# Tobacco and cannabis smoking among adolescents

Tobacco smoking in childhood and adolescence has both immediate and long-term health consequences, increasing the risks of cardiovascular diseases, respiratory illnesses and cancer in the long term. While cigarette smoking tends to decrease among adolescents, new tobacco and nicotine products (e.g. roll-your-own tobacco, heated tobacco, e-cigarettes) that are also harmful for health are emerging.

In recent years, cigarette smoking among adolescents has continued to decline in most EU countries, but at a slower pace. On average across EU countries, 21% of 15-16 year-olds reported having smoked cigarettes at least once in the past month in 2019 (Figure 4.1), a decrease of 3 percentage points compared with 2015 (24%). By comparison, the reduction was 8 percentage points between 2011 and 2015, from 32% to 24%.

Smoking rates in adolescents remain relatively high in some countries, reaching 30% or more in Romania, Bulgaria and Italy. Rates are lowest in Malta and Sweden as well as in Iceland and Norway (11% or less). Smoking rates in girls are higher than those in boys in most EU countries. On average in 2019, 22% of 15-16 year-old girls reported cigarette use in the past month compared with 20% of boys.

The Europe's Beating Cancer Plan has set out an ambitious goal to create a "tobacco-free generation" where less than 5% of the population uses tobacco by 2040 (European Commission, 2021[1]). Over the last years, a mix of policies have contributed to reducing smoking rates among children and adolescents, including increased taxes on tobacco products, restrictions on youth purchase, and more recently bans on characterising flavours in cigarettes and combined health warnings implemented under the Tobacco Products Directive (2014/40/EU). To further enforce the EU legislation on tobacco advertising, the European Commission recommends including new tobacco products and covering social media channels (European Commission, 2022[2]).

Cannabis is by far the most used drugs among adolescents. Frequent and heavy cannabis use during adolescence is linked to long-term increased risk of dependence and cognitive functioning problems, including memory loss and attention deficit disorders.

On average in EU countries, nearly 1 in 12 (8%) 15-16 year-olds reported smoking cannabis at least once in the past month in 2019 (Figure 4.2). This proportion ranged from 4% or less in Sweden, Romania and Finland, to over 13% in France, the Netherlands and Italy. The use of cannabis has decreased since 2015 in about half of EU countries, whereas it has increased in the other half.

EU countries are taking different legal and policy approaches to cannabis use. While most countries ban the use of cannabis, others decriminalise or legalise its use – either for medical or recreational purposes.

## Definition and comparability

The data come from the European School Survey Project on Alcohol and Other Drugs (ESPAD). Data are drawn from school-based samples of students who reach the age of 16 years in the calendar year of the survey, ensuring that the sample is representative of the population. The data relate to the proportion of adolescents reporting to have smoked cigarette or cannabis at least once in the past 30 days.

The data source on cigarette and cannabis use in this edition of *Health at a Glance: Europe* is different from the one used in the 2020 edition, which was based on the Health Behaviour in School-aged Children survey. This explains the difference in results.

## References

European Commission (2022), *Leaflet on advertising, promotion and sponsorship of tobacco*, <a href="https://ec.europa.eu/health/latest-updates/leaflet-advertising-promotion-and-sponsorship-tobacco-2022-06-03\_en">https://ec.europa.eu/health/latest-updates/leaflet-advertising-promotion-and-sponsorship-tobacco-2022-06-03\_en</a>.

European Commission (2021), Europe's Beating Cancer Plan - Communication from the commission to the European Parliament and the Council, <a href="https://health.ec.europa.eu/system/files/2022-02/eu\_cancer-plan\_en\_0.pdf">https://health.ec.europa.eu/system/files/2022-02/eu\_cancer-plan\_en\_0.pdf</a>.

[1]

[2]

Figure 4.1. Tobacco smoking rates among 15-16 year-olds, 2011, 2015 and 2019

Note: The EU average is unweighted.

Source: ESPAD Group (2020), ESPAD Report 2019: Results from the European School Survey Project on Alcohol and Other Drugs.

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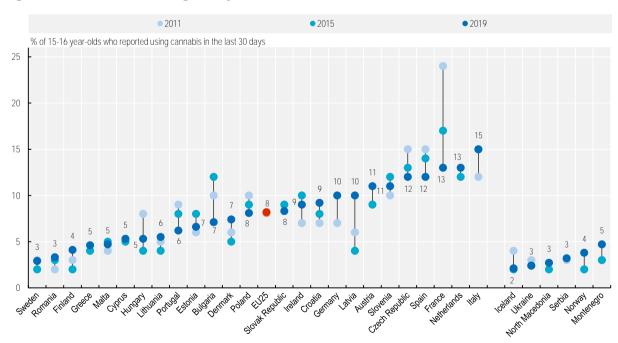


Figure 4.2. Cannabis use among 15-16 year-olds, 2011, 2015 and 2019

Note: The EU average is unweighted.

Source: ESPAD Group (2020), ESPAD Report 2019: Results from the European School Survey Project on Alcohol and Other Drugs.

StatLink https://stat.link/orhbmp



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