

Tobacco Use & Chewing among Youth in Palau

Results from the Palau Youth Tobacco Survey 2009

Youth tobacco use is rising.

Since 2001, among youth aged 13-15 years in Palau:

- Current smoking has nearly **doubled**, from 21.6% to 41.3%.
- The use of smokeless tobacco has risen nearly **5 times**, from 6.3% to 29.1%.
- Second hand smoke exposure at home has increased.

The data confirms that tobacco use and chewing are major public health challenges in Palau.



Tobacco use among youth in Palau is a growing problem.

The Palau Youth Tobacco Survey (PYTS) was conducted among all Middle and High School students in Palau in 2001, 2005 and 2009. Data for all students aged 13-15 years was extracted and used for this Fact Sheet. This allows comparisons to be made with all other countries that have done the Global Youth Tobacco Survey (GYTS), a school-based survey covering 13 to 15 year old students.

Tobacco use among youth is significant.

Smoking:

Four out of 10 (41.3%) youth aged 13-15 currently smoke.

Smokeless tobacco use:

Nearly 1 in 3 (29.1%) youth aged 13-15 currently uses smokeless tobacco.

Chewing with tobacco:

Over half of youth chew betel nut; 76.2% add cigarettes to their chew.

Key Findings

The 2009 PYTS reveals some startling findings about tobacco use among youth aged 13-15 years in the Republic of Palau.

Tobacco consumption, in its various forms, is prevalent and appears to be increasing over time.

In 2009, nearly 3 out of 10 currently use smokeless tobacco, 4 out of 10 currently smoke and 5 out of 10 chew betel nut (areca nut/betel quid). Among the chewers, three-fourths add cigarettes and nearly 8% add smokeless tobacco to their chew. Since 2001, current smoking has nearly doubled, and the use of smokeless tobacco has risen nearly 5 times.

Consumption begins at a very young age.

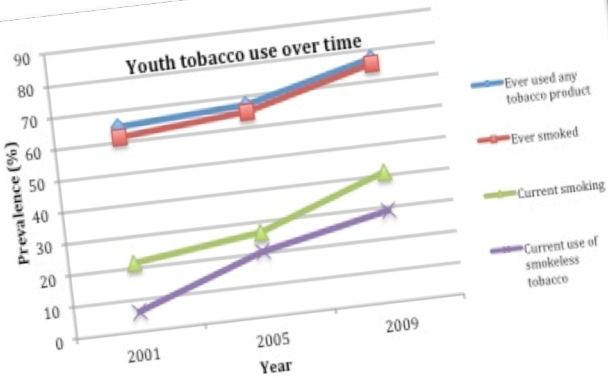
One in 5 youth who have ever tried smoking, smoked their first entire cigarette before the age of 11. One in ten youth aged 13-15 years started chewing at age 5 years or younger, and 4% started adding tobacco to their chew at age 5 years.

Boys consume tobacco differently from girls.

Boys are significantly more likely to smoke cigarettes, cigars, bidis and kreteks, and slightly more likely to use smokeless tobacco products. Girls are more likely to chew “betel nut” (areca nut/betel quid) overall, and more likely to add cigarettes to their chew, while boys are more likely to add smokeless tobacco.

Addiction starts early.

One in 4 young smokers claim they need to smoke every day; among chewers, 1 in 10 can go less than an hour without a chew. The need for another cigarette or chew within a short period of time is consistent with addiction. Regardless of sex, **nearly three-quarters of young smokers want to quit smoking.** The fact that they continue to consume tobacco despite wanting to quit indicates addiction can set in early in life.



Youth can readily obtain tobacco.

Despite the law that prohibits sales of tobacco products to minors, **almost 1 in 5 youth (17.9%) reported getting their cigarettes from a store.** Almost half of minors who bought cigarettes were not refused because of their age. Compounding the issue is the prevalence of social sources of tobacco products and chews. Among the chewers, **majority got their chews from friends or other people they know**, followed by their family.

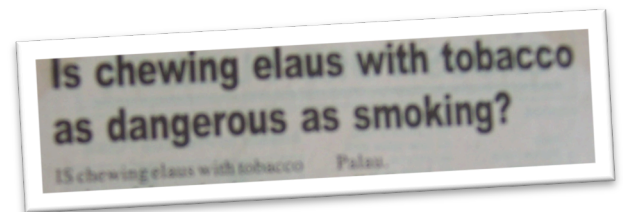


Second hand smoke exposure remains high.

Over half (53.8%) of the respondents reported that they live in homes with smokers. Close to half of youth (44.2%) have been exposed to second hand smoke in their homes, and 1 in 3 (31.7%) have been exposed to SHS while riding in a car during the past 7 days. Over sixty percent (64.1%) have been exposed to SHS in places outside of their homes.

Knowledge about the harmful effects of tobacco, chewing and second hand smoke is uniformly high.

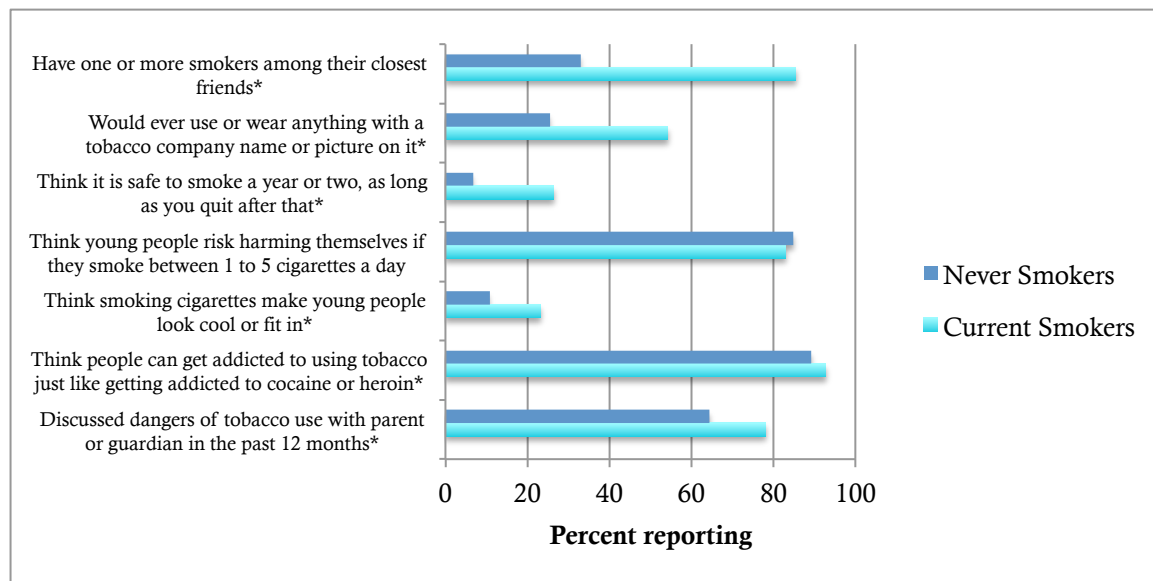
Majority of youth are aware of the harmfulness and addictiveness of tobacco and betel nut, and the adverse health impact of second hand smoke. This holds true regardless of tobacco use/chewing status. **Having adequate knowledge about the risks of tobacco consumption and chewing does not appear to protect youth from using these harmful substances.**



Current smokers and never smokers differ in their social influences, perceptions and beliefs.

Current and never smokers have similar levels of knowledge about tobaccos harms. However, they differ in that never smokers are **less likely** to: (1) have smokers among their closest friends; (2) find smoking attractive; (3) believe that smoking is safe if you can quit after a few years; and (4) be receptive to tobacco advertising.

Differences between current and never smokers, youth 13-15 years, Palau, 2009



* = statistically significant difference

Youth tobacco use a MAJOR problem: Urgent action needed

The data from the 2009 PYTS confirm that youth tobacco use and chewing are MAJOR public health challenges for Palau. Effective action is needed now.

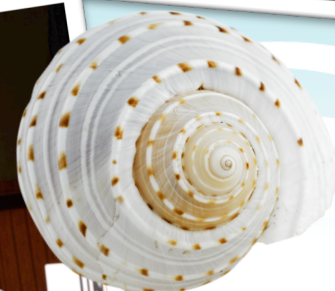
- While Palau is doing a good job educating youth about the dangers of tobacco and betel nut, **education alone does NOT protect young people from tobacco use and chewing. Education should NOT be the major strategy for preventing tobacco use and chewing.**
- **Reducing the social acceptability and attractiveness of tobacco use and chewing** is critical. This can be achieved by:
 1. **Fully enforcing the ban on tobacco use and chewing in all public places.**
 2. **Assisting adult tobacco users and chewers to quit**, so youth have positive role models to emulate.
- 3. **Enforcing the ban on tobacco advertising, sponsorship and promotions.**
- 4. **Mandating graphic warnings** on all tobacco products.
- Making tobacco inaccessible is also important. This can be achieved by:
 1. **Strictly enforcing the ban on sales** of tobacco and chews to minors.
 2. **Raising taxes** on tobacco and betel nut.
- Helping young tobacco users and chewers to quit is necessary. This requires:
 1. Developing **cessation** programs for youth.
 2. Addressing strategies to help **quit chewing as well as tobacco use.**
 3. Since youth listen to youth, **building capacity among youth** to be cessation providers.

All-in-one solution: the FCTC

If Palau is to avert the potential epidemic of tobacco-related death, disease and disability in the future, which the rising prevalence of tobacco use and chewing foretell, it needs to address all these action areas comprehensively. These action areas are also contained in the **WHO Framework Convention on Tobacco Control (FCTC)**. The Republic of Palau, which played a pivotal role in the negotiations for the convention, was the 9th country in the world to ratify the WHO FCTC, in February 2005. Today, Palau needs to redeem its leadership as a Party to the FCTC, by **FULLY**

IMPLEMENTING AND ENFORCING the FCTC articles.

The cost of inaction will be borne by the health of future generations of people in Palau. The implementation enforcement of the FCTC within the primarily good governance and strong determine the future health and economic



and country requires political will. Its success will well being of the country's youth.

If we love our children, we must curb tobacco use and chewing now. Fully enforce the WHO FCTC!

The Palau YTS was conducted through a collaborative effort of the Palau Ministry of Health Tobacco Prevention and Control Program, the Palau Ministry of Education, Palau's private schools and the Coalition for a Tobacco Free Palau.

For more information on the PYTS and on tobacco control strategies, please contact:

Mr. Roman B. Oseked, Sr.
 Mr. Kaipo Recheungel
 Tobacco Prevention and Control Program
 Division of Behavioral Health
 Ministry of Health
 PO BOX 6027
 Koror, Palau 96940
 Telephone: 680-488-8118
 Facsimile: 680-488-8119
 Email: stun@palaunet.com