THE BURDEN OF ADULT SMOKING IN INDIANA 2012

THE BURDEN OF ADULT SMOKING IN INDIANA

Quick Facts

An estimated 1.25 million adults in Indiana report being a current smoker.

Cigarette smoking is the leading cause of preventable death in the United States (CDC, 2012).

Smoking causes cancer, heart disease, stroke, and lung diseases including emphysema, bronchitis, and chronic airway obstruction (CDC, 2012).

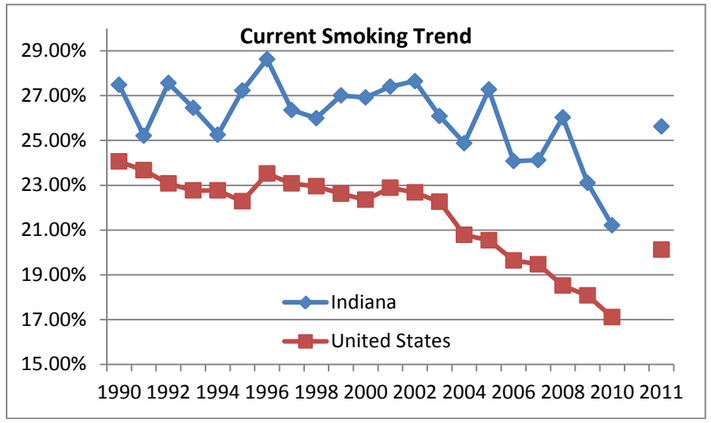
PERSPECTIVE

- 25.6% of the adult population of Indiana, or about 1.25 million, report being a current smoker[1].
- 57.5% of current smokers stopped smoking for at least one day in the past year as an attempt to quit smoking.
- Indiana has the 7th highest smoking rate among the 50 states and the District of Columbia.
- Among adults in Indiana, the percentage of adults who report being current smokers decreases as either income or education levels increase. More males report being current smokers compared to females.
- Smoking causes cancer, heart disease, stroke, and lung diseases (including emphysema, bronchitis, and chronic airway obstruction) (CDC,2012).
- In 2010 in Indiana 9,700 people died and $4.7 billion was spent on annual health and other economic costs as a result of tobacco use (Jay, Torabi, & Spitznagle, 2012).

CURRENT SMOKING

TREND

The following figure displays the trend in the percentage of adults in Indiana and the United States who report being a current smoker.



DEMOGRAPHICAL BREAKDOWN

SEX	27.6% of males report being a current smoker compared to 23.8% of females.
AGE	29.0% of 18-24 year olds, 40.0% of 25-44 year olds, 26.3% of 45-64 year olds, and 11.5% of 65+ year olds report being a current smoker.
RACE/ETHNICITY	25.0% of white, non-Hispanic adults, 31.4% of black, non-Hispanic adults, 22.4% of Hispanic adults, and 33.4% of other adults report being a current smoker.
INCOME	40.5% of adults with annual household income of less than $15,000, 30.3% of those with household income between $15,000-$24,999, 28.7% of those with household income between $25,000-$49,999, 20.7% of those with household income between $50,000-$74,999, and 13.4% of those with household income over $75,000 report being a current smoker.
EDUCATION	41.6% of those with less than a high school education, 30.0% of those with a high school education, 24.3% of those with some college education, and 8.5% of those with a college education report being a current smoker.

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Quick Facts

Approximately 57.5% of current smokers in Indiana attempted to quit smoking in the past 12 months.

Cessation can significantly reduce the risk of suffering from smoking-related diseases (CDC,2012).

Most smokers are dependent on nicotine (CDC, 2012).

Counselling and medication can more than double the chance that a smoker who tries to quit will succeed (WHO, 2012).

CURRENT SMOKING

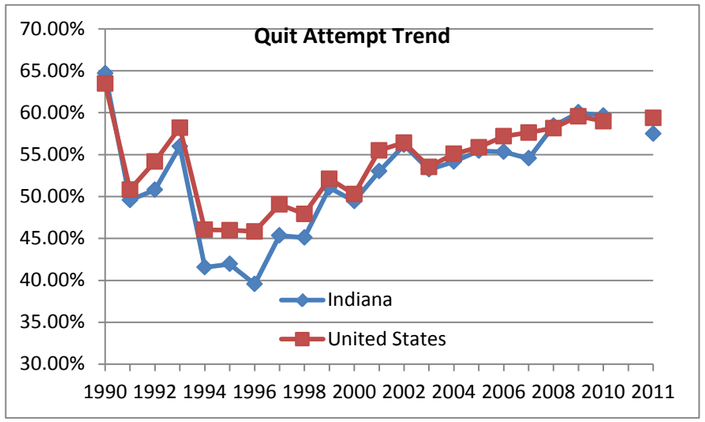
STATISTICAL ANALYSIS

SEX	The male and female groups are significantly different from each other.
AGE	The 18-24 year group is not significantly different from the 25-44 and 45-64 year groups. All other age groups are significantly different from each other.
RACE/ ETHNICITY	The Hispanic group is significantly different from the black non-Hispanic group, and other/multiracial non- Hispanic group. All other race/ethnicity groups are not significantly different from each other.
INCOME	The $25-50k income group is not significantly different from the $15-25k income group. All other income groups are significantly different from each other.
EDUCATION	All education groups are significantly different from each other except for some college and high school graduation group.

QUIT ATTEMPT

TREND

The following figure displays the trend in the percentage of smoking adults in Indiana and the United States who report attempting to quit smoking[2] for one day or longer in the past year.



DEMOGRAPHICAL BREAKDOWN

SEX	Among current smokers, 52.4% of males, and 63.0% of females report attempting to quit smoking.
AGE	Among current smokers, 64.1% of 18-24 year olds, 60.5% of 25-44 year olds, 53.1% of 45-64 year olds, and 47.5% of 65+ year olds report attempting to quit smoking.
RACE/ ETHNICITY	Among current smokers, 56.3% of white, non-Hispanic adults, 73.7% of black, non-Hispanic adults, 45.6% of Hispanic adults, and 55.1% of other adults report attempting to quit smoking.
INCOME	56.5% of adults with annual household incomes of less than $15,000, 60.1% of those between $15,000-$24,999, 56.5% of those between $25,000-$49,999, 55.0% of those between $50,000-$74,999, and 59.8% of those over $75,000 report attempting to quit smoking.
EDUCATION	58.4% of those with less than a high school education, 55.0% of those with a high school education, 59.4% of those with some college education, and 59.4% of those with a college education report attempting to quit smoking.

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Cigarette smoking costs more than $193 billion (i.e., $97 billion in lost productivity plus $96 billion in health care expenditures) (CDC, 2012).

Each pack of cigarettes creates $35 dollars of health-related costs for the smoker (American Cancer Society, 2012).

Half of all those who continue to smoke will die from a smoking-related illness (American Cancer Society, 2012).

QUIT ATTEMPT

STATISITCAL ANALYSIS

SEX	The male and female groups are significantly different from each other
AGE	Age group 18-24 is not significantly different from age group 25-44 and age group 65+ is not significantly different from age group 45-64. All other age groups are significantly different from each other.
RACE/ETHNICITY	The white non-Hispanic group is significantly different from the black non-Hispanic group. No other race/ethnicity groups are significantly different from each other.
INCOME	The greater than $75k group is significantly different from the less than $15k and $25-50k groups. No other income groups are significantly different from each other.
EDUCATION	All education groups are significantly different from each other.

APPENDIX

FOOTNOTES

[1] "Current smokers" are respondents who smoked at least 100 cigarettes in their lifetime and who, at the time of survey, smoked either every day or some days.

[2]"Quit Attempt" is defined as current smokers who stopped smoking for one day or longer in the past year as an attempt to quit smoking.

[3]Beginning in 2011, the CDC made a methodological change to their data collection procedures for BRFSS. Therefore, data prior to 2011 cannot be accurately compared with 2011 and subsequent years data (CDC, 2012).

Statistical Analysis

Tests for statistically significant differences across the groups listed below were performed at the 5% significance level. Tests comparing two groups, for example: male vs female, were performed using a two sample z-test for proportions. For the categories that utilize multiple groups, for example: age, the Marascuilo procedure was employed to perform pairwise comparisons. The time series data were not tested due to a methodological change made by the CDC detailed in the footnotes section.

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APPENDIX

ABOUT THE GLOBAL HEALTH INSTITUTE

Ball State University's Global Health Institute (GHI) focuses on various issues related to the function of health care systems and the promotion of health. The interdisciplinary institute concentrates on: public and community health; public, business and science policy; information systems and communication technology; architecture and design. The study of health-related issues is a key research and educational priority for Ball State.

The Global Health Institute's mission is to encourage interdisciplinary investigation of critical issues that impact local and global health.

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