# Youth Demographic Characteristics and Risk Perception of Using Alternative Tobacco Products: An Analysis of the 2014–2015 Canadian Student Tobacco, Alcohol, and Drugs Survey (CSTADS)

Udoka Okpalauwaekwe, MBBS, MPH<sup>1</sup>, Chinenye Nmanma Nwoke, BSc, MPH<sup>2</sup>, and Jacinthe Messier, BSc, MSc<sup>3</sup>

<sup>1</sup>Department of Academic Family Medicine, College of Medicine, University of Saskatchewan, Saskatoon, SK, Canada. <sup>2</sup>Faculty of Health Sciences, University of Lethbridge, Lethbridge, AB, Canada. <sup>3</sup>Independent Researcher in Indigenous Studies, Project Coordinator, Siksika First Nation Project, Calgary, AB, Canada. Tobacco Use Insights
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## **ABSTRACT**

**BACKGROUND:** There is a growing attraction by youth to alternative tobacco products (ATPs) such as e-cigarettes and hookahs. This study investigated risk perceptions and demographic characteristics associated with ATP use in grade 8–10 students.

**METHODS:** Data were drawn from the 2014/15 cycle of the CSTADS. The analytic sample included 1819 students from a total pool of 42 094 students who completed the survey. Logistic regression models were used to examine factors (demographic characteristics and risk perception) associated with ATP use in the past 30 days.

**RESULTS:** 12% of students in grade 8–10 self-identified as having used ATPs in the past 30-days, with a majority of students in grade 10 (56%). Male students had higher odds of reporting ATP use when compared to females. Although a lesser proportion of Indigenous students reported ATP use in comparison to White students (31% vs 61%), Indigenous students were 2.42 (1.49, 3.93) times as likely to use ATPs as White students. Students who perceived smoking hookah once in a while as "no to slight risk" were 1.58 (1.09, 2.28) times more likely to report ATP use than students who perceived "moderate to great risk." Also, students who perceived using e-cigarettes on a regular basis as "no to slight risk" were 2.21 (1.53, 3.21) times more likely to report ATP use as students who perceived "moderate-great risk."

**CONCLUSION:** A significant number of grade 8–10 students use ATPs, especially e-cigarettes, with the misconception of minimal health risks. There remains the need to do more to counteract the rise in social and epidemiological alternative tobacco use trends among the youth.

KEYWORDS: Alternative tobacco products, e-cigarette, hookah, risk perception, Saskatchewan, Canada

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ETHICAL APPROVAL AND OTHER CONSIDERATIONS The CSTADS is a biennial school-based survey administered to grade 6-12 students nationally, supported and funded by Health Canada. The survey is conducted by a consortium of researchers across Canada and coordinated centrally by the Propel Centre for Population Health Impact, University of Waterloo. The CSTADS is approved by the Health Canada Research Ethics Board, appropriate school board and public health ethics committees. Responding to this survey was voluntary.

CORRESPONDING AUTHOR: Udoka Okpalauwaekwe MBBS, MPH, Department of Academic Family Medicine, University of Saskatchewan, 103 Hospital Drive, Saskatoon, SK S7N 0W8, Canada. Email: udokaokpala.uo@usask.ca

# Introduction

Tobacco use has become a global challenge, as consuming forms are becoming more sophisticated and the cultivated tobacco marketplace becoming increasingly diverse. According to a 2019 World Health Organization (WHO) report on the global tobacco epidemic, tobacco (*Nicotiana* genus) products are considered the leading cause of premature mortality and disease burden worldwide, resulting in approximately 7 million preventable deaths annually. Tobacco use remains a significant health risk factor for several diseases, including cancers, cardiovascular conditions, diabetes mellitus, and chronic respiratory ailments. Additionally, tobacco and tobacco products are

harmful to those who smoke and those exposed to second-hand smoke (SHS) or environmental tobacco smokes (ETS).<sup>6</sup> The World Health Organization recognizes these harms and the need to prevent significant health challenges from using tobacco and tobacco products from escalating in the future.<sup>7</sup>

Although the habit of cigarette-smoking appears seemingly on a decline among the youth population in general, the purchasing of nonconventional alternative tobacco products (ATPs), such as e-cigarettes, vaping devices, pipes, hookahs, cigars, cigarillos, flavored tobacco products (FTPs), and smokeless tobacco products (STPs) are on the rise globally, including in Canada. <sup>5,8–11</sup> Research has indicated that tobacco

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products and their modern alternatives introduced during later childhood and early adolescence are strongly associated with a lower probability of quitting during an individual's lifespan. <sup>1,5,8,9,12</sup> This is why adult users of nicotine-containing tobacco are more likely to be addicted from their youth onwards, resulting in a normalized behavioral response to all other tobacco products, including ATPs. <sup>1,9</sup>

The overall prevalence rates of cigarette-smoking among the younger adult population in Canada have shown a downward trend, decreasing from 45% in 1981 to 13.8% in 2015. 13 However, tobacco use remains significantly high among youth in Saskatchewan compared to other Canadian provinces. 13 According to the 2012 Canadian Tobacco Use Monitoring Survey (CTUMS), 22.6% of Saskatchewan youth (aged 15 years and over) reported using nicotine-tobacco and other forms of ATPs compared to the 10.1% nationally. 13,14 Comparably, a 2015 survey by the Saskatchewan Alliance for Youth and Community Well-being (SAYCW) showed that 22.8% of Saskatchewan teenagers between 15 and 19 years old use ATPs, compared to 14.6% nationwide. 15 In the Canadian prairies, the vast growing and purchasing of ATPs, including nontraditional tobacco use or tobacco misuse by Indigenous adolescents (use of tobacco for recreational purposes), has been reported to influence high prevalence rates. 16,17 Unfortunately, with companies targeting youth with the assortment of new, appealing, and readily accessible ATPs, studies have reported that youth are misguided about the health risks of ATPs. 1,18,19 Thus, we designed this study to determine the associations between ATP use in the past 30 days, youth demographic characteristics, and risk perception in a representative sample of grade 8-10 students in Saskatchewan from the Canadian Student Tobacco, Alcohol and Drugs Survey (CSTADS) 2014/ 15 data.<sup>20</sup>

# Methods

# Data Source and Participants

The Canadian Student Tobacco, Alcohol, and Drugs Survey (CSTADS) is an ongoing biennial school-based survey administered to grade 6–12 students nationally and facilitated by the Propel Centre for Population Health Impact at the University of Waterloo.<sup>20</sup> The objective of the CSTADS is to collect data on youth substance use/abuse and other areas identified by schools as priorities, such as bullying, mental health, and students' connectedness or sense of belonging in their school environment.<sup>21</sup> The survey uses a stratified single-stage cluster design, with strata based on smoking rates in health regions and the type of school. The 2014/2015 survey was implemented in schools between October 2014 and May 2015, replacing the Youth Smoking Survey (YSS) used in the years prior.<sup>21</sup> For this study, data were drawn from the 2014/15 survey cycle of the CSTADS.<sup>20</sup>

The 2014/15 CSTADS involved a total of 42 094 respondents from grade 6 to 12 across 336 schools in Canada. <sup>20</sup>

All schools that participated in the survey received a \$100 honorarium, a school-specific profile, and summaries of their survey results. In Saskatchewan, 4010 students participated in the 2014/15 survey cycle, with a student-level response rate of 79%. The current study was limited to Saskatchewan students in grade 8–10 (n = 1819). Survey weights were assigned to adjust for nonresponse and nonrandom sample selection of the responding sample.

Permission to use the 2014/15 CSTADS data was obtained through an application to the Propel Centre for Population Health Impact at the University of Waterloo.<sup>20</sup>

## Outcome Variable

The outcome variable for this study was alternative tobacco products (ATPs) used in the past 30 days, categorized as a binary variable. Alternative tobacco product use was derived from a combination of the following questions in the CSTADS asking: "In the last 30-days, did you use any of the following?— Little cigars or cigarillos (plain or flavored), cigars (not including little cigars or cigarillos, plain or flavored), roll-your-own cigarettes (tobacco only, in rolling papers), bidis (little cigarettes hand-rolled in leaves, tied with string ends, and may come in different flavors), smokeless tobacco (chewing tobacco, pinch, snuff, or snus), a water-pipe (hookah) to smoke shisha (herbal or tobacco), blunt wraps (a tube made of tobacco used to roll cigarette (tobacco), or e-cigarettes (electronic cigarettes). All the variables used to derive the outcome variable were dichotomous (Yes or No). Students who answered yes to any of these questions were classified as ATP users.

## Potential Correlates

Potential correlates included respondents' demographics (i.e., grade = 8, 9, 10; sex = male, female; ethnicity = White, Indigenous, other), and perception of harm to using ATPs (i.e., risk of smoking hookah once in a while; risk of smoking hookah on a regular basis; risk of smoking e-cigarettes once in a while; risk of smoking e-cigarettes on a regular basis). Perceptions of risk from ATP use were assessed with the statement "how much do you think people risk harming themselves when they do each of the following activities?" with responses re-categorized to (1) no to slight risk and (2) moderate to great risk.

## Statistical Analysis

Sample characteristics were described with frequency and proportions. Associations between ATP use in the past 30 days (i.e., ATP use vs no ATP use) and sample characteristics were determined using  $\chi$ -square tests. Significant variables from the tests of association were used to choose variables for the multiple regression analysis (i.e., sex, ethnicity, grade, perception of harm of hookah use (once in a while, on a regular basis), and

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Table 1. Demographic characteristics of grades 8-10 students in Saskatchewan, with and without alternative tobacco products use in the past 30 days.

	ALTERNATIVE TOBACCO PRODUCTS USE (PAST 30 DAYS), N = 211	NO ALTERNATIVE TOBACCO PRODUCTS USE (PAST 30 DAYS), N = 1608	P VALUES
Sex, %			
Female	35.88	50.77	.002
Male	64.12	49.23	
Grade, %			
Eight	12.03	34.22	<.001
Nine	31.81	33.29	
Ten	56.16	32.49	
Ethnicity, %			
White	61.45	72.59	<.001
	30.99	9.40	
Indigenous			
Other	7.56	18.01	

Survey-set command was used to determine P values of weighted variables.

**Table 2.** Perception of harm characteristics of grades 8-10 students in Saskatchewan, with and without alternative tobacco products use in the past 30 days.

	ALTERNATIVE TOBACCO PRODUCTS USE (PAST 30 DAYS), N=211	NO ALTERNATIVE TOBACCO PRODUCTS USE (PAST 30 DAYS), N=1608	P VALUES
Smoke a tobacco wate	r-pipe (hookah) once in a while		
No risk to slight risk	70.91	50.79	<.001
Moderate risk to great risk	29.09	49.21	
Smoke a tobacco wate	r-pipe (hookah) on a regular basis		
No risk to slight risk	45.71	33.35	.005
Moderate risk to great risk	54.29	66.65	
Use an e-cigarette (ele	ctronic cigarette) once in a while		
No risk to slight risk	89.90	70.82	<.001
Moderate risk to great risk	10.10	29.18	
Use an e-cigarette (ele	ctronic cigarette) on a regular basis		
No risk to slight risk	71.10	46.52	<.001
Moderate risk to great risk	28.90	53.48	

Survey-set command was used to determine  $\ensuremath{\textit{P}}$  values of weighted variables.

perception of harm of e-cigarette use (once in a while, on a regular basis).

Multivariable logistic regression was performed to identify predictive variables significantly associated with ATP use in the past 30 days and presented as odds ratios and 95% confidence intervals (CI). Stepwise model building was utilized. At each step of the model building, the highest nonsignificant variable was removed until all variables were significant. Variables

removed were also tested to determine if they were confounding variables. No confounders were found.

Survey weights (https://uwaterloo.ca/tobacco-use-canada/about/analysis) were included in the analysis to accommodate the survey design and non-response bias and ensure that the findings were representative of the grade 8–10 population in Saskatchewan. A *P*-value <.05 was considered statistically significant. All analyses were performed with Stata IC 16

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Table 3. Final model of factors associated with alternative tobacco products use among grades 8-10 students in Saskatchewan.

	ADJUSTED OR	95% CI	P VALUE
Sex			
Female	Reference	Reference	
Male	2.00	1.44-2.77	<.001
Grade			<.001
Eight	Reference	Reference	
Nine	2.31	1.50-3.56	.48
Ten	4.17	2.77-6.26	<.001
Ethnicity			<.001
White	Reference	Reference	
Indigenous	2.42	1.49-3.93	<.001
Other	.51	.3185	<.001
Smoke a tobacco water-pipe (hookah) on	ce in a while		
Moderate risk to great risk	Reference	Reference	
No risk to slight risk	1.58	1.09-2.28	.015
Use an e-cigarette (electronic cigarette) o	n a regular basis		
Moderate risk to great risk	Reference	Reference	
No risk to slight risk	2.21	1.53-3.21	<.001

CI, confidence interval.

Note: Model adjusted for perception of smoking hookah on a regular basis and use of an e-cigarette once in a while.

statistical software package (College Station, Texas, Stata Corporation).<sup>22</sup>

## Results

Data from a sample of 1819 survey respondents were analyzed. Past-30-day ATP use was reported by 11.6% of participants (211/1819); the majority were male (64%), White (61%) and in 10th grade (51%) (see Table 1).

More ATP users than nonusers perceived no to slight risk of occasional use of hookah for both occasional (71% ATP users vs 51% nonATP users) and regular (46% ATP users vs 33% nonATP users) use. Similar trends were noticed for ATP users vs non-users for e-cigarettes for both occasional (90% ATP users vs 71% nonATP users) and regular (71% ATP users vs 46% nonATP users) use (see Table 2).

Table 3 presents the results of the multivariable logistic regression analyses. From the bivariate analyses, male respondents were twice as likely as females, tenth graders were 4 times as likely as eighth graders, and Indigenous students were more than twice as likely as White students to report past-30-day ATP use. In contrast, identifying as Black, Asian, or Hispanic was protective (see Table 3).

Assessing perception of harm variables, respondents who stated that smoking hookah once in a while was "no risk to slight risk" were one and one-half times more likely to report past-30-day ATP use compared to those who responded, "great risk to moderate risk." Similarly, respondents who stated that use of an e-cigarette on a regular basis was "no risk to slight risk" were

more than twice more likely to report past-30-day ATP use compared to those who responded, "great risk to moderate risk." (see Table 3).

## Discussion

We investigated the demographic characteristics of Saskatchewan students in grade 8-10 that used ATPs and explored the perception of health risk associated with ATP use. Our results showed that a more students who used ATPs in the last 30 days perceived "no risk to slight risks" of using hookahs and/or e-cigarettes occasionally or on a regular basis compared with students who had not used ATPs in the past 30 days. These results are comparable to findings from several similar studies exploring risk or harm perception of hookahs, e-cigarettes, flavored cigarettes, water-pipes, and other ATP forms. 1,5,9,18,23-27 The common justification provided in these studies for this misperception was the notion that e-cigarettes and other forms of ATPs were beneficial alternatives for personal tobacco cessation and harm reduction. 1,5,9,18,23,24,27 A recent survey of over 7000 youth tobacco and poly-tobacco users in the US reported that youth perceived e-cigarettes to be more popular and safer than combustible tobacco because of the novel technology that gauges nicotine strength, with added healthy flavors, hence reduced chances for addictiveness. <sup>26</sup> Another very recent study exploring risk perceptions of hookah use among 671 youth reported that 45% of them believed hookahs were less harmful because the water, molasses, and fruity flavors in hookahs filter harmful or toxic substances better than with regular filter cigarettes.<sup>5</sup> As Okpalauwaekwe et al 5

such, youth find ATPs such as e-cigarettes, hookahs, and flavored tobacco products more attractive alternatives to cigarettesmoking.<sup>5</sup> Comparable studies have also implicated the several reasons for the growing youth attraction to ATPs to include the increasing normalization of ATP use on social media, the glamorizing marketing strategies targeted at youth, lower and/or affordable cost, the assortment of flavored e-juices, e-cigarette designs, and characteristics (e.g., shape, style, and volume) and easy access to ATPs and other illicit substances, in part due to the recent legalization of cannabis in Canada. 8,18,28-31 These preferences are then rationalized by youth as tools to fit in with peers, recreational sport for showing off vaping tricks, enhancement tools for stress and anxiety relief, and status symbols as with cigars and cigarillos among adults. 24,27,32,33 Notwithstanding, this begs the crucial need for refortified health literacy efforts and media campaigns focusing on the addictive nature of nicotine which is native in all ATP forms.

Our study also showed that Indigenous students were 2 times more likely to use ATP in the past 30 days compared with White students. Consistent with this are similar findings from on tobacco use among Indigenous youth. 2,16,17,19,34-38 These studies cite the influence of peer pressure, lack of social and community support, a loss of cultural identity, the impacts of colonization, and the intergenerational trauma (brought about by the residential school systems and the sixties scoop in Canada) to be responsible for the high prevalences of tobacco misuse (i.e., recreational or nontraditional use of tobacco). 2,16,17,19,34-38 The high prevalence rates of tobacco misuse by Indigenous youth have also been implicated in leveraging the overall high rates of tobacco use in Saskatchewan province. 39,40 Historically, Indigenous communities' relationship with tobacco before colonization was not for recreational use<sup>38</sup> because various species of tobacco were considered sacred and used (inhaled or smudged) in small amounts, and for limited time periods for medicinal, spiritual, and socio-cultural purposes. 38,41 For example, Nicotiana tabacum and N. rustica plants have been valued and revered for thousands of years among many Indigenous communities. 42,43 However, there has been a vital transfer, since colonial times, to recreational use of nicotine-based products by Indigenous peoples, 27,29,32 all of which have resulted in severe and associated health concerns, particularly for young adults. 5,16,17,44 Therefore, a key consideration in intervention efforts with Indigenous youth and communities should be on the nontraditional use of tobacco and tobacco products and not the narrative that "all tobacco use is bad," rather, should differentiate between traditional (sacred) and nontraditional (recreational) use. Engaging with the Elders and Knowledge Keepers in Indigenous communities can facilitate the appropriate dissemination of this knowledge and the co-creation of community-driven and context-specific mitigation strategies.45

Males and students in grade 10 were significantly more likely to use ATP in the past 30 days compared with their female and lower-grade counterparts. These findings are consistent with

similar studies among youth and school graders 8,11,35,46-48; and might be explained using the psychological reactance theory (PRT).<sup>42</sup> PRT states that proscribed youthful attitudes will motivate an individual to pursue a basic need for selfdetermination, as a means to self-preserve autonomy, especially at the beginning of adult life. 42 It is, therefore, conceivable that with the present preponderance of antitobacco interventions, tobacco-control and nicotine-free campaigns in middle to high-grade schools in Canada, 49 may have instigated youth to react against these contemporary efforts as a way to assert selfdetermination towards tobacco and ATP control. 42 Additionally, the perception of harm using ATPs such as e-cigarettes and hookahs have been correlated with gender differences in research studies, as males tended to consider themselves more invulnerable to illnesses or injuries compared with females.  $^{1,23,28,50,51}$  This still calls for concern as it could indicate that the health promotion and prevention strategies provided to middle to high-grade students in the province may be failing or needs restrategization.<sup>52</sup>

Our study highlights the importance of investigating patterns of tobacco and ATP use (as well as other substances) by grades and among youth in general. We believe our findings can provide foundational or additive basis for developing health prevention and cessation programs for youth in grade schools in respective Canadian provinces. Although Canada has demonstrated positive strides in reducing tobacco consumption among adults in nonIndigenous and Indigenous communities, there remains a need for continued and strengthen efforts, especially among our vulnerable and impressionable youth population.<sup>36,37</sup> Evidence have supported strategies like aggressive health and social media campaigns in grade schools, increasing cost and access to ATPs, tailored age-specific addiction and cessation programs in youth communities, and policy actions (e.g., to reduce legal limits for nicotine concentrations in ATPs and flavor bans to minimize attraction to ecigarettes and ATPs) in the general population. 16,27,53-55 However, research has shown that culturally adapted interventions can reduce tobacco misuse among Indigenous communities. 34,37,56,57 This would involve less aggressive measures, more importantly, community engagement with elders, Knowledge Keepers, and Indigenous community members. 36,54 This is because research with Indigenous communities must be reflective of their norms, cultural values, and customs, as dictated in the Tri-Council Policy Statement (TCPS) on Ethical conduct for research involving First Nations, Inuit, and Métis peoples. 45 Using this approach facilitates the sustainability of community-driven strategies that promote wellness within the community.<sup>45</sup>

## Strengths and Limitations

Although these analyses of cross-sectional population-level data identified some associations, it is important to acknowledge that they cannot imply a cause-and-effect relationship between Tobacco Use Insights

correlates and the outcomes of ATP use in the past 30 days. All statistics reported are estimates, and caution needs to be taken in their application and interpretation. The cross-sectional design of this study provides a snapshot of ATP use among grade 8–10 students in Saskatchewan at a specific time and space. Also, the time limitation on the use of ATPs in general, as represented within the previous 30 days usage, may have biased the volume or frequency of ATP use. Furthermore, limiting the research to youth only in schools could affect the external validity of the results, as it is plausible that the majority of youth that uses ATP may not be attending school or attending classes' in-person. However, the investigation showed strengths in its large sample capacity, being a national model with an adequate representation from across the province of Saskatchewan.

## Conclusion

A significant number of Saskatchewan grade 8–10 school students use ATPs, especially e-cigarettes and hookahs. As they get to higher grades, youth, mainly male and indigenous youth, seem to have little to no knowledge about the health risks of using ATPs. Our research results highlight the need for continued health literacy efforts on tobacco and ATPs in grade schools and a collective action to engage Indigenous youth in health and wellness promotion strategies that integrate their Indigenous ways of knowing.

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## **Author contributions**

UO and CN were involved in the study conception and design. CN and UO were responsible for the data analysis. All authors (UO, CN and JM) contributed to the interpretation and discussion of finding. JN and UO helped review the manuscript for appropriacy and applicability to the Indigenous context. All authors (UO, CN and JM) read and approved the final manuscript.

## **ORCID IDs**

Udoka Okpalauwaekwe https://orcid.org/0000-0002-0973-1163

Chinenye Nmanma Nwoke https://orcid.org/0000-0003-1241-2531

# REFERENCES

- Berg CJ, Stratton E, Schauer GL, et al. Perceived harm, addictiveness, and social acceptability of tobacco products and marijuana among young adults: marijuana, hookah, and electronic cigarettes win. Subst Use Misuse. 2015;50(1):79-89.
- Statistics Canada. Smoking Prevalence Among Inuit in Canada. Health Reports,; 2017;28(2):10-14. Available from: https://www.statcan.gc.ca/pub/82-003-x/ 2017002/article/14773-eng.htm. Accessed August 18, 2021.

 World Health Organization. WHO Report on the Global Tobbaco Epidemic 2019: World Health Organization; 2019. License: CC BY-NC-SA 3.0 IGO. Retrieved from: https://www.who.int/teams/health-promotion/tobacco-control/who-reporton-the-global-tobacco-epidemic-2019. Accessed August 28, 2021.

- The U.S. Department of Health and Human Services. The Health Consequences of Involuntary Exposure to Tobacco Smoke: A Report of the Surgeon General. 2020. Available from: https://www.hhs.gov/sites/default/files/2020-cessation-sgr-full-report.pdf https://www.hhs.gov/sites/default/files/2020-cessation-sgr-full-report.pdf. Accessed August 28, 2021.
- Jamil HJ, Albahri MRA, Al-Noor NH, et al. Hookah smoking with health risk perception of different types of tobacco. J Phys Conf. 2020:1664.
- Centers for Disease Control and Prevention. Second-hand Smoke (SHS) Facts. Available from:. https://www.cdc.gov/tobacco/data\_statistics/fact\_sheets/secondhand\_smoke/general\_ facts/index.htm.Updated January 2018. AccessedAugust 28, 2021.
- World Health Organization. WHO Framework Convention on Tobacco Control. Geneva: World Health Organization; 2005. License: HD 9130.6. Available from: https://www.who.int/fctc/text\_download/en/. Accessed August 28, 2021.
- Bird Y, May J, Nwankwo C, Mahmood R, Moraros J. Prevalence and characteristics
  of flavoured tobacco use among students in grades 10 through 12: a national crosssectional study in Canada, 2012-2013. *Tob Induc Dis.* 2017;15:20.
- Czoli CD, Hammond D, Reid JL, Cole AG, Leatherdale ST. Use of conventional and alternative tobacco and nicotine products among a sample of Canadian youth. J Adolesc Health. 2015;57(1):123-125.
- Minaker LM, Ahmed R, Hammond D, Manske S. Flavored tobacco use among Canadian students in grades 9 through 12: prevalence and patterns from the 2010– 2011 youth smoking survey. Prev Chronic Dis. 2014;11:E102.
- Minaker LM, Shuh A, Burkhalter RJ, Manske SR. Hookah use prevalence, predictors, and perceptions among Canadian youth: findings from the 2012/2013 youth smoking survey. Cancer Causes Control. 2015;26(6):831-838.
- Minaker LM, Shuh A, Nguyen N, Azagba S, Manske SR. Cigarette smoking susceptibility among youth alternate tobacco product users: implications of flavoured tobacco from a national cross-sectional Canadian sample (YSS 2012/2013). BMJ Open. 2015;5(12):e009549.
- Statistics Canada. Smoking. Health Facts Sheets. Ottawa (ON): Statistics Canada; 2018. Statistics Catlogue No. 82-625-X. 7p; 2018. Retrieved from: https://www150.statcan.gc.ca/n1/pub/82-625-x/2019001/article/00006-eng. htm. Accessed August 28, 2021.
- Government of Canada. Canadian Tobacco Use Monitoring Survey (CTUMS) 2012. 2012. Retreived from: https://www.canada.ca/en/health-canada/services/ publications/healthy-living/canadian-tobacco-use-monitoring-survey-ctums-2012. html. Accessed August 28, 2021.
- Saskatchewan Alliance for Youth & Community Well-being (SAYCW). SAYCW
  Youth Health Survey: Saskatchewan Provincial Report Grades 7 to 12. 2016.
  Retrieved from: https://selu.usask.ca/documents/research-and-publications/
  SAYCW-Youth-Health-Survey\_2016.pdf. Accessed August 28, 2021.
- Jetty RCanadian Paediatric Society FNIMetis Health Committee OO. Tobacco use and misuse among Indigenous children and youth in Canada. *Paediatr Child Health*. 2017;22(7):395-405.
- Gendron F. Aboriginal youth's perceptions of traditional and commercial tobacco in Canada. Health Promot Int. 2018;33(6):1033-1041.
- Strong DR, Messer K, White M, Shi Y, et al. Youth perception of harm and addictiveness of tobacco products: Findings from the population assessment of tobacco and health study (wave 1). Addict Behav. 2019;92:128-135.
- Heris CL, Chamberlain C, Gubhaju L, Thomas DP, Eades SJ. Factors influencing smoking among indigenous adolescents aged 10-24 years living in Australia, New Zealand, Canada, and the United States: A systematic review. *Nicotine Tob Res*. 2020;22(11):1946-1956.
- Rynard V, Cumming T, Burkhalter R, Manske S. Canadian Student, Tobacco, Alcohol and Drugs Survey Microdata: Propel Centre for Population Health Impact. Waterloo: University of Waterloo; 2014/2015.
- University of Waterloo. Canadian student tobacco, alcohol and drugs survey. 2021. Available from: https://uwaterloo.ca/canadian-student-tobacco-alcohol-drugs-survey/about https://uwaterloo.ca/canadian-student-tobacco-alcohol-drugs-survey/about. Accessed June 11, 2021.
- 22. Stata Statistical Software: Release 16: StataCorp LP. [computer program]. 2019.
- Parker MA, Villanti AC, Quisenberry AJ, et al. Tobacco product harm perceptions and new use. *Pediatrics*. 2018;142(6):e20181505.
- Roditis M, Delucchi K, Cash D, Halpern-Felsher B. Adolescents' perceptions of health risks, social risks, and benefits differ across tobacco products. *J Adolesc Health*. 2016;58(5):558-566.
- Goncy EA, Mrug S. Where and when adolescents use tobacco, alcohol, and marijuana: comparisons by age, gender, and race. J Stud Alcohol Drugs. 2013;74(2): 288-300.
- Sylvestre MP, Wellman RJ, O'Loughlin EK, Dugas EN, O'Loughlin J. Gender differences in risk factors for cigarette smoking initiation in childhood. *Addict Behav*. 2017;72:144-150.

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- Al-Hamdani M, Hopkins DB, Hardardottir A, Davidson M. Perceptions and experiences of vaping among youth and young adult e-cigarette users: Considering age, gender, and tobacco use. *J Adolesc Health*. 2021;68(4):787-793.
- Huang LL, Baker HM, Meernik C, Ranney LM, Richardson A, Goldstein AO. Impact of non-menthol flavours in tobacco products on perceptions and use among youth, young adults and adults: a systematic review. *Tobac Control*. 2017;26(6): 709-719.
- Campbell BK, Le T, Gubner NR, Guydish J. Health risk perceptions and reasons for use of tobacco products among clients in addictions treatment. *Addict Behav*. 2019;91:149-155.
- Strong DR, Leas E, Elton-Marshall T, Wackowski OA, Travers M, Bansal-Travers
  M, et al. Harm perceptions and tobacco use initiation among youth in wave 1 and 2
  of the population assessment of tobacco and health (PATH) study. Prev Med. 2019;
  123-185-191
- Warner KE, Mendez D. E-cigarettes: Comparing the possible risks of increasing smoking initiation with the potential benefits of increasing smoking cessation. *Nicotine Tob Res.* 2019;21(1):41-47.
- Amrock SM, Lee L, Weitzman M. Perceptions of e-cigarettes and noncigarette tobacco products among US youth. *Pediatrics*. 2016;138(5):e20154306..
- Ambrose BK, Rostron BL, Johnson SE, et al. Perceptions of the relative harm of cigarettes and e-cigarettes among U.S. youth. Am J Prev Med. 2014;47(2 suppl 1): 553-560.
- Sikorski C, Leatherdale S, Cooke M. Tobacco, alcohol and marijuana use among Indigenous youth attending off-reserve schools in Canada: cross-sectional results from the Canadian student tobacco, alcohol and drugs survey. *Health Promot Chronic Dis Prev Can.* 2019;39(6-7):207-215.
- Elton-Marshall T, Leatherdale ST, Burkhalter R, Brown KS. Changes in tobacco use, susceptibility to future smoking, and quit attempts among Canadian youth over time: a comparison of off-reserve aboriginal and non-aboriginal youth. *Int J Environ* Res Publ Health. 2013;10(2):729-741.
- Maddox R, Waa A, Lee K, et al. Commercial tobacco and indigenous peoples: a stock take on framework convention on tobacco control progress. *Tobac Control*. 2019;28(5):574–581.
- Minichiello A, Lefkowitz AR, Firestone M, Smylie JK, Schwartz R. Effective strategies to reduce commercial tobacco use in Indigenous communities globally: A systematic review. BMC Publ Health. 2016;16:21.
- Wardman DMR, McKennitt D, O'Donaghey P. Non-traditional tobacco use among aboriginal Canadians. In: Els C, Kunyk D, Selby P, eds. *Disease Interrupted:* Tobacco Reduction and Cessation. Quebec, QC. Presses de l'Université Laval; 2014: 239-256
- Pasiechnik D. Saskatchewan teens smoking at nearly 3 times rate of Canadian youth. Policy report for Canadian cancer society. Toronto, ON: Canadian Cancer Society, 2018. Available from: https://action.cancer.ca/en/about-us/media-releases/2018/saskatchewan-teens-smoking-rate https://action.cancer.ca/en/about-us/media-releases/2018/saskatchewan-teens-smoking-rate. Accessed June 11, 2021.
- Sorgi SL. A Comparison of Tobacco Use Among Saskatchewan First Nations, Metis, and Non-aboriginal Youth: Factors Associated with Youth Tobacco Use Doctoral dissertation. Saskatoon, SK: University of Saskatchewan); 2000.
- First Nations Health Authority. Respecting Tobacco. 2020. Available from: http://www.fnha.ca/wellness/wellness-and-the-first-nations-health-authority/wellness-streams/respecting-tobacco. http://www.fnha.ca/wellness/wellness-and-the-first-nations-health-authority/wellness-streams/respecting-tobacco. AccessedJune 11, 2021.

- Grandpre J, Alvaro EM, Burgoon M, Miller CH, Hall JR. Adolescent reactance and anti-smoking campaigns: a theoretical approach. *Health Commun.* 2003;15(3): 349-366.
- Tushingham S, Snyder CM, Brownstein KJ, Damitio WJ, Gang DR. Biomolecular archaeology reveals ancient origins of indigenous tobacco smoking in North American Plateau. Proc Natl Acad Sci U S A. 2018;115(46):11742-11747.
- Orisatoki R. The public health implications of the use and misuse of tobacco among the aboriginals in Canada. Global J Health Sci. 2012;5(1):28-34.
- Canadian Institutes of Health Research (CIHR)Natural Sciences and Engineering Research Council of Canada (NSERC), Social Sciences and Humanities Research Council of Canada (SSHRC). Tri-Council Policy Statement. Ethical Conduct for Rresearch Involving Humans. Ottawa, ON: Government of Canada. Available from: www.pre.ethics.gc.ca/pdf/eng/tcps2-2014/TCPS\_2\_FINAL\_Web.pdf. Accessed September 1, 2021.
- Cole AG, Leatherdale ST. The association between senior student tobacco use rate at school and alternative tobacco product use among junior students in Canadian secondary schools. *Tob Induc Dis.* 2014;12(1):8.
- Czoli CD, Leatherdale ST, Rynard V. Bidi and hookah use among Canadian youth: findings from the 2010 Canadian youth smoking survey. Prev Chronic Dis. 2013;10:E73.
- Hamilton HA, Ferrence R, Boak A, et al. Ever use of nicotine and nonnicotine electronic cigarettes among high school students in ontario, canada. *Nicotine Tob* Res. 2015;17(10):1212-1218.
- Government of Canada. Strong foundation, renewed focus an overview of Canada's federal tobacco control strategy 2012-17. 2014. Available from: https://www.canada. ca/en/health-canada/services/publications/healthy-living/strong-foundation-renewed-focus-overview-canada-federal-tobacco-control-strategy-2012-17.html. Accessed August 28, 2021.
- Dawson KA, Schneider MA, Fletcher PC, Bryden PJ. Examining gender differences in the health behaviors of Canadian university students. J R Soc Promot Health. 2007; 127(1):38-44.
- Getachew B, Payne JB, Vu M, et al. Perceptions of alternative tobacco products, anti-tobacco media, and tobacco regulation among young adults: A qualitative study. Am J Health Behav. 2018;42(4):118-130.
- 52. Thompson-Haile A, Burkhalter R, MacKenzieCooke AM. 2016/2017 Canadian TobaccoAlcohol and Drugs Survey: Health Profile for SK; 2018. Available from: https:// uwaterloo.ca/canadian-student-tobacco-alcohol-drugs-survey/sites/ca.canadianstudent-tobacco-alcohol-drugs-survey/files/uploads/files/cst16\_sk\_profile\_ combined\_for\_online.pdf. Accessed Aug 30, 2021.
- Alawsi F, Nour R, Prabhu S. Are e-cigarettes a gateway to smoking or a pathway to quitting? Br Dent J. 2015;219(3):111-115.
- Bottorff JL, Sarbit G, Oliffe JL, Caperchione CM, Wilson D, Huisken A. Strategies for supporting smoking cessation among indigenous fathers: A qualitative participatory study. Am J Men's Health. 2019;13(1):1557988318806438.
- Chamberlain C, Perlen S, Brennan S, et al. Evidence for a comprehensive approach to Aboriginal tobacco control to maintain the decline in smoking: an overview of reviews among indigenous peoples. Syst Rev. 2017;6(1):135.
- Carson KV, Brinn MP, Labiszewski NA, et al. Interventions for tobacco use prevention in indigenous youth. Cochrane Database Syst Rev. 2012;2012(8): CD009325
- Carson KV, Brinn MP, Peters M, Veale A, Esterman AJ, Smith BJ. Interventions for smoking cessation in indigenous populations. *Cochrane Database Syst Rev.* 2012; 1:Cd009046.