

National Center for Chronic Disease Prevention and Health Promotion Office of Smoking and Health



Smoking

Problem

Millions of people in the US still smoke

The decline in smoking has stalled in the past five years.

♦ In 2005, about 20.9% of adults smoked cigarettes. In 2009 about 20.6% smoked.

Some groups smoke more.

- ♦ More men (nearly 24%) than women (about 18%) smoke.
- Nearly 30% of multiracial adults and 23% of American Indian/Alaska Native adults smoke.
- Smoking rates are higher among people with a lower education level. For example, nearly 1 in 2 of all US adults who have a GED smoke; only around 6% of people with a graduate degree smoke.
- ♦ About 31% of people who live below the poverty level smoke.

Although the number of teenagers in the US who smoke continues to drop year after year, progress is slowing.

- ♦ In 1997, about 36% of high school students smoked cigarettes.
- ♦ Between 1997–2003, the rates of smoking among high school students dropped from 36% to about 22%. However, between 2003 to 2009, declines slowed from 22% to 20%.

The slowing decline in teen cigarette use suggests that smoking and all the health problems related to smoking will continue as teens become adults.

- ♦ In 2009, nearly 1 in 5 high school students (20%) still smoked cigarettes.
- Monitoring teen smoking is important because most adult smokers (about 80%) began smoking before the age of 18.

States and regions in the US have different smoking rates.

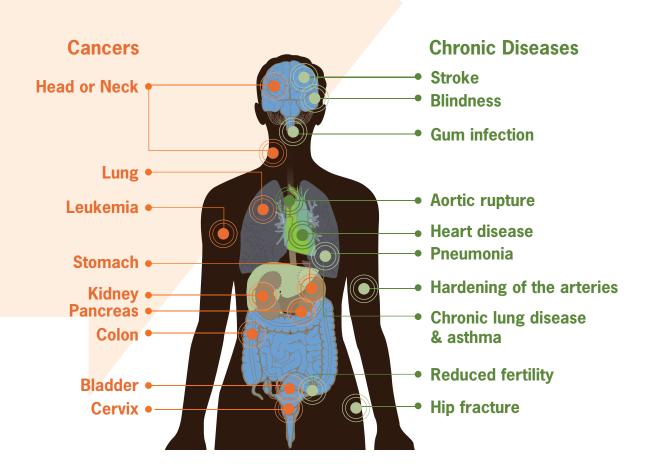
- Utah has the lowest smoking rate; fewer than 10% of adults in Utah smoke cigarettes.
- Kentucky and West Virginia have the highest smoking rates; nearly 26% of adults smoke in both states.
- Fewer people smoke in the West (about 16%), and more people smoke in the Southeast (about 22%) and Midwest (about 23%).

Smoking in the US needs to be reduced.

- ♦ About 1 in 2 adults who continue to smoke cigarettes will die from smoking-related causes.
- Health reform is expected to help increase smokers' access to services and treatments that help people quit. This could help more smokers quit and may result in fewer adult smokers in the US.
- Medicare now covers support for quitting services for smokers.
- By 2015, an estimated 5 million fewer people would smoke if all states funded their tobacco control programs at CDC-recommended levels. States such as Maine, New York, and Washington have recently seen youth smoking go down 45% to 60% with sustained comprehensive statewide programs.

Risks from Smoking

Smoking can damage every part of the body

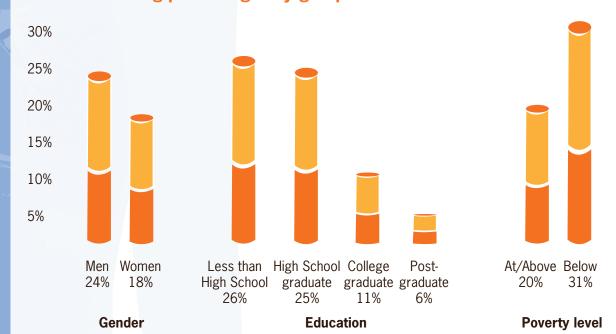


Smoking

Problem

Some groups of people in the US smoke more than others.

Current smoking percentages by group

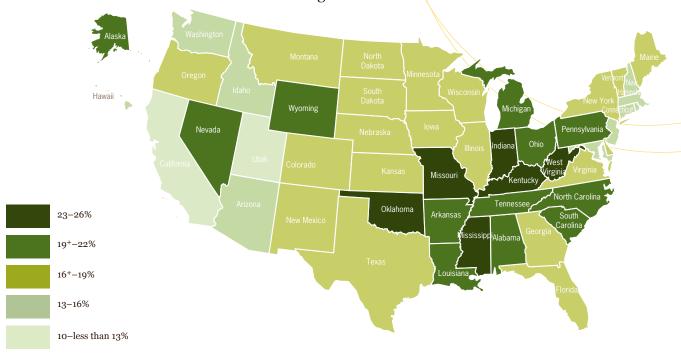




US State Info

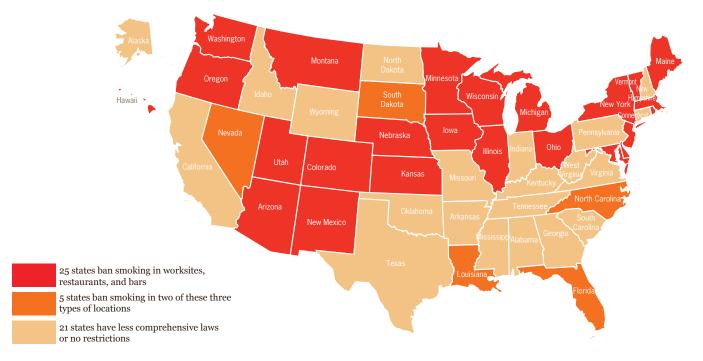
Smoking

Adult smoking rates vary across the US, but the states with the most smokers are in the Midwest and Southeast regions.



No-Smoking Laws

Smoke-free indoor air laws for bars, restaurants, and private worksites vary from state to state.



Secondhand Smoke

Problem

Even brief exposure to secondhand smoke can be harmful.

Secondhand smoke contains toxic chemicals and causes disease.

- Secondhand smoke contains toxic and cancer-causing chemicals.
- ♦ Secondhand smoke causes heart disease and lung cancer in nonsmoking adults.
- Secondhand smoke causes sudden infant death syndrome (SIDS) and a number of health conditions in children, including middle ear infections, more severe asthma, and respiratory infections.

About 4 in 10 nonsmokers in the US (40%, or 88 million people) continue to be exposed to secondhand smoke.

- Almost everyone who lives with somebody who smokes indoors is exposed to secondhand smoke. Children and teens are more likely than adults to live in homes where someone smokes indoors.
- ♦ About 54% of children (aged 3-11 years) are exposed to secondhand smoke. Children are most heavily exposed at home.
- ♦ About 47% of youth (aged 12−19 years) are exposed to secondhand smoke.
- ♦ About 56% of black nonsmokers are exposed to secondhand smoke compared with about 40% of white nonsmokers and 29% of Mexican-American nonsmokers.

Levels of secondhand smoke exposure in the US have greatly dropped during the last 20 years.

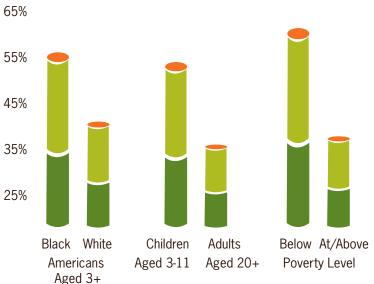
- Nearly 88% of nonsmokers in the US were exposed to secondhand smoke during 1988–1991.
- ♦ That number greatly dropped to about 53% by 1999–2000.
- About 40% of US nonsmokers were exposed to secondhand smoke during 2007–2008.



Smoke-free laws that completely ban smoking in indoor workplaces and public places are needed to protect nonsmokers from secondhand smoke.

- ♦ The only way to fully protect nonsmokers is to ban smoking in indoor places.
- About 47% of Americans live under state or local laws that make workplaces, restaurants, and bars completely smoke-free. That means that more than 1 in 2 Americans still live in areas where they are not fully protected by smoke-free laws.
- Physicians need to educate patients and parents about secondhand smoke dangers.

Exposure to secondhand smoke by group



Millions of people in the US are exposed to secondhand smoke in homes, workplaces, public places, and vehicles. Black Americans, children (aged 3–11 years), and people living below the poverty level are heavily exposed.

Risks from Secondhand Smoke

Some of the toxic chemicals in smoke



What Can Be Done



Smokers and smokeless tobacco users can

- Quit. Ask your doctor for help in making a plan to quit or call 1-800-QUIT-NOW (800-784-8669; TTY 800-332-8615).
- Never smoke in your home, vehicles, or around nonsmokers, especially children, pregnant women, and persons with heart disease or respiratory conditions.

Parents and nonsmokers can

- Quit if you smoke. Children of parents who smoke are twice as likely to become smokers.
- If you can't stop yet, never smoke or allow others to smoke in your home, vehicles, or around your children.
- ♦ Teach your children about the health risks of smoking and secondhand smoke.
- ♦ Not start, if you aren't already using tobacco.

Employers can

- Establish a policy banning the use of any tobacco product indoors or outdoors on company property by anyone at any time.
- Provide all employees and their dependents with health insurance that covers support for quitting without copayment.

Retailers can

- Learn the new FDA restrictions on youth access to tobacco products and tobacco marketing to youth, and closely follow them.
- Check the photo ID of any customer trying to buy tobacco products who appears to be 26 years of age or younger, and never sell any tobacco product to customers younger than 18 years of age.

Doctors, nurses, and other health care providers can

- Ask all patients and parents of pediatric patients whether they use tobacco, and advise those who do to quit.
- ♦ Advise everybody to make their homes and vehicles 100% smoke-free 24/7.
- Advise nonsmokers to avoid being exposed to secondhand smoke, especially if they are pregnant or have heart disease or respiratory conditions.

State and community leaders can

 Consider the World Health Organization's MPOWER strategies in efforts to prevent and control tobacco use.

Monitor tobacco use and prevention policies

Protect people from tobacco smoke

Offer help to quit

Warn about the dangers of tobacco use

Enforce bans on tobacco advertising

Raise taxes on tobacco

- Establish comprehensive tobacco control programs funded at CDC-recommended levels and sustain them over time.
- Reduce tobacco use by making tobacco products less accessible, affordable, desirable, and accepted.

www 😹 http://www.cdc.gov/mmwr

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For more information, please contact

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