



Smoking in nine Chicago community areas

HEALTH SNAPSHOT NO.9

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Tobacco use is the leading cause of preventable deaths in the US, claiming more than 480,000 lives and contributing to over \$320 billion in health care expenditures and productivity losses annually.¹⁻³ Despite promising reductions over the past five decades, 15% of US adults continue to smoke, representing roughly 40 million Americans.⁴ The majority of these individuals (69%) would like to quit and their efforts are increasingly aided by public health campaigns, cessation aids, and public policies (including tobacco taxes and smoke-free laws).⁵ This health snapshot presents smoking-related findings from the *Sinai Community Health Survey 2.0*, a community-driven, representative survey of nine communities in Chicago.

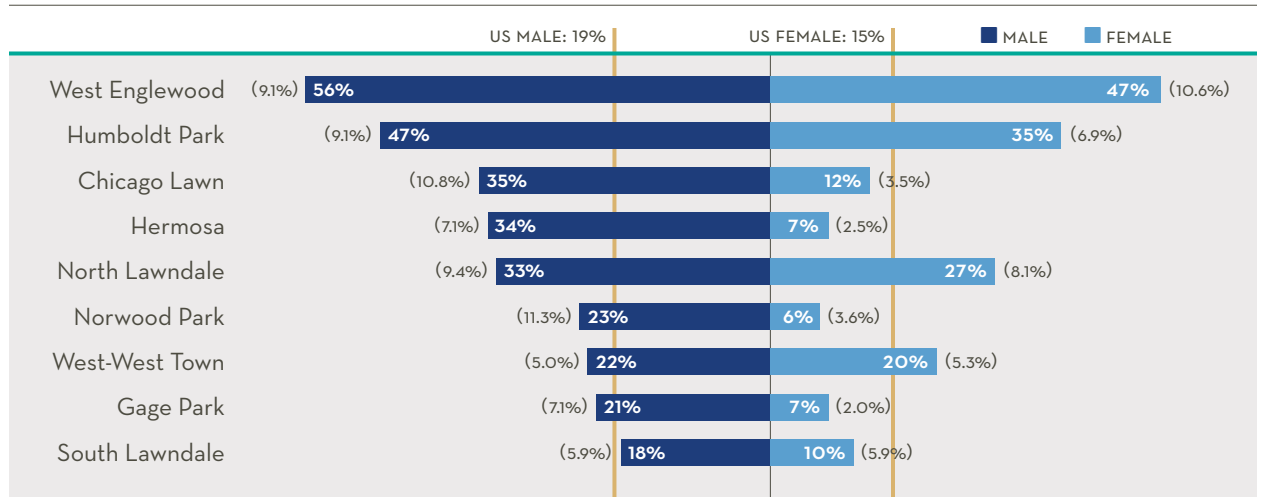
WHICH COMMUNITIES ARE MOST AFFECTED?

- West Englewood had the highest percentage of current smokers (56% for males and 47% for females), but also the highest percentage of smokers who were trying to quit (76%).
- In west-West Town and Gage Park, less than half of smokers were trying to quit.

WHO IS MOST AFFECTED?

- Non-Hispanic Black adults were the most likely to smoke (49% for males and 32% for females) and adults of Mexican origin were the least likely (19% for males and 6% for females).
- Among females of Puerto Rican origin who currently smoke, 92% were trying to quit.
- Only 34% of non-Hispanic White males who currently smoke were trying to quit.

FIGURE 1: Percent who currently smoke by community area and sex

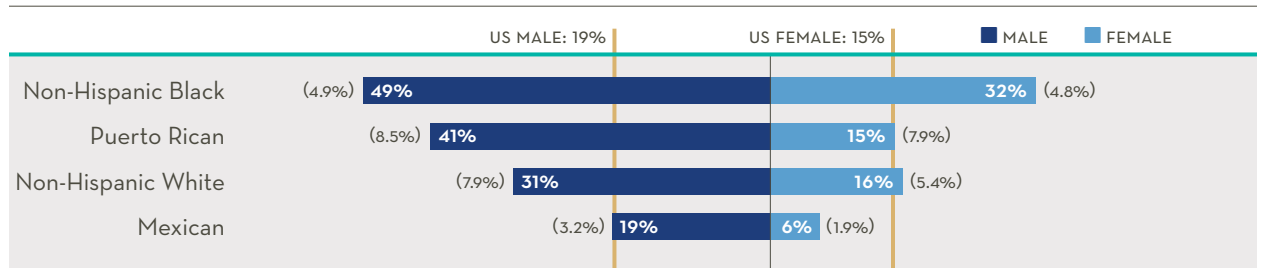


Sampled West Town community area west of Western Avenue only
 US data source: National Health Interview Survey, 2015

PREVALENCE (STANDARD ERROR)

- The percentage of females who currently smoke ranged from a high of 47% for females in West Englewood to a low of 6% for females in Norwood Park.
- The percentage of males who currently smoke ranged from a high of 56% for males in West Englewood to a low of 18% for males in South Lawndale.

FIGURE 2: Percent who currently smoke by race/ethnicity and sex

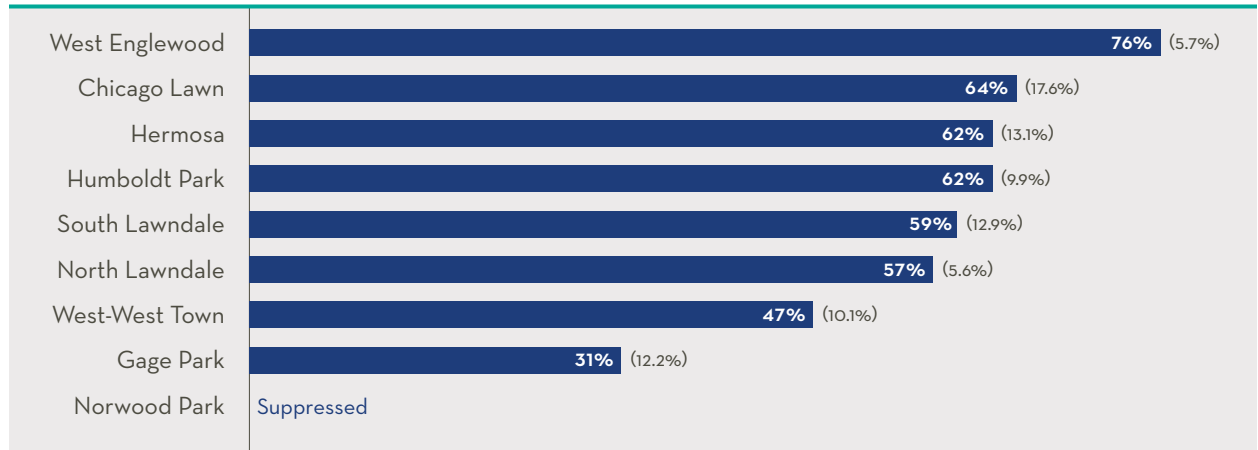


US data source: National Health Interview Survey, 2015
 Rao-Scott Chi-Square p-value < 0.0001 (males); p < 0.0001 (females)

PREVALENCE (STANDARD ERROR)

- There was a statistically significant difference in the percentage of females who currently smoke by race/ethnic group, which was highest for non-Hispanic Black females (32%) and lowest for females of Mexican origin (6%).
- There was also a statistically significant difference in the percentage of males who currently smoke by race/ethnic group, which was highest for non-Hispanic Black males (49%) and lowest for males of Mexican origin (19%).

FIGURE 3: **Percent of smokers who were trying to quit by community area**

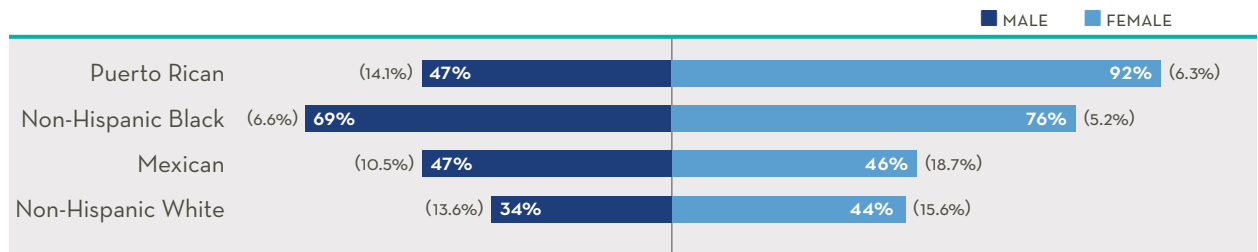


Sampled West Town community area west of Western Avenue only
No national comparison data available

PREVALENCE (STANDARD ERROR)

- The percentage of smokers who were trying to quit ranged from a high of 76% in West Englewood to a low of 31% in Gage Park.
- In west-West Town and Gage Park, less than half of smokers were trying to quit.

FIGURE 4: **Percent of smokers who were trying to quit by race/ethnicity and sex**



No national comparison data available

Rao-Scott Chi-Square p-value = 0.0848 (males); p = 0.0455 (females)

PREVALENCE (STANDARD ERROR)

- There was a statistically significant difference in the percentage of female smokers who were trying to quit by race/ethnic group, which was highest for females of Puerto Rican origin (92%) and lowest for non-Hispanic White females (44%).
- The percentage of male smokers who were trying to quit was highest for non-Hispanic Black males (69%) and lowest for non-Hispanic White males (34%). These differences were not statistically significant.

ABOUT THE SURVEY

Sinai Urban Health Institute (SUHI) is a unique, nationally-recognized research center on the west side of Chicago. Our mission is to achieve health equity among communities through excellence and innovation in data-driven research, interventions, evaluation, and collaboration. SUHI is a proud member of Sinai Health System. For more information about SUHI, visit www.SUHChicago.org.

SUHI designed and conducted the *Sinai Community Health Survey 2.0* in partnership with our Community Advisory Committee and The University of Illinois at Chicago Survey Research Laboratory (SRL). SRL administered surveys face-to-face in both English and Spanish to randomly selected households from each of the nine surveyed communities. Interviewers randomly selected up to two adults (18 and over) per household. Data collection took place between March 2015 and September 2016 with a final sample size of 1,543 adults. Survey results are representative at the community area level for all communities with the exception of West Town, which was sampled west of Western Avenue only. More information about the survey is available at www.SinaiSurvey.org.

DEFINITIONS

Current smoker was defined as responding ‘every day’ or ‘some days’ when asked whether you currently smoke every day, some days, or not at all.

Trying to quit was defined as responding ‘currently trying to quit’ when asked whether you are currently trying to quit smoking or not currently trying to quit smoking.

METHODS

We used sampling weights to compute statistical estimates to ensure (1) the estimates accounted for the differential probability of the selection of respondents; and (2) the demographic profile of survey respondents matched the community area demographic profiles from the *2010-2014 American Community Survey*. The Rao-Scott Chi-Square test was used to test for statistical differences by race/ethnic group and sex. Findings were suppressed when the number of observations was less than five.

REFERENCES

1. U.S. Department of Health and Human Services. *The health consequences of smoking: 50 years of progress. A report of the Surgeon General*. Atlanta, GA: U.S. Department of Health and Human Services, Centers for Disease Control and Prevention, National Center for Chronic Disease Prevention and Health Promotion, Office on Smoking and Health, 2014. <https://www.surgeongeneral.gov/library/reports/50-years-of-progress/full-report.pdf>. Accessed December 20, 2016.
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4. Centers for Disease Control and Prevention. Cigarette smoking among adults—United States, 2005-2015. *Morb Mortal Wkly Rep*. 2016; 65(44): 1205-1211.
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