



Hooked early: Nicotine use among Australian teens

Poll report

Poll 40, February 2026



Report highlights

- One quarter (26%) of teens have ever tried a nicotine product, 12% are current users, and 15% are considering trying a nicotine product.
- Three quarters of teens (74%) using nicotine products shows signs of dependence.
- Half of all teens (53%) who are using a nicotine product would like to quit or cut down.
- Less than half (45%) of parents know about all the types of nicotine products their teen has tried.

Use of nicotine products

Nicotine comes in different forms, including cigarettes, e-cigarettes or vapes and oral nicotine pouches.¹ We asked children aged 12 to 17 years (teens) if they had ever used or tried these products and if they had used them in the last 30 days. Teens who said they had used a product in the last 30 days were defined as 'current users'. One in four teens (26%) reported they had ever used at least one nicotine product and one in eight (12%) reported they were current users (see *figure 1*). Among current users, more than a third (38%) report using multiple types of nicotine product. When teens were asked if they would consider using one of these products in the next 12 months, 7% said yes and a further 8% were not sure.

Current use of any nicotine product increased with age from 8% of 12-year-olds to 16% of 15-year-olds and 15% of 16- and 17-year-olds. There was no difference in the proportion of current users between males and females.

Cigarettes

One in five teens (19%) said they had ever smoked or tried smoking cigarettes, with one in twenty (6%) currently smoking (see *figure 1*). As expected, ever smoking cigarettes was highest for older age groups – 28% of 17-year-olds compared to 15% of 14-year-olds and 10% of

12-year-olds. In contrast, slightly more 15-year-olds (9%) reported currently smoking than younger teens (6% of 12- and 13-year-olds) and older teens (4% of 16- and 17-year-olds). Similar numbers of male and female teens reported ever or currently smoking cigarettes.

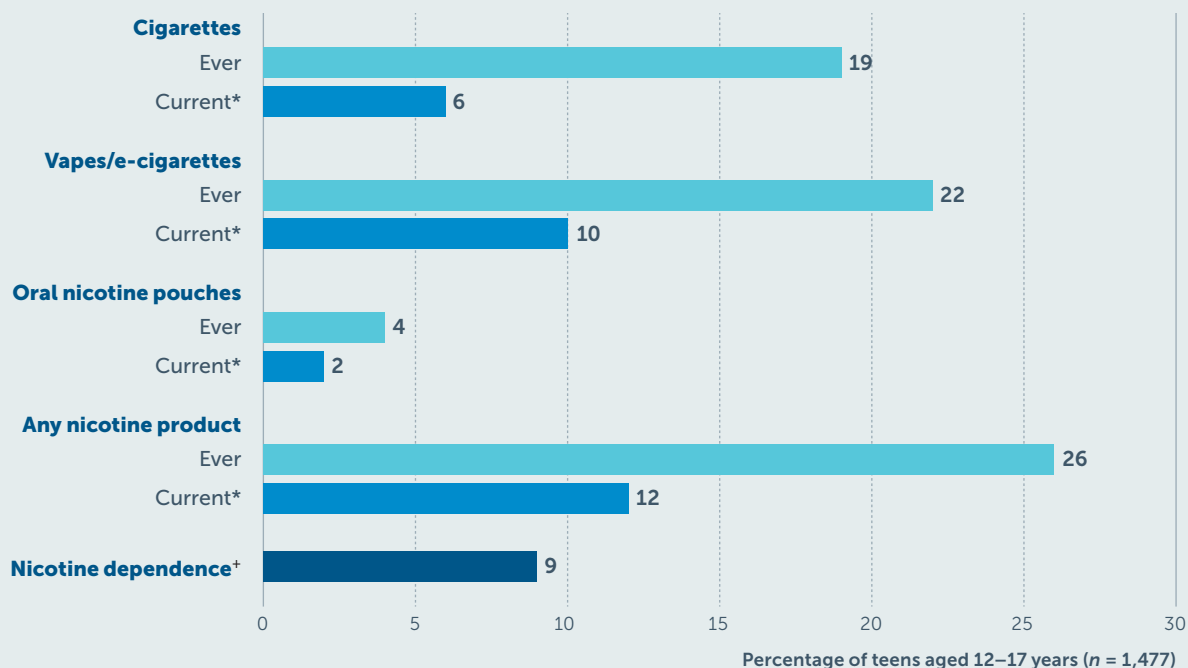
E-cigarettes (vapes)

One in five teens (22%) said they had ever used or tried e-cigarettes or vapes, with one in ten (10%) currently using them (see *figure 1*). Ever using or trying e-cigarettes increased sharply with age; just 10% of 12-year-olds reporting ever use compared to 32% of 16- and 17-year-olds. Twice as many older teens (13% of 15 to 17-year-olds) reported currently using e-cigarettes than younger teens (7% of 12- to 14-year-olds). Similar numbers of male and female teens reported ever or currently vaping.

Nicotine pouches

Oral nicotine pouches have recently become available in Australia and are marketed as an alternative to cigarettes and e-cigarettes.² They are sometimes known by the brand name 'Zyn'. One third of teens reported they had 'heard' of oral nicotine pouches and eight percent were unsure. One in twenty (4%) teens said they had tried oral nicotine pouches and just 2% reported current use (see *figure 1*). Notably, twice as many males (6%) as females (3%) reported ever trying or using these products.

Nicotine product use among teens



Note: All proportions are weighted by teens' age, sex, SES and state

* current use was defined as using in the last 30 days

+ dependence was classified as reporting any of the following: inability to get through the day without it, believes it would be difficult to stop using it, feels bad if not using it, uses when first wakes up, uses it every or most days or had tried unsuccessfully to cut down in the past.

Figure 1.

What are nicotine pouches?

Nicotine pouches are small microfibre bags containing nicotine and sometimes other ingredients, such as sweeteners and flavours. These products are designed to be placed between the lip and gum, and usually contain 'synthetic nicotine' which is absorbed through the gums into the blood stream. Snus pouches are similar, but they contain both tobacco and nicotine.³

Attitude and knowledge among teens about nicotine pouches

Knowledge about products containing nicotine influences a person's decision to start or quit using them.⁴ As nicotine pouches have become more widely available and popular in Australia⁵, we asked teens about their knowledge and attitude toward them. One in five teens (18%) believe nicotine pouches are not as bad for your health as regular cigarettes and two in five (40%) are unsure. Similar proportions of teens believe nicotine pouches are not as bad for your health as e-cigarettes (17%) or are unsure (42%) (see *figure 2*).

Many nicotine products are designed to appeal to young people. One in five (18%) teens believe nicotine pouches make people feel good and two in five (42%) are unsure. Fifteen percent of teens believe nicotine pouches help people relax and 38% are unsure. When asked if nicotine pouches were easier or cheaper to buy than cigarettes or vapes, 14% of teens said they were, and 55% were unsure (see *figure 2*).

Quitting

Half of all teens (53%) who are currently using (last 30 days) at least one nicotine product would like to quit or cut down, and close to half (46%) said it would be hard to do so. One third (30%) of all teens who had ever used at least one form of nicotine and half (47%) of those currently using (last 30 days) said they had tried to cut down or quit.

Dependency and help seeking

Nicotine dependence is when a person requires nicotine to avoid experiencing withdrawal symptoms.⁶ Teens who said they experienced the following when using a nicotine product were classified as being dependent: inability to get through the day without it, believes it would be difficult to stop using it, feels bad if not using it, uses it when first wakes up, uses it every or most days or had tried unsuccessfully to cut down in the past.^{6,7} Based on their survey responses, one in ten (9%) of all teens were considered dependent on at least one nicotine product (see *figure 1*). This represents 74% of those currently using at least one nicotine product. There was no difference in the proportion of males and females considered dependent. Twice as many 17-year-olds (13%) as 12-year-olds (6%) were considered dependent.

Teens who were considered dependent were asked where they would go for help if they wanted to quit using nicotine products. The most common help source cited was a website (46%), followed by parents (39%), a doctor (37%), a friend (29%), school (25%), social media (25%) and a helpline (20%).

Teens' beliefs about oral nicotine pouches

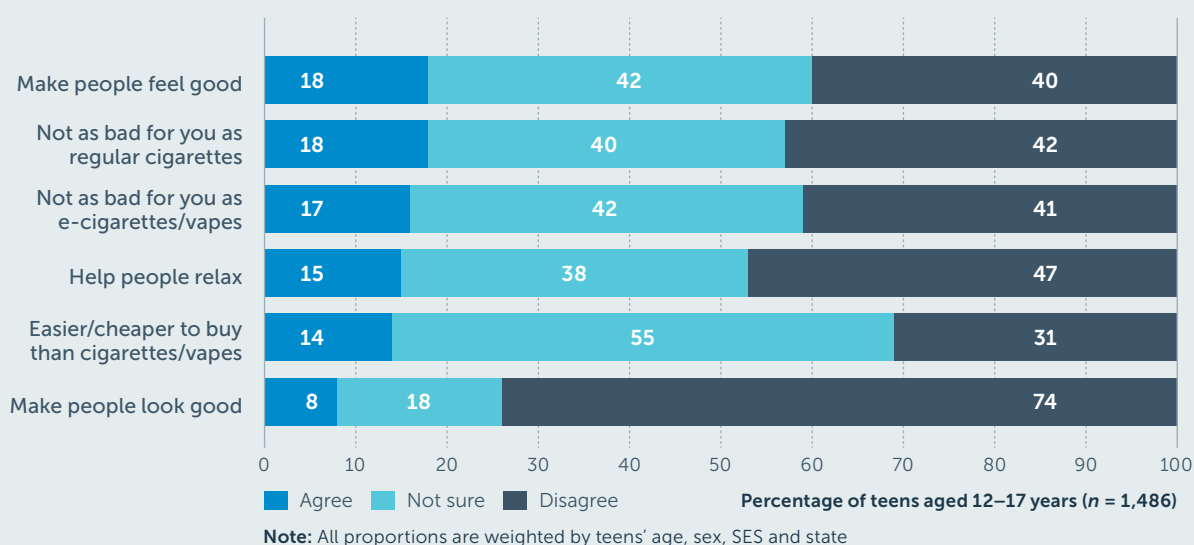


Figure 2.

Parent views and knowledge

Do parents know about teen's nicotine use?

Parents were asked a series of questions about their child's nicotine use. Many parents are not aware of their teen's use of nicotine products. Among teens who reported ever having used a nicotine product, 34% of parents were not aware their child had tried any product and a further 21% were only aware of some of the products their child had tried. Among those teens who report being current users of one or more nicotine products, less than half (42%) of parents were aware of their child's use, 14% were aware of some of the products their child was using and 44% were not aware of any product use.

Parent awareness of teen nicotine use varied somewhat across different product types, with 50% of parents aware their child had ever tried cigarettes, compared with 64% aware their teen had tried vaping and 35% aware they had tried nicotine pouches.

Can parents recognise nicotine dependence?

Half of parents (49%) said they were very confident they could recognise the signs of nicotine dependence, 41% were somewhat confident and 10% were not at all confident. One in four parents of teens (24%) considered dependent on a nicotine product said they were not able to help their child quit and 16% were unsure if they could help.

Where would parents go for help?

When asked what sources parents would use to help their child quit nicotine products, the majority of parents said they would go to the doctor (70%) followed by using a website (60%), using a helpline (36%) and seeking help from their child's school (26%).

Implications

Nicotine is highly addictive and has profound and often harmful effects on the developing teenage brain.⁸ This Poll reveals many teens are already using – or considering using – nicotine products, jeopardising their immediate wellbeing and long-term health. Early nicotine exposure increases the likelihood of long-term dependence, making quitting more difficult and raising the risk of chronic conditions including cardiovascular disease, respiratory illness and oral health problems.⁹ Short-term impacts include heightened anxiety, stress when access to nicotine is restricted, mood disorders, cognitive impacts including problems with attention, learning and memory, and interactions with certain medications.¹⁰

In this Poll, we found the majority of teens using nicotine show signs of dependence. Encouragingly, half of dependent users express a desire to quit or cut back, with many of them saying they would turn to their parents for support. Many parents feel ill-equipped to help their child quit and would seek assistance from

Most parents don't know of all the nicotine product types their teen has tried.



trusted sources such as doctors, helplines and school-based supports. To prevent dependency, both parents and teens must be supported with education about how quickly dependency develops, how to recognise the signs and what resources and supports are available.

Awareness of the risks associated with oral nicotine pouches is low among teens. Although these pouches may lack tobacco leaf, they still deliver addictive and harmful nicotine as well as potential contaminants like heavy metals and formaldehyde.¹¹ Produced by major tobacco companies, nicotine pouches are now widely available in Australia and marketed to teens using aggressive strategies similar to those for other tobacco products. Research indicates these approaches appeal to young people with flavours such as bubble gum and fruits presented in attractive packaging.¹² Marketing strategies commonly present e-cigarettes and nicotine pouches as safer than traditional cigarette smoking, but the fact remains that there is no 'safe' use of nicotine.¹¹

These findings likely underestimate the true proportion of teens who currently use or are at risk of using nicotine products, as such health behaviours are commonly underreported in population-based surveys.^{13,14} Nonetheless, this Poll reinforces that preventing the initiation of nicotine use among teens remains an important public health objective. Comprehensive strategies should aim to educate parents and teens to correct misconceptions regarding nicotine products, including oral pouches, and emphasise the neurodevelopmental and long-term health risks associated with use. Concurrently, interventions to address established dependence must be accessible and tailored to adolescents. Supporting both young people and their parents with resources is essential to mitigate the ease with which dependence develops. Limiting the supply and accessibility of these products to young people is also important. A dual focus on prevention and treatment will be fundamental to reducing the burden of nicotine-related morbidity and safeguarding teen health, now and in the future.

Data source and methods



This report presents findings from a nationally representative household survey conducted exclusively by the Online Research Unit for The Royal Children's Hospital, Melbourne. The survey was administered from 20 to 28 May 2025 to a randomly selected nationally representative sample of Australian parents aged 18 years or older by age, sex and state of residence. All parents had at least one child aged 12 to 17 years of age who was also invited to participate in the survey. The survey comprised two questionnaires – one completed by a parent or caregiver, and the other by their child aged 12 to 17 years. For parents with more than one child in the target population, one child was randomly selected to participate. Both parents and children responded to close-ended questions assessing their knowledge, attitudes and behaviours in relation to nicotine products by adolescents. The response rate among eligible parents was 91%, with 2,012 completing the parent questionnaire. Of these, 1,488 (74%) provided consent for their child aged 12 to 17 years to participate. All 1,488 children whose parents consented agreed to participate and completed the child questionnaire, resulting in 1,488 parent–child dyads. The estimates presented in this report are based on these 1,488 children and the 2,012 parents who completed their respective questionnaires. The data have been weighted to reflect the demographic distribution of the Australian population, using figures from the Australian Bureau of Statistics.

References



1. World Health Organization. *Types of tobacco and nicotine products*. World Health Organization. Accessed December 15, 2025. www.who.int/docs/librariesprovider2/default-document-library/2-types-of-tobacco-and-nicotine-products.pdf?sfvrsn=88bee704_3
2. Watts C, McGill B, Rose S, Yazidjoglou A, Chapman L, Dessaux A, et al. 'It'll save your lungs': early insights into nicotine pouch use and perceptions among young Australians. *Health Promot Int*. 2024;39(6). doi: 10.1093/heapro/daae159.
3. Cancer Council NSW. *Nicotine pouches*. Cancer Council NSW. Accessed December 15, 2025. www.cancercouncil.com.au/cancer-prevention/smoking/nicotine-pouches
4. Wood L, Greenhalgh EM, Vittiglia A, Hanley-Jones S. 5.2 Factors influencing uptake by young people: overview. *Tobacco in Australia: Facts and issues*. www.tobaccoinaustralia.org.au/chapter-5-uptake/5-2-factors-influencing-uptake-by-young-people-ove
5. Jongenelis MI, Brierley ME, Li R. *Patterns of nicotine pouch use among young Australians*. *Drug Alcohol Depend*. 2024;259:112428. doi:10.1016/j.drugalcdep.2024.112428
6. Dovetail. *Tips for working with young people experiencing nicotine dependence*. Accessed December 15, 2025. www.insight.qld.edu.au/dovetail
7. Marshall H, Vandeleur M, Dean E, et al. *Thoracic Society of Australia and New Zealand (TSANZ) guidance for the management of electronic cigarette use (vaping) in adolescents and adults*. *Respirology*. 2025;30(7):605-22. doi:10.1111/resp.70066
8. NSW Health. *Nicotine addiction – Fact sheet for young people*. NSW Health. Accessed December 15, 2025. www.health.nsw.gov.au/tobacco/Pages/vaping-nicotine-addiction-young-people-factsheet
9. Lanza ST, Vasilenko SA. *New methods shed light on age of onset as a risk factor for nicotine dependence*. *Addict Behav*. 2015 Nov;50:161-4. doi:10.1016/j.addbeh.2015.06.024.
10. VicHealth. *How does nicotine affect brain development*. VicHealth. Accessed December 15, 2025. www.vichealth.vic.gov.au/our-health/be-healthy-blog/how-does-nicotine-affect-brain-development
11. Centers for Disease Control and Prevention. *Nicotine pouches*. Centers for Disease Control and Prevention. Accessed December 15, 2025. www.cdc.gov/tobacco/nicotine-pouches
12. World Health Organization. *Tobacco and nicotine industry tactics addict youth for life*. World Health Organization. Accessed December 15, 2025. www.who.int/news/item/23-05-2024-tobacco-and-nicotine-industry-tactics-addict-youth-for-life
13. Dolcini MM, Adler NE, Lee P, Bauman KE. *An assessment of the validity of adolescent self-reported smoking using three biological indicators*. *Nicotine Tob Res*. 2003;5(4):473-83. doi:10.1080/1462220031000118586
14. Liber AC, Warner KE. *Has underreporting of cigarette consumption changed over time? Estimates derived from US national health surveillance systems between 1965 and 2015*. *Am J Epidemiol*. 2017;187(1):113-9. doi:10.1093/aje/kwx196

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