INTERACT FOR HEALTH

Greater Cincinnati
Community Health Status Survey



June 2014

Area's smoking rate declines, but still higher than nation's

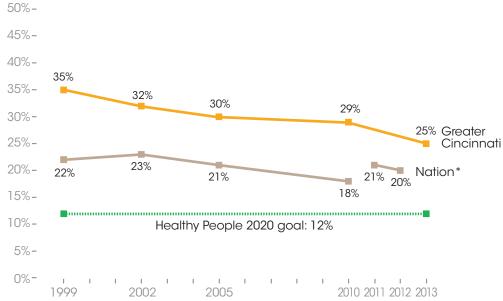
According to the Centers for Disease Control and Prevention's *Behavioral Risk Factor Surveillance System* (BRFSS), 20% of adults in the United States were current smokers in 2012.¹ This number is higher than the Healthy People 2020 goal of 12%.

The smoking rate in Greater Cincinnati continues to be higher than the national average. In 2013, 25% of adults in this region were current smokers. However, this rate has been steadily decreasing over the past 14 years, down from 35% in 1999.

Smoking rates highest in rural areas

Rural areas in our region generally have higher smoking rates than urban areas. The past three years have shown some improvement, with the smoking rate in rural Kentucky counties² declining from 43% in 2010 to 33% in 2013. The rate in rural Ohio counties³ dropped from 37% in 2010 to 30% in 2013. Urban Kentucky counties⁴ also showed a significant drop, from 33% in 2010 to 25% in 2013.

Percentage of adults age 18 and older who are current smokers



* National data are from the CDC's Behavioral Risk Factor Surveillance System (BRFSS). BRFSS has changed the way its data are weighted. Data 2011-present should not be directly compared to data before 2011. National data were available only up to 2012.

Higher smoking rates among those with lower income, less education

Nearly 5 in 10 (48%) adults living below 100% of the Federal Poverty Level (FPL)⁵ are current smokers. This compares with only 2 in 10 adults living above 100% FPL (20%). (See graph on back.) These rates have consistently declined over the past 14 years. However, smoking rates

 $^{\rm 5}$ In 2013, 100% FPL for a family of four was an annual income of \$23,550.

among those with less than a high school education have increased from a low of 47% in 2005 to 54% in 2013. Smoking rates have declined for all other education levels since 2010. (See graph on back.)

Counseling by healthcare provider

Support from a doctor or other healthcare provider can play an

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The Greater Cincinnati Community Health Status Survey (CHSS) is a project of Interact for Health. The CHSS is conducted by the Institute for Policy Research at the University of Cincinnati. A total of 4,929 randomly selected adults residing in 8 Ohio counties, 9 Kentucky counties, and 5 Indiana counties were interviewed by telephone between Aug. 20, 2013, and Jan. 19, 2014. This included 4,324 landline interviews and 605 cell phone interviews. The potential sampling error for the survey is ±1.5%. For more information, including other topics and the list of community partners, please visit our web site at www.interactforhealth.org/greater-cincinnati-community-health-status-survey. For the complete survey dataset, visit www.oasisdataarchive.org. If you have further questions, email Jennifer Chubinski at jchubinski@interactforhealth.org.

¹ National data are from the 1999, 2002, 2005, 2010, 2011 and 2012 Behavioral Risk Factor Surveillance System, available at http://apps.nccd.cdc.gov/brfss/.

² Bracken, Carroll, Gallatin, Owen and Pendleton counties.

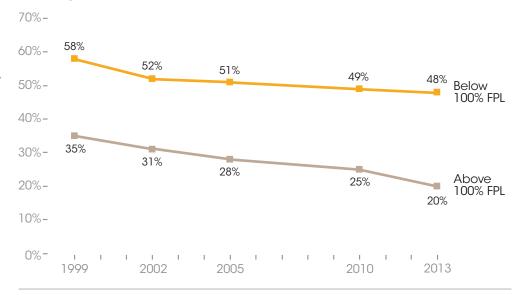
³ Adams, Brown, Clermont, and Highland counties.

⁴ Boone, Campbell, Grant and Kenton counties.

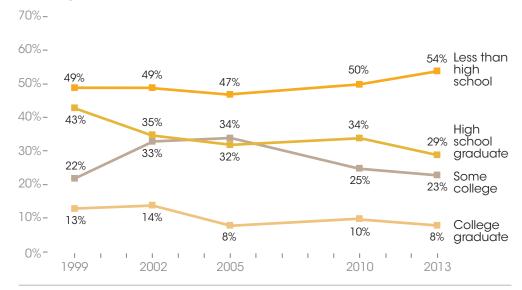
important role in helping adults to quit smoking. The 2013 CHSS asked current smokers if a doctor or other healthcare provider had ever offered help or counseled them to quit smoking. Responses varied widely across the region. The lowest rates of offered help were in Indiana counties (49%)⁶ and Hamilton County suburbs (60%). The highest reported rates of offered help were in Kentucky (74%), the City of Cincinnati (70%) and Butler/Clinton/Warren counties (70%).

Women reported being offered support to quit (73%) more often than men (58%). This rate was also higher among low-income adults. About 7 in 10 adults (71%) living below 100% FPL were offered help. That compares with 6 in 10 adults (63%) living above 100% FPL. Older people and people with poor health were also more likely to report being offered help to quit. Because smoking cessation is important at any age or state of health, it is useful for clinicians to be aware of demographic groups that might benefit from increased assistance to quit using tobacco.

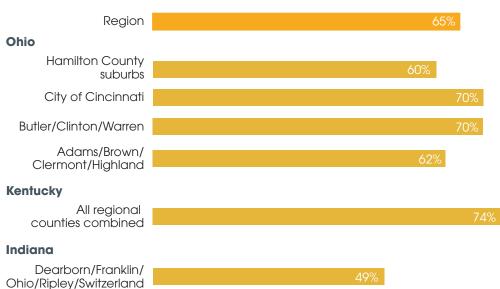
Smoking rates by poverty level



Smoking rates by education level



Percentage of current smokers who report that a doctor/other healthcare provider has ever offered help or counseled them to quit smoking, by region



⁶ Dearborn, Franklin, Ohio, Ripley and Switzerland counties.