Prevalence of current tobacco use in adolescents (13-15 years of age)

Rationale for use

The risk of chronic diseases starts early in childhood and such behaviour continues to adulthood. Tobacco is an addictive substance and smoking often starts in adolescence, before the development of risk perception. By the time the risk to health is recognized, the addicted individuals find it difficult to stop tobacco use.

Definition

Prevalence of tobacco use (including smoking, oral tobacco and snuff) on more than one occasion in the 30 days preceding the survey, among adolescent 13-15 year olds.

Data sources

Global Youth Tobacco Survey (GYTS) and Global School Health Survey (GSHS). GYTS started in 1998 and is ongoing. Few countries have repeated surveys. This is a school based self-administrated questionnaire.

Methods of estimation

Adjustments and standardizations are made as necessary.

Disaggregation

By sex.

References

- GYTS: (http://www.who.int/tobacco/surveillance/gyts/en)
- GSHS: (http://www.who.int/school_youth_health/assessment/gshs/en)

Database


Comments

Some of the surveys were conducted in small sub-national populations and therefore may not accurately reflect the national picture.
Prevalence of current (daily or occasional) tobacco smoking among adults (15 years and older) (percentage)

Rationale for use

Prevalence of current tobacco smoking among adults is an important measure of the health and economic burden of tobacco, and provides a baseline for evaluating the effectiveness of tobacco control programmes over time. While a more general measure of tobacco use, including both smoked and smokeless products, would be ideal, data limitations restrict the present indicator to smoked tobacco. Occasional tobacco smoking constitutes a significant risk factor for tobacco-related disease, and is therefore included along with daily tobacco smoking.

Definition

Prevalence of current tobacco smoking (including cigarettes, cigars, pipes or any other smoked tobacco products). Current smoking includes both daily and non-daily or occasional smoking.

Associated terms

The specific definition of non-daily or occasional smoking is not necessarily consistent across surveys.

Data sources

The WHO Survey Programme and World Health Survey compile comprehensive baseline information on the health of populations and on the outcomes associated with the investment in health systems.

The WHO Global InfoBase collects all country-level data on important non-communicable disease risk factors for all WHO Member States. It acts as a repository for all survey information relevant to 8 risk factors, including tobacco use.

Methods of estimation

Empirical data only. World Health Survey methods can be consulted here. The methods underlying WHO Global InfoBase data vary according to the source, and additional data may have been obtained from communications with authors. Metadata for all surveys contained in the WHO Global InfoBase can be found here.

Disaggregation

Varies by survey; includes disaggregation by sex, age, location and socio-economic characteristics.

References

World Health Survey: [http://www.who.int/healthinfo/survey/en](http://www.who.int/healthinfo/survey/en)
WHO Global InfoBase Online: (http://www.who.int/ncd_surveillance/infobase/web/InfoBaseCommon)

Database

WHO Global InfoBase Online: (http://www.who.int/ncd_surveillance/infobase/web/InfoBaseCommon)

Comments

Cross-country comparisons are problematic as survey methods and definitions may vary across sources. Footnotes indicate those surveys that were conducted in sub-national populations, among adult sub-groups, or for a sub-sample of smoked tobacco products (e.g. cigarettes only).