Rural and Urban Trends in the Prevalence of Smoking Bans:

A Report from the National Social Climate Survey of Tobacco Control, 2000-2002

Robert McMillen

Julie Breen

Arthur G. Cosby

Social Science Research Center

Mississippi State University





Support

- The Office of Rural Health Policy of the Department of Health and Human Services
- The Rural Health, Safety, and Security Institute, Social Science Research Center
- Center for Child Health Research of the American Academy of Pediatrics





Health Risks of Smoking

- Tobacco use is responsible for more than 430,000 deaths per year among adults in the US
- Represents more than 5 million years of potential life lost
- Direct medical costs related to smoking total at least \$50 billion per year

Health Risks of ETS

- ETS accounts for 53,000 deaths of non-smokers each year
- 3,000 nonsmokers die each year die of lung cancer each year
- 150,000-300,000 infants and children under age 18 months experience lower respiratory track infections
- Other recognized problems of ETS exposure: Low birth weight, asthma, SIDS, behavioral and cognitive functioning

Levels of Urbanization

- Eberhardt's Urban and Rural Health Chartbook
- Large Central Counties
- Large Fringe Counties
- Small Metropolitan Counties
- Rural Counties with a City
- Rural Counties without a City

Adult Smoking

1997-1998 NHIS

- Rural Counties, 27.3%
- The Most Urban Counties, 22.6%

2003 SCS-TC

- Rural residents, 24.9%
- Urban residents, 20.9%



Rural-Urban Gaps in Smoking Bans

Rural-Urban Differences in Self-Reported Smoking Bans, p <.05

Ban	Most Urban	Most Rural			
Household	74.5%	65.7%			
Children Present	88.4%	78.7%			
Family Vehicle	83.2%	72.4%			
Work Areas	67.2%	53.4%			
Convenience Stores	79.6%	70.2%			
Fast Food	69.0%	54.0%			
Restaurants	35 9%	22 0%			



Purpose

To determine if smoking bans increasing in both rural and urban areas



Social Climate Survey of Tobacco Control

- Provide timely, comprehensive data about tobacco control attitudes and practices
- Objectively measure, and ultimately monitor, progress towards intermediate objectives
- Annual cross-sectional assessments of the social climate: 2000, 2001, 2000





Methods

Simple Random Sample of Adults

- Computer assisted telephone interviewers
- 2000: N = 1,503; Co-operation Rate = 74%
- 2001: N = 3,002; Co-operation Rate = 84%
- 2002: N = 3,009; Co-operation Rate = 86%



Changes from 2000-2002

- 45.2% of social climate indicators improved from 2000 to 2002
- 30.8% of indicators improved from 2001 to 2002
- Support is increasing for restrictions on smoking in public places
- Smoking restrictions are becoming more prevalent in some private and public settings





Smokefree Private Settings

	2000	2001	2002	% Point Difference	% Change
Household Ban*	69.1	74.1	73.7	4.6	6.7
Ban in the presence of children*	83.5	87.9	87.8	4.3	5.1
Ban in the family vehicles	n/a	79.6	78.5	-1.1	-1.4





^{*} p<.05, 2000 vs 2002

Smokefree Public Settings

	2000	2001	2002	% Point Difference	% Change
Malls*	75.4	77.0	79.2	3.8	5.0
Convenience Stores*	68.4	73.7	75.4	7.0	10.2
Fast Food*	52.1	57.8	63.5	11.4	21.9
Restaurants	24.5	28.1	26.5	2.0	8.2
Bars	13.0	12.4	13.3	0.3	2.3
Outdoor Parks*	7.9	7.9	11.3	3.4	43.0

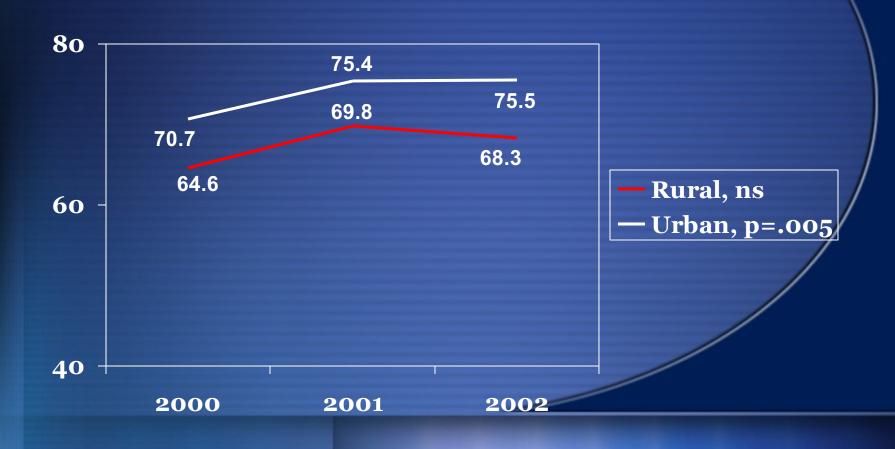
^{*} p<.05, 2000 vs 2002



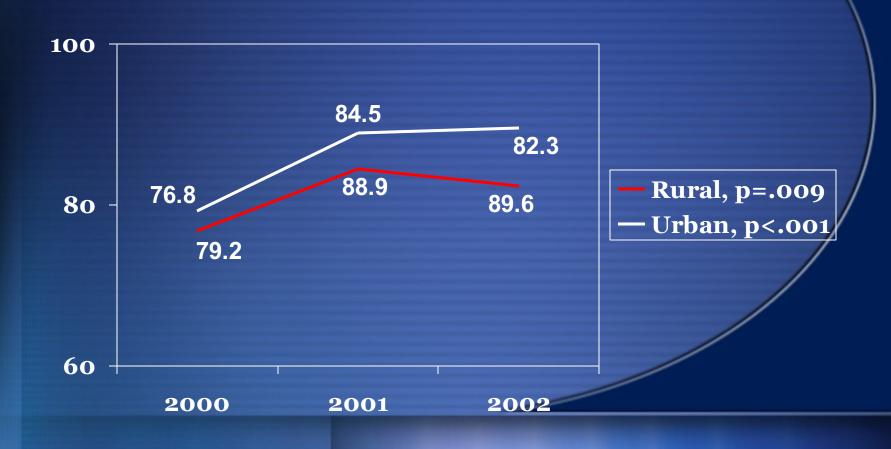


Rural-Urban Trends in the Prevalence of Smoking Bans

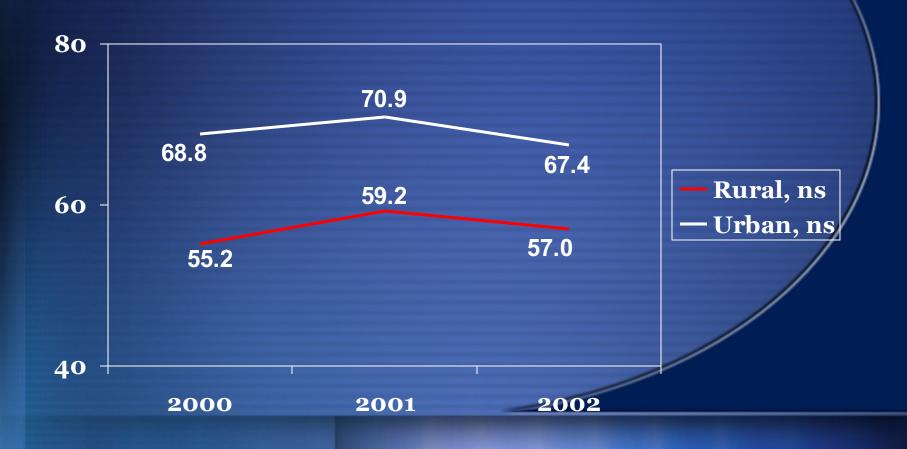
Household Smoking Bans



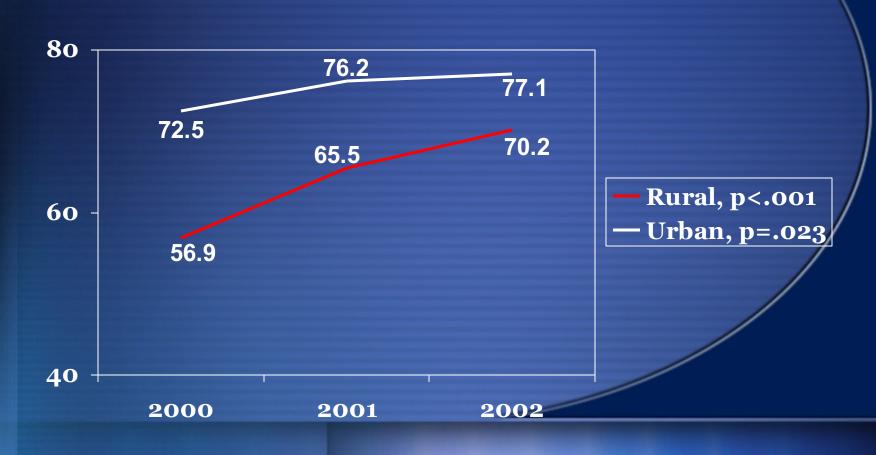
Smoking in the Presence of Children



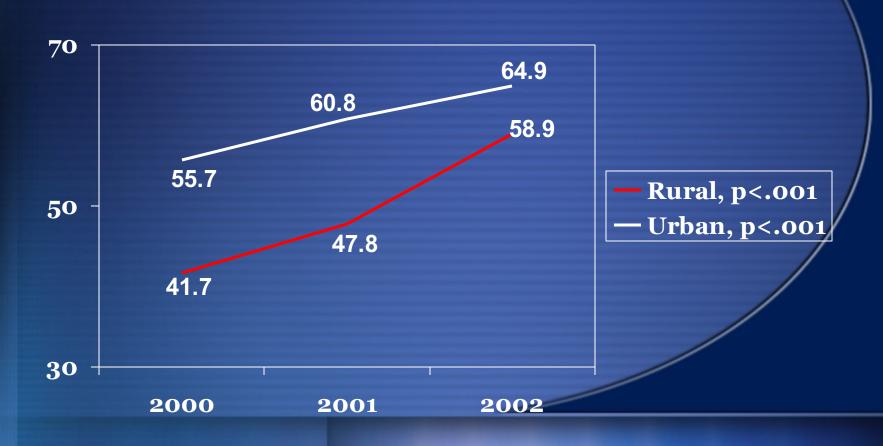
Workplace Smoking Bans



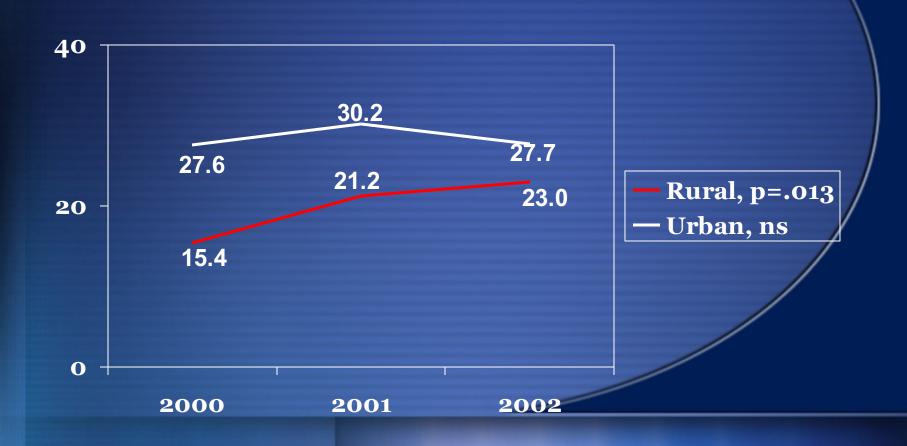
Smokefree Convenience Stores



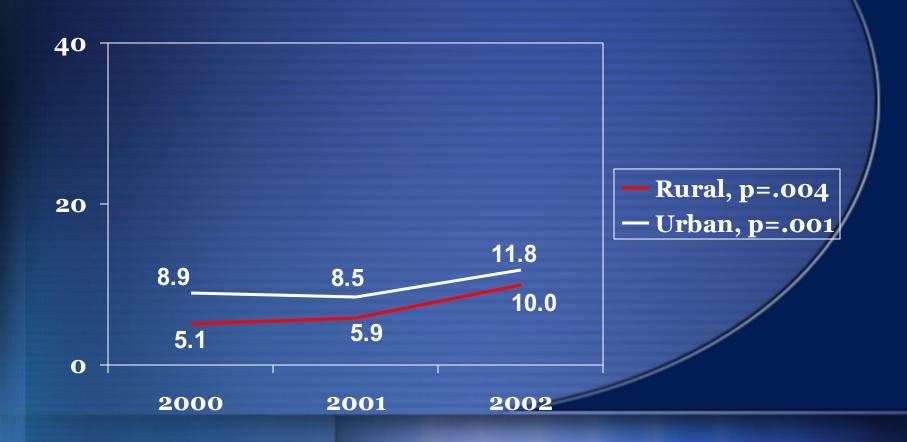
Smokefree Fast Food Restaurants



Smokefree Restaurants



Smokefree Outdoor Parks



Limitations

- Telephone surveys may underrepresent some populations
- All data are self-report

Summary

- Smoking bans are becoming more common in public and private places
- Although smoking bans are more common in urban areas, this ruralurban gap does not appear to be increasing

Social Science Research Center,

Mississippi State University

www.ssrc.msstate.edu/socialclimate