ALABAMA ADULT TOBACCO SURVEY

INTRODUCTION AND METHODS

The Alabama Adult Tobacco Survey (AL ATS) is conducted by the Statewide Tobacco Control Branch of the Alabama Department of Public Health (ADPH), through a grant from the Office on Smoking and Health, Centers for Disease Control and Prevention (CDC). The AL ATS is a comprehensive survey of tobacco use, cessation, secondhand smoke, tobacco-related opinions and attitudes, and tobacco-free policies among adults 19 years and older in Alabama. The survey produced data that represents non-institutionalized, adult residents in Alabama. The AL ATS provides valuable baseline data to guide and evaluate program efforts and cessation campaigns within Alabama.

The 2011 AL ATS was a voluntary, stratified, landline and cell phone survey. The questionnaire consisted of 130 questions. The state was divided into three strata, which included a listed landline stratum, a not-listed landline stratum, and a cell phone stratum. A sample of random residential telephone numbers throughout the state was called to contact respondents for the survey. The landline telephone sample was prescreened. Telephone numbers such as business and nonworking numbers were removed.

Survey administration procedures were designed to protect privacy and allow for anonymous participation. For landline numbers, the person on the telephone was asked if he/she was 19 years or older to act as screener respondent, whether the number was associated with a residence, and how many persons 19 years or older lived in the household. The respondent was selected by age, household sequence/status, and gender. For cell phone numbers, it was assumed that the person answering the phone was the only user of the phone. Cell phone respondents were selected once it was determined that the person was 19 years or older. An interview was attempted if the selected respondent was available. If the selected respondent was not available, a call back was scheduled.

In the 2011 AL ATS, a total of 1,970 surveys were completed. This includes 1,902 landline surveys and 68 cell phone surveys. The overall response rate was 12.3% with a response rate of 15.6% for landline and 3.1% for cell phone.

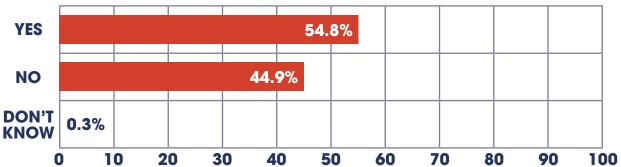
Data gathered from the AL ATS is utilized to enhance Alabama's capacity to design, implement, and evaluate the various components of its program. Results are used to identify future priority areas and monitor progress toward state plan goals.

EVER TRIED CIGARETTE SMOKING

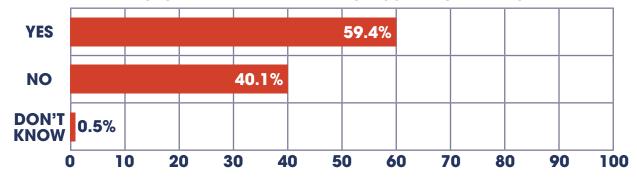
Surveyed adults were asked whether they had ever tried cigarette smoking (even one or two puffs) in their lifetime. A question was also asked if cigarettes had ever been smoked at least once a day for 30 days in a row.

- Overall, 54.8% of adults had ever tried cigarette smoking in their lifetime.
- 40.0% of those surveyed have smoked at least 100 cigarettes in their lifetime.
- Over half (59.4%) of adults have smoked every day for 30 days in a row.
- Smoking at least 100 cigarettes in a lifetime can lead to "current smoking."

ADULTS WHO HAVE TRIED CIGARETTE SMOKING, EVEN ONE OR TWO PUFFS



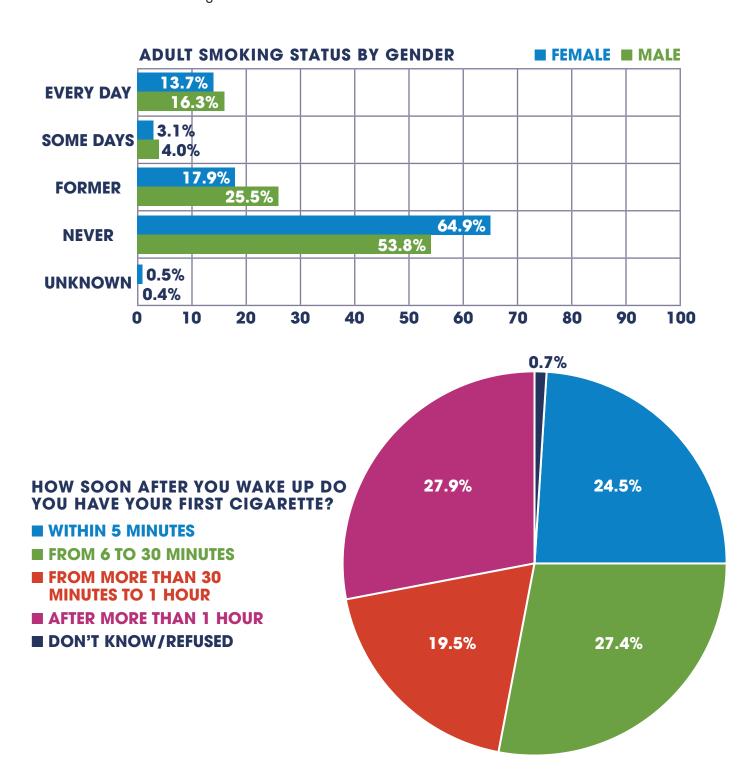
ADULTS WHO HAVE SMOKED AT LEAST ONE CIGARETTE EVERY DAY FOR 30 DAYS IN A ROW



CURRENT CIGARETTE SMOKERS

Adults were asked about their current smoking status at the time of the survey. Smokers were also asked how soon they have their first cigarette.

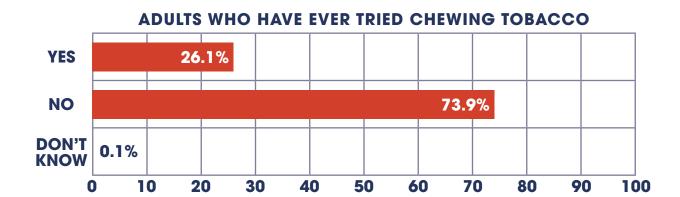
- 37.1% of adults were current smokers, and 43.4% of adults were former smokers.
- There are slightly more former smokers than current.
- Female participants are more likely to never smoke than males.
- 51.9% of smokers have their first cigarette in the first thirty minutes after they wake up, which demonstrates the nicotine addiction of cigarettes.

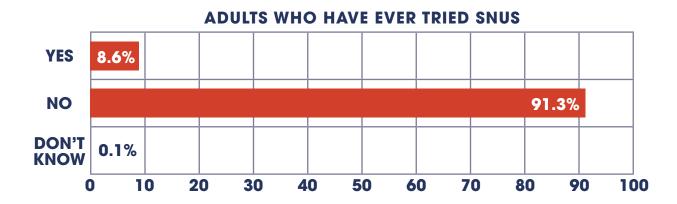


EVER TRIED SMOKELESS TOBACCO

Questions were asked to determine whether chewing tobacco or snus had ever been tried. Snus is moist, smokeless tobacco, which is placed under the lip against the gum.

- Only 26.1% of adults surveyed had ever tried chewing tobacco.
- The majority (91.3%) of adults have never tried snus.

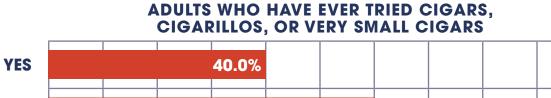


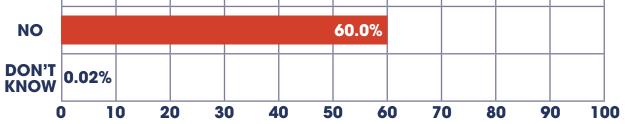


EVER TRIED CIGARS

Adults were asked whether they had ever tried cigars, cigarillos, or little cigars (even one or two puffs) in their lifetime.

• More than half (60.0%) of adults have never tried cigars, cigarillos, or very small cigars.

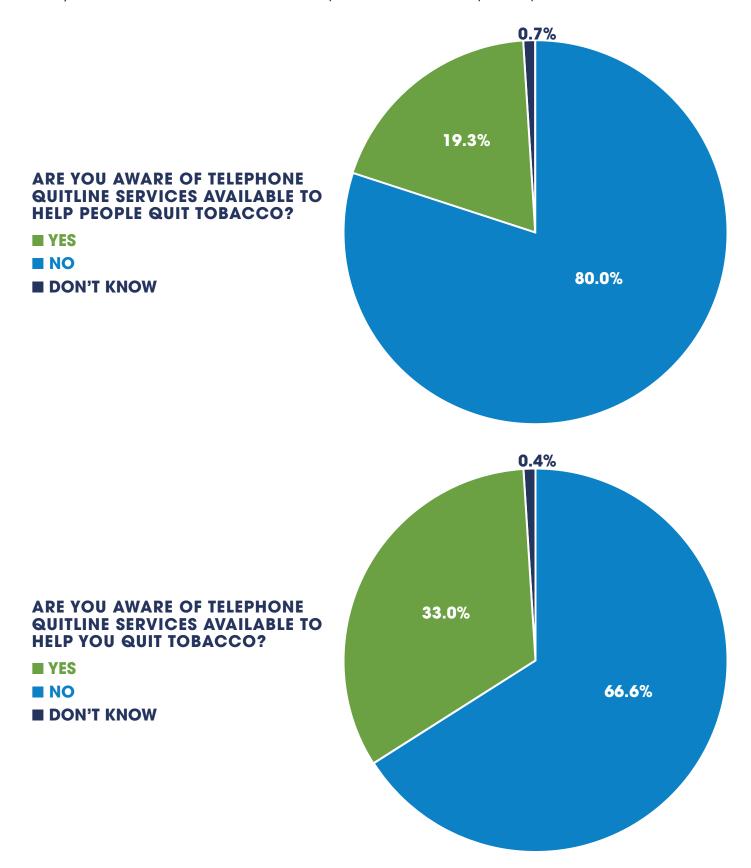




CESSATION

Adults were asked if they knew about telephone quitline services to help anyone including themselves quit tobacco.

- The majority of survey participants were not aware of available telephone quitline services.
- Only one-third of smokers were aware of the quitline, which could help them quit tobacco.

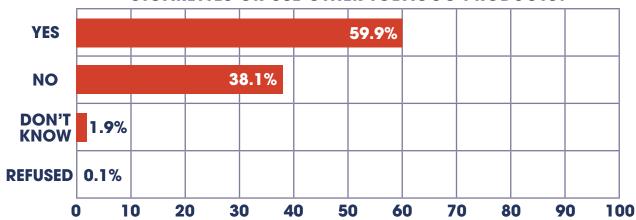


TOBACCO DISCUSSION WITH HEALTH PROFESSIONALS

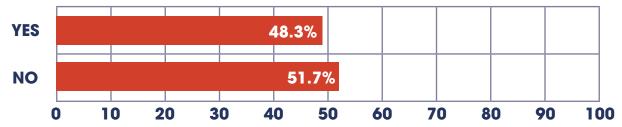
Questions were asked if a doctor, dentist, or nurse asked the survey participant about tobacco use in the past 12 months and also if healthcare professionals advised them in the past 12 months not to use tobacco of any kind.

- Most adults (85.0%) had seen a healthcare professional in the past 12 months.
- Over half (59.9%) surveyed were asked if they smoked cigarettes or used other tobacco products.
- Among tobacco users, 48.3% were advised to quit using tobacco by a healthcare professional.

DID A HEALTH PROFESSIONAL ASK IF YOU SMOKE CIGARETTES OR USE OTHER TOBACCO PRODUCTS?



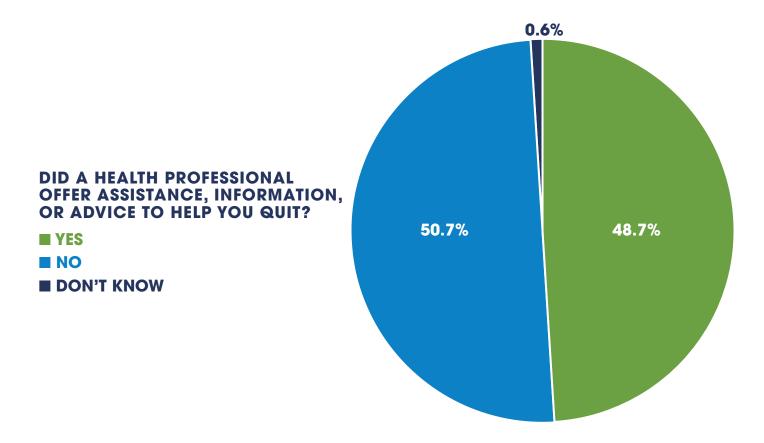
DID A HEALTH PROFESSIONAL ADVISE YOU TO QUIT USING TOBACCO IN THE PAST 12 MONTHS?

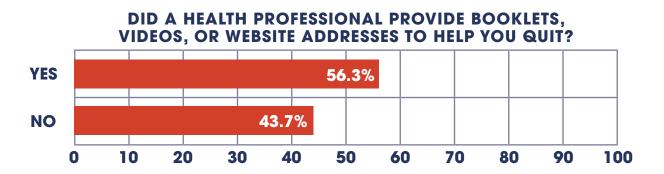


TOBACCO CESSATION ASSISTANCE FROM HEALTH PROFESSIONALS

Smokers were asked if a healthcare professional in the past 12 months offered advice, assistance, or information such as booklets, videos, or website addresses to help them quit using tobacco.

- A similar percentage of people did receive (48.7%) advice or information from healthcare professionals as those who did not (50.7%).
- Resources to aid in cessation were provided to 56.3% of tobacco users.
- National, health professionals offer more assistance (57.1%) to smokers than in Alabama alone.





TOBACCO POLICY IN THE HOME OR IN THE VEHICLE

Questions were asked about the policies to allow smoking inside the home or in any family member's vehicle except motorcycles. Exposure to secondhand smoke will occur if someone smokes inside the home or vehicle around others.

• More people believed in always allowing or sometimes allowing smoking inside the vehicle than inside the home.

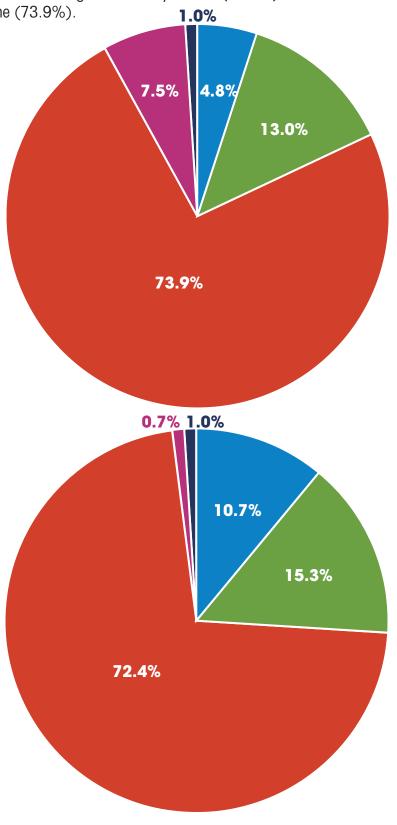
A large percentage of those surveyed never allowed smoking inside family vehicle (72.4%) and believed smoking should never be allowed inside a home (73.9%).



- ALWAYS BE ALLOWED
- ALLOWED ONLY AT SOME TIMES OR IN SOME PLACES
- **NEVER BE ALLOWED**
- WHATEVER THE PEOPLE WHO LIVE THERE DECIDE
- DON'T KNOW/REFUSED

IN VEHICLES THAT YOU OR FAMILY MEMBERS LIVING WITH YOU OWN OR LEASE, SMOKING...

- ALWAYS ALLOWED IN ALL VEHICLES
- SOMETIMES ALLOWED IN AT LEAST ONE VEHICLE
- NEVER ALLOWED IN ANY VEHICLE
- RESPONDENT'S FAMILY DOES NOT OWN OR LEASE A VEHICLE
- DON'T KNOW/REFUSED



TOBACCO POLICY AT THE WORKPLACE

People were asked questions regarding their opinions about smoking and use of tobacco indoors and outdoors at workplaces.

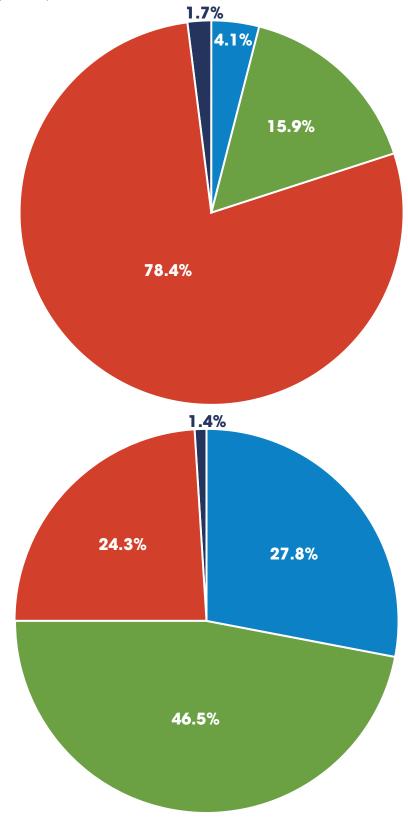
- A majority of people believed smoking should never be allowed (78.4%) inside the workplace.
- However, more people believed smoking outside at workplaces should be allowed at some times or in some places (46.5%) compared to never allowed (24.3%).



- ALWAYS ALLOWED
- ALLOWED ONLY AT SOME TIMES OR IN SOME PLACES
- **NEVER ALLOWED**
- DON'T KNOW/REFUSED

AT WORKPLACES, DO YOU THINK SMOKING OUTDOORS SHOULD BE...

- **ALWAYS ALLOWED**
- ALLOWED ONLY AT SOME TIMES OR IN SOME PLACES
- **NEVER ALLOWED**
- DON'T KNOW/REFUSED



OTHER TOBACCO POLICIES AT WORKPLACES

A question was asked if chewing tobacco, snuff, dip, or snus could be used at the participant's workplace. Adults were also asked if smoking should be allowed in indoor sections of restaurants since exposure to secondhand smoke can occur.

- About half (50.8%) of adults report that the use of chewing tobacco is never allowed at their workplace.
- Most adults believe indoor smoking should be restricted.

• 69.1% of adults believe smoking should never be allowed in restaurants, and 27.0% said it should only be

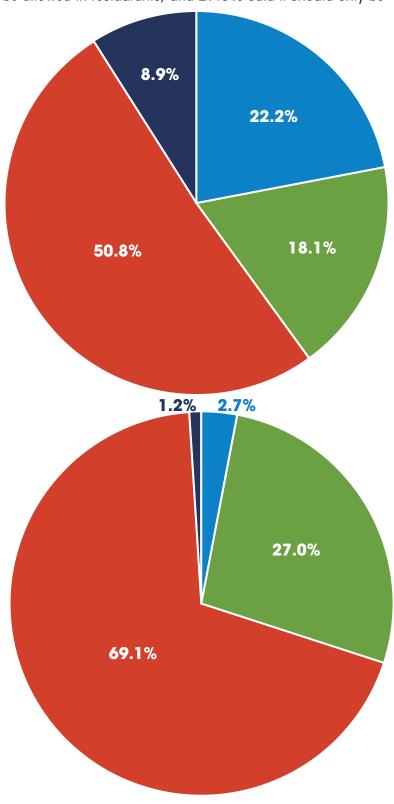
allowed at some times or some places.



- ALWAYS ALLOWED
- ALLOWED ONLY AT SOME TIMES OR IN SOME PLACES
- **NEVER ALLOWED**
- DON'T KNOW/REFUSED

SHOULD SMOKING INDOORS IN RESTAURANTS BE...

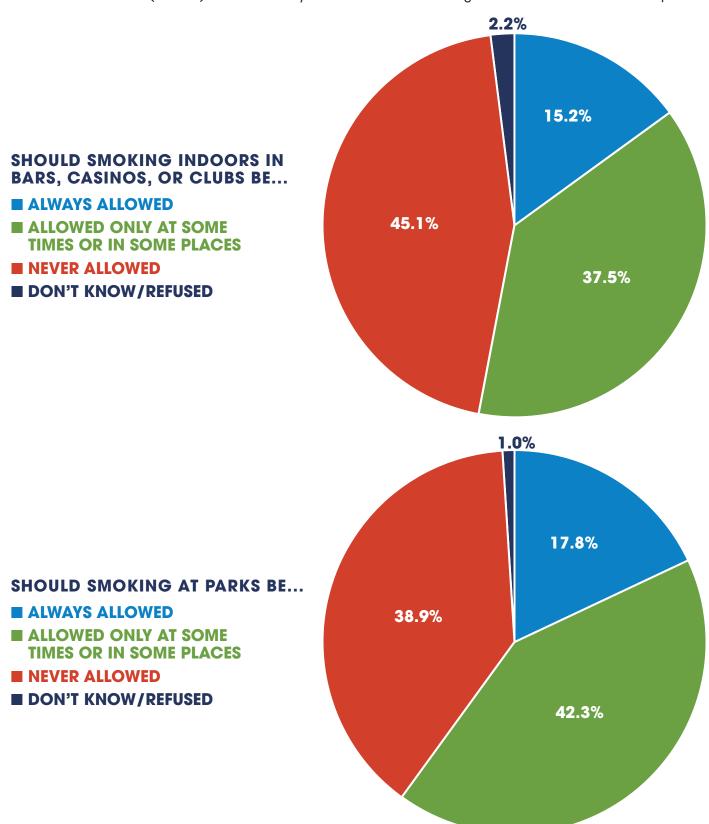
- ALWAYS ALLOWED
- ALLOWED ONLY AT SOME TIMES OR IN SOME PLACES
- **NEVER ALLOWED**
- DON'T KNOW/REFUSED



TOBACCO POLICIES AT OTHER PLACES

Adults were also asked for their opinions about allowing smoking at other indoor or outdoor locations which they may visit.

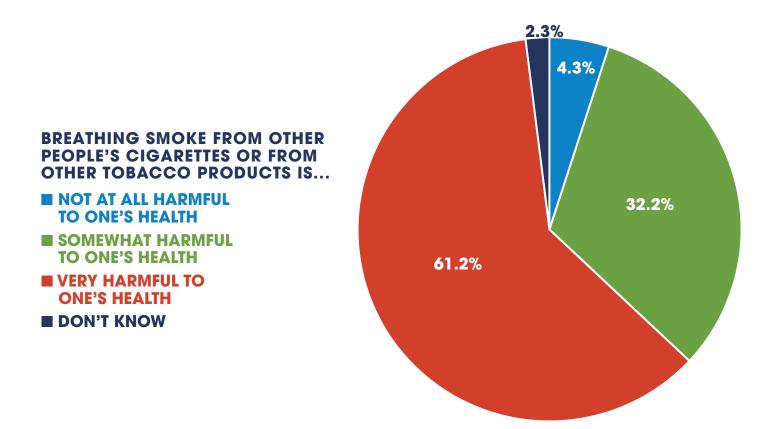
- A total of 45.1% believe smoking should not be allowed inside bars, casinos, or clubs.
- More than one-third (38.9%) of those surveyed answered that smoking should "never be allowed" in parks.



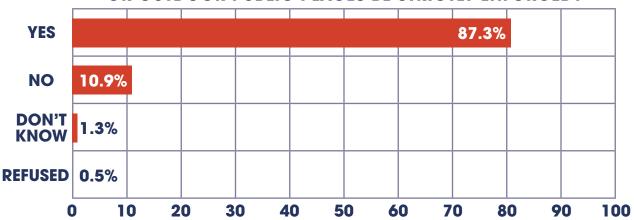
SECONDHAND SMOKE

Participants were asked if they think secondhand smoke is harmful to them. Knowledge of the harmful effects of tobacco may help people avoid cigarette smoking and secondhand smoke for themselves and others. Another question was asked about the enforcement of policies restricting tobacco use in public places.

- 93.4% of adults think secondhand smoke is harmful to one's health.
- About 9 out of 10 people agree that policies not allowing tobacco use in public places should be strictly enforced.



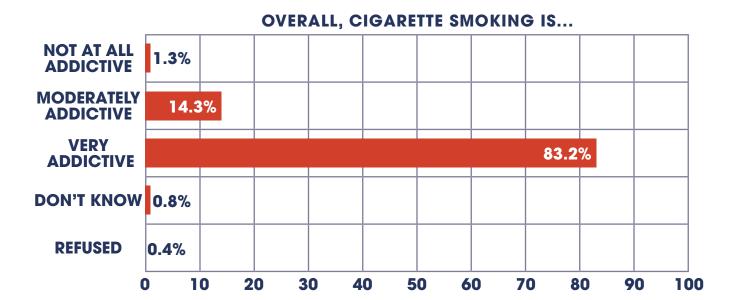


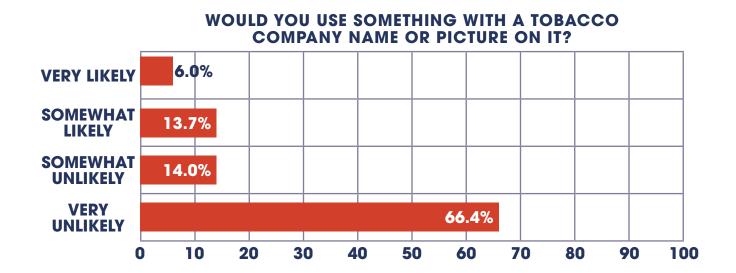


TOBACCO BELIEFS

A question was asked to determine if adult participants think cigarette smoking is addictive. A question was also asked if adults would use or wear products with a tobacco company name or picture on it.

- Most adults (about 9 out of 10) believe that cigarette smoking is addictive.
- 8 out of 10 adults think cigarette smoking is "very addictive".
- Only 20% of participants are "very likely" or "somewhat likely" to use or wear products with a tobacco company name or picture on it.
- This is a method of advertising to current tobacco users.

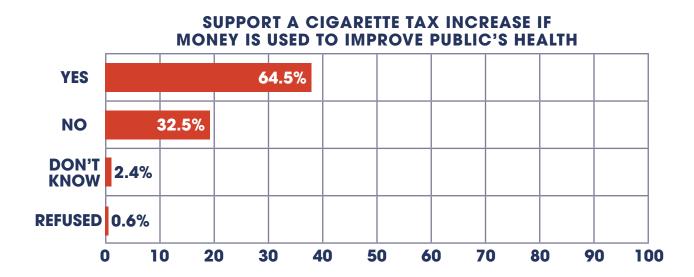


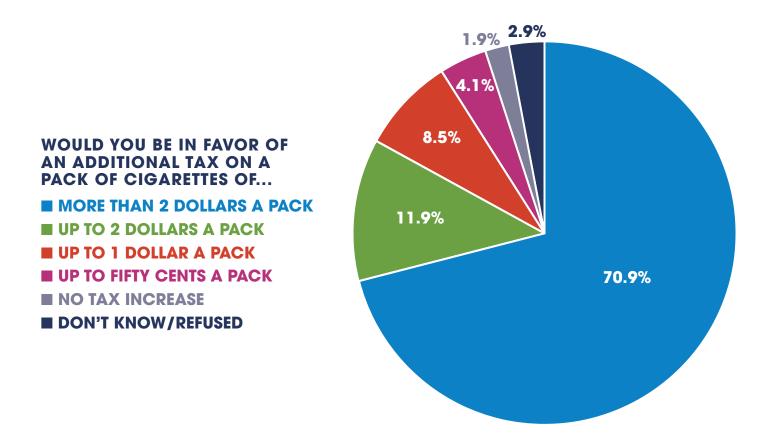


CIGARETTE TAX INCREASE

People were surveyed whether they would support a cigarette tax increase. An additional survey question was used to determine what amount of tax increase would be supported.

- Almost two-thirds (64.5%) supported a tax increase if the money is used to improve the public's health.
- About 95% of tax increase supporters expressed an additional tax amount which they would support.
- 70.9% of those in support of a tax increase were in favor of an additional tax of "more than two dollars a pack."





SUMMARY/CONCLUSIONS

The use of tobacco is harmful to everyone, both smokers and nonsmokers. People may start tobacco use as early as their youth and continue to use tobacco as adults. Policies and social beliefs may also affect tobacco use, cessation, or exposure to secondhand smoke of adults and those around them. Data from the 2011 AL ATS help monitor and evaluate progress toward reaching goals in the state plan and identifies areas where focus is needed in the future.

Over half (54.8%) of adult survey participants in Alabama have tried cigarette smoking in their lifetime. 46.2% of participants were current smokers when they were surveyed. Cigarettes are the most likely tobacco product to be tried followed by cigars, cigarillos, or very small cigars. Smokeless tobacco or snus are the least likely to be tried by adults in their lifetime.

Tobacco policies and beliefs can influence the choices adults make about use of tobacco, cessation, and social attitudes about tobacco. A person's opinion on the danger of secondhand smoke to one's health can influence the desire to limit exposure to secondhand smoke for themselves and those around them. Tobacco policies established in the home or vehicle serve as a factor in the amount of secondhand smoke exposure.

The opinions of people regarding tobacco use in the workplace, smoking in restaurants, or smoking in other indoor/outdoor public places may influence policies at these various locations. Adults also show support for a cigarette tax increase to help the health of the community. Policies restricting tobacco use in public places should be enforced to support the social beliefs of the community.

Smokers should be encouraged to quit smoking, and those who want to quit should be encouraged to make quit attempts and be provided information to aid in cessation. When health professionals ask adult patients about the use of tobacco, information and education about the dangers of tobacco can be provided to these patients to encourage cessation. Non-smokers can be advised by healthcare professionals not to use tobacco. Adults can be informed and have access to information on cessation and quitline services. This will help expand knowledge throughout the community about the services available to smokers.

Results and data from adults in the AL ATS provide important information needed to change tobacco use, provide knowledge, and produce policies among adults. This data could help everyone in the progress toward more tobacco knowledge and changes in attitudes and beliefs. Improvements in tobacco use and control may benefit both smokers and nonsmokers in the future.