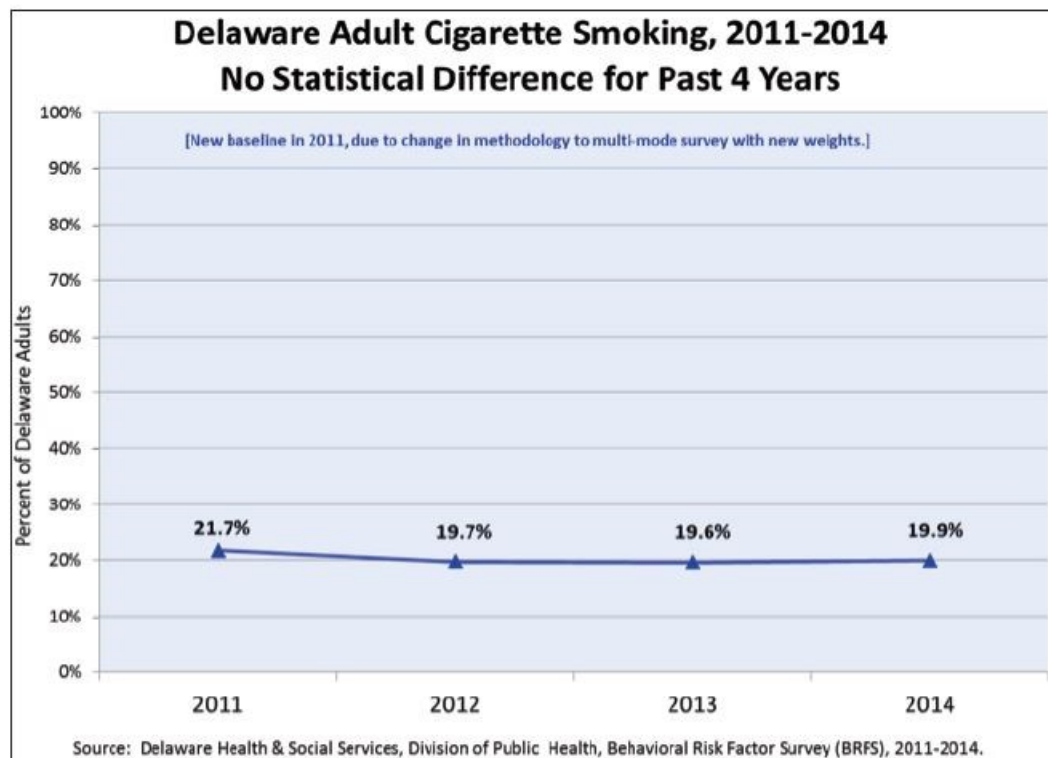


## Tobacco Use in Delaware: Issues and Trends

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During much of the past two decades, especially when the state's Tobacco Prevention and Control Program was adequately funded, smoking prevalence among adults and youth trended downward. Adult smoking prevalence decreased by about 24 percent — from 26 percent in 1991 to 19.8 percent in 2007. According to the adult Delaware Behavioral Risk Factor Survey (BRFS), the adult prevalence has leveled off since 1997; there has been no statistically significant difference in adult cigarette smoking for the past several years (see Figure 1).

Figure 1. Delaware Adult Cigarette Smoking, 2011 - 2014



Much of the emphasis of tobacco prevention efforts has been on preventing smoking initiation among teens. The Youth Risk Behavior Survey (YRBS), conducted every other year in Delaware public high schools, shows successful reduction in tobacco use initiation by high school students (see Figure 2). “Current smoking” among high school students decreased by nearly 56 percent from 1999 (when the YRBS was initiated) to 2013. Current smoking (the blue trend line) is defined in the YRBS as smoking during the past 30 days. The red line shows “regular smoking,” which means the respondent smoked on 20 or more of the past 30 days.

### Adult Tobacco Use

In 2014, 14.7 percent of Delaware adults reported they are every-day smokers. Another 5.2 percent of adults said they are some-day smokers, which may mean they are either starting to smoke and are not yet addicted or they are trying to quit smoking. In 2014, 55.5 percent of adults

report they have never smoked – the highest “never smoked” prevalence in the 25-year history of the Delaware BRFs . Former smokers comprise 24.6 percent of the adult population in the state.

A majority of smokers said they have tried to quit. During the past year, 59.3 percent of adult cigarette smokers say they stopped smoking for a day or more because they were trying to quit.

To look at smoking prevalence in smaller areas, the BRFs aggregated two years (2013-14) of data and three Zip Codes from center city Wilmington.

Figure 2. Prevalence of Current Smoking Decreased Steadily Among Delaware H.S. Students from 1999 – 2013

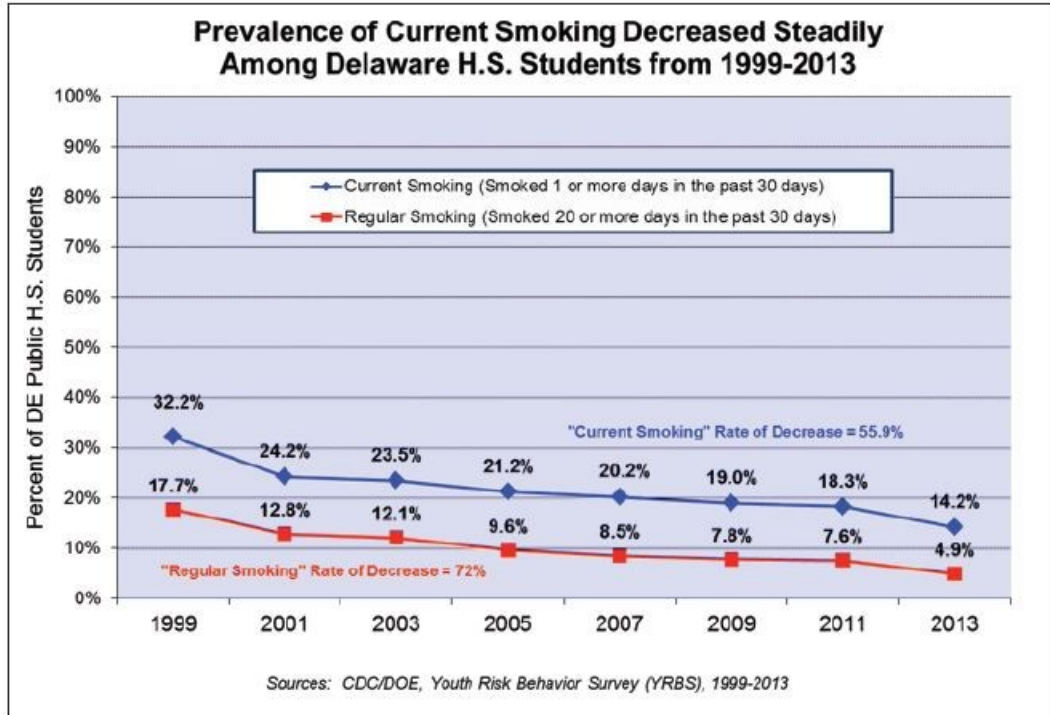


Table 1 shows the smoking prevalence by county and Wilmington:

Table 1: Current Smoking Prevalence by Region

	Statewide	Wilmington	Suburban NC County	Kent County	Sussex County
Smokers	19.7%	30.5%	17.1%	21.1%	20.3%

Source: Delaware Health and Social Services, Division of Public Health, Behavioral Risk Factor Survey (BRFS), 2013-2014.

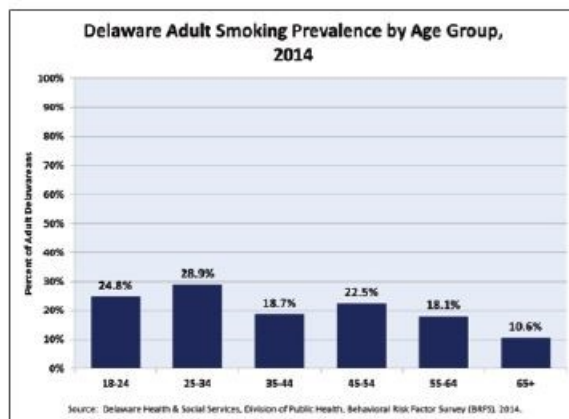
Wilmington residents reported the highest prevalence of cigarette smoking, followed by Kent and Sussex Counties; while Suburban New Castle County has the lowest smoking prevalence. Other populations are notably at higher risk for smoking:

- 23.5 percent of adult men smoke, compared to 16.6 percent of adult women.
- The highest smoking prevalence by age is among 25 to 34 year old adults (see Figure 3). Smoking prevalence has dropped among young adults 18-24, as high

school students, now smoking at lower rates, have moved into the adult population. Currently, 24.8 percent of young adults report smoking cigarettes.

- The highest smoking prevalence (greater than 40 percent) is among adults with incomes under \$15,000 a year, and among adults with less than a high school education. While 24.4 percent of high school graduates are smokers, only 9 percent of college graduates smoke.
- Adults who report poor mental health (39.2 percent) smoke more than adults who report mostly good mental health (17.3 percent).
- Smoking is also higher among adults with disabilities (28.4 percent) than among adults who do not have any disabilities (17.2 percent).
- 34.3 percent of adults who report being lesbian, gay or bisexual (LGB) smoke, compared to 19.5 percent of heterosexual adults who report smoking.

Figure 3. Delaware Adult Smoking Prevalence by Age Group, 2014



New tobacco products and changing patterns of tobacco use make it necessary to look at more than just cigarette smoking. Other tobacco products include smokeless tobacco (chewing tobacco, snuff and snus), cigars and little cigars, pipes (including water pipes and hookahs), and electronic or e-cigarettes. While 19.9 percent of Delaware adults smoke cigarettes, the total tobacco use prevalence goes up to 26.9 percent of adults when these other forms of tobacco are included.

## High School Tobacco Data

Most of the data on high school tobacco use comes from the YRBS, conducted in public high schools in odd-numbered years. The latest data, below, are from the 2013 survey; 2015 data will be available in 2016.

The demographics of students at greatest risk for tobacco use largely mirror the adult population. One notable exception is smoking prevalence by race or ethnicity. Significantly more non-Hispanic white high school students (19.3 percent) smoke than do African American students (6.8 percent) or Hispanic/Latino students (11.9 percent). Among adults, there is no statistically significant difference for cigarette smoking by among whites, African Americans or Hispanics.

Smoking does increase with age and grade level. While only 12.2 percent of high school freshmen report current smoking, the prevalence increases to 21.2 percent of seniors. This is close to the 24.8 percent prevalence among young adults 18-24.

As with adults, students who identify as gay, lesbian or bisexual have a higher smoking prevalence (21.8 percent) than heterosexual students (13.7 percent), according to the YRBS.

Disabilities and mental health also are related to tobacco use. Among students with emotional or learning disabilities, 27.4 percent smoke, compared to only 13.4 percent of students without those disabilities. About 18.5 percent of students with physical disabilities reports smoking, compared with 14.4 percent of students without physical disabilities (YRBS).

Little cigars or cigarillos appear to be gaining in popularity among high school students, perhaps because they're cheaper (lower taxes) and can be purchased in smaller packs. During 2013, 12 percent of public high school students reported smoking little cigars. Smokeless tobacco use among students has doubled in the past decade, from 3.4 percent in 2003 to 7.1 percent in 2013 (YRBS).

Another survey conducted for the Division of Public Health, the Youth Tobacco Survey (YTS), is conducted in even-numbered years when the YRBS is not being administered. According to the YTS data, the prevalence of students who have tried e-cigarettes more than doubled from 6.3 percent in 2012 to 14.3 percent in 2014. Current use of e-cigarettes also doubled— from 2.1 percent in 2012 to 5.6 percent in 2014.

As with adults, total tobacco use is higher than current cigarette smoking. While 14.2 percent of public high school students smoke cigarettes, the prevalence for total tobacco use (i.e. cigarettes, cigars, and other tobacco products) is 20.3 percent. Like cigarette use, the trend for total tobacco use is downward, from a high of 26.6 percent in 2003.

## Conclusions

While the data clearly show success with prevention of cigarette smoking among high school students, tobacco addiction remains a serious public health problem in Delaware – as it does in the nation. Tobacco use is still the leading cause of premature death and disability in the nation.

The 2014 U.S. Surgeon General's report on tobacco, *The Health Consequences of Smoking – 50 Years of Progress*, points out that “comprehensive tobacco control programs and policies have been proven effective for controlling tobacco use. Further gains can be made with the full, forceful, and sustained use of these measures.<sup>1</sup>”

Data from the BRFS and YRBS will and should inform comprehensive tobacco prevention and control efforts in Delaware. These data suggest topics and audiences which the programs should reach. Clearly, as more evidence mounts about e-cigarettes and usage increases, policies and educational programs will need to address these new tobacco industry products. Low income and low-education populations are at greater risk for tobacco use, as are LGB Delawareans, and those with mental health problems and mental or physical disabilities. Prevention and cessation efforts need to continue to reach out to these populations with appropriate and culturally sensitive messages. Segmenting and targeting prevention efforts, while justified as best practices, create additional costs and will require the state's comprehensive tobacco prevention and control program to be well funded.

## References

1. U.S. Department of Health and Human Services. The Health Consequences of Smoking—50 Years of Progress: A Report of the Surgeon General. Atlanta, GA: U.S. Department of Health and Human Services, Centers for Disease Control and Prevention, National Center for Chronic Disease Prevention and Health Promotion, Office on Smoking and Health, 2014.

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