### Tobacco Use in Vermont 2017 Behavioral Risk Factor Surveillance Survey

In Vermont, reducing the prevalence of tobacco use is a health priority to reduce chronic disease and tobaccorelated 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 2017 Behavioral Risk Factor Surveillance System (BRFSS) survey for selected indicators and demographic subgroups related to the HV2020 goals.

In 2017, 17% of adults reported smoking cigarettes regularly and 59% 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 and smokeless tobacco use were statistically similar to previous years (2011 – 2016). Quit attempts in 2017 were significantly higher than 2016 (49%), but similar to all other previous years (2011-2015). In 2017, 18% percent of Vermont adults had ever used and 3% reported currently using electronic cigarettes (e-cigarettes). These were statistically similar to the previous year, which was the first year we asked about electronic cigarette use.

#### Adult Smoking Prevalence & Quit Attempts (VT BRFSS, 2017)

	%	Estimated Vermonters <sup>‡</sup>
Cigarette Use <sup>†</sup>	17.3	76,000
Smokeless Tobacco Use	2.6	12,000
Lifetime Electronic Cigarette Use	18.1	86,000
Current Electronic Cigarette Use	3.0	15,000
Quit Attempts among cigarette users <sup>†</sup>	59.3	45,000

<sup>†</sup> Percentages age-adjusted to standard U.S. 2000 population according to Healthy People 2020 guidelines. <sup>‡</sup> Estimated counts are rounded to the nearest thousand Vermonters and not age-adjusted.

While nine in ten current and former smokers started smoking before the age of 21, a significantly higher percentage of current smokers, compared to former smokers, started before they were 18 years old (70% versus 60%).

The average number of years smoked also differed between current and former smokers: those who currently smoke reported smoking an average of 28 years while former smokers smoked for an average of 18 years (data not shown).

Current and former smokers reported smoking a similar quantity of cigarettes per day. More than a third smoked less than 10 cigarettes (37% and 36%, respectively), about half smoked between 10 and 20 cigarettes per day (54% and 51%, respectively), and few adults reported smoking more than a pack a day (10% and 13%, respectively) (data not shown).

# Age of Smoking Initiation among Current & Former Smokers (VT BRFSS, 2017)



<sup>\*</sup>Indicates current and former smokers are statistically different.



#### DEMOGRAPHICS

There continue to be significant differences in smoking by age, education level, federal poverty level (FPL), and insurance type.<sup>1</sup> Making a guit attempt in the last year only differs statistically by race/ethnicity and age.

- Those who are 25-34 years old have the highest smoking rate; this is the only age group with a rate significantly higher than the state average.
- Those with lower levels of education and income (measured by FPL and insurance type) are more likely to smoke in comparison to those with higher education and incomes.
- **People of Color and adults age 18-24** who currently smoke are almost 1.5 times as likely to have a quit attempt in the past year compared to white, non-Hispanic adults and those age 45-54.

	Smoking Prevalence			Quit Attempts		
	%†	Estimated Vermonters <sup>‡</sup>	Different from State Average	%†	Estimated Vermonters <sup>‡</sup>	Different from State Average
Overall	17.3	76,000		59.3	45,000	
Age Group						
18-24 years	12.9 <sup>A</sup>	8,000		80.4 <sup>A</sup>	7,000	
25-34 years	25.5 <sup>B</sup>	17,000	Yes	59.0 <sup>AB</sup>	10,000	
35-44 years	22.4 <sup>B</sup>	15,000		57.5 <sup>AB</sup>	9,000	
45-54 years	18.2 <sup>ABC</sup>	14,000		49.6 <sup>B</sup>	7,000	
55-64 years	13.9 <sup>AC</sup>	13,000		58.6 <sup>AB</sup>	7,000	
65+ years	8.0 <sup>A</sup>	9,000	Yes	55.3 <sup>AB</sup>	5,000	
Gender						
Female	16.1 <sup>A</sup>	36,000		57.1 <sup>A</sup>	20,000	
Male	18.6 <sup>A</sup>	40,000		61.4 <sup>A</sup>	24,000	
Race-Ethnicity						
White, non-Hispanic	17.1 <sup>A</sup>	69,000		57.8 <sup>A</sup>	39,000	
People of Color	20.6 <sup>A</sup>	6,000		81.2 <sup>B</sup>	5,000	Yes
Education						
Less than high school	35.0 <sup>A</sup>	11,000	Yes	64.3 <sup>A</sup>	7,000	
High school	26.4 <sup>A</sup>	35,000	Yes	58.6 <sup>A</sup>	20,000	
Some college	19.1 <sup>B</sup>	23,000		59.0 <sup>A</sup>	13,000	
College or higher	5.1 <sup>c</sup>	8,000	Yes	59.7 <sup>A</sup>	4,000	
Federal Poverty Level						
<250% of FPL	26.9 <sup>A</sup>	40,000	Yes	64.7 <sup>A</sup>	25,000	
≥250% of FPL	10.9 <sup>B</sup>	24,000	Yes	53.9 <sup>A</sup>	13,000	
Insurance Type						
Medicaid	31.0 <sup>A</sup>	20,000	Yes	62.9 <sup>A</sup>	12,000	
Non-Medicaid	13.2 <sup>B</sup>	44,000	Yes	60.9 <sup>A</sup>	26,000	
Sexual Orientation/Gende	er Identity					
Heterosexual/Cisgender	17.5 <sup>A</sup>	62,000		60.9 <sup>A</sup>	37,000	
LGBT	17.1 <sup>A</sup>	4,000		41.8 <sup>A</sup>	2,000	

## Adult Smoking Prevalence & Quit Attempts by Demographic Characteristics (VT BRFSS, 2017)

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

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

<sup>A,B,C,D</sup> Groups within demographic categories that share a common letter are statistically similar to each other. For example, smoking among white, non-Hispanic adults and People of Color is statistically similar, while quit attempts is significantly different. NOTE: Cisgender is a term for a person whose gender identity matches the sex they were assigned at birth.



<sup>&</sup>lt;sup>1</sup> Historically in VT, and in the national literature, we see significant differences in smoking prevalence by gender, race/ethnicity, and sexual orientation/gender identity. It is important to note that we may not be detecting these differences here because of small sample sizes.

#### **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 COPD; adults with COPD are over three times as likely to report current smoking compared to those without COPD.
- Those with cardiovascular disease (CVD) are 2.5 times as likely as those without CVD to currently smoke.
- There are also significant differences in smoking prevalence for those with chronic kidney disease, arthritis, and depression.

Smoking prevalence is

statistically similar among

#### Percent of Current Smokers among VT Adults Without and With Select Chronic Conditions (VT BRFSS, 2017)



\*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

those with diabetes, non-skin cancer, asthma and obesity compared to those without these conditions.

#### SMOKING PREVALENCE BY COUNTY

- Adult smoking prevalence varies across Vermont, ranging from 13% to 26%. As illustrated in the map, Orleans (23%) county has a significantly higher prevalence than the state average (17%) while Chittenden County (13%) has a significantly lower prevalence than the state average.
- Over the last five years, we have seen the prevalence of smoking in Bennington County decrease to where it is no longer significantly higher than the state average (from 28% in 2011-2012 to 21% in 2016-2017).

#### FOR MORE INFORMATION

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#### Rate (%) of Current Cigarette Use by County (VT BRFSS, 2016-2017)



