

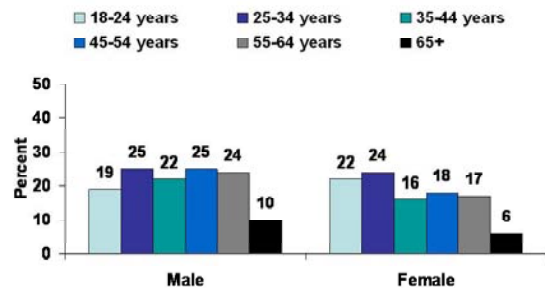
# DISPARITIES IN TOBACCO USE

**“If disparity elimination is to occur, then the critical focus of the interventions must be the community, with sufficient attention provided to groups, strata, and individuals.”—Robert G. Robinson, DrPH<sup>1</sup>**

## Age Group

- The overall smoking prevalence is highest among adults age 25-34 years (**25%; 400,000**)<sup>3</sup>
- Females age 18-24 and 25-34 years are more likely to smoke than females in other age groups (Figure 1)
- The smoking prevalence is consistently high for males age 25-64 years (Figure 1)

Figure 1. Percentage of adult cigarette smokers, by sex and age, Georgia, 2008



## Race/Ethnicity

- The smoking prevalence is highest among American Indians/Alaskan Natives at **31% (30,000)**, followed by non-Hispanic (NH) whites at **20% (900,000)** (Figure 2)
- The smoking prevalence is highest among NH white adults age 18-24 (**28%; 100,000**) and 25-34 (**28%; 235,000**) years (Figure 3)
- The smoking prevalence is highest among NH black adults age 45-54 (**23%; 90,000**) and 55-64 (**23%; 50,000**) years (Figure 3)

Figure 2. Percentage of adult cigarette smokers by race/ethnicity, Georgia, 2006-2008

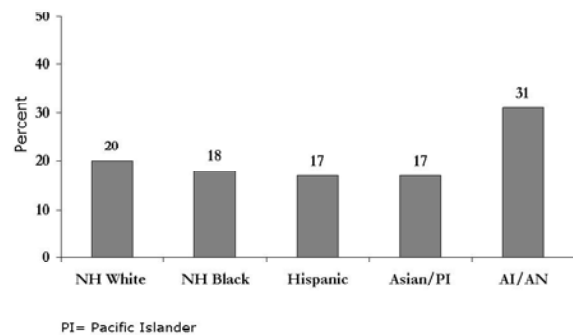
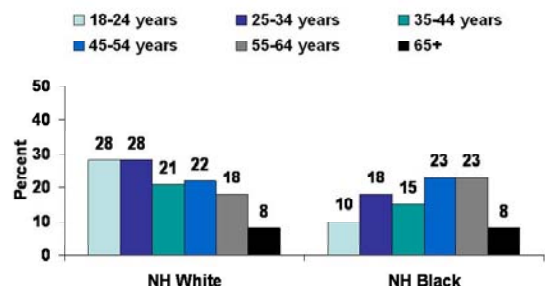


Figure 3. Percentage of adult cigarette smokers, by race/ethnicity and age, Georgia, 2008



## Health Coverage Status

- Male and female smokers are significantly less likely to have health coverage than nonsmokers (Figure 4)
- Almost half of NH white smokers do not have health coverage (**46%; 250,000**)<sup>3</sup>

## Income Level

- Adults with an annual household income of less than \$15,000 have the highest smoking prevalence at **31% (160,000)**<sup>3</sup>
- Males with an annual income less than \$15,000 (**43%; 80,000**) are more likely to smoke than males who have a higher income (Figure 5)

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Figure 4. Percentage of adults who have health coverage by sex and smoking status, Georgia, 2008

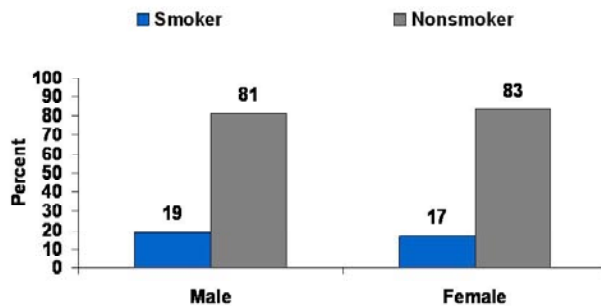
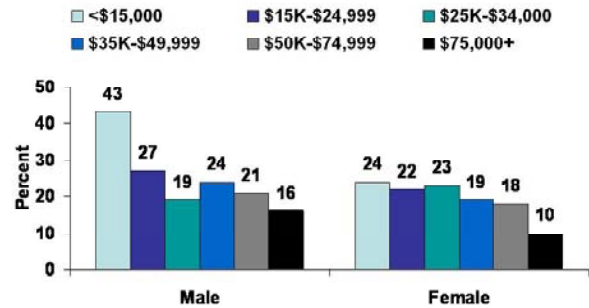


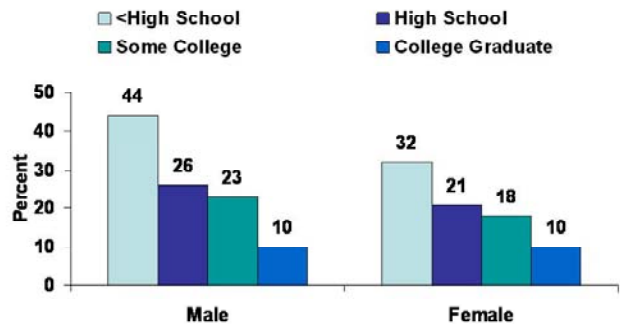
Figure 5. Percentage of adult cigarette smokers, by sex and annual income, Georgia, 2008



## Education Level

- Smoking prevalence decreases as education level increases (Figure 6)
- Adult males (**44%**; **160,000**) and females (**32%**; **120,000**) with less than a high school level education are significantly more likely to smoke than adults with a high school diploma/GED or above (Figure 6)

Figure 6. Percentage of adult cigarette smokers, by sex and education, Georgia, 2008



## Cardiovascular Health

- Heart attack is the most common form of cardiovascular disease among male (**28%**; **40,000**) and female (**19%**; **20,000**) smokers (Figure 7)
- NH black smokers are more likely to have suffered from cardiovascular disease (heart attack, angina/coronary heart disease, and stroke) than NH white smokers (Figure 8)

Figure 7. Percentage of cardiovascular disease among adult smokers by sex, Georgia, 2008

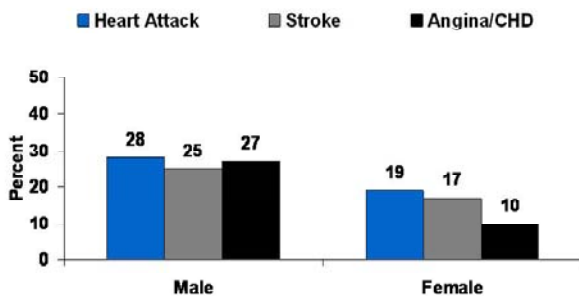
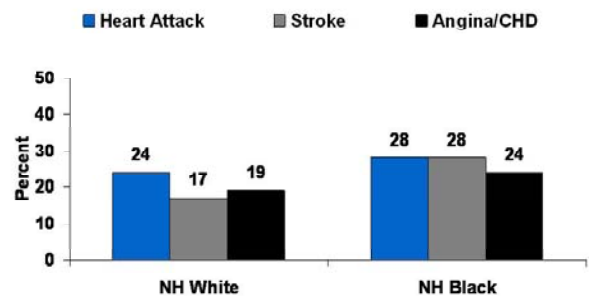
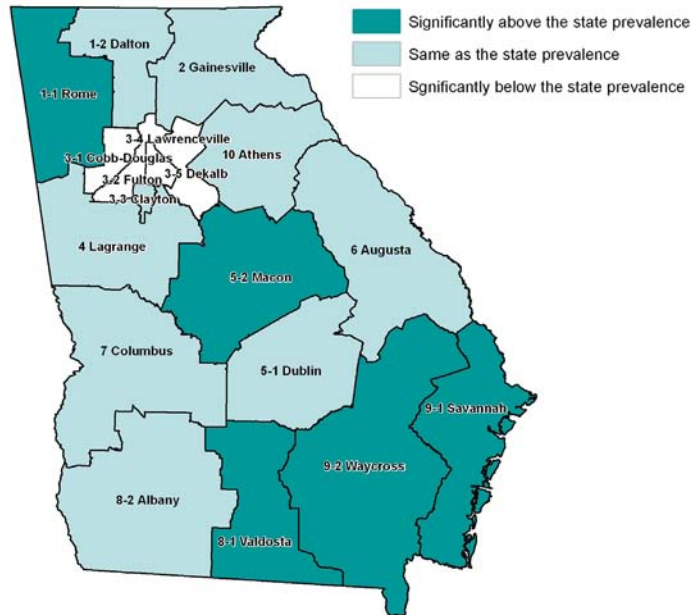


Figure 8. Percentage of cardiovascular disease among adult smokers by race, Georgia, 2008



# DISPARITIES IN TOBACCO USE

## Percent of Adults Who Smoke Cigarettes by Health District, Georgia, 2004-2007



Smoking prevalence among adults by public health district, Georgia, 2004-2007

Public Health District	Smoking Prevalence (%)	Estimated Number of Adult Smokers
1-1 Northwest (Rome)*	27%	96,000
1-2 North Georgia (Dalton)	24%	56,000
2-0 North (Gainesville)	22%	69,000
3-1 Cobb-Douglas	15%	74,000
3-2 Fulton	15%	90,000
3-3 Clayton (Morrow)	23%	37,000
3-4 East Metro (Lawrenceville)	16%	82,000
3-5 DeKalb	14%	66,000
4-0 LaGrange	20%	85,000
5-1 South Central (Dublin)	22%	20,000
5-2 North Central (Macon)*	25%	81,000
6-0 East Central (Augusta)	23%	65,000
7-0 West Central (Columbus)	23%	54,000
8-1 South (Valdosta)*	25%	39,000
8-2 Southwest (Albany)	22%	51,000
9-1 Coastal (Savannah)*	25%	82,000
9-2 Southeast (Waycross)*	26%	57,000
10-0 Northeast (Athens)	20%	39,000
<b>Georgia</b>	<b>20%</b>	<b>1,400,000</b>

\* Significantly above the state smoking prevalence, based on 95% confidence intervals  
 Data source: 2004-2007 Georgia Behavioral Risk Factor Surveillance System (BRFSS) Data

# DISPARITIES IN TOBACCO USE

## Youth

- Use of smokeless tobacco (**14%**; **32,000**) and cigars/cigarillos (**18%**; **40,000**) is significantly higher among male high school students than female students (Figure 9)
- NH white (**24%**; **46,000**) high school students are significantly more likely to smoke cigarettes than NH black (**9%**; **15,000**) and Hispanic (**16%**; **7,000**) students (Figure 10)
- NH white (**13%**; **28,000**) high school students are significantly more likely to use smokeless tobacco than NH black (**3%**; **5,000**) and Hispanic (**5%**; **2,000**) students (Figure 10)
- Cigar/cigarillos are the most common form of tobacco used by NH black high school students (**13%**; **23,000**) (Figure 10)
- The prevalence of cigarette (**16%**; **7,000**) and cigar/cigarillo (**15%**; **7,000**) use among Hispanic high school students is almost the same (Figure 10)
- Over half of NH white high school students (**56%**; **137,000**) were exposed to secondhand smoke in a room or car within the past seven days (Figure 11)
- High school students who were exposed to secondhand smoke in the past seven days are more likely to have been diagnosed with asthma (**27%**; **66,000**) compared to those who were not exposed to secondhand smoke (**24%**; **48,000**)<sup>5</sup>

Figure 9. Percentage of high school students who use tobacco by sex, Georgia, 2009

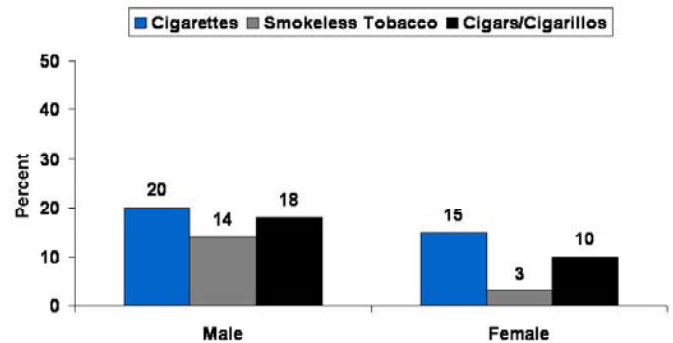


Figure 10. Percentage of high school students who use tobacco by race/ethnicity, Georgia, 2009

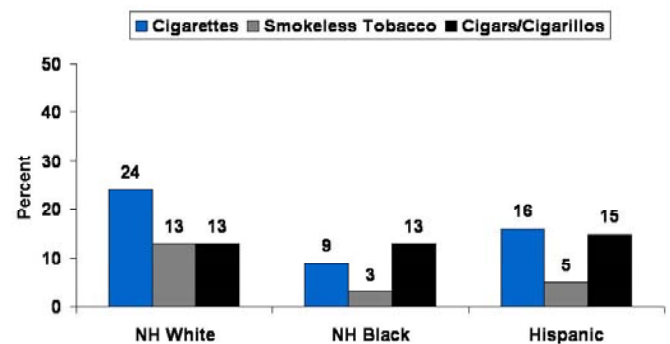
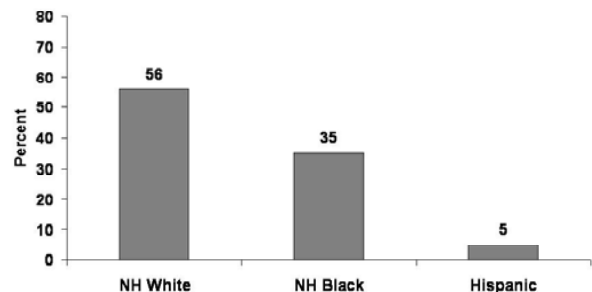


Figure 11. Percentage of high school students who are exposed to 2<sup>nd</sup> hand smoke by race/ethnicity, Georgia, 2009



## Description of Terms

1. Current smoker (Adult): Adult who has smoked at least 100 cigarettes in their lifetime and are currently smoking
2. Current smoker (Youth): Youth who has smoked at least one cigarette in the past 30 days
3. Smokeless Tobacco (SLT): Includes chewing tobacco, snuff, or dip
4. Cigarillos: Little cigars

### Data sources:

1. Robinson, R. G. (2005). Community development model for public health applications: Overview of a model to eliminate population disparities. *Health Promotion Practice*, 6(3), 338-346.
2. 2006 and 2007 Georgia Behavioral Risk Factor Surveillance System (BRFSS) Data
3. 2008 Georgia Behavioral Risk Factor Surveillance System (BRFSS) Data
4. 2009 Georgia Youth Risk Behavior Survey (YRBS) Data
5. 2009 Georgia Youth Tobacco Survey (YTS) Data

Date updated: February 2010

Visit <http://www.health.state.ga.us/epi/cdiee/tobaccouse.asp> for more information about tobacco use in Georgia

Visit <http://health.state.ga.us/programs/tobacco/index.asp> for more information about the Georgia Tobacco Use Prevention Program