



Pacific Fathers and their Smoking

Smoking prevalence and behaviours amongst a longitudinal cohort of Pacific Islands fathers in New Zealand.





El-Shadan Tautolo, Leon Iusitini, Steve Taylor, Janis Paterson, Centre for Pacific Health and Development Research, AUT University, Auckland, New Zealand.

Discussion

Although most fathers in this study possess positive health attributes, values, and behaviours, a concerning number of fathers exhibited harmful patterns of smoking. While smoking has been acknowledged as a major cause of heart attacks, heart disease, and stroke, perhaps of most concern is the significant impact smoking has on children's health either directly during pregnancy, or indirectly during childhood.² Strategies targeted at alleviating some of these issues are vital to supporting the positive development of these fathers, and consequently their children and families.

The findings suggest that tobacco excise tax increases are working in reducing the smoking amongst Pacific communities, with 203 (72%) fathers indicating they had reduced their smoking following the increase in tobacco prices. Additional planned increases from 2013-2016 are likely to continue this trend of reducing smoking amongst many Pacific peoples.

Information regarding quit attempts and motivations for quit smoking were also reported by participants. The results highlight key factors which may be useful to target when designing interventions and support services to assist Pacific people in their efforts to quit smoking.

References

- 1. Blackburn CM, Bonas S, Spencer NJ, Coe CJ, Dolan A, Moy R. Parental smoking and passive smoking in infants: fathers matter too. Health Education Research. 2005;20(2):185-194.
- 2. Ministry of Health. Tobacco Control and Smoking: Health Effects of Smoking. Wellington: Ministry of Health; 2008





Background

About 5,000 deaths each year in New Zealand are attributed to direct smoking or second hand smoke - approximately 13 people a day. Current statistics indicate that over one in four Pacific adults smoke (26.9%), and this is markedly higher than the general New Zealand European (18.6%) and Asian (11.2%) populations. In addition, the Pacific population is largely young, and evidence indicates an alarmingly high rate of smoking amongst youth. There is little epidemiological information and understanding about Pacific fathers' smoking status and the relationship between the smoking status of fathers within a family setting - despite the health impact this potentially wields over their children.¹ If the public health approach to tobacco control is based on the rigorous requirement of scientific method that moves from understanding and measuring the problem to finding, implementing and evaluating a solution, then such robust epidemiological information is essential.

Design

Using questions from the Pacific Island Families (PIF) study, this paper empirically investigates smoking prevalence and other smoking-related variables. Participants were 805 fathers of Pacific ethnicity enrolled in the Pacific Islands Families (PIF) Study, a longitudinal study following 1398 Pacific families resident in New Zealand since the year 2000. An investigation of the data collected at the 11-year measurement point of the PIF study examined variables measuring smoking status and other related variables.

Additional variables describing other circumstances of the participating fathers included the impact of recent increases in tobacco excise tax on smoking, the number of quit attempts amongst smokers, and the key motivations for attempting to quit

smoking.



Results

In the overall analysis, 292 (37%) fathers self-identified themselves as being current smokers. In terms of ethnic sub-groups, 166 (37.9%) Samoan fathers, 91 (45.7%) Tongan fathers, 31 (42.5%) Cook Islands fathers, and 20 (37.0%) Pacific fathers of other nationalities self-

Table 1 presents the frequencies and percentages for several smokingrelated questions amongst Pacific fathers that were current smokers. When examining these variables further, 203 (72%) fathers indicated that tax increases had caused them to reduce their smoking, 235 (80%) fathers reported that they wanted to quit smoking, and the key motivations for quit smoking were personal health, cost, and impact on child's health.

Table 1. Smoking prevalence and other smoking-related behaviours for Pacific fathers at 11-year measurement point

11-year measurement point	
	n (%)
Current Smoking Status	(/*)
Non-smoker	486 (62%)
1-4 per day	53 (7%)
5-9 per day	89 (11%)
10+ per day	153 (19%)
Has the series of tax increases (2010-20	12) on cigarette sales in
NZ caused you to reduce your smoking	g?
Yes	203 (72%)
Do you want to QUIT smoking?	
Yes	235 (80%)
How many times have you attempted t	to OUIT smoking?
None	34 (12%)
Once	69 (25%)
Twice	59 (21%)
Three or more	115 (42%)
If you have attempted to quit, what mo	otivated you to do so?
My appearance	32 (13%)
My child's health	122 (50%)
Cost	158 (64%)
Taking control	103 (42%)
My health	198 (80%)
Other reason	37 (15%)
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Acknowledgements





identified themselves as being current smokers (p-value = 0.28).