



# Education Fact Sheet

- The high rate of cigarette, smokeless tobacco, and cigar use among youth, along with the emergence of novel tobacco products such as bidis (or beedies) and kreteks (also known as clove cigarettes), suggests that a major proportion of U.S. youth already exhibit or are at risk for nicotine addiction and the subsequent health problems caused by tobacco use.<sup>1</sup>
- More than 4 million adolescents under the age of 18 in the United States smoke cigarettes.<sup>2</sup> Each day, more than 6,000 young people try a cigarette and nearly 3,000 become regular smokers — that adds up to more than one million new smokers each year.<sup>3</sup>
- In 1999 more than one-third (34.8%) of U.S. high school students in grades 9 through 12 reported smoking cigarettes in the past month. Data from 1995 (34.8%) and 1997 (36.4%) show that current smoking prevalence rates among high school students remain high but appear to have plateaued.<sup>4</sup>
- Many factors interact to encourage tobacco use among youth, including tobacco advertising and promotion, tobacco use by peers and family members, and easy access to tobacco products.<sup>6</sup>
- Early adolescence (age 11-15 years, or sixth through tenth grade) is the period when young people are most likely to try smoking for the first time.<sup>6</sup>
- Tobacco-free policies involving the school's faculty, staff, and students have a critical role in reducing tobacco use among young people, especially when these policies apply to all school facilities, property, vehicles, and school-sponsored events. While two-thirds of schools (62.8%) had smoke-free building policies in 1994, significantly fewer (36.5%) reported having policies that included the entire school environment.<sup>6</sup>
- Adopting strong tobacco-free policies are only the first step. Schools should rigorously enforce these policies to protect children from the hazards of tobacco smoke at school, to model a tobacco-free environment, and to reduce opportunities for young people to experiment with tobacco on school grounds.
- Implementing effective educational programs for preventing tobacco use could postpone or prevent smoking onset in 20% to 40% of U.S. adolescents.<sup>6</sup>
- Programs with the most educational contacts during the critical years for smoking adoption (age 11-15 years) are more likely to be effective, as are programs that address a broad range of educational needs.<sup>6</sup>
- Educational strategies to prevent tobacco use must become more consistent and effective. This will require continuing efforts to build strong, multi-year prevention units into school health education curricula. It will also require expanded efforts to make use of the influence of parents, the mass media, and community resources.<sup>6</sup>
- Existing data suggest that evidence-based curricula and national guidelines have not been widely adopted. Less than 5% of schools nationwide are implementing the major components of CDC's Guidelines for School Health Programs to Prevent Tobacco Use and Addiction, which recommends schools should: <sup>6</sup>
  - Develop and enforce a school policy on tobacco use.
  - Provide instruction about the short- and long-term effects of tobacco use, social influences on tobacco use, peer norms regarding tobacco use, and refusal skills.
  - Provide tobacco-use prevention education in kindergarten through 12th grade, with especially intensive instruction in junior high or middle school.
  - Provide program-specific training for teachers.
  - Involve parents and families in support of school-based programs to prevent tobacco use.
  - Support cessation efforts among students and school staff who use tobacco.
  - Assess the tobacco-use prevention program at regular intervals.
- Educational curricula that address social influences (of friends, family, and media) that encourage tobacco use among youth, have shown consistently more effectiveness than programs based on other models.<sup>6</sup>
- Two middle school programs that have demonstrated effectiveness in reducing tobacco use behaviors in youth have been identified by the Centers for Disease Control and Prevention as programs that work, and they are Life Skills Training Program, and Project Toward No Tobacco (TNT).<sup>6</sup>
- Schools can not bear the sole responsibility for preventing tobacco use. School-based programs are more effective when combined with mass media programs and with community-based efforts involving parents and other community resources.<sup>6</sup>

## REFERENCES

1. Centers for Disease Control and Prevention. Tobacco use among middle and high school students — United States, 1999. *MMWR*; 49:49-53.
2. Substance Abuse and Mental Health Services Administration. Annual national drug survey results from the 1998 National Household Survey on Drug Abuse. Office of Applied Studies, August 1999.
3. Centers for Disease Control and Prevention. Incidence of Initiation of Cigarette Smoking — United States, 1965-1996. *MMWR*; 47:837-840.
4. Centers for Disease Control and Prevention. Youth risk behavior surveillance — United States, 1999. *MMWR*; 49 (SS-5).
5. Centers for Disease Control and Prevention. Preventing Tobacco Use Among Young People: A Report of the Surgeon General. Atlanta: U.S. Department of Health and Human Services, 1994, pages 129-131,166, and 248-249.
6. U.S. Department of Health and Human Services. Reducing Tobacco Use: A Report of the Surgeon General. Atlanta: U.S. Department of Health and Human Services, Centers for Disease Control and Prevention, 2000.