



Indiana Adult Tobacco Survey Summary of Findings

November 2022



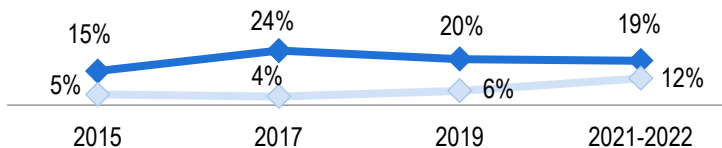
All Hoosiers deserve a fair and just opportunity to be as healthy as possible. However, predatory marketing tactics by the tobacco industry have resulted in some communities being unfairly burdened by commercial tobacco. In Indiana, the percentage of adults who smoke is consistently higher than in other states, and each year over 11,000 Hoosiers die from tobacco-related illnesses.¹ The Indiana Adult Tobacco Survey (IN ATS) is the most comprehensive source of data on adult tobacco use and attitudes in the state. Indiana Tobacco Prevention and Cessation first administered the IN ATS in 2002 and has administered it biennially since 2013 to monitor tobacco trends among adults in Indiana. This report summarizes key results from the 2021-2022 IN ATS.

Current tobacco use

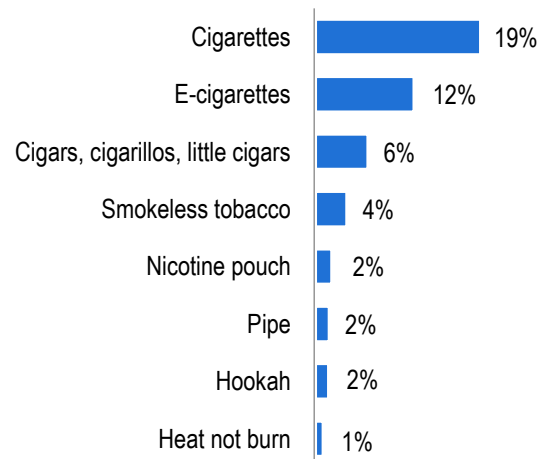
Combustible cigarettes remain the most used tobacco product, but use of e-cigarettes is on the rise.

Nearly 29% of Indiana adults currently use tobacco. Combustible cigarettes are the most used tobacco product, followed by e-cigarettes. Use of e-cigarettes has increased steadily since 2017.

Current use of **cigarettes** and **e-cigarettes** among Indiana adults



Current use of tobacco products among Indiana adults

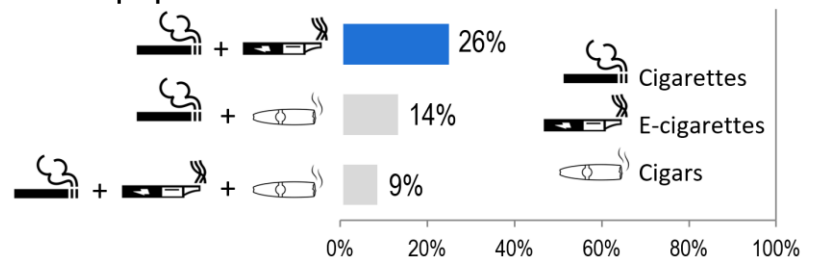


50% of people who use e-cigarettes currently smoke and **25%** used to smoke.

Among adults who currently use tobacco, 35% use multiple products.

Among adults who use multiple tobacco products, the most common combination of products is cigarettes and e-cigarettes, followed by cigarettes and cigars (including little cigars and cigarillos), and lastly a combination of the three. These combinations reflect the tobacco use of nearly 50% of adults who use multiple products.

Most common combinations of tobacco products among adults who use multiple products

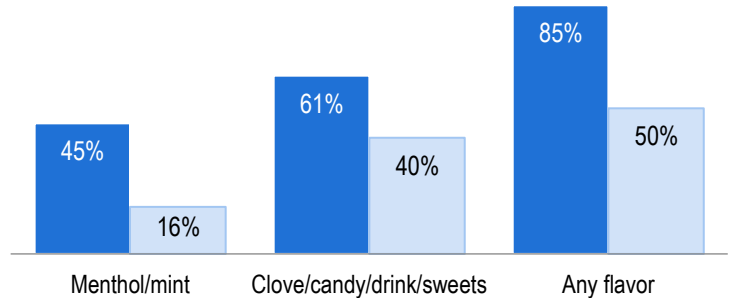


Current tobacco use

Use of flavored products is common, especially for e-cigarettes.

Flavoring in tobacco products masks the taste and harshness of tobacco and increases the risk of initiation of tobacco use among youth and young adults.² Among adults who currently smoke, 32% reported they usually smoke menthol flavored cigarettes. Flavored product use is even more common among adults who use cigars and those who use e-cigarettes. Nearly 85% of adults who use e-cigarettes have used a flavored e-cigarette within the past 30 days.

Percent of adults who used flavored e-cigarettes and cigars in the past 30 days among those who currently use these products



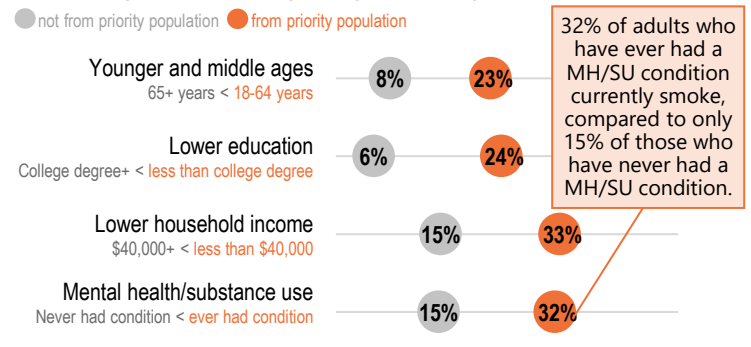
Disparities in who is impacted by tobacco

Although smoking has declined among Indiana adults, certain populations are still disproportionately impacted by tobacco.

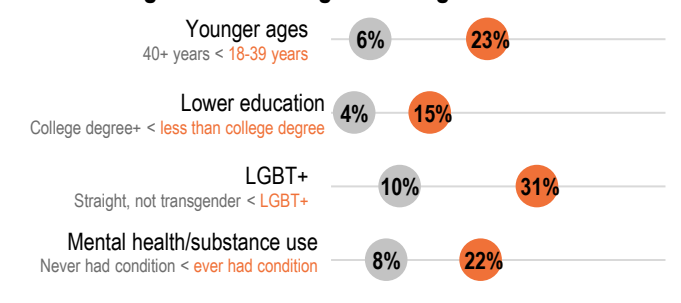
The tobacco industry advertises, discounts, and displays tobacco products in some communities more than others. Historically, they have disproportionately targeted people of color and the LGBT+ community, among others, with tailored ads and flavored products. At the same time, societal stressors like discrimination, living in poverty, and stressful life events can make it more likely a person will start using tobacco and make it harder to quit. The resulting disparities in tobacco use and burden of tobacco-related diseases prevent some Hoosiers from having the opportunity to be as healthy as possible.

Among adults in Indiana, the use of cigarettes, e-cigarettes, and cigars is higher among priority populations, such as certain age groups and those with lower education. Specific disparities also exist for those who have ever been diagnosed with a mental health or substance use (MH/SU) condition, those with lower annual household incomes, and Black/African American adults.

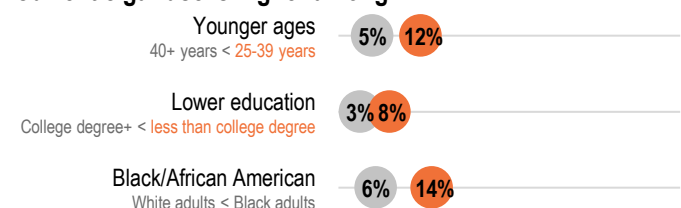
Current cigarette smoking is higher among



Current e-cigarette use is higher among



Current cigar use is higher among



80% of Black or African American adults who currently smoke or used to smoke report menthol cigarettes as their usual product (compared to 20-48% among other groups).

Cessation among adults who use tobacco

Indiana adults who use tobacco are trying to quit, and many are using proven supports to help them.

Just over one half of Indiana adults who currently use e-cigarettes and more than one third of adults who smoke or use other tobacco products tried to quit in the past year. Among those who tried to quit, 38% used nicotine replacement or prescription medications and 16% used a Quitline, counseling, or a class to help them during their most recent quit attempt.

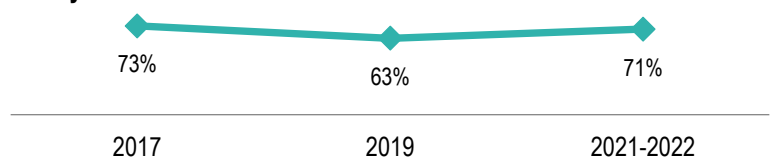
Despite relatively low use of counseling, awareness of the Indiana Tobacco Quitline (ITQL) remains high among adults who currently use tobacco.

Brief interventions by health care providers can help motivate adults who use tobacco to quit and connect them to effective treatment.

Percent of adults who tried to quit in the past year among those who currently use



Percent of adults who are aware of the ITQL among those who currently use tobacco



82% of adults who use tobacco saw a health professional in the past year.



59% of adults who use tobacco and saw a health professional were advised to quit.

Smoke-free rules and secondhand smoke exposure

Most adults have smoke-free and vape-free rules in their homes.

Tobacco smoke and aerosol from e-cigarettes contain harmful chemicals and metals, some of which are toxic or carcinogenic. Limiting secondhand exposure to smoke and aerosol is critical in preserving health and preventing lung disease. Despite most adults living in homes with smoke-free and vape-free rules, 12% of adults were exposed to secondhand smoke in their home in the past 7 days and 9% were exposed to secondhand aerosol.

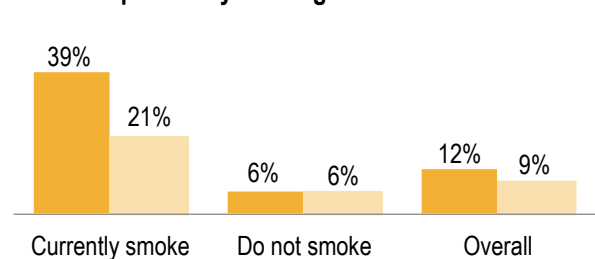


80% of Indiana adults live in smoke-free homes.



77% of Indiana adults live in vape-free homes.

Exposure to **secondhand smoke** and **e-cigarette aerosol** in the home in the past 7 days among those who...



Adults who currently smoke are less likely than those who don't smoke to have smoke-free (47% versus 88%) and vape-free (49% versus 83%) rules at home and more likely to be exposed to secondhand smoke and aerosol in their homes. Indiana adults who are younger, have lower education, have lower household income, have ever been diagnosed with a MH/SU condition, and those who identify as LGBT+ are also less likely to have smoke and vape-free rules at home and are 2 to 3 times as likely to be exposed to secondhand smoke and aerosol at home.*

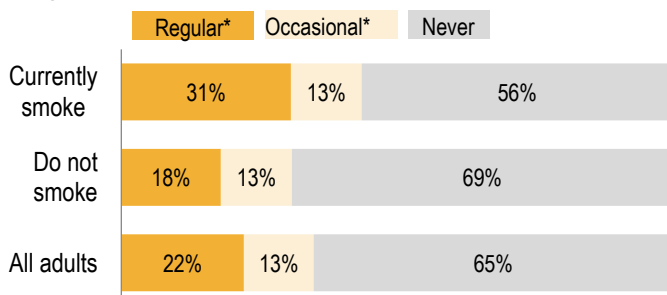
*The difference in secondhand smoke exposure in younger adults (16%) compared to older adults (11%) was smaller and not significant.

Smoke-free rules and secondhand smoke exposure

1 in 5 residents who live in multiunit housing are exposed to secondhand smoke regularly, but most residents favor smoke-free indoor environments.

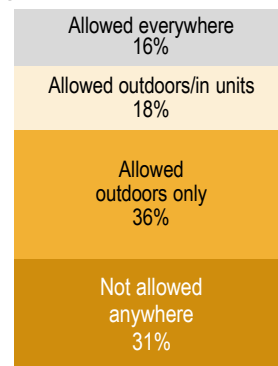
Residents who live in multiunit housing (MUH) such as apartment buildings, townhomes, and condominiums can be exposed to secondhand smoke that enters common areas and private residences from somewhere else in the building. Secondhand smoke can travel through ventilation ducts, gaps in walls and pipes, as well as open doorways and windows. Among Indiana adults who live in MUH, almost 30% of adults who smoke and 20% of adults who don't smoke are regularly exposed to secondhand smoke that enters their home from somewhere else in the building. Smoke-free buildings can help reduce exposure. Most adults who live in MUH want smoking to be allowed outside only or banned completely.

Exposure to secondhand smoke from elsewhere in the building among adult MUH residents who...



*Regular = a few times a week to every day
Occasional = less than once a month to a few times a month

A majority of Indiana adults living in MUH want smoking banned completely or confined to the outdoors



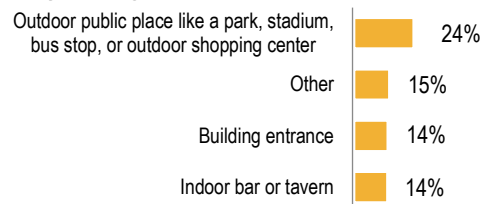
Most indoor work settings are smoke-free.

Among Indiana adults who work indoors, 90% work in places that do not allow smoking in any indoor areas. Approximately 6% and 9% of indoor workers were exposed to secondhand smoke and e-cigarette aerosol at work in the past 7 days, respectively.

23% of adults were exposed to secondhand smoke in the community.

The most common place for secondhand smoke exposure in the community (i.e., besides at home or work) was in an outdoor public place.

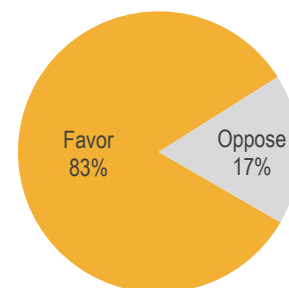
Most common secondhand smoke exposure locations in the community among those who were exposed



83% of Indiana adults are in favor of the smoke-free air law.

Most Indiana adults want smoking banned or limited in public indoor spaces. Overall, 83% of Indiana adults are in favor of Indiana's smoke-free air law, which prohibits smoking inside most public places including workplaces, public buildings, offices, restaurants, and bowling alleys. Most people also support smoke-free indoor environments or restricting smoking to certain places or times in workplaces (97%) and restaurant (97%) as well as bars, casinos, and clubs (88%).

Most Indiana adults favor the smoke-free air law



Marijuana

About 1 in 7 Indiana adults currently use marijuana; most use marijuana by smoking it and many use it in multiple ways.

Half of Indiana adults have tried marijuana and 15% currently use it. The most common method of using marijuana is by smoking it, but many adults who currently use marijuana consume it in multiple ways.

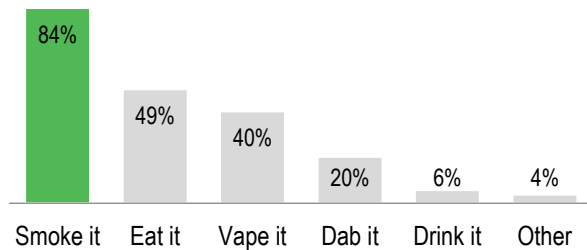


50% of Indiana adults have tried marijuana.

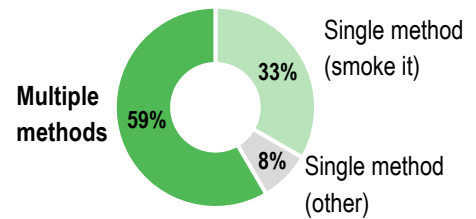


15% of Indiana adults currently use marijuana.

Smoking is the most common method of marijuana use



Using marijuana in multiple ways is common among adults who currently use



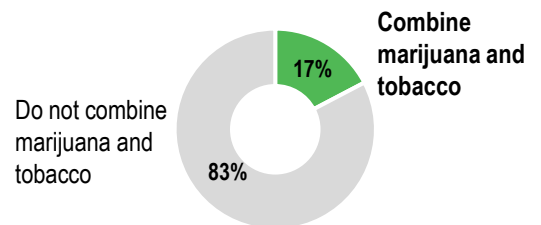
Most use marijuana for both medical and non-medical purposes.

Among Indiana adults who currently use marijuana, about one quarter (23%) use it for medical purposes, such as to treat or decrease symptoms of a health condition. Another quarter use marijuana for non-medical reasons like to have fun or to fit in (27%) and half use it for both medical and non-medical reasons (50%).

Nearly 75% of adults who use marijuana also use tobacco.

The majority (73%) of adults who use marijuana also use tobacco. Among adults who currently smoke or vape marijuana, 17% have mixed tobacco in with their marijuana in the past 30 days.

Some adults who currently use marijuana mix in tobacco to use at the same time



IN ATS Survey Methods

Indiana Tobacco Prevention and Cessation (TPC) and Professional Data Analysts (PDA) worked collaboratively to develop the 2021-2022 IN ATS questionnaire. The final questionnaire contained sections on general health, cigarette smoking and other tobacco use (including e-cigarettes and emerging products), cannabis use and exposure, Quitline awareness, tobacco cessation, health care provider interventions, health insurance coverage, secondhand smoke/aerosol exposure and policies, media awareness, tobacco industry marketing, attitudes and beliefs about smoking and policy, and demographics. The questionnaire was available in English and Spanish.

The survey was conducted by telephone between December 2021 and February 2022. A probability-based random sample of 2,002 Indiana adults was acquired through random digit dialing; 600 adults were reached on a landline phone and 1,402 were reached on a cell phone. The data are weighted to be representative of the adult population of Indiana. Estimates exclude don't know and refused responses. Data was suppressed if the number of observations in the denominator was less than 50 or if the relative standard error of the estimate was greater than 0.3. Statistical significance used overlapping 95% confidence intervals.

References

- Centers for Disease Control and Prevention. Smoking-Attributable Mortality, Years of Potential Life Lost, and Productivity Losses—United States, 2000–2004. *Morbidity and Mortality Weekly Report*. 2008;57(45):1226–8.
- Villanti, AC et al. (2019). Association of flavored tobacco use with tobacco initiation and subsequent use among US youth and adults, 2013–2015. *JAMA Network Open*. 2019;2(10):e1913804. doi:10.1001/jamanetworkopen.2019.13804. Accessed 7/28/2022.