

# Statistics on Smoking Habits Among Parents with Infants 2015

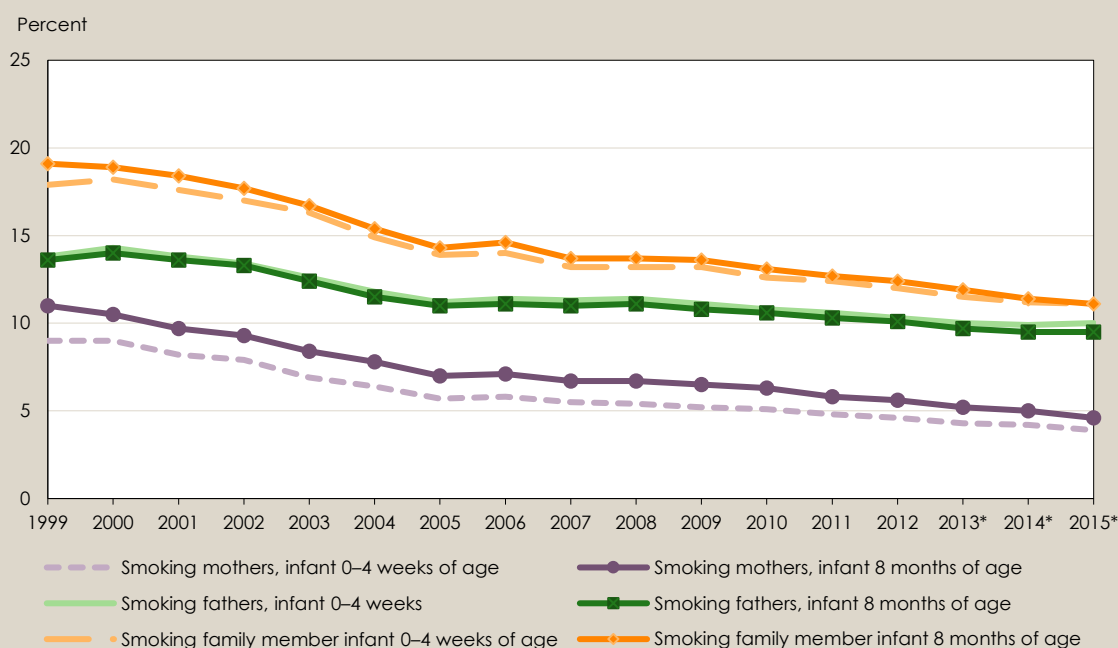
**The proportion of mothers of infants who smoke continues to decline. During the past 15 years, the proportion has fallen to half for both mothers with very small children, ages 4 weeks or below, as well as among those with infants 8 months of age. The decrease in the rate of smoking fathers has been less significant but it seems to have stabilized over the last five years.**

## Infants exposed to smoking at home continues to decrease

In 1999 about 19 percent of infants at home were exposed to smoking at 8 months of age. By 2015, the figure was down to just over 11 percent.

The biggest decrease has taken place among mothers, where about 9 percent smoked daily at the start of the 2000s. The latest statistics, from 2015, show that the proportion of smoking mothers with children aged 0–4 months is below 4 percent. The percentage of smoking mothers of infants aged 8 months has also decreased somewhat, from 5 percent in 2014 to just below 5 percent in 2015.

**Figure 1. Smoking habits among parents and total exposure to passive smoking during infancy. Infants born 1999–2015**



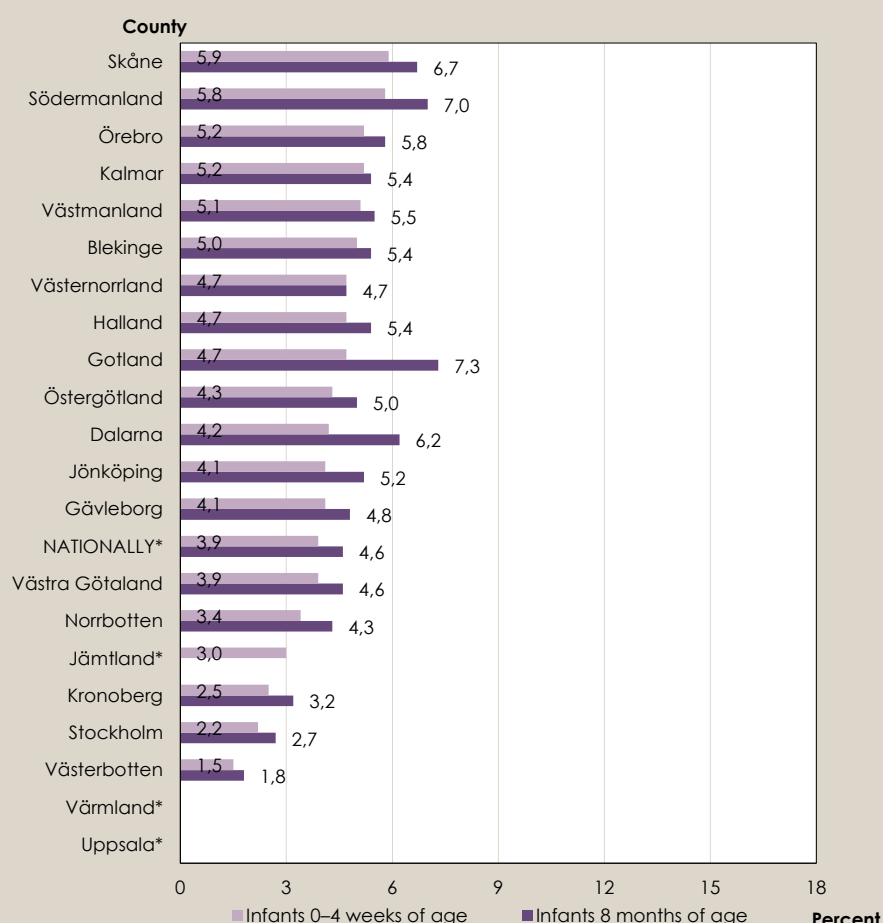
Source: Statistics on smoking habits among parents of infants, The National Board of Health and Welfare

Smoking has also decreased among fathers who have infants, from around 14 percent in 2000 to around 10 percent in 2015. In the past 5 years, the percentage of smokers among fathers of infants aged 0–4 weeks and 8 months has stabilized at around 10 percent (see figure 1).

## Regional differences in smoking habits

The proportions of smoking parents vary across counties. When it comes to smoking mothers, the counties of Västerbotten and Stockholm have the lowest figures. The proportion of smokers among mothers of children aged 0–4 weeks is 1.5 percent in Västerbotten, while the same percentage for Stockholm is 2 percent. The highest percentage of smoking mothers can be found in the counties of Södermanland and Skåne, with almost 6 percent smoking mothers of infants aged 0–4 weeks.

**Figure 2. Mothers who smoke during infancy, by county. Infants born 2015**

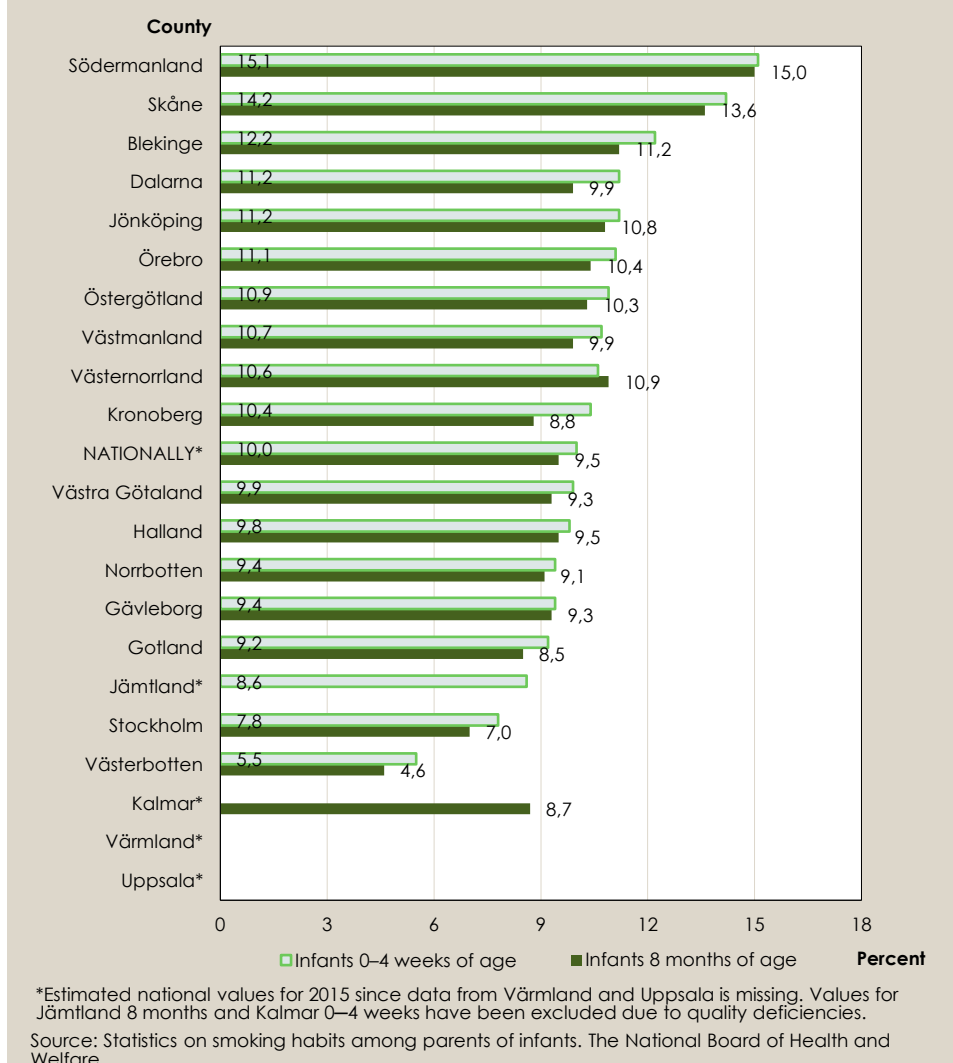


\*Estimated national values for 2015 since data is missing from Värmland and Uppsala. Values for Jämtland 8 months have been excluded due to quality deficiencies.

Source: Statistics in smoking habits among parents of infants. The National Board of Health and Welfare

Gotland had the highest rate of smoking mothers with 8-month-old children. The proportion was significantly lower at 0–4 weeks, which could also indicate that mothers resumed smoking as the child grew older (see figure 2).

**Figure 3. Fathers who smoke during infancy, by county. Infants born 2015**



There are also large regional differences among smoking fathers. The lowest percentage of smoking fathers of children aged 0–4 weeks is found in the counties of Västerbotten and Stockholm, while the highest percentage occurs in the counties of Södermanland and Skåne.

The differences within counties when it came to smoking fathers of children aged 0–4 weeks and 8 months are lower than one percentage point (see figure 3).

The proportion of children exposed to tobacco smoke varies greatly within the counties, and with major differences among city districts within Stockholm for example [1].

**About the statistics on smoking habits among parents of infants**

Statistics on smoking during infancy has been collected since 1999 and include smoking when the infant is 0–4 weeks and 8 months. The information is available at county and municipal levels.

*Smoker* is defined as a person that is smoking at least once daily, i.e. inhales smoke from cigarettes, cigarillos, cigars, tobacco pipes or other items containing tobacco. People always smoking outside are included.

*Smoking family member* is defined as a person who permanently lives with the child e.g. older siblings or grandparents or any other who smoke. Permanently refers to a person living at the same address as the child at least 14 days per month.

There are certain quality issues concerning the 2013–2015 data. For more information, see the Excel file attached to this publication.

## References

1. Årsrapport Barnhälsovården i Stockholms län 2016. Stockholm: Stockholms läns landsting, Barnhälsovårdsenheten 2016.

**More information**

You can find more tables, graphs and information in the following Excel file (in Swedish, but with English list of terms):

[www.socialstyrelsen.se/publikationer2017/2017-10-3](http://www.socialstyrelsen.se/publikationer2017/2017-10-3)

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