

HEALTHY CHICAGO DATA BRIEF

2019 YOUTH TOBACCO USE

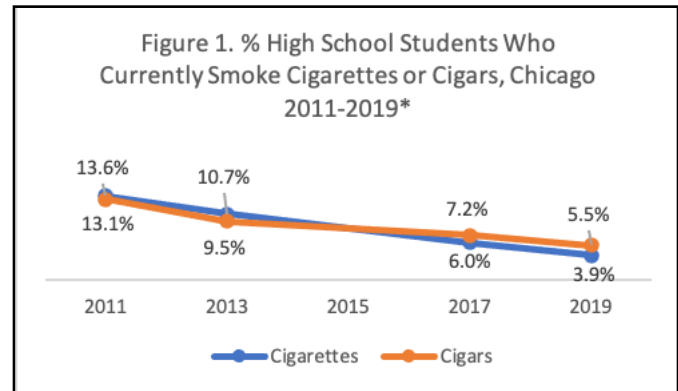
New data from the Centers for Disease Control and Prevention (CDC) shows mixed results on youth tobacco use in Chicago over the past two years. While cigarette smoking is at a record low, the overall rate of tobacco use has increased due to the rise of vaping. In addition, Black males have seen no improvements in the use of combustible products and, in the case of cigarettes, an increase—even as combustible product use overall is on the decline. Nevertheless, Chicago’s tobacco use rates are lower than the rest of the state and country, suggesting that the city’s policies have helped mitigate the effects of nationwide trends.

Tobacco Use, Overall

In 2019, 16.2% of Chicago high school students reported current use of any tobacco product, including cigarettes, vape products, cigars, and smokeless tobacco. This figure represents a 12% increase since 2017. While overall tobacco use increased, use of any tobacco product among Chicago high school students remains significantly lower than state (22.7%) and national (36.5%) rates, and likewise increased by a lower rate than at the state (+22%) and national (+87%) levels. In 2019, 43% of high school-aged tobacco users in Chicago reported attempting to quit.

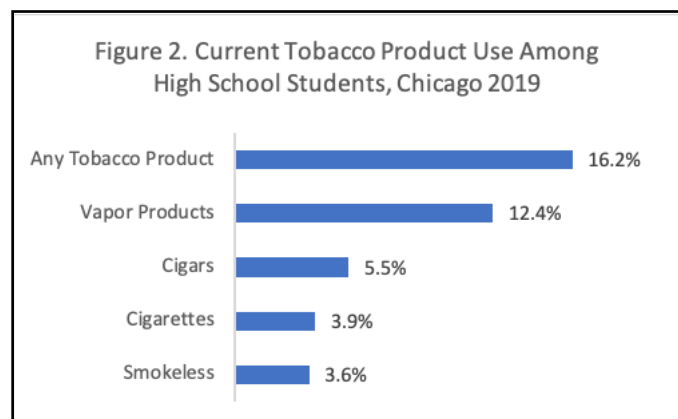
Combustible Tobacco Use

Youth cigarette use in Chicago is at an all-time low. In 2019, only 3.9% of Chicago high school students reported current cigarette use, a 71% decline since 2011 (Figure 1). Chicago rates were lower than state (4.7%) and national (6.0%) rates. Historic lows were also observed for the percentage of Chicago high school students who had ever tried a cigarette (15.9%) and the percentage who tried their first cigarette before age 13 (6.9%). Similarly, only 5.5% of Chicago high school students reported current cigar use (including cigarillos and blunts), representing a 58% decline since 2011.



Vapor Product Use

The vapor product market has grown and evolved rapidly over the last decade and they are now the most commonly used tobacco product by youth. In 2019, 12.4% of Chicago high school students reported current use of vapor products (Figure 2), which is nearly two times the reported rate in 2017 (6.6%). Despite this, the rate of vapor product use among high school students in Chicago remains lower than state (19.9%) and national (32.7%) rates. In 2019, 41% of Chicago high school students reported trying a vapor product in the past year, and 18.6% of these students reported acquiring their vapor products in retail settings.



Disparities in Youth Tobacco Use

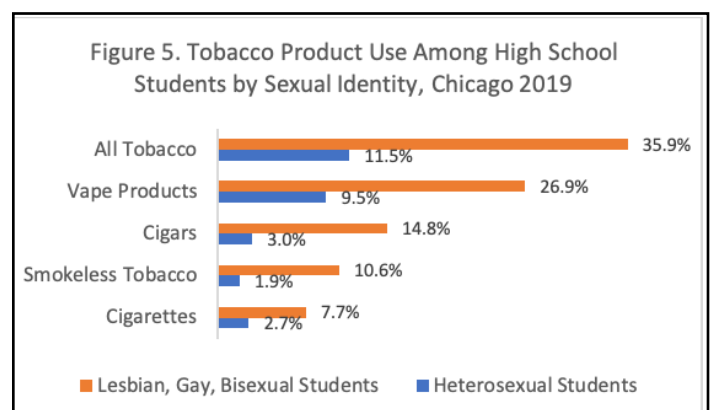
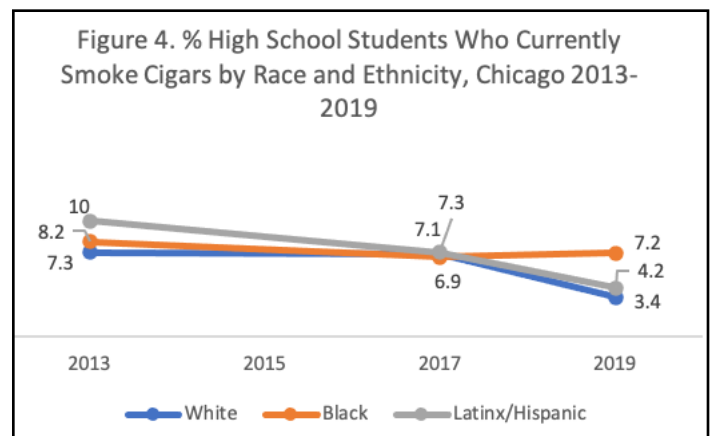
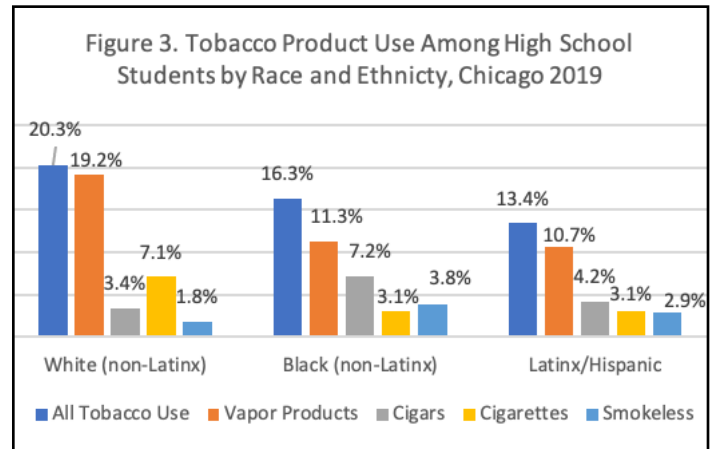
While youth use of cigarettes, cigars, and smokeless tobacco are at historic lows, disparities in tobacco use persist (Figure 3). Rates of decline over the last decade have not been equal and in some instances are increasing by race/ethnicity, gender, and sexual identity.

White high school students continue to use tobacco products at higher rates than other racial/ethnic groups. However, while declines in cigarette use among white and Latinx/Hispanic Chicago high school students occurred between 2017 and 2019, cigarette use among Black male high school students increased by 32% during this same period.

Similarly, while overall rates of cigar use have been in decline for the last decade, there has been no corresponding decline in cigar use among Black high school students (Figure 4).

Likewise, while vapor product use increased across all demographics, the biggest increase by race/ethnicity was among Black high school students, with a 352% increase from 2017 to 2019. At 11.3%, Black high school students now have the second highest rate of vapor product use, behind only white youth. Nevertheless, the rate of current vapor product use remains 1.5 times higher among white high school students than the overall average. Similarly, the rate of frequent and/or daily vapor product use is nearly 4 times higher for white high school students than the overall average.

In addition, significant disparities in tobacco use persist for lesbian, gay and bisexual (LGB) students. Rates of tobacco use among LGB students in 2019 were between 2.8 times and 5.6 times higher than for heterosexual students, depending on product. These disparities were even more profound among Black LGB students, with rates of tobacco use for Black LGB students between 2.5 times and 7 times higher than heterosexual students of any race, depending on product. While vaping products were the most commonly used product by LGB youth (26.9%), there was also a notable increase in cigar use by LGB students (+18%), largely driven by a 49% increase in cigar use by Black LGB students.



Improving Health Equity

Reducing inequity in tobacco use and tobacco-related disease is a top priority of the City of Chicago. Tobacco-related disease accounts for 1.8 years of the 8.8-year life expectancy gap between Black and white residents.¹ Even though African Americans who smoke typically start later and smoke fewer cigarettes over their lifetime, they are more likely to die from tobacco-related disease than white people.² Indeed by young adulthood (18-29 years old), cigarette smoking rates are higher among Black than white Chicagoans,³ despite the opposite being true for high school students. Disparities in tobacco use and tobacco-related disease are influenced by a number of social determinants of health, but also result from decades of deliberate tobacco industry profiling and targeting. For example, the tobacco industry has aggressively marketed menthol cigarettes to Black, LGBTQ and young people for decades, including by placing more advertising in predominantly Black neighborhoods.⁴ Studies show that menthol cigarettes are easier to start and harder to quit.⁵ It is thus no surprise that **approximately half (44.6%) of young adults (18-29 years old) in Chicago who smoke use menthol cigarettes all or most of the time.**⁶ Similarly, the tobacco industry has strategically expanded its product portfolio and deliberately targeted young people to recruit them as replacement users while overall use of combustible tobacco products declined.⁷

What is Chicago Doing to Prevent and Reduce Tobacco Use?

Chicago has been recognized as a leader in tobacco control due to progressive policymaking and counter marketing efforts.^{8, 9, 10, 11, 12} The policies include becoming one of the first cities in the country to add e-cigarettes to its Clean Indoor Air Ordinance, the first U.S. city to impose a vaping tax, and the first jurisdiction in the world to include menthol in a flavored tobacco sales ban, which covers stores within 500 feet of high schools. Chicago residents also have the country's highest cigarette tax burden, a ban on redeeming tobacco coupons, and a minimum purchasing age 21 that went into effect years ago. While these policies have likely helped reduce Chicago's tobacco rates—which are lower than the state and nation overall—addressing vaping and closing disparities will require building on previous efforts with a robust, multi-pronged policy approach. Studies suggest the most effective approaches include: restricting access to youth-attracting products; expanding access to smoke-free spaces; reducing the impact of tobacco marketing; keeping tobacco prices higher; and launching hard hitting media campaigns.¹³ We are likewise continuing to help current tobacco users who want to quit by increasing access to tailored cessation support and reducing triggers to tobacco use through policy.



ChicagoHealthAtlas.org

The Chicago Health Atlas is a website developed by the Chicago Department of Public Health and the City Tech Collaborative to allow users to easily explore, analyze and download health-related data for the city of Chicago. Users can view data on their desktop or mobile device for more than 160 data indicators to explore the demographics, health outcomes, behaviors and social characteristics of Chicago residents and their neighborhoods.

Additional Resources

Centers for Disease Control and Prevention (CDC): <https://www.cdc.gov/tobacco/about/osh/>

Federal Drug Administration (FDA): <https://www.fda.gov/tobacco-products>

The Truth Initiative: www.truthinitiative.org

Quit smoking: Call 1-800-QUIT-NOW | www.smokefree.gov | www.becomeanex.org

[Chicago Tobacco Cessation Network](#) (Respiratory Health Association)

[Freedom from Smoking](#) (American Lung Association)

¹ CDPH analysis of 2017 IDPH mortality data

² Centers for Disease Control and Prevention. African Americans and Tobacco Use. <https://www.cdc.gov/tobacco/disparities/african-americans/index.htm#references>. Accessed August 2020.

³ CDPH analysis of 2018 Healthy Chicago Survey data.

⁴ Food and Drug Administration. Preliminary Scientific Evaluation of the Possible Public Health Effects of Menthol Versus Nonmenthol Cigarettes. 2013.

⁵ Centers for Disease Control and Prevention. Menthol and Cigarettes. https://www.cdc.gov/tobacco/basic_information/tobacco_industry/menthol-cigarettes/index.html. Accessed August 2020.

⁶ CDPH analysis of 2018 Healthy Chicago Survey data.

⁷ Truth Initiative. Spinning a New Tobacco Industry. <https://truthinitiative.org/research-resources/tobacco-industry-marketing/spinning-new-tobacco-industry-how-big-tobacco-trying>. Accessed August 2020.

⁸ Chicago Earns Gold Medal for Policies Improving Quality of Life. https://www.chicago.gov/city/en/depts/mayor/press_room/press_releases/2018/june/GOLD_MEDAL.html.

⁹ Chicago Again Earns Gold Medal from CityHealth for Passing Policies that Improve Residents' Health and Quality of Life. <https://www.chicago.gov/city/en/depts/cdph/provdrs/healthychicago/news/2019/november/chicago-again-earns-gold-medal-from-cityhealth-for-passing-polic.html>.

¹⁰ National Association of County and City Health Officials. Chicago Health Commissioner Described How Community Engagement Helped Advance Rigorous Tobacco Control Policies. <https://www.naccho.org/blog/articles/chicago-health-commissioner-describes-how-community-engagement-helped-advance-rigorous-tobacco-control-policies>.

¹¹ Public Health Law Center. (2016). Chicago's Regulation of Menthol Flavored Tobacco Products. <https://www.publichealthlawcenter.org/resources/chicagos-regulation-menthol-flavored-tobacco-products-case-study-2015>.

¹² Uang R, Barnes R, Glantz SA. (2014). Tobacco Policymaking in Illinois, 1965-2014: Gaining Ground in a Short Time. Center for Tobacco Control Research and Education, Philip R. Lee Institute for Health Policy Studies, School of Medicine, University of California, San Francisco. <https://escholarship.org/uc/item/6805h95r>.

¹³ Centers for Disease Control and Prevention. Best Practices for Comprehensive Tobacco Control Programs—2014. Atlanta: 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.