

# A qualitative analysis of 'informed choice' among young adult smokers

September 15 2014, by Rebecca Gray

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Flaws in the tobacco industry's argument that smokers exercise "informed adult choice" when they start smoking have been highlighted in new study.

The University of Otago research involved 15 in-depth interviews with 18-25 year olds who had started smoking since turning 18. Results showed that, despite a general awareness that tobacco causes harm, it is difficult for young adults to make an informed choice.

Although participants had a general awareness that smoking is harmful and knew some specific risks, they rarely understood these risks in-depth or saw them as personally relevant when they started smoking, says lead author Rebecca Gray.

Participants' poor understanding of addiction also meant most regarded smoking as a short-term phase they could stop at will, Gray says.

In New Zealand, smoking prevalence remains high among those aged 18 to 25, despite a reduction in adolescent smoking rates.

Tobacco companies have opposed [policy interventions](#) by arguing that smokers exercise "informed adult choice" and commence smoking after appraising the risk and benefits they may incur. But even those smokers who do start as adults appear not to make decisions about smoking based on fully informed choices, Gray says.

"Our findings show that, regardless of the risk information that young adults have access to, they generally don't consider this information at the time they start smoking."

Some study participants noted that they didn't feel they could be fully informed about the risks of smoking until they started to feel some of the health effects themselves.

"This was particularly true with regard to addiction, which few participants had understood or taken seriously at the time they started smoking. Younger and non-daily smokers tended to believe that they could avoid addiction, while those who had smoked for longer often remembered that they used to think that way, but now realised with some regret how difficult it was for them to stop smoking."

This misunderstanding of the addictive nature of smoking was coupled with a short-term focus among young adults who assumed that they would stop smoking in a few years, once they entered a more mature life phase, Gray says.

"They could therefore rationalise their current smoking as a short-term behaviour that would not lead them to the serious health outcomes depicted in pack warnings and other health promotion information."

The study also showed many young adults started smoking when influenced by alcohol or in socially-pressured situations that fostered spur-of-the-moment decisions.

"Young people will often take up smoking for immediate social reasons without considering the longer-term consequences or taking the more serious risks personally."

Young adults have to make all sorts of significant life decisions, but

don't treat starting to smoke as one of those important decisions, Gray says.

"In a lot of cases they're not thinking at all when they start, and only give serious consideration to the risks further down the track, by which point they are already experiencing addiction."

Policy interventions that could help young adults avoid becoming smokers without making a conscious choice include decoupling [smoking](#) from drinking in young adult's social environments, and ensuring that risk messages aimed at [young adults](#) recognise their short term focus and desire for control over their lives.

Such interventions are important alongside other approaches being taken to achieve New Zealand's Smokefree 2025 goal, Gray says.

The study, titled "A qualitative analysis of 'informed choice' among young adult smokers" was authored by Ms Gray, Professor Janet Hoek and Professor Richard Edwards from the University's Public Health and Marketing departments.

**More information:** "A qualitative analysis of 'informed choice' among young adult smokers." Rebecca J Gray, Janet Hoek, Richard Edwards. *Tob Control* [DOI: 10.1136/tobaccocontrol-2014-051793](https://doi.org/10.1136/tobaccocontrol-2014-051793)

Provided by University of Otago

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