

Country reports

The World Health Organization (WHO) and the Centers for Disease Control and Prevention (CDC), Atlanta, developed the Global Youth Tobacco Survey to track tobacco use among youth across countries using a common methodology and core questionnaire. Information from the Survey is compiled within the participating country by a Research Coordinator nominated by the Ministry of Health, and technically reviewed by WHO and CDC. The content has not otherwise been edited by WHO or CDC.

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Global Youth Tobacco Survey

"GYTS"

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Table of Contents

Chapter 1: Introduction and background	7
1.1 Introduction:	8
1.2 Framework Convention on Tobacco Control (FCTC)	9
1.3 The Global Youth Tobacco Survey (GYTS) - Objectives and Goals	11
Objectives of the GYTS:	11
Chapter 2 : Methodology Study design and sampling	13
2.1 Study Design and Sampling	14
2.2 Data Collection	15
2.3 Data entry, clearance and analysis	16
2.4 Sample Description:	17
Chapter 3: Findings	19
3.1 Sample Description	20
3.2 Tobacco Use	22
3.2.1 Current tobacco use	22
3.2.2 Ever smoked tobacco	24
3.2.3: Attitudes towards tobacco use	25
3.2.4: Smoking frequency among currently cigarette smokers	26
3.2.5: Age of first experiment of smoking cigarette among youth who ever smoked cigarette	28
3. ^v .6: Reasons behind starting smoking	29
3.2.8: Places that smokers tends mostly to smoke at	30
3.2.9: Smoking Dependency	32
3.3. Smoking Cessation	32
3.3.1 Desire to stop smoking	32
3.3.2 Attempts to stop smoking	32
3.3.3 Smokers believe that they will be able to quit smoking ⁽¹⁾	33
3.3.4 Receiving help to quit smoking ⁽²⁾	33
3.3.5 Main reasons for quitting smoking	33
3.4 Second-hand smoking	34
3.4.1 Exposure to second-hand smoking at home	34
3.4.2 Exposure to second-hand smoking at school ⁽³⁾	34
3.4.3 Exposure to second-hand smoking at other public places	35
3.4.4 Thoughts and attitudes towards second-hand smoking	36
3.5 Access and availability	36

3.5.1 Access to tobacco products	36
3.5.2 Knowledge and thoughts about pricing tobacco products	38
3.6 Knowledge of messages that are against using tobacco	39
3.6.1 Anti-tobacco messages on media or gathering places	39
3.6.2 Health warnings on cigarette packages	39
3.6.3 Anti-tobacco messages at school	40
3. ^v . Knowledge of advertisements or promotions for tobacco	40
3.7.1 Tobacco products advertisements and promotion	40
3.8 Attitudes and beliefs about using tobacco	41
3.8.1 Attitudes towards using tobacco	41
3.9 Shisha (Nargile) smoking	44
3.9.1 Ever smoking Shisha (Nargile)	44
3.9.2 Age of first-time experiment of smoking Shisha (Nargile)	44
3.9.3 Current smoking Shisah (Nargile)	45
3.9.4 Thoughts about stop smoking Shisha and second-hand shisha smoke	46
3.9.5 Places that youth who smokes shisha tends to smoke at	47
3.9.6 Access and availability of smoking Shisha	47
3.9.7 Thoughts and attitudes towards smoking shisha	47
Chapter 4: Discussion	48
4. Discussion	49
4.1 Tobacco use	49
4.2 Smoking Cessation	51
4.3 Exposure to second-hand smoke	52
4.4 Access and availability	53
4.5 Knowledge of massages that are against tobacco use	53
4.5 Knowledge of advertisements or promotions for tobacco	54
4.6 Knowledge and attitudes towards using tobacco products	55
4.7 Shisha (Nargile) use	55
Chapter 5: Conclusion and recommendations	57
Conclusion	58
Recommendations	58
ANNEXES	60
Annex 1: GYTS Fact Sheet – West Bank 2016	61
Annex 2: GYTS in Palestine West Bank (2001 – 2016) – Comparative Table & Trend charts	63

	Chart 1: Trends of Indicators related to prevalence of tobacco use - GYTS West Bank 2001-2016 6	55
	Chart 2: Trends of access and availability – GYTS West Bank 2001-2016	55
	Chart 3: Trends of quit smoking related indicators – GYTS West Bank 2001-2016	6
	Chart 4: Trends of Indicators related to Second-hand smoke - GYTS West Bank 2001-2016	6
	Chart 5: Trends of Indicators related to media and advertising - GYTS West Bank 2001-2016 6	57
	Chart 6: Trends of Indicators related to school and tobacco smoking – GYTS West Bank 2001- 20126	57
A	nnex 3: Recent GYTS surveys done in Palestine and Jordan – Major indicators Comparative table. 6	58

Chapter 1

Introduction and background

Chapter 1

Introduction and background

1.1 Introduction:

By the year 2030 tobacco will be the single biggest cause of death worldwide, killing some 8.4 million people per year. The figure is more than the projected mortality from pneumonia, diarrheal diseases, tuberculosis and complications from childbirth combined. Smokers face 1 in 2 risk of being killed by tobacco. With current smoking patterns, that means about 650 million people alive today will eventually be killed by tobacco use. Today, smoking kills 1 in 10 adults. By 2030, or sooner, this proportion will be 1 in 6. Moreover, the developing world will bear the brunt of this global epidemic. By 2020, 7 of every 10 people killed by smoking will be in low and middle-income nations. Globally, 1.3 billion people currently smoke. That number is expected to rise to more than 1.7 billion by 2025. In most countries, the poor are more likely to smoke than the rich. Individuals who have received little or no education are also more likely to smoke than those who are educated. Even when smoking is very common in a population, the damage to health may not yet be visible, because the diseases caused by smoking can take several years to develop. Tobacco not only impoverishes those who use it, it puts an enormous financial burden on countries. The costs of tobacco use at the national level encompass increased health care costs, lost productivity due to illness and early death, foreign exchange losses and environmental damage.

The Palestinian Ministry of Education and Higher Education has adopted comprehensive health strategy in schools and the community. This approach aims to create a Palestinian generation with good knowledge and skills that enable them to cope and appropriately face and manage the daily challenges. In order to achieve this, the Palestinian MOH and MOEHE, in cooperation and coordination with World Health Organization (WHO) and Centres for Disease Control and Prevention (CDC) launched and conducted the fourth Global Youth Tobacco Survey (GYTS) among youth aged 13-15 years in West Bank-Palestine.

This study provides sub-nationally representative data on the smoking prevalence of Palestinian young people aged 13 to 15 who attend school. The findings will enable decision makers and health policy planners as well as health education decision makers to appropriately plan for programs that help to reduce this phenomena. The data will help to develop, implement and evaluate tobacco control interventions in Palestine.

Information on five determinants of tobacco use was included in this study such as: access/availability and price, environmental tobacco smoke (ETS) exposure, cessation, media and advertising, and school curriculum as well as attitudes and students perceptions. These determinants are components which we considered in our comprehensive health education and promotion tobacco control program in schools and community. It is a worldwide known fact that tobacco use causes serious health problems. Currently, every tenth death among adults is attributable to tobacco use in the world. Data from WHO show that there are around 5.4 million deaths per year as a result of tobacco smoking, and unless more effective measures are implemented it is estimated that this number is expected to reach 8.4 million per year by the year of 2030, where 70% of them will be in the developing countries. In West Bank-Palestine, data from the survey conducted in the year 2009, showed that 43.8% of students had ever smoked cigarettes, while there are 21.0 % of them currently smoke cigarettes. The negative trends in smoking prevalence among young people, women and lower socioeconomic status (SES) groups, as well as the gap in tobacco control policies are of particular concern.

1.2 Framework Convention on Tobacco Control (FCTC)

The WHO Framework Convention on Tobacco Control (FCTC) is the first treaty negotiated under the auspices of the World Health Organization. The FCTC is an evidence based treaty that reaffirms the right of all people to the highest standard of health. The FCTC was developed in response to the globalization of the tobacco epidemic.

The spread of the tobacco epidemic is facilitated through a variety of complex factors with crossborder effects, including trade liberalization and direct foreign investment. Other factors such as global marketing, transnational tobacco advertising, promotion and sponsorship, and the international movement of contraband and counterfeit cigarettes have also contributed to the explosive increase in tobacco use.

The WHO Framework Convention on Tobacco Control (WHO FCTC) recognizes the substantial harm caused by tobacco use and the critical need to prevent it. Tobacco kills approximately 6 million people and causes more than half a trillion dollars of economic damage each year. Tobacco will kill as many as 1 billion people this century if the WHO FCTC is not implemented rapidly. Although tobacco use continues to be the leading global cause of preventable death, there are proven, cost-effective means to combat this deadly epidemic. In 2008, WHO identified six evidence-based tobacco control measures that are the most effective in reducing tobacco use. Known as "MPOWER", these measures correspond to one or more of the demand reduction provisions

included in the WHO FCTC: Monitor tobacco use and prevention policies, Protect people from tobacco smoke, Offer help to quit tobacco use, Warn people about the dangers of tobacco, Enforce bans on tobacco advertising, promotion and sponsorship, and Raise taxes on tobacco. There continues to be substantial progress in many countries. More than 2.3 billion people living in 92 countries - a third of the world's population - are now covered by at least one measure at the highest level of achievement .Nearly 1 billion people living in 39 countries are now covered by two or more measures at the highest level. In 2007, no country protected its population with all five or even four of the measures. Today, one country, Turkey, now protects its entire population of 75 million people with all MPOWER measures at the highest level. While there has been a steady increase in the number of countries that have established a complete bans on tobacco advertising, promotion and sponsorship TAPS ban and the number of people worldwide protected by this type of ban, this measure has yet to be widely adopted. Only 24 countries (with 694 million people which just under 10% of the world's population) have put in place a complete ban on direct and indirect TAPS activities, although this trend has accelerated since 2010. More than 100 countries are close to having a complete TAPS ban, needing to strengthen existing laws to ban additional types of TAPS activities to attain the highest level.

The WHO FCTC demonstrates sustained global political will to strengthen tobacco control and save lives. As countries continue to make progress in tobacco control, more people are being protected from the harms of second-hand tobacco smoke, provided with help to quit tobacco use, exposed to effective health warnings through tobacco package labelling and mass media campaigns, protected against tobacco industry marketing tactics, and covered by taxation policies designed to decrease tobacco use and fund tobacco control and other health programmes. However, more countries need to take the necessary steps to reduce tobacco use and save the lives of the billion people who may otherwise die from tobacco-related illness worldwide during this century.

The core demand reduction provisions in the FCTC are contained in articles 6-14:

Price and tax measures to reduce the demand for tobacco, and Non-price measures to reduce the demand for tobacco, namely:

- Protection from exposure to tobacco smoke;
- Regulation of the contents of tobacco products;
- Regulation of tobacco product disclosures;
- Packaging and labelling of tobacco products;
- Education, communication, training and public awareness;

- Tobacco advertising, promotion and sponsorship; and,

Demand reduction measures concerning tobacco dependence and cessation.

The core supply reduction provisions in the FCTC are contained in articles 15-17:

- Illicit trade in tobacco products;
- Sales to and by minors; and,
- Provision of support for economically viable alternative activities.

1.3 The Global Youth Tobacco Survey (GYTS) - Objectives and Goals

Tobacco use is one of the chief preventable causes of death in the world. WHO attributes some 5.4 million deaths a year to tobacco, a figure expected to rise to 8.4 million deaths a year by 2030. By that time, 70% of those deaths will occur in developing countries. Most people begin using tobacco before the age of 18. Recent trends indicate rising smoking prevalence rates among children and adolescents and earlier age of initiation. If these patterns continue, tobacco use will result in deaths of 250 million children and adolescents alive today. In recent years WHO, UNICEF, G8, Ministers of the environment, Ministers responsible for youth and many national health agencies have called for concerted action against tobacco use by young people. Yet, comprehensive tobacco prevention and control information on young people is not available for most developing countries.

To address this data gap, the WHO's Tobacco Free Initiative (WHO TFI), and the CDC's Office on Smoking and Health (OSH) have developed the Global Youth Tobacco Survey (GYTS), in consultation with a range of countries representing the 6 WHO Regions.

The GYTS is part of the Global Tobacco Surveillance System (GTSS). By the end of the year 2013, the survey has been completed in over 188 countries and over 120 countries have repeated the survey.

Objectives of the GYTS:

This survey is a school based tobacco specific survey that focuses on students aged 13-15 years. The objectives of the survey are:

- 1- To document and monitor the prevalence of tobacco use including: cigarette smoking, smokeless tobacco, and Shisha (water pipe) as one of the optional country specific issue.
- 2- To understand and assess students' attitudes, perception and behaviours about tobacco use and its impact, including: tobacco use (smoking and smokeless), cessation, second-hand smoke (SHS),

pro- andante-tobacco media and advertising, access and availability to obtain tobacco products, second hand tobacco smoke exposure, and school curriculum.

The GYTS will attempt to address the following issues:

- The level of tobacco use, access and availability
- The age of initiation of cigarette use
- Exposure to tobacco promotion and advertising
- Different socio economic variables that might play a role in the increased percentage among this age
- Key intervening variables, such as knowledge, attitudes and behavioural norms with regard to tobacco use among young people which can be used in prevention programs cessation support and desire to quit
- The role of different media channels and advertising

Chapter 2

Methodology Study design and sampling

2.1 Study Design and Sampling

A Two-stage sample design was used for GYTS:

Stage 1: selection of schools

Since the target population for the GYTS is youth aged 13-15 years, a list of schools eligible to participate in the survey was sent to the CDC where the sample selection was drawn. This list included students from the primary and secondary schools. Schools were selected with a probability proportional to enrolment size. This meant that large schools were more likely to be selected than small schools. The outcome of this selection process gave West Bank 23 schools with an expected survey population of 1604 students, with no replacement or substitution allowed for schools that did not agree to participate.

Stage 2: Selection of Classes and Students

In the selected schools, the number of classes in each enrolled school was listed, and from this list, classes were randomly selected (based on the random start provided by CDC on the school level form). In each school, depending on the number of classes listed, one to four of those classes were selected (giving a total of 56 class), and in each class selected, every student present was interviewed. CDC processed the raw data using standard GYTS procedures. A weighting factor was applied to reflect the likelihood of sampling each student and to reduce bias by compensating for differing pattern of non- response. Also, a statistical analysis of correlated data was used to compute 95% confidence intervals.

The questionnaire

The questionnaire was self-administered and consisted of a 'core' component and an 'optional' component. The core questions allow for comparison between countries and regions, and the optional questions allow for specific issues pertaining to individual countries.

All the questions were multiple-choice questions that asked for background information such as age, gender, grade, use of tobacco (prevalence, access, and about other tobacco products), knowledge and attitude towards smoking, environmental tobacco smoke, cessation, media and advertising , school curriculum and community response to smoking. The questionnaire was pretested before it was administered to schools.

2.2 Data Collection

One of the prerequisites for the implementation of the GYTS in Palestine was the acquisition of current (2015-2016) school enrolment data. Complete data for this academic year were available at the Planning and Statistical Section of the Ministry of Education.

A one day training workshop for field data collectors (survey administrators) was held in Ramallah/West Bank on Mar 17th 2016. The basic aim of the training workshop was the standardization of the research methodology. At the training workshop, with the use of the GYTS Handbook, the core questions and optional questions to be included in the final questionnaire were reviewed. Tasks of the data collector personals were identified and discussed, namely, GYTS Survey Design and procedures, as well as the list of Sample Selection and the final sample size.

The Research Coordinator was responsible for the overall management of the project, development of the final questionnaire, making the initial contact with school personnel, identifying Survey Administrators, and training and assigning Survey Administrators to schools selected. The purpose of the training was to ensure that all the Survey Administrators had the same information about GYTS and follow the same survey administration procedures. The training dealt with the purpose of GYTS, confidentiality, scheduling survey administration, documenting school and class participation, presenting and administering the GYTS to the students, and materials needed for survey administration.

The Survey administrators were selected mainly from the staff of NCD's Department, school health departments at MoH and MOEHE. They were assigned to specific schools and were responsible for the delivery and collection of all survey documentation forms, Answer Sheets, Header Sheets, and Questionnaires.

Two forms were provided for each selected school: the school-level form and the class-room level form. These two forms provided the necessary identification information and were the primary data management forms. The school-level form contained the coordination agency, the school name, the sample size, and the School ID (this was supplied by CDC). The grades taught and grades surveyed in the school, as well as the total number of eligible classes, were filled in by the Survey Administrator. A list of random number was supplied by CDC and appeared just above the class tracking information. The Survey Administrator filled in the class tracking information. This contained a grid that was used to catalogue the completion status of each selected class.

The classroom level form showed the school name, the sample, the school ID and the class ID. One e-mailed copy of the classroom level form was provided by the CDC and additional copies were provided by the Health Education and Promotion Department. The survey administrator entered the number of students who were enrolled in the classes and the number of students who participated in the survey. All students in the selected classes were eligible for participation.

The answer sheet and the header sheet were provided by CDC. One answer sheet was given to each student. Students were not required to write their names on the answer sheet or provide any other kind of identifying information. The answer sheets on which students were asked to record their responses was machine-readable. A header sheet was completed for each participating class in each school and showed the school ID from the school level form and class ID from the classroom level form. Instruction were provided to the survey administrators for procedures to be followed prior to, during and after the survey in the classroom. Before the start of the survey a script of instructions for students was read. The survey procedures employed allowed for students' voluntary participation, anonymity, and privacy.

Each of the 12 survey administrators were assigned to a selected number of schools and each had the responsibility to collect the enrolment data of all the classes. This information was transmitted to the research coordinator by hand so as to confirm the selection of the correct class or classes to be interviewed. The administration of the questionnaire, documentation of the class and school participation, and the security of the answer sheet were the assigned responsibility of the survey administrators. The research coordinator undertook the responsibility of final editing and packaging of the answer sheets, header sheets, classroom-level form, and school-level form. This was done simply to establish quality data management throughout the data gathering process. Finally, all the packages were sealed and shipped via FedEx and forwarded to CDC for processing.

2.3 Data entry, clearance and analysis

Data entry has been done by CDC staff using optical readers. Data clearance also has been done by CDC staff. An adjustment on sex variable has been done, upon our request, according to the type of school (School for males only, school for females only), when it was possible, since only 2 out of 23 schools have mixed (male and female) students. Data has been analysed also by the CDC staff, using Normal (Sudaan) Method, for analysing the data which is a software package that accounted for complex sampling design and weight factors. 95% confidence interval was used for to see if there is any statistically difference for the estimates of different variables. Frequency tables

with weighted percents and unweighted sample sizes for each column reported by gender and age (Ages 13-15), have been provided to the research coordinator.

2.4 Sample Description:

All schools containing grade 7, grade 8, grade 9, and grade 10 that contained 40 or more students were included in the sampling frame. A two-stage cluster sample design was used to produce a representative sample of students in grade 7, grade 8, grade 9, and grade 10.

School Level - The first-stage sampling frame consisted of all schools containing grade 7, grade 8, grade 9, and grade 10 that contained 40 or more students. Schools were selected with probability proportional to school enrolment size.

Class Level - The second sampling stage consisted of systematic equal probability sampling (with a random start) of classes from each school that participated in the survey. All classes in the selected schools were included in the sampling frame. All students in the selected classes were eligible to participate in the survey.

Overall Response Rates:

Schools - 100.0% 23 of the 23 sampled schools participated

Classes - 100.0% 56 of the 56 sampled classes participated

Students- 95.3% 1,518 of the 1,594 sampled students participated

Overall response rate - 100.0% * 100.0% * 95.3% = 95.3%

Weighting:

A weight has been associated with each participating student record to reflect the likelihood of sampling each student and to reduce bias by compensating for differing patterns of nonresponse.

The Weight Used For Estimation Is Given By:

W = W1 * W2 * f1 * f2 * f3 * f4

W1 = the inverse of the probability of selecting the school

W2 = the inverse of the probability of selecting the class within the school

f1 = a school-level nonresponse adjustment factor calculated by school size category (small, medium, large)

f2= a class adjustment factor calculated by school

f3 = a student-level nonresponse adjustment factor calculated by class

f4 = a post stratification adjustment factor calculated by gender and grade

Use of the Weighted Results:

The weighted results can be used to make important inferences concerning tobacco use risk behaviours of students in grade 7, grade 8, grade 9, and grade 10 in West Bank.

Chapter 3

Findings

The following are a summary for the GYTS findings in West Bank -GYTS- 2016. West Bank data:

3.1 Sample Description

Age Groups (years)	Males	Females	Total
11	0.3	0.0	0.1
12	1.7	3.3	2.5
13	26.2	29.9	28.0
14	28.6	28.2	28.5
15	29.9	29.9	29.9
16	12.7	8.4	10.5
17	0.6	0.3	0.4

 Table 3.1.1: Gender and age groups (%)

The percentage of youth studied who were within the age group 13-15 years old was 86.4% (n=1332) (males 84.7% (n=691), females 88.0% (n=637). (Table 3.1.1) (Fig. 3.1.1).

The distribution of youth ages 13-15 years to the grades was almost equal, with more bulk in Grade 8 (28.9%) (Table 3.1.2)(Fig 3.1.2)

About 54.7% of youth (males 54.8%, females 54.9%) have more than 10 shekels that they could spend however they want in an average week. (Table 3.1.3) (Fig. 3.1.3)



Fig. 3.1.1: Age distribution of participants

Table 3.1.2: Distribution of youth to grades (age 13-15) (%)

Grades	Males	Females	Total
Grade 7	30.3	24.7	27.4
Grade 8	30.8	27.3	28.9
Grade 9	26.0	27.1	26.6
Grade 10	12.9	21.0	17.1





Table 3.1.3: Average amount of money that can be freely spent in an average week (age 13-15)

Avrg. Money	Males	Females	Total
Zero	6.4	2.5	4.4
< 4 NIS	9.1	13.7	11.5
4-5 NIS	13.2	15.6	14.5
6-7 NIS	9.6	7.9	8.7
8-9 NIS	6.8	5.5	6.2
> 10 NIS	54.8	54.9	54.7



Fig. 3.1.3: Average money spent freely in an average week

3.2 Tobacco Use

3.2.1 Current tobacco use

According to the definition of current tobacco use ⁽¹⁾, 31.3% (Males 43.7%, Females 19.7%) of youth reported a current use of any type of tobacco products. While 28.1 % (Males 39.3, Females 17.7) use smoked tobacco ⁽²⁾, 17.5% (males 28.7%, females 7.5%) reported current use of cigarettes ⁽³⁾, 4.8% (males 10.1%, females 0.0%) reported frequent cigarette smoking ⁽⁴⁾. Also 22.7% (Males 31.3%, Females 14.7%) said that they are currently using other tobacco products rather than cigarettes ⁽⁵⁾. In respect to current Shisha use⁽⁶⁾, 17.9% (males 23.8%, females 12.4%) of youth confirmed the current Shisha use, where 2.7% (Males 5.2%, Females 0.5%) reported frequent use of Shisha⁽⁷⁾ (Tables 3.2.1)

Table 3.2.1: Current tobacco use (age 13-15)

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	Any Tobacco type (%)	Smoked Tobacco (%)	Cigarettes (%)	Frequent cigarette (%)	Other Smoked types (%)	Shisha (%)	Smokeless Tobacco (%)		
Total	31.3	28.1	17.5	4.8	19.0	17.9	6.0		
Males	43.7	39.7	28.7	10.1	26.1	23.8	8.5		
Females	19.7	17.7	7.5	0.0	12.5	12.4	3.6		

(1) Percentage of youth who smoked cigarettes on 1 or more days in the past 30 days or smoked any tobacco products other than cigarettes in the past 30 days or used any smokeless tobacco products in the past 30 days.

(2) Percentage of youth who smoked any tobacco products in the past 30 days

(3) Percentage of youth who smoked cigarettes on 1 or more days of the past 30 days.

(4) Percentage of youth who smoked cigarettes on 20 or more days of the past 30 days.

(5) Percentage of youth who smoked tobacco products other than cigarettes on 1 or more days of the past 30 days

(6) Percentage of youth who smoked Shisha on 1 or more days of the past 30 days

(7) Percentage of youth who smoked Shisha on 20 or more days of the past 30 days.

Looking to types of smoked tobacco currently used by the youth, results showed that 17.8% (Males 28.7%, Females 7.6%) currently smoke manufactured cigarettes ⁽¹⁾, 11.3% (Males 18.3%, Females 4.5%) currently smoke hand-rolled cigarettes ⁽²⁾, 14.9% (Males 24.1%, Males 6.3%) currently smoke cigars/mini cigars/cigarillos ⁽³⁾, 17.9% (Males 23.8%, Females 12.4%) currently smoke Shisha ⁽⁴⁾, and 6.3% (Males 9.6%, Females 3.2%) currently smoke tobacco in pipe ⁽⁵⁾. (Fig. 3.2.1)



Fig. 3.2.1: Types of smoked tobacco used (age 13-15)

- (1) Percentage of youth who smoked manufactured cigarettes on 1 or more days of the past 30 days
- (2) Percentage of youth who smoked hand-rolled cigarettes on 1 or more days of the past 30 days
- (3) Percentage of youth who smoked cigars/mini cigars/cigarillos on 1 or more days of the past 30 days
- (4) Percentage of youth who smoked Shisha on 1 or more days of the past 30 days
- (5) Percentage of youth who smoked tobacco in a pipe on 1 or more days of the past 30 days

3.2.2 Ever smoked tobacco

Ever tobacco use as defined in the study protocol ⁽¹⁾ has been studied and the results showed that 58.3% (Males 67.6%, Females 49.7%) reported that they have experimented with any tobacco product. While 55.3% (Males 64.9%, Females 46.4%) of youth have experimented smoking any type of smoked tobacco ⁽²⁾, 9.8% (Males 12.5%, Females 7.2%) said that they have experimented a smokeless tobacco product ⁽³⁾. Regarding experimenting with Shisha smoking ⁽⁴⁾, 36.4% (Males 41.3%, Females 31.9%) confirmed it. (Tables 3.2.2.1, 3.2.2.2) (Fig. 3.2.2.1, 3.2.2.2)

	Any type (%)	Smoked Tobacco (%)	Cigarettes (%)	Other Smoked types (%)	Smokeless Tobacco (%)	Shisha (%)		
Total	58.3	55.3	43.6	39.9	9.8	36.4		
Males	67.6	64.9	54.9	47.2	12.5	41.3		
Females	49.7	46.4	33.6	33.4	7.2	31.9		

Table 3.2.2.1: Ever tobacco use / among genders (age 13-15)





(1) Percentage of youth who tried or experimented with cigarettes or any other smoked tobacco products or any smokeless tobacco products.

- (2) Percentage of youth who ever tried or experimented with smoking any tobacco products
- (3) Percentage of youth who ever tried or experimented with any smokeless tobacco products
- (4) Percentage of youth who ever tried or experimented with Shisha

Age groups (Years)	Any tobacco type (%)	Cigarettes (%)	Other smoked types (%)	Smokeless Tobacco (%)	Shisha (%)
13	47.8	31.1	29.4	9.8	26.2
14	54.8	40.2	36.2	9.6	31.7
15	70.7	57.8	52.8	9.9	49.8

Table 3.2.2.2: Ever tobacco smoking / among age groups





3.2.3: Attitudes towards tobacco use

Results showed that 9.0% (males: 15.8%, females: 5.0%) of participants who are never tobacco users, are susceptible to using tobacco⁽¹⁾ in the future. Also 7.3% (Males: 11.3%, Females: 5.0%) of never smokers think they might enjoy smoking⁽²⁾ a cigarette. The susceptibility and the thought of might enjoy smoking show a decrease as age increase (Table 3.2.3, Fig. 3.2.3)

Table 3.2.3: Youth who are susceptible or might enjoy smoking/ among genders & age groups

	Total	Males	Females	Ŭ	13 years	14 years	15 years
Susceptible	9.0	15.8	5.0		11.3	7.8	7.4
Might enjoy	7.3	11.3	5.0		10.0	6.5	4.2

⁽¹⁾ Percentage of never tobacco users who have never used any tobacco products who answered: 1) "Definitely Yes", "Probably Yes", or "Probably Not" to using tobacco if one of their best friends offered it to them, or 2) "Definitely Yes", "Probably Yes", or "Probably Not" to using tobacco during the next 12 months

⁽²⁾ Percentage of youth who have never smoked tobacco, who "Strongly Agree" or "Agree" with the statement "I think I might enjoy smoking a cigarette"



Fig. 3.2.3: Youth who are susceptible or might enjoy smoking/ among genders & age groups (Age 13-15)

3.2.4: Smoking frequency among currently cigarette smokers

When studying the frequency of smoking among those who are currently smoking cigarettes, results showed that 24.7% (Males: 16.2%, Females: 52.4%) smoke less than one cigarette ⁽¹⁾, 28.0% (Males: 30.4%, Females: 21.0%) smoke one cigarette ⁽¹⁾, 24.9% (Males: 25.9%, Females: 19.9%) smoke two to five cigarettes ⁽¹⁾, 10.4% (Males: 13.0%, Females: 2.2%) smoke six to ten cigarettes ⁽¹⁾, 8.1% (Males: 9.2%, Females: 4.4%) smoke eleven to twenty cigarettes ⁽¹⁾ and 4.0% (Males: 5.3%, Females: 0.0%) smokes more than 20 cigarettes per day ⁽¹⁾, on the days that they smoke (Tables 3.2.4.1, 3.2.4.2, Fig. 3.2.4.1, 3.2.4.2).

1 4010 5.2.4.1	rable 5.2.4.1. Smoking frequency among currently smoking youth / among genders (age 15-15)								
	< 1 cigarette	1 cigarettes	2-5 cigarettes	6-10 cigarettes	11-20 cigarettes	> 20 cigarettes			
Total	24.7	28.0	24.9	10.4	8.1	4.0			
Males	16.2	30.4	25.9	13.0	9.2	5.3			
Females	52.4	21.0	19.9	2.2	4.4	0.0			

Table 3.2.4.1: Smoking frequency among currently smoking youth /among genders (age 13-15)

Table 3.2.4.2: Sn	noking frequence	v among cur	rently smoking	y vouth /among	age groups	(age 13-15)
14010 0121 1121 011				, , , , , , , , , , , , , , , , , , , 		(""""""""""""""""""""""""""""""""""""""

	<1	1	2-5	6-10	11-20	> 20
	cigarette	cigarettes	cigarettes	cigarettes	cigarettes	cigarettes
13 years	36.5	34.8	24.1	2.4	2.2	0.0
14 years	25.3	26.2	25.4	8.3	10.5	4.4
15 years	19.4	26.1	24.9	14.8	9.3	5.5

⁽¹⁾ Percentage of current cigarette smokers who usually smoke [less than 1; 1; 2 to 5; 6 to 10; 11 to 20; more than 20] cigarettes per day, on the days they smoked in the past 30 days



Fig. 3.2.4.1: Smoking frequency among currently smoking youth / among genders (age 13-15)

Fig. 3.2.4.2: Smoking frequency among currently smoking youth / among age groups (age 13-15)



3.2.5: Age of first experiment of smoking cigarette among youth who ever smoked cigarette

Asking participants who ever cigarette smokers, about the age they first tried smoking a cigarette, 9.3% (Males: 13.1%, Females: 3.9%) said that it was equal or less than seven years old ⁽¹⁾, 13.8% (Males: 13.8%, Females: 13.4%) said that it was between eight to nine years old ⁽¹⁾, 22.9% (Males: 23.6%, Females: 21.9%) said that it was between ten to eleven years old ⁽¹⁾, 31.3% (Males: 31.8%, Females: 30.7%) said that it was between twelve to thirteen years old ⁽¹⁾, and 22.7% (Males: 17.7%, Females: 30.1%) said that it was between fourteen and fifteen years old ⁽¹⁾. (Table 3.2.5, Fig. 3.2.5.1). 23.2% (Males: 26.9%, Females: 17.3%) of the ever cigarette smokers said that they first tried to smoke a cigarette at an age less than ten years old (Fig. 3.2.5.2)

Table 3.2.5: Age of first experiment of smoking cigarette among youth who ever cigarette smokers

	<u><</u> 7 years	8-9 years	10-11years	12-13 years	14-15 years
Total	9.3	13.8	22.9	31.3	22.7
Males	13.1	13.8	23.6	31.8	17.7
Females	3.9	13.4	21.9	30.7	30.1





(1) Percentage of ever cigarette smokers who first tried a cigarette at the age of [7 or younger; 8 or 9; 10 or 11; 12 or 13; 14 or 15] years old.

Fig. 3.2.5.2: Ever cigarette smokers who said that they first tried to smoke a cigarette at an age less than ten years old (age 13-15)



3.⁷.6: Reasons behind starting smoking

Results showed that the main reason made smokers start smoking among both genders is curiosity and experiment (57.4%). This reason was more significant among females (78.1%) than among males (46.2%). Peer pressure came second at the list in males (19.7%) while mode effect was the second main reason among females (8.8%). Table 3.2.6 shows the main reasons that made smokers start smoking.

\mathcal{B}							
	Curiosity & experiment	Beer pressure	Model Effect	Filling free time	Other reasons		
Total	٥٧.٤	13.7	12.2	4.9	11.7		
Males	46.2	19.7	14.1	7.3	12.6		
Females	78.1	2.3	8.8	0.5	10.2		

Table 3.2.6: Main reasons made smokers start smoking (%)

3.2.7: Types of tobacco products used among current smokers

In order to explore what types of tobacco products are used, questions were asked to the participants who currently use tobacco. Results showed that 21.3% (Males 21.1%, Females 20.8%) used smokeless tobacco such as snuff, 32.2% (Males 38.9%, Females 14.7%) used hand-rolled cigarettes, 52.6% (Males 62.1%, Females 28.7%) used manufactured cigarettes, 46.0% (Males 54.2%, Females 27.0%) used cigars/mini cigars/cigarillos, 16.5% (Males 19.3%, Females 9.3%) used pipe, and 44.1% (Males 44.3%, Females 43.7% used Shisha, at least once during the past 30 days. (Table 3.2.7, Fig. 3.2.7)

	Smokeless	Hand-rolled Cigarettes	Manufactured Cigarettes	Cigar types	Pipe	Shisha
Total	21.3	32.2	52.6	46.0	16.5	44.1
Males	21.1	38.9	62.1	54.2	19.3	44.3
Females	20.8	14.7	28.7	27.0	9.3	43.7

Table 3.2.7: Types of tobacco products used among current tobacco users smokers (%)

Fig. 3.2.7: Types of tobacco products used among current smokers (%)



3.2.8: Places that smokers tends mostly to smoke at

Asking the youth about the places that they mostly smoke at, results showed that generally home $^{(1)}$ is the most favourable place for smoking 21.7% (Males 9.9%, Females 66.6%), followed by public places $^{(2)}$ (20.8% (Males 26.1%, Females 2.3%)), houses of friends $^{(3)}$ (9.3% (Males 10.4%, Females 6.1%)), school $^{(4)}$ (9.0% (Males 10.0%, Females 5.7%)), work place $^{(5)}$ (8.0% (Males 8.7%, Females 3.3%), and social events $^{(6)}$ (3.1% (Males 2.4%, Females 5.6%)). The rest of smokers (28.1% (Males 32.5%, Females 10.4%)) said that they usually smoke at other places rather than those mentioned. However, this issue showed variations among both genders. While females preferred their homes to smoke (66.6%), followed by homes of their friends (6.1%), males preferred public places (26.1%), followed by houses of friends (10.4%). (Fig. 3.2.8.1, Fig. 3.2.8.2)

⁽¹⁾ Percentage of current cigarette smokers who usually smoke at home

⁽²⁾ Percentage of current cigarette smokers who usually smoke in public places

⁽³⁾ Percentage of current cigarette smokers who usually smoke at a friend's house

⁽⁴⁾ Percentage of current cigarette smokers who usually smoke at school

⁽⁵⁾ Percentage of current cigarette smokers who usually smoke at work

⁽⁶⁾ Percentage of current cigarette smokers who usually smoke at social events



Fig. 3.2.8.1: Places mostly preferred by smokers to smoke at (Total %)

Fig. 3.2.8.2: Places mostly preferred by smokers to smoke at (Among genders %)



3.2.9: Smoking Dependency

Regarding smoking dependency ⁽¹⁾, results showed that 70.3% (Males 79.8%, Females 41.9%) of currently smokers showed signs of smoking dependency. (Fig. 3.2.9)



Fig. 3.2.9: Smoking dependency

3.3. Smoking Cessation

3.3.1 Desire to stop smoking

Results showed that more than half of currently smokers (54.6%) want to stop smoking ⁽²⁾. (Fig. 3.3.1)

3.3.2 Attempts to stop smoking

Not only more than half of currently smokers said that they want to stop smoking, but also more than half of them (57.5% (Males 58.4%, Females 53.7%)) have actually attempted ⁽³⁾ to do this at least once during the past 12 months (Fig. 2.3.1). For those who successfully quitted smoking, almost half of them (47.4% (Males 38.4%, Females 67.7%) said it was very easy to do, while only 14.2% (Males 18.1%, Females 4.2%) said that it was very difficult

⁽¹⁾ Percentage of current smokers who sometimes or always smoke or feel like smoking tobacco first thing in the morning OR start to feel a strong desire to smoke again within 1 full day after

⁽²⁾ Percentage of current smokers who want to stop smoking now

⁽³⁾ Percentage of current smokers who tried to stop smoking during the past 12 months.

3.3.3 Smokers believe that they will be able to quit smoking ⁽¹⁾

A high percentage of currently smokers (72.9% (Males 69.2%, Females 87.9%)) believe that they will be able to quit smoking whenever they want (Fig. 2.3.1). Results also showed that almost two third of currently smokers (61.4% (Males 55.8%, Females 76.1%)) think that it would be either fairly or very easy to quit smoking.

3.3.4 Receiving help to quit smoking⁽²⁾

Although high percentages of currently smokers want, attempted and think that they will be able to quit smoking, only low percentage of them (17.4% (Males 16.9%, Females 19.2%)) actually received help to do this. (Fig. 3.3.1)



Fig. 3.3.1: Smoking cessation

3.3.5 Main reasons for quitting smoking

Asking youth who were previously smokers and quitted smoking, about the main reason made them quit, results showed that 58.7% (Males 64.2%, Females 46.5%) answered: to improve my health, other reasons are shown in (Table 3.3.5)

Table 3.3.5: Main reasons	for c	quitting	smoking	(%))
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	Improve Health	Save money	Family dislike	Friends dislike	Others	
Total	58.7	5.6	12.5	2.9	20.3	
Males	64.2	8.2	12.9	3.2	11.5	
Female	46.5	0.0	11.6	2.3	39.5	

(1) Percentage of current smokers who think they would be able to stop smoking if they wanted to.

(2) Percentage of current smokers who have received help/advice to stop smoking from a program or professional to help them stop smoking

3.4 Second-hand smoking

3.4.1 Exposure to second-hand smoking at home

When asking the youth about the exposure to second-hand smoking at their home ⁽¹⁾, 47.7% (Males 40.6%, Females 54.4%) answered that they have exposed to that on at least one day during the past 7 days. 25.6% (Males 19.8%, Females 30.9%) said that they have exposed to second-hand smoking, at home, on all the days during the past 7 days. Though, 49.2% (Males 47.5%, Females 50.5%) of youth said that they have at least one parent who smokes ⁽²⁾. Fathers (step fathers) are more likely to be the source of second-hand smoking at home to their children more than mothers (step mothers) (Table 3.4.1).

Table 3.4.1: Exposer to second-hand smoking at home from fathers and mothers (%)

	Don't see or don't have this person	Every Day	Some times	Never
Father (stepfather)	9.5	34.4	17.1	38.9
Mother (stepmother)	8.0	9.7	7.0	75.3

3.4.2 Exposure to second-hand smoking at school ⁽³⁾

Asking the youth "During the past 30 days, did you see anyone smoke inside the school building or outside on school property?" 41.9% (Males 60.9%, Females 24.2%) answered "Yes". Looking to the intensity of being exposed to teachers' smoking outdoors on school premises, during school hours, results are shown in the (Table 3.4.2)

	About every day	Sometimes	Never	Don't know
Total	25.1	18.7	38.9	17.3
Males	46.7	28.2	11.4	13.6
Females	5.4	9.7	64.3	20.6

Table 3.4.2: Seeing teachers' smoking outdoors on school premises, during school hours

⁽¹⁾ Percentage of youth who reported that smoking occurred in their presence inside their home on 1 or more days in the past 7 day

⁽²⁾ Percentage of youth who have one or more parents who smoke

⁽³⁾ Percentage of youth who saw someone smoke inside the school building or outside on school property during the past 30 days.

3.4.3 Exposure to second-hand smoking at other public places

In order to find out how often youth have been exposed to second-hand smoking at other places rather than home, during the past 7 days, questions have been asked and the results showed that 57.2% (Males 62.6%, Females 52.2%) exposed, on at least one day, inside any enclosed public place ⁽¹⁾, where 37% (Males 44.2%, Females 30.4%) said that they had exposure on 3 or more days. Also, 50.1% (Males 57.7%, Females 43.0%) reported exposure at any outdoor public place ⁽²⁾, on at least one day, where 29.7% (Males 37.4%, Females 22.6%) reported exposure at these places on 3 or more of the past 7 days. Public transportation vehicles are another exposure place to second-hand smoking. 44.5% of youth said that they didn't use any public transportation vehicle during the past 7 days. Among those who said that they used them, 60.9% said that someone smoked in their presence, inside any public transportation vehicle, on at least one day, where 31.2% said that someone did that on 3 or more of the past 7 days. (Fig. 3.4.3)



Fig. 3.4.3: Exposure to second-hand smoking at other places

- (1) Percentage of youth who reported that smoking occurred in their presence in any enclosed public place other than their home (such as schools, shops, restaurants, shopping malls, and movie theaters) in the past 7 days
- (2) Percentage of youth who reported that smoking occurred in their presence at any outdoor public place other than their home (such as playgrounds, sidewalks, entrance of buildings, parks, and beaches) in the past 7 days

3.4.4 Thoughts and attitudes towards second-hand smoking

Questions were asked to explore thoughts and attitudes of youth towards second-hand smoking, and results showed that 10.2% (Males 13.9%, Females 6.9%) think that the smoke from other people's tobacco smoking is definitely NOT harmful to them, while 68.1% (Males 57.8%, Females 77.7%) think it is definitely harmful to them. The rest either think it is probably harmful (15.4%), or probably NOT harmful (6.3%). Asking the youth whether they support banning smoking at enclosed ⁽¹⁾ and out-door ⁽²⁾ public places, or not, results showed 74.2% (Males 68.1%, Females 79.5%) are supporting the ban at enclosed public places, where 69.0% (Males 62.0%, Females 75.1%) are supporting the ban at out-door public places. (Table 3.4.4)

	Total	Males	Females
Think definitely is NOT harmful (%)	10.2	13.9	6.9
Think definitely is harmful (%)	68.1	57.8	77.7
Support ban at enclosed pub. Places (%)	74.2	68.1	79.5
Support ban at out-door pub. Places (%)	69	62	75.1

Table 3.4.4: Thoughts and attitudes of youth towards second-hand smoking

3.5 Access and availability

3.5.1 Access to tobacco products

Trying to assess how easy or difficult for the youth to access to tobacco products questions have been asked and the results showed that, among those who smoked cigarettes during the last 30 days, 43.1% (Males 50.7%) said that they have bought them in a store or shop ⁽³⁾. In the total, the second most prevalent source was "got them from someone else" ⁽⁴⁾ 30.9% (Males 24.1%). However, this was the most prevalent source for females. Other sources were; street vendor ⁽⁵⁾ 7.3% (Males 8.9%), kiosk ⁽⁶⁾ 5.1% (Males 6.3%), and some other ways ⁽⁷⁾ 13.6% (Males 10.1%) (Figure 3.5.1.1)

⁽¹⁾ Percentage of youth who are in favor of banning smoking in enclosed public places

⁽²⁾ Percentage of youth who are in favor of banning smoking at outdoor public places

⁽³⁾ Percentage of current cigarette smokers who last obtained cigarettes by purchasing from a store or shop in the past 30 days

⁽⁴⁾ Percentage of current cigarette smokers who last obtained cigarettes by getting them from someone else in the past 30 days

⁽⁵⁾ Percentage of current cigarette smokers who last obtained cigarettes by purchasing from a street vendor in the past 30 days

⁽⁶⁾ Percentage of current cigarette smokers who last obtained cigarettes by purchasing from a kiosk in the past 30 days

⁽⁷⁾ Percentage of current cigarette smokers who last obtained cigarettes by getting them some other way in the past 30 days

Overall, 55.5% (Males 65.8%) have purchased the cigarettes they smoked during the last 30 days from a store, shop, street vendor, or kiosk ⁽¹⁾.Results also showed that 82.2% (Males 83.1) of current cigarette smokers were not prevented from buying cigarettes in the past 30 days because of their age⁽¹⁾. Regarding the last time the youth bought cigarettes during the past 30 days, among those who did it, packs ⁽²⁾ (42.3% (Males 42.0)) and individual sticks ⁽²⁾ (37.1% (Males 37.6%,)) were the most prevalent forms been bought. Other forms shown in (Figure 3.5.1.2)



Fig. 3.5.1.1: Sources of bought cigarettes, from where those who smoked them, got during the last 30 days

Fig. 3.5.1.2: Forms of cigarettes bought, that youth who bought them during the last 30 days got



- (1) Percentage of current cigarette smokers who obtained the cigarettes they last smoked by purchasing them from a store, shop, street vendor, or kiosk in the past 30 days
- (2) Percentage of current cigarette smokers who were not prevented from buying cigarettes in the past 30 days because of their age
- (3) Percentage of current cigarette smokers who last bought cigarettes as a pack, as individual sticks (singles), as carton, in rolls or bought tobacco and rolled their own.

3.5.2 Knowledge and thoughts about pricing tobacco products

Results showed that 50% of youth don't know the average cost of a pack of 20 cigarettes. This percentage was higher among females (64.9%) than it is among males (34.0%). Another 22.4% (Males 30.9%, Females 14.5%) have underestimated the cost. Only 27.6% (Males 35.1%, Females 20.6%) right estimated the cost of a pack of 20 cigarettes (Fig. 5.2.1). Among those who gave an estimate for the cost, 55.3% (Males 53.2%, Females 58.7%) have the right estimation (>12 NIS/Pack)⁽¹⁾.



Fig. 3.5.2.1: knowledge about the average cost of a pack of 20 cigarettes

Recently in Palestine a rise of taxes on tobacco product, especially manufactured cigarettes, has been introduced, so prices of tobacco products increased significantly. Trying to measure the impact of this price rising intervention on the smoking habits of the youth a question has been asked, and the results showed that while 78.9% (Males 65.4%, Females 91.4%) said that they don't smoke and never thought of smoking, among those who smoke or previously thought to smoke, 71.1% (Males 74.6%, Females 59.3%) said that this intervention has affected the way that they smoke somehow. (Figure 3.5.2.2)





(1) Percentage of youth who estimated the cost of a pack of 20 cigarettes is more than 12 NIS

In the same context, domestically cultivated, hand-rolled, illegally marketed, and markedly cheaper cigarettes are exist in the Palestinian market. To find out the impact of the availability of such tobacco products on the smoking habits of the youth, a question has been asked and the results showed that 49.6% (Males 47.6%, Females 57.4%) said that this didn't affect their smoking habits anyhow. Other effects shown in (Figure 3.5.2.3)





3.6 Knowledge of messages that are against using tobacco

3.6.1 Anti-tobacco messages on media or gathering places

Results showed that, during the last 30 days, 52.9% (Males 52.4%, Females 53.4%) of the youth have seen or heard an anti-tobacco media message ⁽¹⁾. 17.5% (Males 22.8%, Females 12.4%) saw or heard any anti-tobacco media messages at sporting or other community events in the past 30 days ⁽²⁾. 32.7% (Males 37.4%, Females 26.8%) of youth who attended sporting or other community events in the past 30 days saw or heard any anti-tobacco messages at the events ⁽³⁾.

3.6.2 Health warnings on cigarette packages

Regarding health warnings on cigarette packages, results showed that 78.9% (Males 82.2%, Females 72.2%) of current smokers have noticed health warnings on cigarette packages in the past 30 days ⁽⁴⁾. 24.8% (Males 24.9%, Females 24.6%) of all current smokers thought about quitting smoking in the past 30 days because of health warnings on cigarette packages⁽⁵⁾.

⁽¹⁾ Percentage of youth who saw or heard anti-tobacco messages in the media in the past 30 days

⁽²⁾ Percentage of youth who saw or heard any anti-tobacco media messages at sporting or other community events in the past 30 days

⁽³⁾ Percentage of youth who attended sporting or other community events in the past 30 days who saw or heard any anti-tobacco messages at the events

⁽⁴⁾ Percentage of current smokers who noticed health warnings on cigarette packages in the past 30 days

⁽⁵⁾ Percentage of all current smokers who thought about quitting smoking in the past 30 days because of health warnings on cigarette packages

Among current smokers, who noticed health warnings on cigarette packages in the past 30 days, 31.4% (Males 30.2%, Females 34.0%) thought about quitting smoking because of the health warnings ⁽¹⁾. For those who were never smokers, 16.1% (Males 17.9%, Females 15.1%) thought about not starting smoking, in the past 30 days, because of health warnings on cigarette packages⁽²⁾.

3.6.3 Anti-tobacco messages at school

Asking youth if, during the last 12 months, they were taught in any of their classes about the dangers of tobacco use or not ⁽³⁾, 60.4% (Males 54.9%, Females 65.5%) answered "Yes", 24.2% (Males 28.8%, Females 20.0%) answered "No", and the rest answered "I don't know". 35.6% (Males 31.5%, Females 39.4%) said that during the last 12 month, they have discussed in one class, the reasons why people their age use tobacco. Where 43.9% (Males 47.1%, Females 40.8%) said they didn't do this, and the rest of them said that they are not sure

3.^V. Knowledge of advertisements or promotions for tobacco

3.7.1 Tobacco products advertisements and promotion

Advertisement for tobacco products in Palestine is banned by law since 2005, with recent more strict enforcement. Trying to explore the compliance to this regulation questions have been asked, and the results showed that, 32.5% (Males 38.2%, Females 27.1%) of all the study population saw an advertisement or promotions for tobacco products at points of sale, during the past 30 days ⁽⁴⁾. While, among those who visited points of sale, in the past 30 days, 41.2% (Males 45.2%, Females 36.8%) said that they saw any tobacco marketing at the points of sale ⁽⁵⁾. Also, during the past 30 days, 63.4% (Males 59.4%, Females 67.2%) of the whole study population, said that they saw people using tobacco on TV, in videos or in movies ⁽⁶⁾.

⁽¹⁾ Percentage of current smokers who noticed health warnings on cigarette packages in the past 30 days, who thought about quitting smoking because of the health warnings

⁽²⁾ Percentage of never smokers who thought about not starting smoking in the past 30 days because of health warnings on cigarette packages

⁽³⁾ Percentage of youth who were taught about the dangers of tobacco use in class during the past 12 months

⁽⁴⁾ Percentage of youth who saw tobacco marketing at points of sale in the past 30 days

⁽⁵⁾ Percentage of youth who visited points of sale in the past 30 days who saw any tobacco marketing at the points of sale

⁽⁶⁾ Percentage of youth who saw someone using tobacco on television, videos, or movies in the past 30 days

For those who watched television, videos, or movies in the past 30 days, 74.5% (Males 72.4%, Females 76.5%) said that they saw someone using tobacco on television, videos, or movies ⁽¹⁾. 11.1% (Males 15.5%, Females 7.3%) also said that a person working for a tobacco company ever offered them a free tobacco product ⁽²⁾. While 10.6% (Males 15.5%, Females 6.2%) of youth said that they would use or wear something that has a tobacco company or tobacco product name or picture on it, 12.0% (Males 17.3%, Females 7.3%) said that they have such an object ⁽³⁾.For those who were never tobacco users, 18.5% (Males 23.2%, Females 15.7%) said that they own something with a tobacco product brand logo, or who might use or wear something that has a tobacco company or product name or picture on it ⁽⁴⁾.

3.8 Attitudes and beliefs about using tobacco

3.8.1 Attitudes towards using tobacco

Asking youth; if one of their best friends offered them a tobacco product, would they use it, or not? 5.9% (Males 9.8%, Females 2.3%) said that they will definitely use it, while 74.4% (Males 63.3%, Females 84.9%) said that definitely they will not use it. (Figure 3.8.1.1) Regarding the probability of using any tobacco product, at any time during the next 12 months, 6.4% (Males 11.3%, Females 1.8%) said that yes, they will definitely use it, while 76.4% (Males 66.3%, Females 86.0%) said that definitely they will not use it. (Figure 3.8.1.2)



Fig. 3.8.1.1: Probability of using a tobacco product offered by best friend

- (1) Percentage of youth who watched television, videos, or movies in the past 30 days who saw someone using tobacco on television, videos, or movies
- (2) Percentage of youth who were ever offered a free tobacco product from a tobacco company representative
- (3) Percentage of youth who have something (t-shirt, pen, backpack) with a tobacco product brand logo on it
- (4) Percentage of never tobacco users who own something with a tobacco product brand logo or who might use or wear something that has a tobacco company or product name or picture on it



Fig. 3.8.1.2: Probability of using any tobacco product, at any time during the next 12 months

Trying to explore their beliefs about the addictiveness of smoking, youth were asked, once someone starts to smoke, wither its easy or difficult to quit. Results showed that 26.5% (Males 28.6%, Females 24.8%) of the whole study population definitely think that once someone starts smoking tobacco it is difficult to quit ⁽¹⁾. (Figure 3.8.1.3)

Fig. 3.8.1.3: beliefs about the addictiveness of smoking: once someone starts to smoke, wither its easy or difficult to quit



(1) Percentage of youth who definitely think that once someone starts smoking tobacco it is difficult to quit

Results also showed that 20.1% (Males 27.2%, Females 13.7) of the youth think smoking tobacco helps people feel more comfortable or less comfortable at celebrations, parties, or in other social gatherings. Also, 19.6% (Males 27.3%, Females 12.6%) of them think smoking tobacco makes young people look more attractive. Among those who are not currently smokers, 9.4% (Males 15.2%, Females 4.4%) strongly agree with the following "I think I might enjoy smoking a cigarette". Other opinions showed in (Fig. 3.8.1.4).

Another finding was that 19.6% (Males 27.3%, Females 12.6%) of youth think that young people who smoke are more attractive ⁽¹⁾. Results showed that 49.2% (Males 47.5%, Females 50.5) of the youth have one or more parents who smoke ⁽²⁾. Also, 42.0% (Males 60.0%, Females 25.4%) of youth have at least one of their closest friends, who smoke tobacco.



Fig. 3.8.1.4: Answers to the question: Do you agree or disagree with the following: "I think I might enjoy smoking a cigarette."

- (1) Percentage of youth who think that young people who smoke are more attractive
- (2) Percentage of youth who have one or more parents who smoke

3.9 Shisha (Nargile) smoking

3.9.1 Ever smoking Shisha (Nargile)

Shisha (Nargile) smoking is known to be a traditional habit among Palestinians, which recently became more prevalent. This special section was added to the standard questionnaire to explore who much prevalent is this habit among Palestinian youth. Results showed that 36.4% (Males 41.3%, Females 31.9%) of youth have tried or experimented with shisha smoking, even one or two puffs ⁽¹⁾. This percentage increased with age as shown in (Figure 3.9.1)



Fig. 3.9.1: Prevalence of ever smoking Shisha (Nargile)

3.9.2 Age of first-time experiment of smoking Shisha (Nargile)

Asking youth, who said that they have tired or experimented with Shisha (Nargile) smoking, about at what age they did that for the first time, 16.8% (Males 21.1%, Females 11.1%) said that they were at the age seven (7) or younger when they did that. Females tend to experiment with shisha more lately than males. Detailed age distribution shown in (Figure 3.9.2)

⁽¹⁾ Percentage of youth who ever smoked shisha



Fig. 3.9.2: Age of first-time experiment with shisha smoking

3.9.3 Current smoking Shisah (Nargile)

Regarding current smoking shish ⁽¹⁾, results showed that 17.9% (Males 23.8%, Females 12.4%) of youth currently smoke shisha. The prevalence shows significant increase with age (Figure 3.9.3). Also 2.7% (Males 5.2%, Females 0.5%) smoke shisha frequently ⁽²⁾ (>20 days/month)

Fig. 3.9.3: Current Shisha smoking prevalence (%)



(1) Percentage of youth who currently smoke shisha

(2) Percentage of youth who smoked shisha on 20 or more days of the past 30 days

3.9.4 Thoughts about stop smoking Shisha and second-hand shisha smoke

Among youth who currently smoke Shisha (Nargile), 43.4% (males 44.4, Females 41.7) said that they want to quit smoking Shisha now, and 49.5% (Males 51.8, Females 45.2%) of them said that, during the past 12 months, they already tried to quit smoking shisha. (Figure 3.9.4.1).



Fig. 3.9.4.1: Youth who want, and who already tried to stop smoking shisha

Another finding was that 52.6% (Males 46.3%, Females 58.3%) of youth think that the smoke from other people's shisha smoking is definitely harmful to them. Other thoughts regarding this issue shown in (Figure 3.9.4.2)

Fig. 3.9.4.2: Thoughts about the harm of second-hand shisha smoke



3.9.5 Places that youth who smokes shish a tends to smoke at

To explore the most preferable places that youth smoke shisha at, a question has been asked, and results showed that 43.7% (Males 35.0%, Females 62.2%) of those who smoked shisha during the past 30 days, the did that at home. Other places shown in the (Figure 3.9.5)



Fig. 3.9.5: Places that current shish asmokers smoked shish at, when they did that during the past 30 days.

3.9.6 Access and availability of smoking Shisha

Results showed that only 45.5% of those who tried to smoke shisha, during the past 30 days, have been prevented from doing this because of their age. Females (63.0%) tends to be much more prevented from smoking shisha because their age than males (36.0%). Also, 8.0% (Males 12.6%, Females 3.9%) of youth said that, if one of their best friends offered them shisha, they will definitely smoke it, while 72.4% (Males 64.1%, Females 80.1%) of them said that they will definitely not smoke it. Others either said probably yes, or probably no. Recalculating the same variable for those who don't currently smoke shisha, 4.1% (Males 7.3%, Females 1.1%) answered "Definitely yes", while 82.0% (Males 76.1%, Females 87.6%) answered "Definitely no".

3.9.7 Thoughts and attitudes towards smoking shisha

In this respect, results showed that 25.6% (Males 25.6, Females 25.5%) of youth think that, once someone has started smoking shisha, definitely it would be difficult for them to quit. Also, 21.1% (Males 27.7%, Females 15.1%) of youth think smoking shisha helps people feel more comfortable or less comfortable at celebrations, parties, or in other social gatherings. Asking youth "Do you agree or disagree with the following: "I think I might enjoy smoking shisha", 20.9% (Males 25.8%, Females 16.1%) of youth who don't currently smoke shisha answered either "strongly agree" (8.7% (Males 12.5%, Females 4.9%)) or "Agree" (12.2% (Males 13.3, Females 11.2%).

Chapter 4

Discussion

4. Discussion

Global Youth Tobacco Survey (GYTS), as part of Global Tobacco Surveillance System (GTSS), done under the World Health Organization's (WHO) Tobacco Free Initiative program (TFI), with leadership and technical assistance of the Centers for Disease Control (CDC) is an important tool to provide data about the trends of tobacco consumption among this age grouped (13-15 years old) youth. In Palestine, particularly in West Bank, a total of 4 rounds of GYTS have been done since 2001, including this round. Now it is a great opportunity to monitor the trends of tobacco consumption during this period of time since 2001. It also provides a chance to compare data with other countries in the region and in the world.

4.1 Tobacco use

This survey showed that almost one third of the youth (31.3%) is currently using any type of tobacco product. This finding correlates with the one found by the GYTS done by UNRWA in West Bank (WB) in 2014 ⁽¹⁾, which was 34.6%, but not with those done in Gaza Strip (GS) by government ⁽²⁾ in 2013, and by UNRWA ⁽³⁾ in 2013, where prevalence of current tobacco use were 17.3% and 17.9 respectively. This difference between WB and GS is not exclusive to this indicator, but it can be also seen in a number of indicators such as ever tobacco use (any type), where it has been found to be 58.3% in our survey, 63.9% in UNRWA WB's survey ⁽¹⁾, 37.9% ⁽²⁾ and 40.9% ⁽³⁾ in the surveys of GS. The male/female difference can also be seen clearly in current tobacco use, where males (43.7%) more than doubles females (19.7%), while in ever tobacco use the difference is much narrower (males 67.4, Female 49.7%). This shows that males have a higher tendency to continue using tobacco, after first experiment, than females. When comparing our results, regarding these two indicators, with those of 2009 ⁽⁴⁾, a decline in the prevalence of current tobacco use, which was 40.2%, can be observed. The same comparison couldn't be done for ever tobacco use, because it was not mentioned in the fact sheet of the 2009's survey. However, the trends of these indicators show an increase since 2001, where current tobacco use was 22.4% ⁽⁵⁾

⁽¹⁾ GYTS UNRWA West Bank, 2014

⁽²⁾ GYTS Gaza Strip - Palestine, 2013

⁽³⁾ GYTS UNRWA Gaza Strip, 2013

⁽⁴⁾ GYTS West Bank - Palestine, 2009

⁽⁵⁾ GYTS Palestine (WB & GS), 2001

Current cigarette smoking is also another indicator showed a decline since 2009, where it was 21.0% ⁽¹⁾ declined to 17.5% in our survey. Still it is much higher than it has been found in Gaza MOH's survey 2013 ⁽²⁾ (6.5%), and Gaza UNRWA survey 2013 ⁽³⁾ (11.1%), but less than what was found in UNRWA WB's survey 2014 ⁽⁴⁾ (21.0%). The significant difference between WB and GS observed in the recent surveys done by MOH and by UNRWA in both sides, make it logic to think of the comparability between our survey and the two surveys done in 2001 ⁽⁵⁾, and 2005 ⁽⁶⁾, which were done national wide.

Regarding prevalence related to Shisha (Nargile) smoking, this was studied in 2009's survey and in our survey, but not in the surveys of 2001 and 2005. In 2016, current Shisah (Nargile) smoking found to be (17.9%), showing a significant decline compared with (34.8%) that has been found in 2009⁽¹⁾. This was comparable with the finding of GYTS MOH Gaza 2013⁽²⁾, which found that 16.2% of youth in Gaza are currently smoke Shisha. This issue was not studied in the GYTS done by UNRWA. However, under the indicator of current smokers of other products (rather than cigarettes), our finding (19.0%) correlates with UNRWA WB finding (21.8%), but not with the two surveys of Gaza were GYTS MOH 2013⁽²⁾ found it to be (9.0%) and GYTS UNRWA 2013⁽³⁾ found it to be (9.4%).

Although smokeless tobacco is not that much exist in the Palestinian market, and also not observed to be used, our survey showed that 6.0% of youth is currently using it, and 9.8% of them have experimented with it in the past. Although this can be considered a strange finding, it also can be seen in similar percentages in the surveys done UNRWA WB ⁽⁴⁾ and UNRWA GS ⁽³⁾ (4.8% and 4.1% respectively). This leads us to ask ourselves: is there something that we don't see? Or is this just a misunderstanding from the participants?

Our results showed that 9.0% of the youth, who are never been cigarette smokers, are susceptible to use tobacco in the future, and 7.3% of them think that they might enjoy smoking cigarettes. This susceptibility declined as youth become older. In this respect, youth in Gaza showed a higher susceptibility as found in both MOH's and UNRWA's surveys (14.3% and 12.4% respectively).

⁽¹⁾ GYTS West Bank - Palestine, 2009

⁽²⁾ GYTS Gaza Strip - Palestine, 2013

⁽³⁾ GYTS UNRWA Gaza Strip, 2013

⁽⁴⁾ GYTS UNRWA West Bank, 2014

⁽⁵⁾ GYTS Palestine (WB & GS), 2001

⁽⁶⁾ GYTS Palestine (WB & GS), 2005

Generally, indicators related to prevalence of tobacco consumption showed a decline when compared with 2009, but still higher than those of 2001 and 2005. Can we attribute this decline to the interventions recently implemented by the Palestinian authorities in the context of the MPOWER strategies of the FCTC?

Looking at the age that youth first experiment with cigarette smoking, we found that the age 12-13 years old has the highest percentage for both males and females, with 31.3% of youth who ever smoked cigarettes experimented doing that at that period, followed by 10-11 years old for males, and 14-15 years old for females. Regarding main reasons that make smokers start smoke, we found that curiosity and experiment is the most prevalent reason for both genders (57.4% (Males 46.2%, Females 78.1%)), followed by peer pressure (19.7%) for males, and model effect (8.8%) for females.

Another finding of our study is that manufactured cigarettes are generally the most preferred type of tobacco used by currently tobacco users (52.6%), with another substentiall high proportion of them smoking hand-rolled cigarettes (32.2%). Fore males manufactured cigarettes are still the most preferred (62.1%) followed by cigar types (54.2%), while for females Shisha is the most preferred type (43.7%) followed by manufactured cigarettes (28.7%). Also we noticed that for males public places are the most preferred place to smoke at, with 26.1% of current smokers smoke there, while own home is the most preferred place to smoke at, for females with 66.6% of current smokers smoke there.

A shocking finding of our study is that more than two third of youth who are current smokers (70.3% (Males 79.8, Females 41.9) showed signs of dependency and addictiveness to tobacco products.

4.2 Smoking Cessation

Results of our study showed that 57.5% of current cigarette smokers attempted to quit smoking at least one time during the last 12 months. This was the lowest percentage among all the 4 GYTS rounds, with a drop since 2009 by 3.6% (61.1% in 2009). Also a slight drop has been noticed in the desire to stop smoking, since 2009, which found to be 54.6% in 2016 compared with 56.7% in 2009. The real and most significant dorop obsereved in the percentage of current smokers who have ever received help to stop smoking. In 2009 this percentage was 75.8%, declined severly to become 17.4% in our study in 2016. This can explain the decline in the previous two indicators, the desire to stop and the attempts to stop smoking. Among the 4 surveys done recently in Palestine in both sides, the highest percentage of receiving help to stop smoking was found in the GYTS UNRWA Gaza

2013 (42.3%), and so they reported the also the highest percentage of attempts to stop and desire to stop smoking (66.7% and 65.4% respectively). This finding showes the importance and effectivity of offering help to smokers on their desire and attempts to stop smoking. On the other hand, we found that 72.9% of current smokers think that they would be able to stop smoking if they wanted to do.

4.3 Exposure to second-hand smoke

Although it has been found that almost half of youth (47.7%) are exposed to second-hand smoke at their home, which is a high percentage, the good news that this percentage showed a drop since 2009 where it was 63.0%. This drop has been also noticed to be progressive since 2001 when it was 66.8% at that time. Having at least one current smoker parent is another progressively dropped indicator since 2001, through 2009, till 2016 (57.2%, 53.1% and 49.2% respectively). This finding showed a significant variation among the other three surveys done recently in both sides of Palestine. The lowest percentage was found by GYTS MOH Gaza 2013 (35.5%) and the highest was found by GYTS UNRWA WB 2014 (69.0%). A substantial high percentage of youth (17.1%) have most or all friends who are currently smokers with a slight drop since 2009 in which this percentage was 18.3%.

Regarding exposure to second-hand smoke at public places, another slight decline has been observed when compared with the data of 2009. In 2009, public places were expressed generally, and has been reported that 61.6% of youth have exposed to second-hand smoke at this places, while in our study we separated enclosed public places from out-door public places, and this percentage found to be 57.2% and 50.1% respectively.

Schools are other places where youth reported exposure to second-hand smoke at. This indicator showed a significant variation between governmental/private schools and UNRWA schools as can be noticed when comparing this indicator from surveys conducted in both sides of Palestine at the two different domains. In our survey we found that 41.9% of youth have exposed to second-hand smoke at school. A similar percentage has been reported by GYTS MOH Gaza 2013 (49.1%) which was conducted at governmental and private schools. The two surveys conducted by UNRWA at UNRWA schools in West bank and in Gaza in 2013 reported higher percentages for this indicator (54.9% and 47.5% respectively)

4.4 Access and availability

Asking youth about where did they get cigarettes when they smoked them during the last 30 days, we found that overall 43.1% of them have purchased them in a store or shop. But a variation between males and females has been observed in this indicator. So that, half of males (50.7%) still purchasing cigarettes in a store or a shop, while almost two third of females (64.0%) got the cigarettes they smoked from someone else, and only 4.1% of them puchased them in a store or a shop.

Regarding the forms that youth bought cigarettes in, we found that while 42.3% of current smokers bought cigarettes as packs, 37.1% of them bought cigarettes as individual sticks. Hand-rolled cigarettes are another form, either ready-rolled or self-rolled which found to be 9.1% and 4.6% respectively.

Although selling tobacco products to children under 18 years old is banned by law in Palestine, we found that 82.2% of currently smokers were not prevented from purchasing tobacco products because of their age. This percentage is slightly higher than it was in 2009 (79.8%), and also much higher than it was in 2005 (75.0%), the year the anti-tobacco law has been issued. This finding shows clearly that this law has no impact on this issue so far, and needs be enforced more strictly.

During recent years a progressive increase on taxes on tobacco products has been introduced in Palestine. This caused a significant increase in prices of manufactured cigarettes. This high price of manufactured cigarettes has positive impact on 60.4% of youth, so that, it prevented 24.6% from starting smoking, forced 18.0% of them to quit smoking and made another 18.0% of them to decrease the amount that they smoke. The availability of cheap hand-rolled cigarettes unfortunately made 10.4% of youth to shift from manufactured to hand-rolled cigarettes. Also, the availability of these hand-rolled, cheap cigarettes, encouraged 25.7% of current smokers to start smoking, and made another 24.6% of them increase the amount they smoke.

4.5 Knowledge of massages that are against tobacco use

Our results showed that half of youth (52.9%) have noticed an anti-tobacco message on media during the past 30 days. But this indicator can't give an idea about the intensity of anti-tobacco messages on local media, since there is a large proportion of media is external (satellite TV channels and internet). However, the other recent surveys in both sides of Palestine showed higher percentages

for this indicator all above 63%. In 2009 this percentage also was 60.0%. So, did the intensity of anti-tobacco messages on media dropped during last years, especially last 2 years, since the last survey done in 2014 (GYTS UNRWA WB 2014)?

In Palestine, text health warnings are applied on tobacco packages. We found the 4 out of 5 current smokers have noticed these warnings, but only 1 out of 4 of all current smokers, and 1 out of 3 of current smokers who noticed health warnings, thought to quit smoking because these health warnings. So may these health warnings be modified by adding pictorial warnings, as recommended by the FCTC, to strengthen the effectiveness of these health warnings?

Regarding anti-tobacco messages at school, results showed that 60.4% of students have been taught about the danger of tobacco smoke at school, during the past 12. Females reported a higher percentage (65.5%) than males (54.9%). So, do schools of females give more attention to this issue than schools of males? Another finding is that only 35.6% of students said that during the past 12 months, they discussed why youth their age start smoking. For this indicator also, females reported a higher percentage than males (39.4% and 31.5% respectively).

4.5 Knowledge of advertisements or promotions for tobacco

Although all kinds of advertisement, promotion and sponsorship (including points of sale) are banned in Palestine by law, our study showed that, among those who visited points of sale, in the past 30 days, 41.2% said that they saw any tobacco marketing at the points of sale. This finding has been confirmed by the other recent surveys in Palestine, which reported similar or higher percentages. This leads to discuss again the strict enforcement of the anti-tobacco law, to prevent this issue.

Four out of 5 students, who watched TV, video or movies during the past 30 days, said that they saw someone using tobacco on them. Similar and higher percentages were observed by the other surveys in Palestine and the region. Considering the ban on direct advertisement of tobacco products on media enforced widely in most countries, it became clear that tobacco industry shifted their attention to indirect ways of advertisement and promotion, particularly using drama and movies to promote for smoking. The FCTC has discussed this issue during the last Congress of Parties 7 (COP7) and took a decision to address it.

11.2% of youth also said that they have been offered a free tobacco product as promotion form someone works to a tobacco company. Similar percentages have been reported by all the surveys done recently in Palestine. On the other hand, 12.0% of youth said that they own an object with a tobacco company logo on it, making it sure that tobacco companies try to overcome the advertisement ban by direct person-to-person promotion.

4.6 Knowledge and attitudes towards using tobacco products

Our study showed that only one fourth of youth (26.5%) believes in the addictiveness of tobacco products. Similar and higher percentages were also observed by the other surveys in Palestine. Another finding is that, one out of five students (20.1%), thinks that smoking tobacco helps people feel more comfortable at celebrations, parties, and social gatherings. Similar percentages were observed by all other recent surveys done in Palestine. Also a substantial high proportion (31.9%) of our youth is not sure about the danger of other's tobacco smoke on them. These findings show clearly the weak knowledge that our youth have in relation to tobacco products.

Results also showed that the majority of our youth in favor of banning tobacco smoking in enclosed and out-door public places (74.2% and 69.0% respectively), which can be considered as a good base, to build on towards a strict enforcement of the anti-tobacco law.

4.7 Shisha (Nargile) use

In our survey we found that more than one third (36.4%) of youth have smoked Shisha (Nargile) at least once during their life. 16.8% of them said that they did this at the age of 7 years or younger. Also 17.9% of youth found to be currently Shisha smokers. We noticed that females are more likely to be current shisha smokers (12.4%) than being current cigarette smokers (7.5%), while for males; this is not the case, so that current shisha smokers and current cigarette smokers have almost the same percentage (17.5% and 17.9% respectively). Fortunately, this indicator showed a significant drop since 2009, which was 34.8%.

The good news that two out of five students, who are currently shish smokers, said that they want to quit smoking shish now, and almost half of current shish smokers have at least one attempt to quit smoking shish during the past 12 months. The bad news is that almost half of our youth (47.4%) are not sure about the danger of other's shish smoke. Also, only 25.6% of youth are sure about the addictiveness of shish smoking. Another finding that is 21.1% of youth think smoking

shisha helps people feel more comfortable or less comfortable at celebrations, parties, or in other social gatherings. On the other hand, 20.9% of youth who don't currently smoke shisha think that they might enjoy smoking shisha in the future. All these findings show that the knowledge of youth about shisha has to be changed and corrected.

Regarding places that current shish asmokers prefer to smoke shish at, 43.7% of youth said that they smoke at home. This percentage was higher among females than it is among males (62.2% and 35.0% respectively). This can lead us to think that smoking shish is culturally more acceptable behaviour by family, so females feel free to do it at home!

Results showed that 45.5% of youth who tried to smoke shisha during the past 30 days were prevented from doing this because of their age. Comparing this with the percentage of youth who were prevented to purchase cigarettes because of their age, we can conclude that youth are more likely to be prevented from smoking shisha, but not from purchasing cigarettes, because of their age.

Chapter 5

Conclusion and recommendations

Conclusion

Although the results of this study showed a substentially significant decline in the indicators related to prevalence of tobacco use, in comparison with the 3ed round done in 2009, the prevalences per se still high and alarming. Also, it highlighted a significant weakness in the knowledge of the youth regarding tobacco related issues. Another remarkable problem is the lack of enforcement of anti-tobacco law and regulations, leading to a high exposure of non-smokers to second-hand smoking at public places, availability of tobacco products to minors, and promotion of smoking in different ways. Shisah (Nargile) smoking seems to be taking a noticable place in the Palestinian's culture, and it seems more culturally accepted, especially for females, than cigarette smoking. Also it has been clearly seen that not much of smokers are being offered help to quit smoking, although a remarkable proportion of them wan, and already tried to quit smoking.

Recommendations

- The next rounds of GYTS in Palestine should be done national wide, including West Bank and Gaza Strip, dividing them into two domains, which will give us national statistics rather than subnational ones, and increase the comparability of the survey.
- 2. In the next rounds, the issue of smokeless tobacco should be explained to youth in a better way, so we can be sure that they understand exactly what does it mean, and answer quesions realted correctly.
- 3. Efforts shoud be given to rise awarness of youth about the danger of tobacco use and second-hand smoke, and to increase their knowledge and change their attitudes towards tobacco smoking. This should be done in a multidiciplinary manner, at home, scholl, media and social activities.
- 4. A special focus should be put on the age group 10-13 years, within which most of youth experiments and starts smoking.
- 5. Encourage the enforcement of anti-smoking legislations and regulations at national level (prohibiting from serving shisha and selling cigarettes to adolescents).
- 6. Encourage initiatives to reactivate non-smoking policy in schools.
- Guiding concerned sectors to adopt programs based on life skills (increase self-esteem (female students), decision making, and peer pressure (male students) among students, and integrate these skills in Palestinian curriculum
- 8. Special attention should be given to raise awareness about shisha hazards among both genders.

- 9. Encourage community based intervention that directed towards helping parents and school staff to understand the effect of role model, and how to help smoking students to quit.
- 10. Adopt free smoking media policy which ban indirect advertisement of smoking behaviours.
- 11. Call doctors', teachers', and all youth contacts' attention to their importance as role model of adopting healthy styles in MOH facilities, schools and educational institutes.
- 12. Adopt participatory, collaborative and organized efforts within the national bodies to promote comprehensive anti-smoking programs

ANNEXES

GYTS Objectives

The Global Youth Tobacco Survey (GYTS), a component of the Global Tobacco Surveillance System (GTSS), is a global standard for systematically monitoring youth tobacco use (smoking and smokeless) and tracking key tobacco control indicators.

GLOBAL YOUTH TOBACCO SURVEY

GYTS is a nationally representative school-based survey of students in grades associated with 13 to 15 years of age and is designed to produce cross-sectional estimates for each country. GYTS uses a standard core questionnaire, sample design, and data collection protocol. It assists countries in fulfilling their obligations under the World Health Organization (WHO) Framework Convention on Tobacco Control (FCTC) to generate comparable data within and across countries. WHO has developed MPOWER, a package of selected demand reduction measures contained in the WHO FCTC:

mpower

Monitor tobacco use & prevention policies

Protect people from tobacco smoke

Offer help to quit tobacco use

Warn about the dangers of tobacco

Enforce bans on tobacco advertising, promotion, & sponsorship

Raise taxes on tobacco

GYTS Methodology

GYTS uses a global standardized methodology that includes a two-stage sample design with schools selected with a probability proportional to enrollment size. The classes within selected schools are chosen randomly and all students in selected classes are eligible to participate in the survey. The survey uses a standard core questionnaire with a set of optional questions that permits adaptation to meet the needs of the country on tobacco use and key tobacco control indicators. The questionnaire consists of the following topics: tobacco use (smoking and smokeless), cessation, secondhand smoke (SHS), pro- and anti-tobacco media and advertising, access and availability to obtain tobacco products, knowledge and attitudes regarding tobacco, and the Shisha (Nargile) section, which has been added. The questionnaire is self-administered; using scannable paper-based bubble sheets, it is anonymous to ensure confidentiality.

In West Bank, GYTS was conducted in 2016 by Ministry of Health in partnership with Ministry of Education and Higher Education, under the coordination of the NCD's Department. A total of 1,518 eligible students in grades 7-10 completed the survey, of which 1,332 were aged 13-15 years. The overall response rate of all students surveyed was 95.3%.





GYTS Highlights

TOBACCO USE

- 31.3% overall, 43.7% of boys, and 19.7% of girls currently used any tobacco products.
- 28.1% overall, 39.7% of boys, and 17.7% of girls currently smoked tobacco.
- 17.5% overall, 28.7% of boys, and 7.5% of girls currently smoked cigarettes.
- 6.0% overall, 8.5% of boys, and 3.6% of girls currently used smokeless tobacco.
- 17.9% overall, 23.8% of boys, and 12.4% of girls currently smoked Shisha (Nargile)

CESSATION

- Almost 6 out of 10 current smokers tried to stop smoking in the past 12 months.
- About 5 in 10 current smokers want to stop smoking now.

SECONDHAND SMOKE

- 47.7% of students were exposed to tobacco smoke at home.
- 57.2% of students were exposed to tobacco smoke inside enclosed public places.

ACCESS & AVAILABILITY

- 55.5% of current cigarette smokers obtained cigarettes by buying them from a store, shop, street vendor, or kiosk.
- Among current cigarette smokers who bought cigarettes, 82.2% were not prevented from buying them because of their age.

MEDIA

- 5 out of 10 students noticed anti-tobacco messages in the media.
- 4 out of 10 students noticed tobacco advertisements or promotions when visiting points of sale.
- One out of 10 students own something with a tobacco brand logo on it.

KNOWLEDGE & ATTITUDES

- 68.1% of students definitely thought other people's tobacco smoking is harmful to them.
- 74.2% of students favor banning smoking inside enclosed public places.





GYTS GLOBAL YOUTH TOBACCO SURVEY

FACT SHEET WEST BANK 2016

TOBACCO USE

SMOKED TOBACCO	OVERALL (%)	BOYS (%)	GIRLS (%)
Current tobacco smokers ¹	28.1	39.7	17.7
Current cigarette smokers ²	17.5	28.7	7.5
Frequent cigarette smokers ³	4.8	10.1	0.0
Current smokers of other tobacco ⁴	22.7	31.3	14.7
Ever tobacco smokers ⁵	55.3	64.9	46.4
Ever cigarette smokers ⁶	43.6	54.9	33.6
Ever smokers of other tobacco ⁷	39.9	47.2	33.4
SMOKELESS TOBACCO			
Current smokeless tobacco users ⁸	6.0	8.5	3.6
Ever smokeless tobacco users ⁹	9.8	12.5	7.2
SHISHA (NARGILE) SMOKE			
Current Shisha smokers ¹⁰	17.9	23.8	12.4
Ever Shisha smokers ¹¹	36.4	41.3	31.9
TOBACCO USE (smoked and/or smokeless)			
Current tobacco users ¹²	31.3	43.7	19.7
Ever tobacco users ¹³	58.3	67.6	49.7
SUSCEPTIBILITY			
Never to bacco users susceptible to to bacco use in the future 14	9.8	15.8	5.0
Never smokers who thought they might enjoy smoking a cigarette ¹⁵	7.3	11.3	5.0

GYTS West Bank Prevalence changes between 2009 and 2016 43.6 43.8 31.3 30 25 2009 22. 17.9 20 2016 15 Current Shisha smokers Current cigarette smokers Current tobacco Current smokers of Other products Ever Cigarette smokers

CESSATION

	OVERALL (%)	BOYS (%)	GIRLS (%)
Current smokers who tried to stop smoking in the past 12 months	57.5	58.4	53.7
Current smokers who want to stop smoking now	54.6	55.0	-
Current smokers who thought they would be able to stop smoking if they wanted to	72.9	69.2	87.9
Current smokers who have ever received help/advice from a program or professional to stop smoking	17.4	16.9	19.2

SECONDHAND SMOKE

	OVERALL (%)	BOYS (%)	GIRLS (%)
Exposure to tobacco smoke at home ⁺⁺	47.7	40.6	54.4
Exposure to tobacco smoke inside any enclosed public place ††	57.2	62.6	52.2
Exposure to tobacco smoke at any outdoor public place ^{††}	50.1	57.7	43.0
Students who saw anyone smoking inside the school building or outside on school property [†]	41.9	60.9	24.2

ACCESS & AVAILABILITY

	OVERALL (%)	BOYS (%)	GIRLS (%)
Current cigarette smokers who obtained cigarettes by buying them from a store, shop, street vendor, or kiosk ¹⁶	55.5	65.8	-
Current cigarette smokers who were not prevented from buying cigarettes because of their age ¹⁷	82.2	83.1	-
Current cigarette smokers who bought cigarettes as individual sticks ¹⁸	37.1	37.6	-
MEDIA			
TOBACCO INDUSTRY ADVERTISING	OVERALL (%)	BOYS (%)	GIRLS (%)
Noticing tobacco advertisements or promotions at points of sale ¹⁹	41.2	45.2	36.8
Students who saw anyone using tobacco on television, videos, or movies ²⁰	74.5	72.4	76.5
Students who were ever offered a free tobacco product from a tobacco company representative	11.1	15.5	7.3
Students who own something with a tobacco brand logo on it	12.0	17.3	7.3
ANTI-TOBACCO ADVERTISING			
Noticing anti-tobacco messages in the media [†]	52.9	52.4	53.4
Noticing anti-tobacco messages at sporting or community events ²¹	32.7	37.4	26.8
Current smokers who thought about quitting because of a warning label ²²	31.4	30.2	34.0
Students who were taught in school about the dangers of tobacco use in the past 12 months	60.4	54.9	55.5

KNOWLEDGE & ATTITUDES

	OVERALL (%)	BOYS (%)	GIRLS (%)
Students who definitely thought it is difficult to quit once someone starts smoking tobacco	26.5	28.6	24.8
Students who thought smoking tobacco helps people feel more comfortable at celebrations, parties, and social gatherings	20.1	27.2	13.7
Students who definitely thought other people's tobacco smoking is harmful to them	68.1	57.8	77.7
Students who favor banning smoking inside enclosed public places	74.2	68.0	79.5
Students who favor banning smoking at outdoor public places	69.0	62.0	75.1

¹ Smoked tobacco anytime during the past 30 days. ² Smoked cigarettes anytime during the past 30 days. ³ Smoked cigarettes on 20 or more days of the past 30 days. ⁴ Smoked tobacco other than cigarettes anytime during the past 30 days. ⁵ Ever smoked any tobacco, even one or two puffs. ⁶ Ever smoked cigarettes, even one or two puffs. ⁷ Ever smoked tobacco other than cigarettes, even one or two puffs. ⁸ Used smokeless tobacco anytime during the past 30 days. ⁹ Ever used smokeless tobacco. ¹⁰ Smoked Shisha (Nargile) anytime during the past 30 days. ⁹ Ever used smokeless tobacco. ¹⁰ Smoked Shisha (Nargile) and/or used smokeless tobacco anytime during the past 30 days. ¹³ Ever smoked tobacco and/or used smokeless tobacco. ¹⁴ Susceptible to future tobacco use includes those who answered "Definitely yes", "Probably yes", or "Probably not" to using tobacco if one of their best friends offered it to them or those who answered "Definitely yes", or "Strongly agree" to the statement: "I think I might enjoy smoking a cigarette". ¹⁶ How cigarettes were obtained the last time respondents smoked cigarettes in the past 30 days. ¹⁷ Of those who tried to buy cigarettes during the past 30 days. ¹⁸ Based on the last purchase, of those who bought cigarettes during the past 30 days. ¹⁹ Among those who attended sporting or community events in the past 30 days. ²² Among those who noticed warning labels on cigarette packages in the past 30 days. [†] During the past 30 days. ⁴¹ During the past 7 days.

NOTE: Students refer to persons aged 13-15 years who are enrolled in school. Data have been weighted to be nationally representative of all students aged 13-15 years. Percentages reflect the prevalence of each indicator in each group, not the distribution across groups.

--Indicates estimate based on less than 35 unweighted cases and has been suppressed.

Last updated 04 June 2017

Annex 2: GYTS in Palestine West Bank (2001 – 2016) – Comparative Table and trend charts

	Indicator	GYTS WB 2001		300C 9W 2TVD	CUUZ AW CI ID		GVTS WB 2009			6YTS WB 2016	
		2 0	ш	2	L L	0	Σ	ш	0	Σ	ш
-	Current Cigarette Smokers	14.2 (24.7 4.	7)	18.0 (27	7.6 8.7)	21.0	(36.1	7.5)	17.5	(28.7	7.5)
2	Current Smokers of Other Products	16.6 (23.7 10	(0.	16.7 (20	.8 12.7)	34.8	(44.7 2	5.1)	22.7	(31.3 1	4.7)
ŝ	Ever Cigarette Smokers	49.5 (65.7 34	.5)	35.4 (50	.2 20.8)	43.8	(61.4 2	(0.7	43.6	(54.9 3	3.6)
4	Current Tobacco Users	22.4 (33.8 11	(8.	27.5 (37.	.8 17.4)	40.2	(52.8 2	(7.7)	31.3	(43.7 1	9.7)
ഹ	Susceptibility to Future Tobacco Use	10.0 ()		20.2 ((26.		-	9.8	(15.8	5.0)
9	Attempt to Stop Smoking in the Past 12 Months	66.7 ()		59.8 ((-	61.	.1 (-	57.5	(58.4 5	3.7)
2	Desire to Stop Smoking	61.3 ()		64.9 ((56.) /.	-	54.6	(55.0 5	(6.0
ω	Received Help to Stop Smoking	78.0 ()		78.5 ((-	75.) 8.	-	17.4	(16.9 1	9.2)
6	Exposure to Secondhand Smoke at Home	66.8 ()		62.4 ((-	63.) 0:	-	47.7	(40.6 5	4.4)
10	Have at least one parent who smokes	57.2 ()		54.4 ((-	53.	.1 (-	49.2	(47.5 50).5)
11	Have most or all friends who smoke	17.0 ()		12.9 ((18.	.3 (-	17.1	(27.3 7	.5)

12	Exposure to Secondhand Smoke in Enclosed Public Places				57.2 (62.6 52.2)
13	Exposure to Secondhand Smoke at Outdoor Public Places	() ^ע .עכ	() 4 .60	() 0.10	50.1 (57.7 43.0)
14	Purchasing cigarettes in a store	38.2 ()	27.5 ()	33.3 ()	43.1 (50.7 4.1)
15	Minors' Access to Purchasing Cigarettes	77.5 ()	75.0 ()	79.8 ()	82.2 (83.1 69.9)
16	Prefer smoking at home	20.0 ()	21.2 ()	NA	21.7 (9.9 66.6)
17	Awareness of Anti-Tobacco Messages in the Media	72.0 ()	58.4 ()	60.5 ()	52.9 (52.4 53.4)
18	Learning About Dangers of Tobacco Use at School	53.2 ()	60.3 ()	42.6 ()	60.4 (54.9 65.5)
19	Discussed in class reasons why people their age smoke	37.9 ()	49.2 ()	37.8 ()	35.6 (31.5 39.4)
20	Noticing pro-cigarette smoke ads on billboards	68.9 ()	70.6 ()	NA	NA
21	Noticing pro-cigarette smoke ads in newspapers or magazines	63.9 ()	64.5 ()	NA	NA
22	Exposure to Free Tobacco Promotion	NA	() 6.6	14.9 ()	11.1 (15.5 7.3)
23	Ownership of an Object with a Tobacco Brand Logo	33.1 ()	18.2 ()	20.7 ()	12.0 (17.3 7.3)
24	Beliefs about the Dangers of Secondhand Smoke	83.5 ()	43.1 ()	58.2 ()	68.1 (57.8 77.7)
25	Banning Smoking in Enclosed Public Places			75 0 /	74.2 (68. 79.5)
26	Banning Smoking at Outdoor Public Places	() C.20	() 6.01	() ø.c <i>i</i>	69.0 (62.0 75.1)
27	Smoking makes boys attractive	30.2 ()	20.0 ()	22.6 ()	27.3 ()
28	Smoking makes girls attractive	29.7 ()	17.1 ()	17.4 ()	12.6 ()



Chart 1: Trends of Indicators related to prevalence of tobacco use - GYTS West Bank 2001-2016







Chart 3: Trends of quit smoking related indicators - GYTS West Bank 2001-2016



Chart 4: Trends of Indicators related to Second-hand smoke - GYTS West Bank 2001-2016



Chart 5: Trends of Indicators related to media and advertising - GYTS West Bank 2001-2016





MB CON 2009	M M	21.0 (36.1 7.5)	NA	NA	34.8 (44.7 25.1)	NA	43.8 (61.4 27.0)	NA	NA	NA	40.2 (52.8 27.7)	NA
Gaza UNRWA 2013	0 1 2 0	11.1 (13.7 8.1)	15.4 (19.1 11.0)	2.0 (3.3 0.5)	9.4 (12.5 5.8)	37.6 (43.1 30.9)	31.1 (36.0 25.1)	21.1 (24.8 16.7)	4.1 (3.5 4.9)	7.7 (7.2 8.2)	17.9 (20.9 14.3)	40.9 (45.8 34.9)
4102 AWЯNU 8W	۲ ع 0	21.0(31.2 13.1)	31.8 (44.8 22.0)	3.8 (8.8 0.0)	21.8 (30.5 15.3)	61.2 (72.6 52.4)	51.9 (62.7 43.8)	43.4 (53.0 36.2)	4.8 (5.8 4.1)	9.2 (10.7 7.9)	34.6 (47.5 24.7)	63.9 (74.2 55.8)
642 GOV 2013	۲ ۲	6.5 (9. 3.5)	NA	NA	9.0 (12.2 6.0)	32.2 (41.9 23.1)	24.6 (33.1 16.8)	20.2 (25.2 15.6)	NA	NA	17.3 (23.6 11.0)	37.9 (47.9 28.3)
MB CON 2016	۲ ک O	17.5 (28.7 7.5)	28.1 (39.7 17.7)	4.8 (10.1 0.0)	22.7 (31.3 14.7)	55.3 (64.9 46.4)	43.6 (54.9 33.6)	39.9 (47.2 33.4)	6.0 (8.5 3.6)	9.8 (12.5 7.2)	31.3 (43.7 19.7)	58.3 (67.6 49.7)
Indicator		Current Cigarette Smokers	Current Tobacco Smokers	Frequent Cigarette Smokers	Current Smokers of Other Products	Ever Tobacco Smokers	Ever Cigarette Smokers	Ever Smokers of Other Products	Current Smokeless Tobacco Users	Ever Smokeless Tobacco Users	Current Tobacco Users	Ever Tobacco Users
		-	2	3	4	ъ	9	7	8	6	10	11

Annex 3: Recent GYTS surveys done in Palestine – Major indicators Comparative table

26.2 ()	AN	61.1	56.7	NA	75.8 ()	63.0 ()		() 0'TO	NA	33.3 ()	79.8 ()		NA		60.5 ()	NA
12.4 (17.2 7.7)	5.2 (7.4 3.1)	66.7 (72.4)	65.4 (71.1)	76.0 (79.0)	42.3 (41.8 43.4)	51.5 (47.2 56.8)	59.6 (57.5 62.3)	60.2 (60.5 59.6)	47.5 (51.1 43.0)	40.9 (55.0)	72.4 (76.1)		54.4 (52.8)		65.7 (64.6 67.3)	45.4 (47.4 42.1)
10.8 (17.7 7.8)	8.5 (11.8 6.9)	54.1 (58.4 45.0)	56.7 (58.9 51.0)	68.7 (63.8 79.1)	26.9 (24.1 31.8)	69.0 (66.8 70.9)	66.7 (72.5 62.0)	64.8 (69.2 61.4)	54.9 (67.8 45.2)	42.2 (61.0 8.5)	72.4 (70.7)		47.5 (47.4)		63.4 (60.6 65.4)	49.7 (49.8 49.0)
14.3 (16.6 12.7)	NA	52.3 (60.5)	62.3 (60.2)	79.0 (77.5)	22.0 (26.2 8.6)	35.5 (33.7 37.5)		(0.040.043.04	41.9 (51.6 32.8)	NA	NA		NA		68.1 (65.9 70.6)	42.9 (46.7 38.4)
9.8 (15.8 5.0)	7.3 (11.3 5.0)	57.5 (58.4 53.7)	54.6 (55.0 50.9)	72.9 (69.2 87.9)	17.4 (16.9 19.2)	47.7 (40.6 54.4)	57.2 (62.6 52.2)	50.1 (57.7 43.0)	41.9 (60.9 24.2)	55.5 (65.8 4.1)	82.2 (83.1 69.9)		37.1 (37.6 38.9		52.9 (52.4 53.4)	32.7 (37.4 26.8)
Susceptibility to Future Tobacco Use	Susceptibility to Cigarette Smoking	Attempt to Stop Smoking in the Past 12 Months	Desire to Stop Smoking	Ability to Stop Smoking	Received Help to Stop Smoking	Exposure to Secondhand Smoke at Home	Exposure to Secondhand Smoke in Enclosed Public Places	Exposure to Secondhand Smoke at Outdoor Public Places	Exposure to Secondhand Smoke at School	Obtaining Cigarettes from a Person-to- Person Retail Purchase	Minors' Access to Purchasing Cigarettes	Pack	Unit of Purchased Cigarettes Sticks	Hand rolled	Awareness of Anti-Tobacco Messages in the Media	Awareness of Anti-Tobacco Messages at Sporting or Community Events (Among
12	13	14	15	16	17	18	19	20	21	22	23		24		25	26

	Ч	42.6 ()	NA	NA	14.9 ()	20.7 ()	NA	NA	58.2 ()	75.8 ()	NA
	43.0 (46.1 36.0)	56.6 (53.6 60.1)	47.7 (49.4 45.4)	75.6 (72.7 78.9)	9.0 (11.4 6.2)	10.5 (13.0 7.6)	27.8 (26.5 29.2)	21.5 (21.7 21.1)	70.7 (62.9 80.4)	72.2 (66.3 79.1)	65.0 (60.4 70.3)
	36.4 (39.7 31.3)	62.0 (55.6 67.2)	52.0 (60.2 45.7)	85.0 (82.0 87.0)	12.5 (18.7 7.9)	16.8 (23.0 12.3)	34.9 (31.4 37.7)	22.4 (27.1 18.9)	72.1 (64.7 78.2)	73.8 (65.9 79.8)	66.1 (61.2 70.0)
	38.4 (44.2 25.9)	40.7 (45.8 36.6)	43.3 (43.1 43.9)	71.9 (73.3 70.8)	٧N	ΝA	20.9 (19.7 22.7)	23.2 (29.1 17.9)	67.0 (62.9 71.2)	81.0 (79.8 83.3)	ΨN
	31.4 (30.2 34.0)	60.4 (54.9 65.5)	41.2 (45.2 36.8)	74.5 (72.4 76.5)	11.1 (15.5 7.3)	12.0 (17.3 7.3)	26.5 (28.6 24.8)	20.1 (27.2 13.7)	68.1 (57.8 77.7)	74.2 (68. 79.5)	69.0 (62.0 75.1)
Those who Attended Events	Thinking of Quitting Because of Health Warnings on Cigarette Packages (Among Current Smokers who Noticed Health Warnings)	Learning About Dangers of Tobacco Use at School	Awareness of Tobacco Marketing at Points of Sale (Among Those who Visited Points of Sale)	Awareness of Tobacco Use on Television, Videos, or Movies (Among Those who Watched Television, Videos, or Movies	Exposure to Free Tobacco Promotion	Ownership of an Object with a Tobacco Brand Logo	Belief about the Addictiveness of Smoking	Belief that Smoking Helps People Feel Comfortable at Social Gatherings	Beliefs about the Dangers of Secondhand Smoke	Banning Smoking in Enclosed Public Places	Banning Smoking at Outdoor Public Places
	27	28	29	30	31	32	33	34	35	36	37

THE END