PREVALENCE OF TOBACCO AND E-CIGARETTE USE IN YOUNG PEOPLE IN THE WHO EUROPEAN REGION

OVERVIEW

Worldwide, more than 38 million young people aged 13–15 years (about 10%) use some form of tobacco. The figure in the WHO European Region is 4 million (12.7%) (Fig. 1).

The rate of tobacco use among boys aged 13–15 in the WHO European Region is 13.8%, which is equivalent to 2.3 million. The rate of tobacco use among girls aged 13–15 in the WHO European Region is 11.5%, which is equivalent to 1.8 million. This is above the global average for both boys (12.9%) and girls (7.4%) (Fig. 2).

Rates among boys and girls in the Region are similar (13.8% in boys and 11.5% in girls), but in four other WHO regions1 the rate of tobacco use in girls is on average 1.5–3.5 times lower than in boys.

Using available data from the Global Youth Tobacco Survey (GYTS) and the Health Behaviour in School-aged Children (HBSC) survey, WHO estimates that 500 000 (1.5%) of the Region’s population aged 13–15 use smokeless tobacco products (Fig. 3).

1 WHO African Region, WHO Eastern Mediterranean Region, WHO South East Asian Region and WHO Western Pacific Region.
Forty-two countries in the Region have reported rates of current cigarette smoking in 13–15-year-olds in their most recent national surveys. Analysis shows that rates vary from as low as 0.0% in Turkmenistan (2015) to as high as 32% in Italy (2019) (Fig. 4). Rates of current cigarette smoking in boys vary from 0.1% in Turkmenistan to 31% in Italy, and among girls from 0.0% in Turkmenistan to 36% in Bulgaria (2).

The most recent national surveys suggest that in 28 of 42 countries of the Region in which data on cigarette smoking are reported, the rates of current cigarette smoking among girls are similar to or higher than rates among boys.

National surveys show that the rates vary from 2.8% in Kyrgyzstan (2019) to 41% in Monaco (2019) (Fig. 5).
Rates of e-cigarette use among young people in the Region are increasing. Countries that have collected data on e-cigarette use through their surveys at least twice observe an increase in e-cigarette use over time for both boys and girls (Fig. 6).

**WHAT SHOULD BE DONE?**

- The WHO Framework Convention on Tobacco Control (WHO FCTC) is a highly effective regulatory framework but is underutilized in the Region. Member States should aim to fully implement all measures that fall within the scope of the WHO FCTC.

- Countries should consider more comprehensive regulations on novel and emerging tobacco and nicotine products, including ENDS, ENNDS and HTPs, a gender-sensitive approach, and a focus on the social determinants that predispose children from socially disadvantaged groups to tobacco-related harm.

REFERENCES


ENDS: electronic nicotine delivery systems; ENNDS: electronic non-nicotine delivery systems; HTPs: heated tobacco products.


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