques to show their disapproval such as snapping cigarettes, hiding them or putting them in the bin.

The research also found that shock tactics worked on 11-12 year old girls as an attempt to put them off smoking - they were shocked by some previous adverts surrounding the health consequences of smoking. But campaigns that worked best needed to be more personal and worked better when they could see themselves or a family member in the position of harm.

## Recommendations

Our recommendations to the North Wales Public Health team and their partners include:

- Setting up a multi-disciplinary project group to manage and evaluate pilot work in Wrexham;
- Undertake a comprehensive review to see how each county in North Wales has implemented NICE guidance on school based interventions to prevent the uptake of smoking and undertake a review of all current education programmes in schools and youth settings;
- Develop a local pilot campaign in Wrexham that challenges current attitudes and behaviours to smoking focusing on challenging the appeal and norms of smoking;
- Working alongside a campaign aimed at girls, develop a campaign aimed at parents, focusing on challenging their role as a carer and the impacts on their children;
- Develop a clear benchmark for partners that states how they can become a Smokefree building or space and include e-cigarettes in the vision.
- Work with partners and youth organizations to explore opportunities to encourage individual interests and developing creative outlets for young girls to build confidence. Mapping what is already available to young people and making this information more widely available could increase uptake in outside school activities. Where there are gaps, work with partners to address these.
- Further to the above, assess what is being done in schools to build aspirations. Working with partners, carry out an appraisal of youth services, careers advice services and lessons in relation to aspirations and goals.
- Increase awareness of available smoking cessation support for young people who do smoke and assess how stop smoking services are currently meeting the needs of young people using the "You're Welcome Quality Criteria" as a possible guide.
- In light of the Welsh Public Health Bill proposing restrictions on the sale and distribution of E-cigarettes, hold a summit on e –cigarettes and what can be done locally, regionally and nationally to prevent young people from trying and buying. Consider a pilot programme in Wrexham: "Wrexham crack down" looking at potential control measures on the sale and distribution locally of e-cigarettes.