

Public concern about tobacco

Background

Towards the tobacco control sector's vision of a tobacco free New Zealand/Tupeka Kore Aotearoa, it is important to understand the level of public concern about tobacco as a health and social issue. In the Health Sponsorship Council's (HSC's) 2008 Health and Lifestyles Survey (HLS), respondents were asked a series of questions to measure their concern about tobacco.

Overview of key findings

The majority of respondents indicated that they were concerned about smoking as a social and health issue.

- The majority of people indicated that they still thought smoking was an important health issue. Nine in 10 (89%) respondents disagreed that smoking is not really an important health issue anymore. Respondents who were more likely to disagree were current smokers, Pacific people, and those without university qualifications.
- Three in four respondents agreed that society disapproves of smoking. Respondents who were less likely to agree were Māori and Pacific people, those from lower socio-economic backgrounds, younger people, and those without university qualifications.
- Three in four respondents agreed that smoking is a real problem in New Zealand. Respondents who were less likely to agree were current smokers and people who did not have formal qualifications.

Research details

Methodology

All respondents were asked for their levels of agreement ('strongly agree', 'agree', 'neither agree nor disagree', 'disagree', or 'strongly disagree') with a series of statements measuring their concern about tobacco. The statements were:

- Smoking is not really an important health issue anymore.
- Society disapproves of smoking.
- Smoking is a real problem in New Zealand.

Mean (average) agreement scores were calculated to compare responses by:

- Smoking status (current smokers: those who smoked at least monthly, and past smokers: those who had ever smoked but did not smoke at the time of the survey, compared with never smokers).
- Ethnicity (Māori, compared with non-Māori).
- Neighbourhood deprivation status (NZDep 8-10 and NZDep 4-7, compared with NZDep 1-3).
- Age (25 to 34 years, 35 to 54 years, and 55 + years, compared with 15 to 24 years).
- Gender.
- Educational background (no formal qualifications, School Certificate/NCEA level 1, and UE/NCEA levels 2-3/trade certificates, compared with university qualifications).

Statistically significant differences ($p > .05$) are reported.

Detailed findings

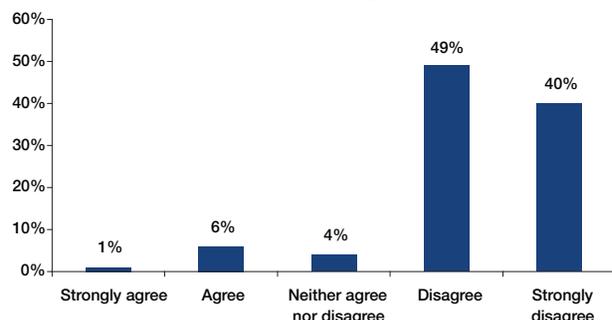
Who sees smoking as an important health issue?

Around nine in 10 (89%) respondents either 'disagreed' (49%) or 'strongly disagreed' (40%) that smoking is not really an important health issue any more (see Figure 1). Respondents who showed higher mean agreement with this statement were:

- Current smokers compared with never smokers.
- Pacific people compared with those of New Zealand/European ethnicity.
- People who did not have university qualifications (no formal qualifications, School Certificate/NCEA Level 1, and University Entrance/NCEA Levels 2-3/trade certificates), compared with those who had university qualifications.
- There were no differences by neighbourhood deprivation status, age, or gender.

Public concern about tobacco (continued)

Figure 1. Agreement that smoking is not really an important health issue any more

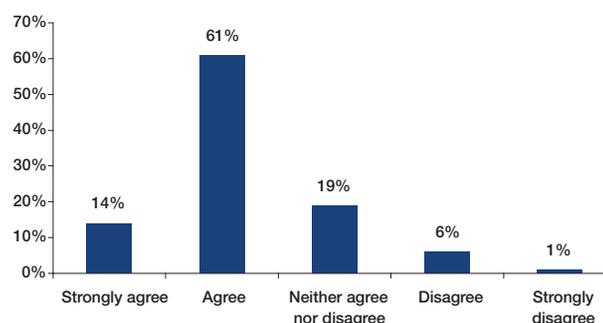


Who thinks that society disapproves of smoking?

Three in four (75%) respondents either 'agreed' (61%) or 'strongly agreed' (14%) that society disapproves of smoking (see Figure 2). Respondents who showed lower mean agreement with this statement were:

- Māori and Pacific people, compared with people of New Zealand European/Other ethnicity.
- Those living in neighbourhoods of high deprivation (NZDep 8-10) compared with those living in neighbourhoods of low deprivation (NZDep 1-3).
- Younger people (15 to 24-year-olds) compared with older people (those aged 55 years and older).
- People who did not have formal qualifications, and those with University Entrance/NCEA 2-3/trade certificates, compared with those who had university qualifications.
- There were no differences by smoking status or by gender.

Figure 2. Agreement that society disapproves of smoking

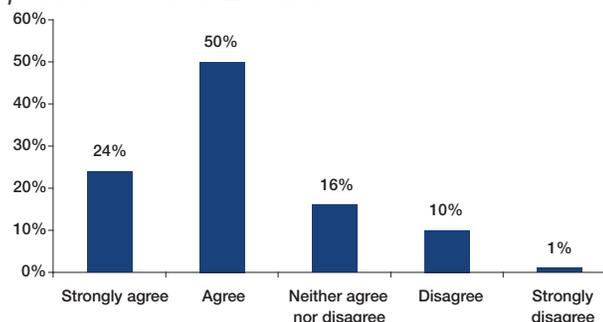


Who thinks that smoking is a real problem?

Around three in four (74%) respondents either 'agreed' (50%) or 'strongly agreed' (24%) that smoking is a real problem in New Zealand (see Figure 3). Respondents who showed lower mean agreement with this statement were:

- Current smokers compared with never smokers.
- People who did not have formal qualifications compared with people with university qualifications.
- There were no differences by ethnicity, neighbourhood deprivation status, age, or gender.

Figure 3. Agreement that smoking is a real problem in New Zealand



About the Survey

- The HLS is a nationwide in-home face-to-face survey conducted every two years. The first HLS was carried out in 2008 with a sample of 1,608 New Zealanders aged 15 years and over, who provided information about their health behaviours and attitudes relating to tobacco, sun safety, healthy eating, and gambling.
- The main sample, with a response rate of 64%, included 818 people of European/Other ethnicity, 392 Māori, 324 Pacific peoples and 74 Asian people.
- The data have been adjusted (weighted) to ensure they are representative of the New Zealand population.
- The significance level used for statistical analyses was set to $\alpha = 0.05$.
- A full description of the 2008 HLS survey methodology and further HLS publications can be found online at www.hsc.org.nz/researchpublications.html.

Citation

Trappitt, R. (2010). *Public concern about tobacco* [In Fact]. Wellington: Health Sponsorship Council.