Urban and Rural Disparities in Tobacco Use

Ming Shan, BS; Zach Jump, MA; Elizabeth Lancet, MPH
National Conference on Health Statistics
August 8, 2012



American Lung Association

• **Our Mission**: To save lives by improving lung health and preventing lung disease.

Mission Goals:

- Eliminate tobacco use and tobacco-related lung disease.
- Improve the air we breathe so it will not cause or worsen lung disease.
- Reduce the burden of lung disease on patients and their families.

• Three-prong Approach:

Education, Advocacy and Research.



Support

- Funding from Communities Putting Prevention to Work (CPPW) grant
- Part of 2009 American Recovery and Reinvestment Act
- Designed to address two leading causes of preventable death and disability: obesity and tobacco use



Tobacco

- Leading cause of preventable illness and death in the United States.
- Rural populations are heavily impacted
 - Socio-economic Factors
 - Cultural Roots
 - Legislation
 - Cash Crop
 - Lack of Access/Utilization of Health Care

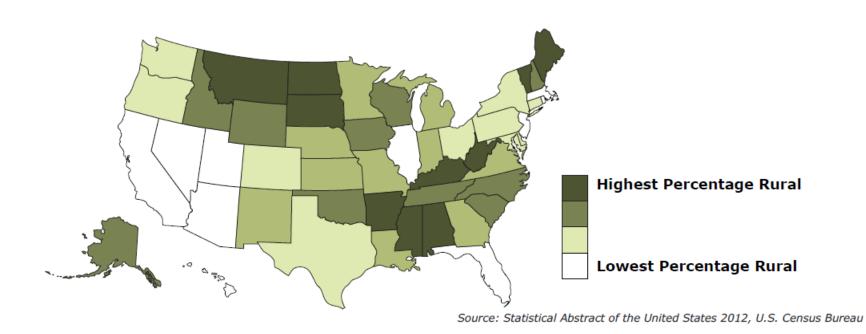


Background

- Rural residency has long been associated with higher rates of smoking nationwide
- Adolescent age of onset of smoking is earlier in rural regions and use is higher
- Previous studies suggest lower levels of income and education, as well higher amounts of Caucasians, may be attributed to this difference

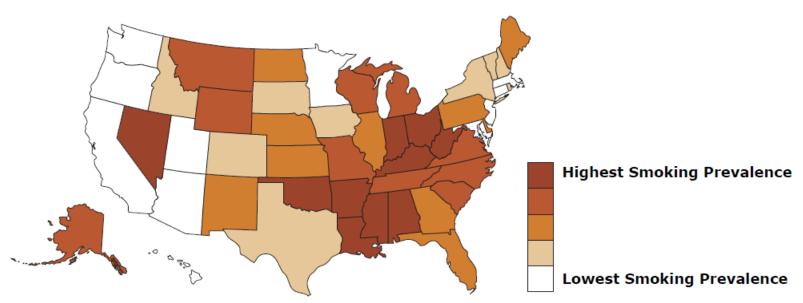


Rural Population





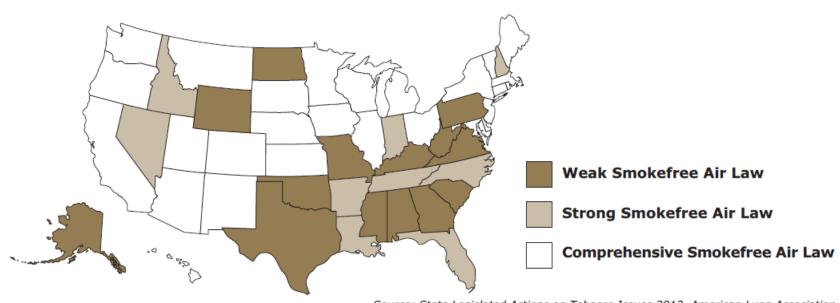
Adult Smoking Prevalence



Source: Behavioral Risk Factor Surveillance Survey 2010, U.S. Department of Health and Human Service:



Strength of Smokefree Air Laws



Source: State Legislated Actions on Tobacco Issues 2012, American Lung Association



Objectives

- Confirm pre-established notions regarding rural and urban differences in tobacco use
- Determine significant predictors of tobacco use among rural and urban areas
- Determine areas where programs and advocacy would be useful



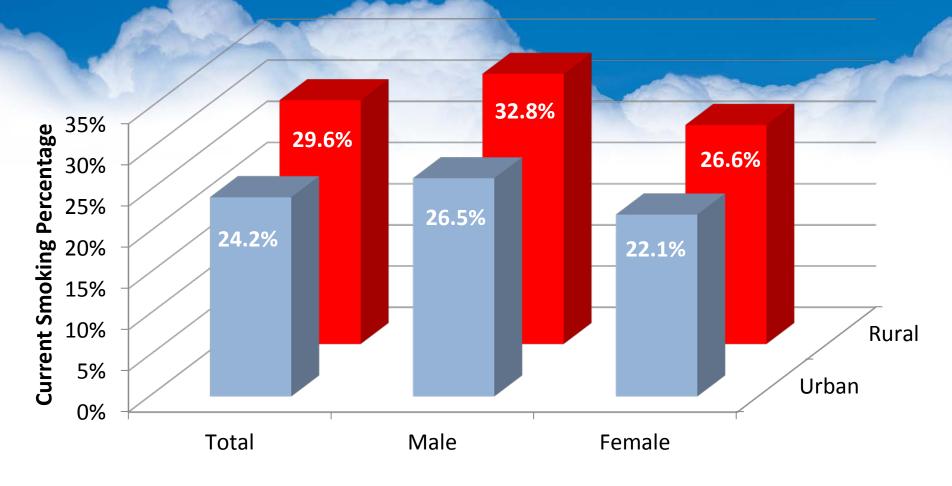
Survey

- 2009 National Survey on Drug Use and Health (NSDUH; n=55,722)
- Noninstitutionalized U.S. civilian population aged 12 or older
- Nationally representative information on substance use and its correlates



Methods

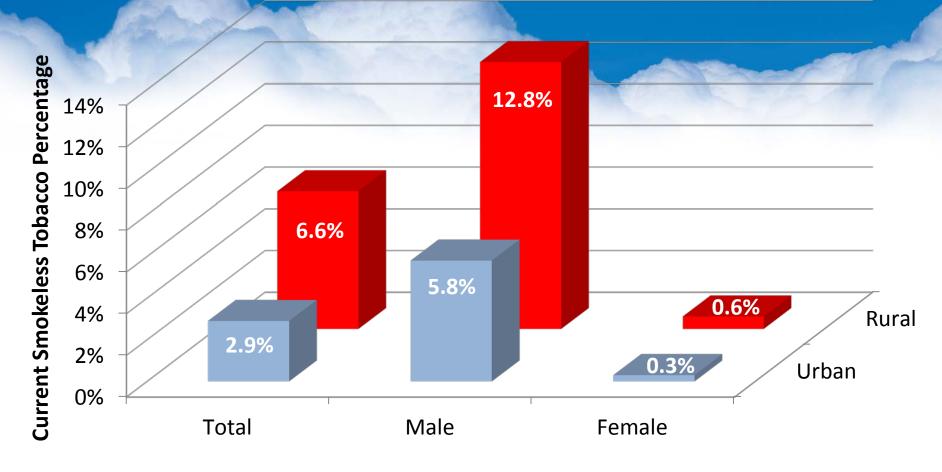
- Analyzed current (30-day) cigarette and smokeless tobacco use
- Smokeless tobacco use included chew, snuff and dip
- Rural = small MSA (<250k), Urban = medium MSA (250k-1000k) + large MSA (1000k+)
- Logistic regression using SPSS-SUDAAN
- Controlled for sex, age, race/ethnicity,
 education, and income



Crude Smoking Rates by Geography and Sex

- Rural > Urban
- Male > Female





Crude Smokeless Tobacco Rates by Geography and Sex

- Rural > Urban
- Male > Female



Current Cigarette Use

Variables	Odds Ratio		
Geography			
Urban vs Rural	0.98		
95% confidence interval	0.89-1.07		
Sex			
Male vs Female	1.28 *		
Family Income			
Less than \$20,000	2.28 *		
\$20,000 - \$49,999	1.81 *		
\$50,000 - \$74,999	1.17 *		
\$75,000 or More	1		

Variables	Odds Ratio
Age	
18-34	7.70 *
35-49	5.84 *
50-64	4.46 *
65+	1
Education	
Some High School	3.54 *
High School Grad	2.67 *
Some College	1.96 *
College Grad	1
Race/Ethnicity	
White	1
Black	0.63 *
Other	0.60 *
Hispanic	0.44 *



^{*} Significant p<.05
Does not include youth

Current Smokeless Tobacco Use

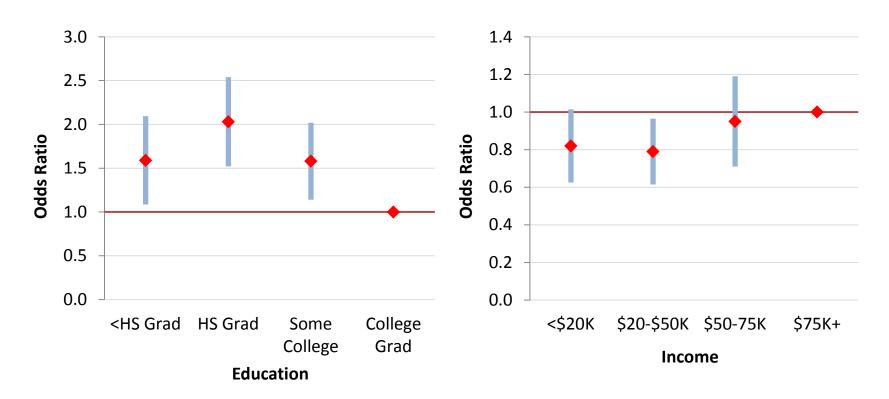
Variables	Odds Ratio		
Geography			
Urban vs Rural	2.03 *		
95% confidence interv	al 1.68-2.46		
Sex			
Male vs Female	24.25 *		
Age			
18-34	5.84 *		
35-49	4.12 *		
50-64	1.47		
65+	1		

Odds Ratio
1.44 *
1.91 *
1.52 *
1
1
0.23 *
0.51 *
0.17 *



^{*} Significant p<.05
Does not include youth

Odds Ratios and 95% Confidence Intervals for Education and Income in Smokeless Tobacco Model



Relationships were not linear for both variables

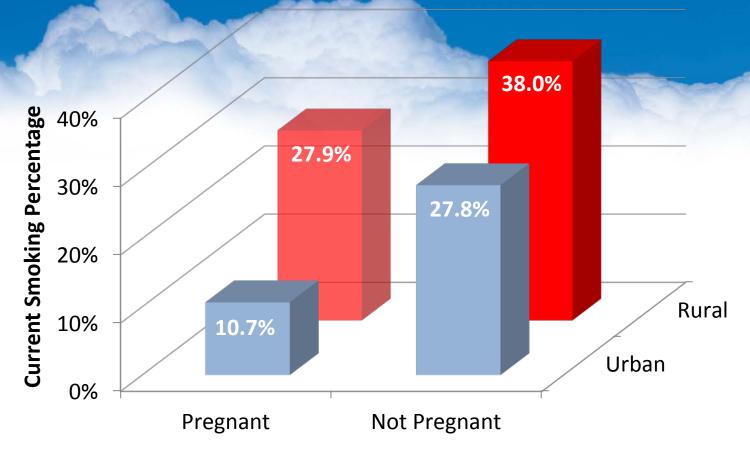


-2 * Log Likelihoods for Cigarette and Smokeless Models

	Cigarette Use	Smokeless Tobacco Use
Model without Rural/Urban Variable	38,588.50	9,232.71
Model with Rural/Urban Variable	38,587.95	9,124.69
Difference	0.55	108.02

Adding geography variable improves the log likelihood of both models





Crude Smoking Rate Among Women by Geography and Pregnant Status

Rural pregnant not different from urban or rural not-pregnant



Pregnancy and Smoking

Variables	Odds Ratio		
Geography			
Urban vs Rural	2.06*		
Family Income			
Less than \$20,000	2.23 *		
\$20,000 - \$49,999	1.83 *		
\$50,000 - \$74,999	1.23 *		
\$75,000 or More	1		
Education			
Some High School	4.02 *		
High School Grad	2.82 *		
Some College	1.23 *		
College Grad	1		

Variables	Odds Ratio		
Race/Ethnicity			
White	1		
Black	0.42 *		
Other	0.47 *		
Hispanic	0.32 *		
Pregnant			
Not Pregnant vs Pregnant	3.48*		
Geography × Pregnant			
Rural, Not Pregnant	0.52*		
Rural, Pregnant	1		
Urban, Not Pregnant	1		
Urban, Pregnant	1		



^{*} Significant p<.05
Only includes females aged 18-44

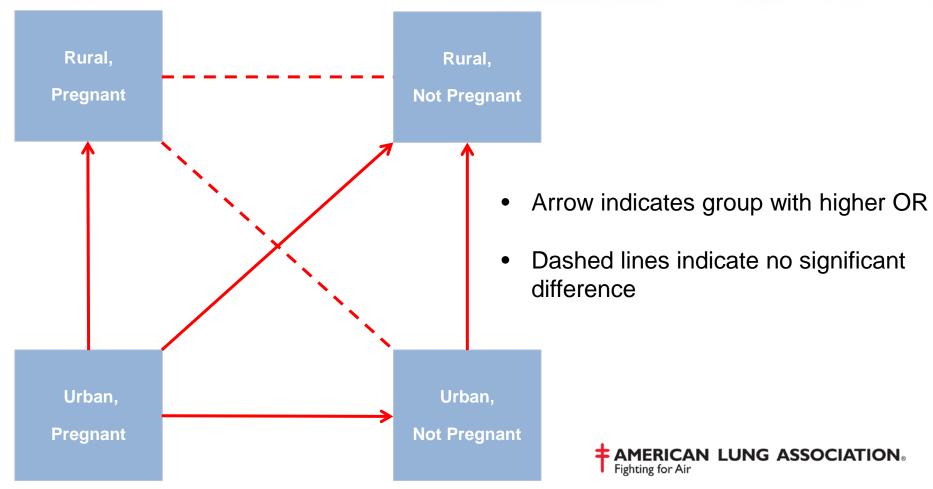
Pregnancy and Smoking Interaction

	OR	95% CI	p-value
Urban, Not Pregnant vs Urban, Pregnant	3.49	2.60; 4.68	<0.0001
Rural, Not Pregnant vs Rural, Pregnant	1.80	0.73; 4.44	0.1996
Urban, Not Pregnant vs Rural, Pregnant	1.70	0.59; 4.85	0.0848

Rural, pregnant smokers n=60



Significance of Relationships in Geography × Pregnant Interaction



Discussion - Cigarettes

- For cigarette use, geography is less of a predictor than socioeconomic factors
- Preconceived notions for cigarette use regarding the relationship between different levels of education and income were confirmed
- Smoking among pregnant women in rural areas is disproportionately high



Discussion - Smokeless

- For smokeless tobacco, gender is the dominant factor, matching expectations
- Geography remains a significant predictor even when controlling for demographic factors
- Income was not a significant predictor, surprisingly



Limitations

- Unable to include group dynamics
- Cross-sectional design limits inference
- Definitions for rural/urban vary widely
- Potential for unmeasured confounders



Future Research

- Examine smokeless tobacco use further to determine why nonlinear trends in education and income were seen
- Reanalyze smoking in pregnant women in rural areas with a larger sample size
- Explore environmental and group level factors using community-based longitudinal methods



Questions?

American Lung Association

Research and Health Information Department www.lung.org/finding-cures

Elizabeth.Lancet@lung.org 212-315-8788

Zach.Jump@lung.org 212-315-8749

