Gender and social class differences in smoking and e-cigarette use among teenagers with Intellectual Disability. A secondary analysis of Wave 3 of Growing Up in Ireland Cohort '98

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Background

Teenagers with intellectual disability (ID) are **largely absent** from literature on **teenage smoking**^{1, 2}

Findings from the small number of studies that exist are **mixed in direction**³, prevalence being significantly higher/lower and similar

Almost nothing is known of **e-cigarette use** in teenagers with ID⁴

or of **gender or social class** differences in smoking/e-cigarette use this population⁵

Study Objectives

To compare **prevalence**of smoking and ecigarette use in older **teenagers** (17/18 yrs)
with and without ID

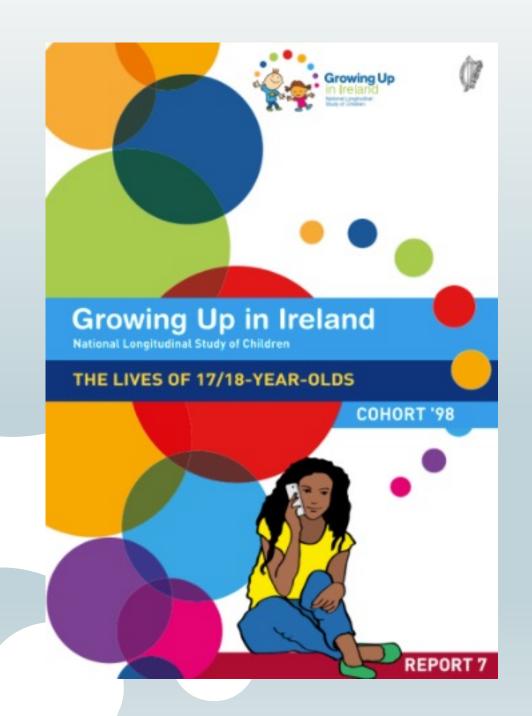
To describe **gender and social class**differences in
prevalence of smoking
and e-cigarette use in
teenagers with ID

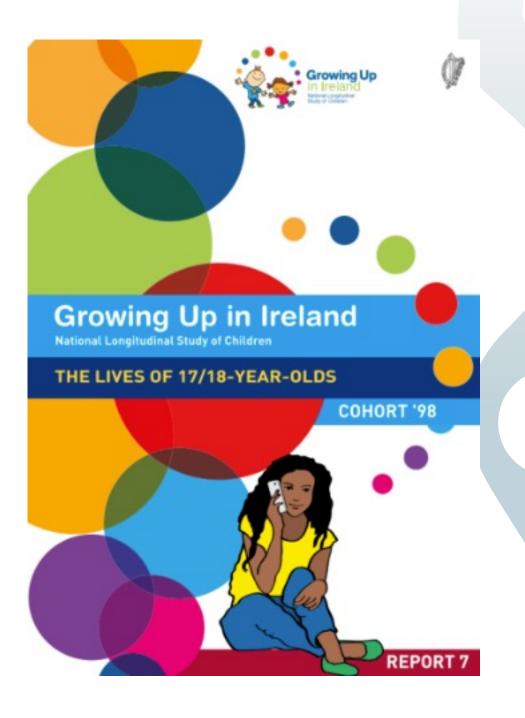
Methodology - Study

Source: Wave 3 of the national longitudinal study, Growing Up in Ireland Cohort '98 (Child Cohort) survey (2016)

Sample: 6,154 17/18-year-olds

Ethical Approval: granted by the GUI Research Ethics Committee, Department of Children and Youth Affairs (.rmf files)





Methodology -Variables

ID Intellectual Disability Yes/No

Gender M/F

Social Class Professional/Managerial vs Skilled/Semi/Unskilled

Ever-Smoked Yes/No

Current Smoking Yes/No

Ever e-cigarette use Yes/No

Methodology - Analysis

A cross-sectional approach was utilised, analysing the Wave 3 survey as a stand-alone dataset.

Descriptive and bivariate statistical techniques were employed using SPSSv.29.

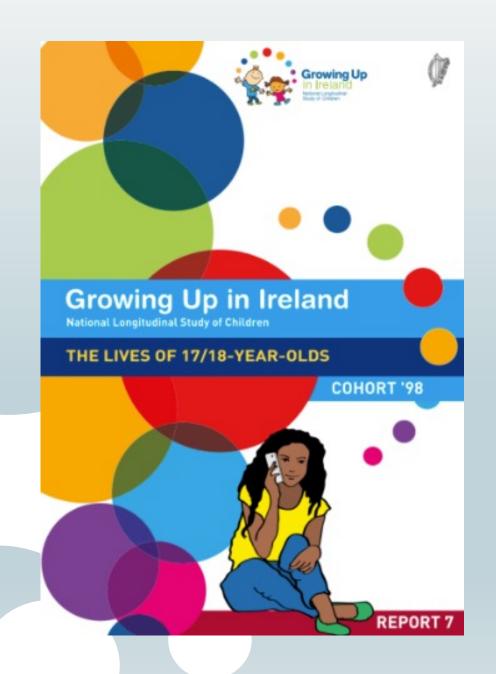


Table 1 Prevalence of Intellectual Disability & Smoking/E-cigarette use

Intellectual disability prevalence, smoking and e-cigarette use

	No 6012 (97.7)	Yes 142 (2.3)	Total 6154 (100.0)	P-value
Ever-Smoked (Wave 3) No Yes	3029 (50.6) 2952 (49.4)	70 (64.0) 39 (36.0)	3098 (50.9) 2992 (49.1)	0.01
Current Smoking (Wave 3) No Yes	4806 (79.9) 1207 (20.1)	115 (81.5) 26 (18.5)	4921 (80.0) 1233 (20.0)	0.63
Ever used e-cigarettes (Wave 3) No Yes	3949 (66.0) 2036 (34.0)	80 (73.1) 29 (26.9)	4029 (66.1) 2065 (33.9)	0.12

Table 2 Intellectual Disability, Social Class and Gender

Social Class Differences ID					
	Total	Professional/	Skilled/semi/	P-	
	5179	Managerial	unskilled	value	
	(100.0)	2481 (47.9)	2698 (52.1)		
Intellectual Disability					
No	5077 (98.1)	2445 (98.6)	2632 (97.6)		
No Yes	99 (1.9)	35 (1.4)	64 (2.4)	0.12	

Gender Differences ID				
	Total 6216 (100.0)	Male 3170 (51.0)	Female 3046 (49.0)	P- value
Intellectual Disability No Yes		3025 (97.5) 79 (2.5)	2944 (97.9) 62 (2.1)	0.22

Table 3 Intellectual Disability, Gender and Smoking/E-cigarette use

Intellectual Disability	Total 6154 (100.0)	No 6012 (97.7)	Yes 142 (2.3)	
Intellectual Disability /Gender	Total 110 (100.0)	Males 62 (57.0)	Females 48 (43.0)	р
Ever Smoking No Yes	70 (64.8) 38 (35.2)	44 (72.1) 17 (27.9)	26 (55.3) 21 (44.7)	0.07
Current Smoking No Yes	114 (81.5) 26 (18.6)	69 (88.5) 9 (11.5)	45 (72.6) 17 (27.4)	0.02
E-cigarette ever use No Yes	79 (73.1) 29 (26.9)	44 (72.1) 17 (27.9)	35 (74.5) 12 (25.5)	0.79

Table 4 Intellectual Disability, Social Class and Smoking/E-cigarette use

Intellectual Disability, Social Class and Smoking/E-cigarette use

Intellectual Disability /Social Class	Total	Professional/ Managerial	Non-manual /Skilled / Semi- /Unskilled	р
Ever Smoking No Yes	54 (66.7) 27 (33.3)	22 (73.3) 8 (26.7)	32 (62.7) 19 (37.3)	0.33
Current Smoking No Yes	80 (80.0) 20 (20.0)	31 (86.1) 5 (13.9)	49 (76.6) 15 (23.4)	0.25
E-cigarette ever use No Yes	56 (69.1) 25 (30.9)	22 (73.3) 8 (26.7)	34 (66.7) 17 (33.3)	0.53



Implications

Teenagers with ID smoke and use ecigarettes, although prevalence is lower than in their peers without ID.

Teenagers with ID are less likely to try smoking but a higher proportion of those who do become current smokers, perhaps indicating an increased risk of addiction to nicotine and lower likelihood of cessation.

Girls with ID are particularly at risk.



Implications

Smoking adds an additional layer to inequalities experienced by this group. Targeted
smoking/ecigarette
prevention and
cessation
programmes with
a gender
sensibility are
recommended.



References

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Thank You

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Source: Results are based on analysis of strictly controlled Research Microdata Files provided by the Central Statistics Office (CSO) Ireland.