Young people’s perceived access to tobacco — 2014

Background

Young people’s access to tobacco through social sources and illegal underage sales is recognised as a key risk factor for smoking initiation (Health Sponsorship Council, 2005). Most young smokers in New Zealand access tobacco from social sources. In 2012, half (55%) of 14 and 15-year-old smokers said they were usually given their tobacco by friends or peers, and around one-in-three bought tobacco from friends or took them from a parent or caregiver; a quarter usually bought them at a shop (White, 2013).

Reducing the availability of tobacco is identified as a strategy to ensure New Zealand reaches the goal of becoming smokefree by 2025, where less than 5% of the population smokes (The New Zealand Government, 2011). As part of this, point-of-sale displays of tobacco products at retail outlets have been prohibited in New Zealand since July 2012. Previous research findings from overseas indicate that in retail outlets which did not have tobacco product point-of-sale displays, adolescents were less likely to know that tobacco products were for sale, and more likely to think tobacco would be hard to buy (Kim et al., 2013).

The Health Promotion Agency’s (HPA’s) Youth Insights Survey (YIS) monitors Year 10 students’ behaviours, attitudes and knowledge on a range of tobacco-related topics, including their perceived access to tobacco. Year 10 students are generally aged 14 to 15 years, and therefore prohibited from purchasing cigarettes and tobacco.

Methodology

Participants in the 2014 YIS were asked whether they thought they could get cigarettes or tobacco from anyone in their family/whānau or home, from their friends, or from a shop, if they wanted to. The response categories were ‘definitely not’, ‘probably not’, ‘probably yes’ and ‘definitely yes’.

Univariate regression analyses were conducted first to assess whether perceived access to tobacco from each source (dependent variable) was associated with any of the independent variables (gender, ethnicity, school decile status, own smoking status, family smoking status and friends’ smoking status; see the ‘About the Youth Insights Survey’ section for more detail and relevant comparison groups). A multivariate regression analysis was then conducted to assess which variables were still associated with perceived access after adjusting for all others.

Further analyses were also undertaken to examine changes over time. Perceived access to tobacco from family/whānau or home and from friends was also asked in the 2010 and 2012 surveys. Perceived access from shops was previously asked in 2012 only.

Access from family/whānau or home

All participants were asked, “If you wanted to, do you think you could get cigarettes/tobacco from anyone in your family/whānau, or from your home?”

Around one-in-eight (12%, 10-13%) thought they would ‘definitely’ (3%, 2-3%) or ‘probably’ (9%, 8-10%) be able to get cigarettes/tobacco from anyone in their family/whānau or from their home if they wanted (Figure 1). The initial univariate analysis showed that perceived access from family/whānau or home was associated with gender, ethnicity, school decile status, own smoking status, family smoking status and friends’ smoking status. After including all of these variables in the same model to adjust for confounding effects, perceived access remained associated with ethnicity, own smoking status and family smoking status. Those most likely to perceive they could ‘definitely’ or ‘probably’ get cigarettes/tobacco from their family/whānau or home were:

- Māori (22%), compared with non-Māori (8%)
- current smokers (47%), compared with ex/experimental smokers (18%) and never smokers (6%)
- those who reported that a parent/caregiver, grandparent or older sibling smoked (19%), compared with those who said none of these family members smoked (3%).
There was a significant decrease in the proportion who thought they could ‘definitely’ or ‘probably’ get cigarettes/tobacco from their family/whānau or home between 2010 (16%) and 2014 (12%). However, the rate for 2014 was not significantly different from 2012 (13%).

Access from friends

All participants were asked, “If you wanted to, do you think you could get cigarettes/tobacco from any of your friends?”

Nearly two in five (38%, 35-40%) thought they would ‘definitely’ (10%, 9-12%) or ‘probably’ (27%, 25-29%) be able to get cigarettes/tobacco from friends (Figure 1). The initial univariate analysis showed that perceived access from friends was associated with gender, ethnicity, own smoking status, family smoking status and friends’ smoking status. After including all of these variables in the same model to adjust for confounding effects, perceived access remained associated with own smoking status and friends’ smoking status only.

Those most likely to perceive they could ‘definitely’ or ‘probably’ get cigarettes/tobacco from their friends were:

- current smokers (85%), compared with ex/experimental smokers (64%) and never smokers (26%)
- those who reported at least one of their five closest friends smoked (71%), compared with those who said none of these friends smoked (20%).

There was a significant decrease in the proportion who thought they could ‘definitely’ or ‘probably’ get cigarettes/tobacco from their friends between 2010 (49%) and 2014 (38%). However, the rate for 2014 was not significantly different from 2012 (40%).

Access from a shop

All participants were asked, “If you wanted to, do you think you could get cigarettes/tobacco from a shop (eg, dairy)?” Despite being under 18 years and therefore prohibited from purchasing tobacco, one-in-eight (12%, 11-14%) thought they would ‘definitely’ (2%, 1-2%) or ‘probably’ (11%, 10-12%) be able to get cigarettes/tobacco from a shop such as a dairy (Figure 1). The initial univariate analysis showed that perceived access from shops was associated with own smoking status and friends’ smoking status; and both remained associated when adjusting for the other in the multivariate model.

Those most likely to perceive they could ‘definitely’ or ‘probably’ get cigarettes/tobacco from a shop were:

- current smokers (29%), compared with ex/experimental smokers (16%) and never smokers (10%)
- those who reported at least one of their five closest friends smoked (18%), compared with those who said none of these friends smoked (9%).

There was a significant decrease in the proportion who thought they could ‘definitely’ or ‘probably’ get cigarettes/tobacco from a shop between 2012 (17%) and 2014 (12%).

![Figure 1: Percentage of respondents in 2014 who thought that if they wanted to, they could get cigarettes/tobacco from anyone in their family/whānau or home, from their friends, or from a shop](image)

Note: Due to rounding, in some cases the proportions add to 100%±1
About the Youth Insights Survey

- The YIS forms part of the New Zealand Youth Tobacco Monitor (NZYTM), a collaborative effort by the Health Promotion Agency (HPA) and Action on Smoking and Health (ASH).
- The YIS is a nationwide paper-based survey conducted in schools every two years, first carried out in its current form in 2006 and dating back to 1995 in different formats.
- The YIS collects data on smoking-related knowledge, attitudes, and behaviour, as well as data on students’ interests, lifestyles, activities, media use, and responses to tobacco control initiatives. It monitors a broad spectrum of risk and protective factors that relate to smoking uptake among young people.
- The 2014 YIS was conducted with a sample of 2,919 Year 10 students (14 to 15-year-olds). The school-level response rate was 76%, the student level response rate 84%, and the overall response rate was 64%. The sample included 1,352 NZ European, 700 Māori, 321 Pacific, 353 Asian, and 193 people of ‘Other’ ethnicity (prioritised ethnicity). Eight percent (n=218) were current smokers (smoke daily, weekly or monthly).
- The data have been adjusted (weighted) to ensure they are representative of the population of New Zealand Year 10 school students.
- For this analysis, jack-knife proportions and 95% confidence intervals were calculated first. Logistic regression was then used to compare responses between groups and across time. The significance level was set to α=.05.
- Comparison groups for these analyses were as follows:
  - Gender (females, compared with males).
  - Ethnicity (Māori, compared with non-Māori).
  - School decile status (low school decile, compared with middle and high). School decile status was used as an indicator of socioeconomic status; low decile schools have a greater proportion of students from low-socioeconomic communities.
  - Own smoking status (current smokers, compared with ex/experimental smokers and never smokers). Current smokers were those who reported smoking at least once a month or more often. Ex/experimental smokers had ever smoked a cigarette, but now no longer smoked or smoked less frequently than once a month.
  - Family smoking status (those who reported that at least one of their parents/caregivers, grandparents or older siblings smoked, compared with those who said none of these family members smoked).
  - Friends smoking status (those who reported that at least one of their five closest friends smoked, compared with those who reported that none of these friends smoked).
- A full description of the 2014 YIS methodology and further YIS publications can be found at http://www.hpa.org.nz/research-library/research-publications.

Key points

- The minority of young people thought they would be able to access tobacco from their family/whānau or home, friends, or from a shop such as a dairy. Of these, friends were perceived as the most likely source of tobacco.
- Young people were less likely to think they would be able to get cigarettes/tobacco from a shop in 2014 compared with in 2012.
- Perceived ease of access to cigarettes/tobacco from family/whānau or home, or from friends in 2014, was unchanged from 2012, but perceived as more difficult compared with 2010.
- Current smokers were more likely than ex/experimental smokers and never smokers to think they would be able to access cigarettes/tobacco from all three sources.
- Māori were more likely than non-Māori to perceive that they would be able to access tobacco from their family/whānau or home.
- Respondents who reported that at least one of their five closest friends smoked were more likely to perceive that they would be able to access tobacco from their friends or from a shop compared with those who had no close friends who smoked.
About the HPA

HPA is a Crown entity that leads and delivers innovative, high quality and cost-effective programmes and activities that promote health, wellbeing and healthy lifestyles, prevent disease, illness and injury, enable environments that support health and wellbeing and healthy lifestyles, and reduce personal, social and economic harm.

References


White, J. (2013). *Where are young smokers accessing cigarettes? [In Fact]*. Wellington: Health Promotion Agency Research and Evaluation Unit.

Citation