

Tobacco Use in Vermont

2016 Behavioral Risk Factor Surveillance Survey

Reducing the prevalence of tobacco use is a health priority in Vermont to reduce chronic disease and tobacco-related deaths. Decreasing adult use of cigarettes and increasing the proportion of cigarette smokers who attempt to quit are Healthy Vermonters 2020 Objectives (HV2020). This data brief includes results from the 2016 Behavioral Risk Factor Surveillance System (BRFSS) survey for selected indicators and demographic subgroups related to the Healthy Vermonters goals.

In 2016, 18% of adults reported smoking cigarettes regularly and 49% of current smokers reported a quit attempt in the last year. Three percent of Vermont adults said they used smokeless tobacco products (for example, chewing tobacco, snuff, and snus). Cigarette smoking prevalence, smokeless tobacco use, and quit attempts in 2016 were all statistically similar to previous years (2011 – 2015). The 2016 survey is the first in which we asked about lifetime and current electronic cigarette (e-cigarette) use. Nineteen percent of Vermont adults have ever used an e-cigarette and 3% reported currently using e-cigarettes.

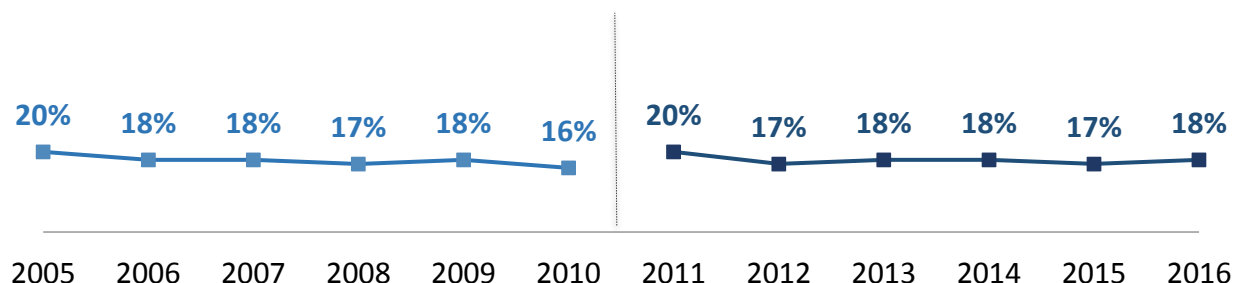
Adult Smoking Prevalence & Quit Attempts (BRFSS, 2016)

	%	Estimated Vermonters [‡]
Cigarette Use [†]	18.2	83,000
Smokeless Tobacco Use	3.1	15,000
Lifetime Electronic Cigarette Use	18.7	92,000
Current Electronic Cigarette Use	3.4	17,000
Quit Attempts among cigarette users [†]	49.2	41,000

[†] Percentages age-adjusted to standard U.S. 2000 population according to Healthy People 2020 guidelines.

[‡] Estimated counts are rounded to the nearest thousand Vermonters and not age-adjusted.

Trend in Smoking Prevalence Among Vermont Adults (BRFSS, 2005 - 2016)



Statistical differences between data from 2011 and forward versus 2010 and earlier may be due to methodological changes, rather than changes in opinion or behavior. Comparisons between BRFSS data from 2011 and forward and earlier years should be made with caution.

[†] Percentages age-adjusted to standard U.S. 2000 population according to Healthy People 2020 guidelines.

DEMOGRAPHICS

There continue to be significant differences in smoking prevalence by age, gender, race/ethnicity, education level, federal poverty level (FPL), and sexual orientation/gender identity. However, for quit attempts there were no significant differences based on demographic characteristics. For trend data on smoking prevalence by demographic characteristics, see the [2015 Tobacco Data Pages](#).

- Those that are 25-34 years old have significantly higher smoking rates than those who are 55 years and older. Those that are 65 years and older have significantly lower smoking rates than all younger age groups.
- Males, racial/ethnic minorities, those who identify as LGBT, and those living below 250% FPL are more likely to smoke in comparison to females, those who identify as white, non-Hispanic, heterosexual/cisgender, and those with higher incomes.
- As education level decreases, smoking rates significantly increase. For example, those with less than a high school education are over eight times more likely to currently smoke compared to those with a college education or higher.

Adult Smoking Prevalence & Quit Attempts by Demographic Characteristics (BRFSS, 2016)

	Smoking Prevalence			Quit Attempts		
	%†	Estimated Vermonters‡	Difference within Groups	%†	Estimated Vermonters‡	Difference within Groups
Overall	18.2	83,000	--	49.2	41,000	--
Age Group			Yes			No
18-24 years	22.0 ^{AB}	14,000		48.7 ^A	7,000	
25-34 years	26.9 ^A	19,000		53.2 ^A	10,000	
35-44 years	19.0 ^{AB}	13,000		54.0 ^A	7,000	
45-54 years	19.5 ^{AB}	16,000		47.7 ^A	7,000	
55-64 years	14.8 ^B	14,000		52.0 ^A	7,000	
65+ years	7.0 ^C	8,000		38.1 ^A	3,000	
Gender			Yes			No
Female	15.5 ^A	37,000		48.8 ^A	18,000	
Male	20.9 ^B	47,000		48.6 ^A	23,000	
Race-Ethnicity			Yes			No
White, non-Hispanic	17.7 ^A	75,000		48.5 ^A	36,000	
Racial/Ethnic Minority	27.3 ^B	8,000		59.0 ^A	5,000	
Education			Yes			No
Less than high school	50.0 ^A	15,000		48.4 ^A	7,000	
High school	28.0 ^B	37,000		47.8 ^A	18,000	
Some college	15.7 ^C	22,000		50.2 ^A	11,000	
College or higher	6.1 ^D	9,000		54.3 ^A	5,000	
Federal Poverty Level			Yes			No
<250% of FPL	28.2 ^A	42,000		50.0 ^A	22,000	
≥250% of FPL	10.9 ^B	25,000		46.5 ^A	12,000	
Sexual Orientation/Gender Identity			Yes			No
Heterosexual/Cisgender	17.4 ^A	67,000		49.9 ^A	34,000	
LGBT	28.3 ^B	7,000		41.1 ^A	3,000	

† Percentages, except age group, age-adjusted to standard U.S. 2000 population according to Healthy People 2020.

‡ Estimated counts are rounded to the nearest thousand Vermonters and not age-adjusted.

^{A,B,C,D} Groups within demographic categories that share a common letter are statistically similar to each other. Groups not sharing a common letter are statistically different from one another. For example, smoking among males and females is significantly different while quit attempts is statistically similar.

NOTE: Cisgender is a term for a person whose gender identity matches the sex they were assigned at birth.

SMOKING IN YOUNG ADULTHOOD

Among younger adults (those 18 to 34 years), the subset of those 25-29 years old report the highest smoking rate (28%). The only demographic differences in smoking prevalence among young adult subgroups are those based on education and income. As education and income increase, smoking prevalence decreases. Only a handful of measures for quit attempts among those 25-34 years old had enough respondents to report a meaningful estimate.

**Young Adult Smoking Prevalence & Quit Attempts
by Select Demographic Characteristics (BRFSS, 2016)**

	Age 18-24	Age 25-29	Age 30-34	Age 25-34	
Estimated Smokers[‡]	14,000	9,000	10,000	19,000	
	Prev %	Prev %	Prev %	Prev %	Quit Attempts %
Overall Prevalence[†]	22.0	28.2	25.8	26.9	53.2
Gender					
Female	18.1 ^A	26.6 ^A	21.8 ^A	24.0 ^A	52.8 ^A
Male	25.6 ^A	29.9 ^A	29.7 ^A	29.8 ^A	53.5 ^A
Race/Ethnicity					
White, non-Hispanic	23.0	27.5	24.5	25.9	51.6
Racial/Ethnic Minority	--	--	--	--	--
Education					
Less than high school	--	--	--	--	--
High school	31.6 ^A	44.0 ^A	32.2 ^A	38.7 ^A	47.3
Some college	18.0 ^A	--	21.3 ^A	20.6 ^B	--
College or higher	--	9.6 ^B	12.8 ^B	11.4 ^B	--
Federal Poverty Level					
<250% of FPL	26.3 ^A	41.9 ^A	39.4 ^A	40.7 ^A	54.6
≥250% of FPL	10.3 ^A	16.9 ^B	15.2 ^B	15.9 ^B	--
Sexual Orientation/Gender Identity					
Heterosexual/Cisgender	19.4	23.7	27.7	26.9	50.2
LGBT	--	--	--	--	--

[†] Percentages are not age-adjusted due to the small age ranges. This differs slightly from analyses of all adults.

[‡] Estimated counts are rounded to the nearest thousand Vermonters and not age-adjusted.

^{A,B} Groups within demographic categories that share a common letter are statistically similar to each other. Groups not sharing a common letter are statistically different from one another.

-- Suppressed due to small numbers.

CHRONIC CONDITIONS

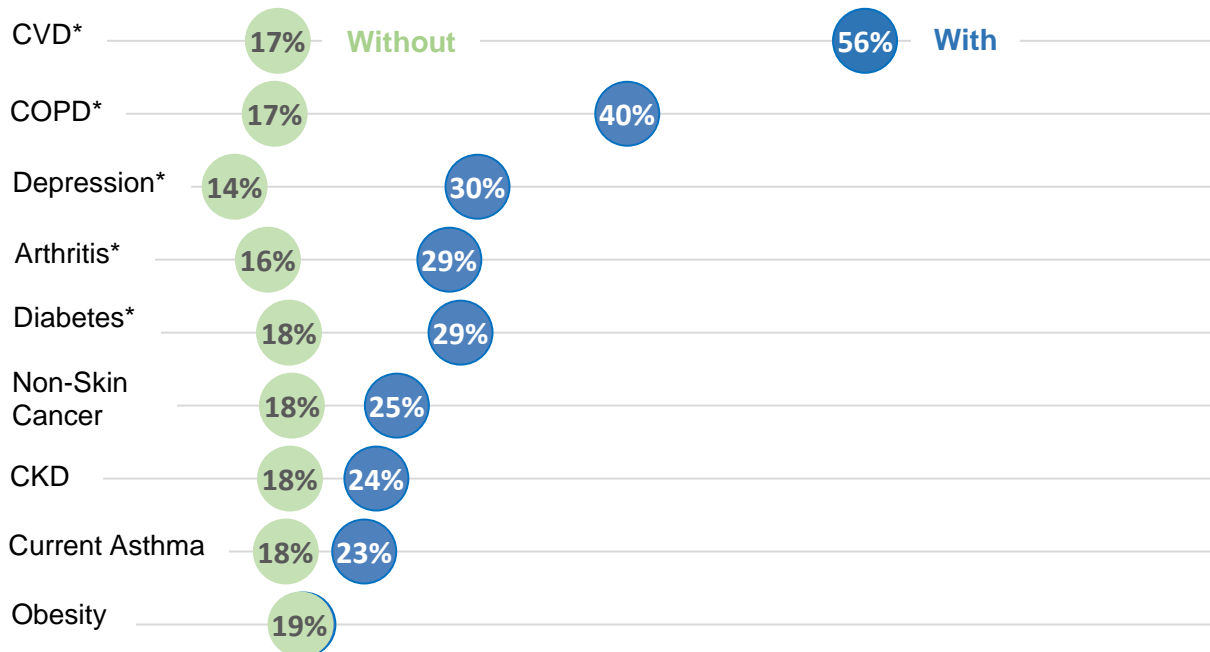
Adult smoking prevalence is significantly higher among Vermont adults with some common chronic conditions.

- Most striking is the prevalence among those ever diagnosed with cardiovascular disease (CVD); adults with CVD are over three times as likely to report current smoking compared to those without CVD. This is a notable difference from 2015, when the smoking rate among those with CVD was double the rate for those without CVD.¹
- Those with COPD are over twice as likely as those without COPD to currently smoke. There are also significant differences in smoking prevalence for those with depression, arthritis, and diabetes.

¹ While there was a significant increase from 2015 to 2016, this may be due to some random fluctuation in the trend data because of small sample sizes.

- There are no significant differences in smoking based on diagnosis of, non-skin cancer, chronic kidney disease, current asthma, or obesity.

**Percent of Current Smokers Among Vermont Adults
Without and With Select Chronic Conditions (BRFSS, 2016)**



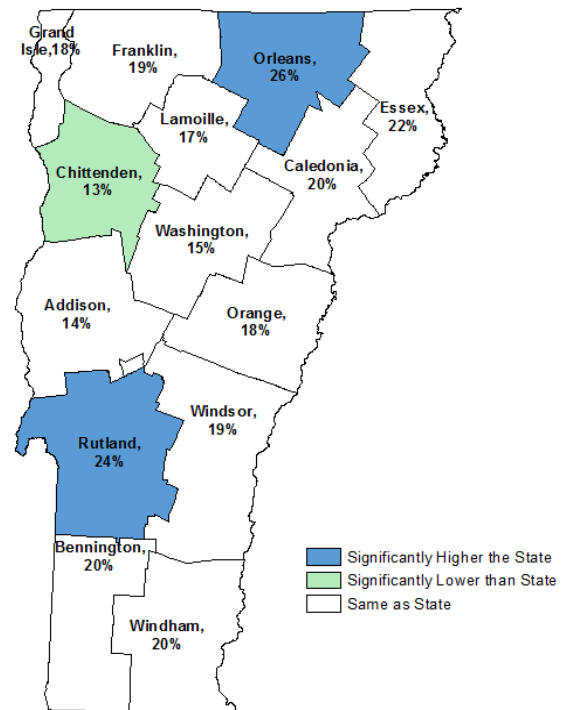
*Indicates significant difference between those with and without the chronic condition.

NOTE: Prevalence is age-adjusted to standard U.S. 2000 population according to Healthy People 2020 guidelines. CVD=Cardiovascular disease; COPD= Chronic obstructive pulmonary disease; CKD=Chronic kidney disease

SMOKING PREVALENCE BY COUNTY

Adult smoking prevalence varies across Vermont. As illustrated in the map, Orleans (26%) and Rutland (24%) counties have a significantly higher prevalence than the state average (18%) while Chittenden County (13%) has a significantly lower prevalence than the state average.

Rate (%) of Current Cigarette Use by County (BRFSS, 2015-2016)



FOR MORE INFORMATION

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