

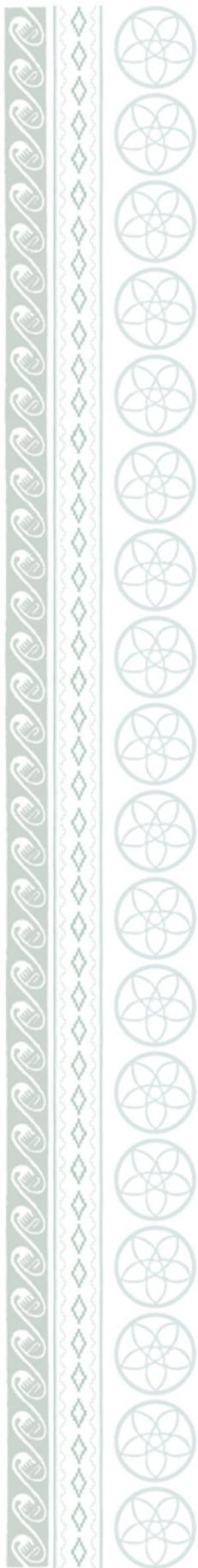
JUNE 2017

TOBACCO USE AMONG AMERICAN INDIAN ADULTS IN NEW MEXICO

A REPORT BY THE ALBUQUERQUE AREA SOUTHWEST TRIBAL
EPIDEMIOLOGY CENTER (AASTEC)



Albuquerque Area Southwest Tribal Epidemiology Center
Albuquerque Area Indian Health Board



Recommended Citation:

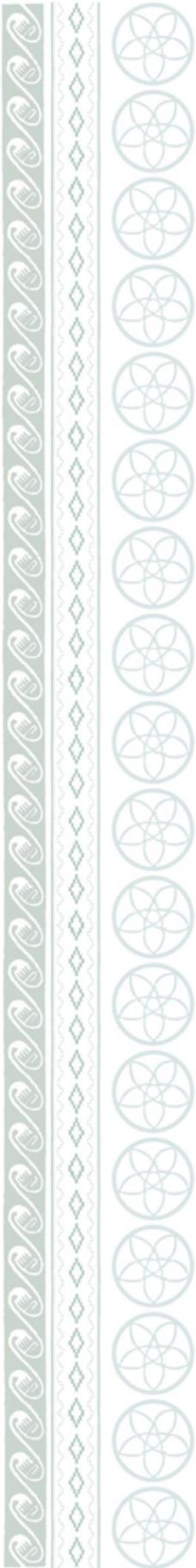
Yazzie S, English K. Tobacco Use among American Indian Adults in New Mexico. Albuquerque: Albuquerque Area Southwest Tribal Epidemiology Center, June 2017.

For Additional Information Contact:

Kevin English—Director
Albuquerque Area Southwest Tribal Epidemiology Center
5015 Prospect Ave NE
Albuquerque, NM 87110
P: 505-764-0036 or (800) 658-6717
kenglish@aaihb.org

TABLE OF CONTENTS

PURPOSE AND DESCRIPTION	03
STATE OF NEW MEXICO BRFSS	
Current Smoker by Race/Ethnicity	05
Current Smoker by Gender	06
Current Smoker by Age Group	07
Quit Attempts	08
Smokeless Tobacco	09
TRIBAL BRFSS	
Smoking Status	11
Smoking Status by Gender and Age	12
Quit Attempts	13
Chewing Tobacco Use	14
Other Tobacco Related Measures	15
INDIAN HEALTH SERVICE CLINICAL DATA	
Trends in Tobacco Use 2007-2016	17
Trends in Tobacco Use by Gender 2007-2016	18
Tobacco Use by Age	19
Tobacco Cessation	20
STATE OF NEW MEXICO PRAMS	
Cigarette Use Before Pregnancy	22
Cigarette Use During Pregnancy	23
Cigarette Use After Pregnancy	24
Postpartum Smoking Relapse	25



PURPOSE AND DESCRIPTION

This report focuses on tobacco-related risk behaviors among American Indian (AI) adults in New Mexico. The data comes from several sources, including:

- State of New Mexico Behavioral Risk Factor Surveillance System (NM BRFSS)
- Tribal BRFSS
- Indian Health Service
- State of New Mexico Pregnancy Risk Assessment Monitoring System Survey (PRAMS)

It is important to note that in most instances, the data in this report does not differentiate between commercial and ceremonial tobacco uses.

REPORT FORMAT

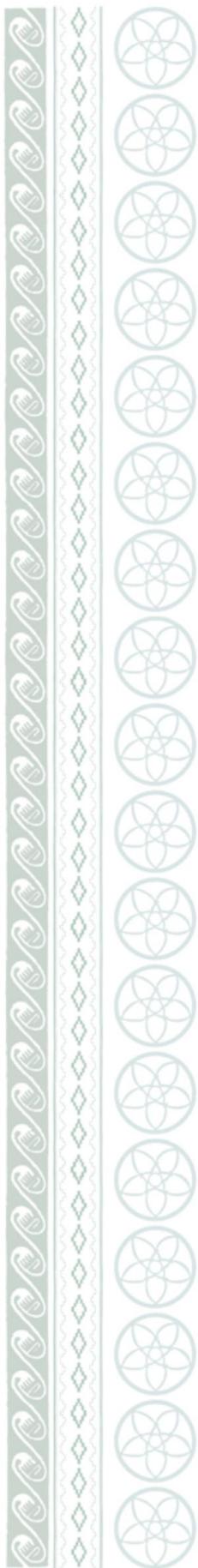
The data in this report are presented in graphs, charts and tables. Comparisons between American Indian specific data and other racial/ethnic groups in New Mexico are made when appropriate. Many tables also provide information on tobacco-related topics by age and sex.

The bar graphs in this report present the percentage of adults who reported engaging in a specific health risk behavior, preventive health practice, etc. The height of the bars show the percentage of adults reporting each behavior, and provides a quick visual comparison between different groups of adults or between American Indian adults and other racial/ethnic groups in the State of New Mexico.

A narrative description of the key findings is offered below each figure/table.

ASSISTANCE

Additional assistance with interpretation of this report is available from AASTEC staff at 1-800-658-6717.



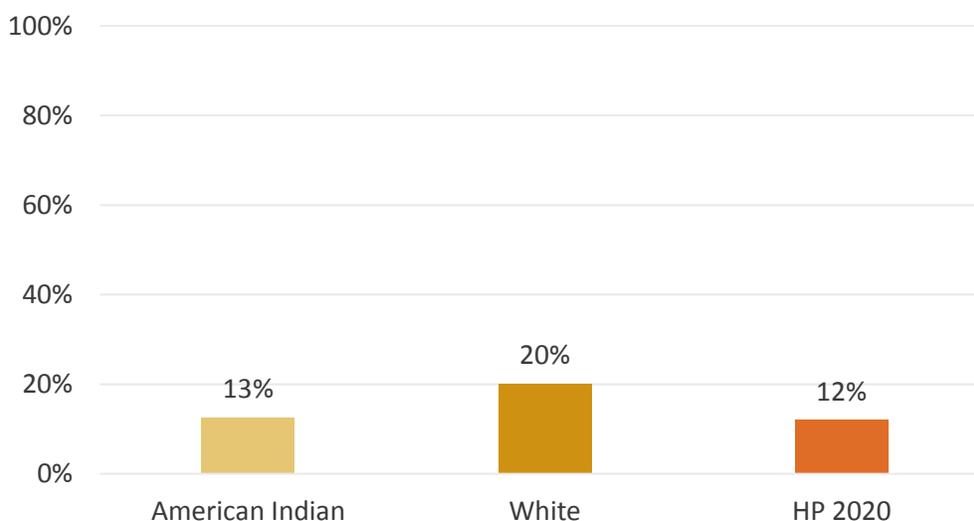
STATE OF NEW MEXICO BEHAVIORAL RISK FACTOR SURVEILLANCE SYSTEM (BRFSS)

State of New Mexico BRFSS – Tobacco Data

The New Mexico Department of Health conducts a statewide Behavioral Risk Factor Surveillance System (BRFSS) survey on an annual basis. The BRFSS is an adult health survey conducted by telephone that collects data about residents regarding chronic health conditions, use of preventive services, and health-related risk behaviors, including tobacco-use. Landline and cellphone numbers are selected at random for inclusion in this statewide survey. The data in this section of the report come from the NM BRFSS conducted during the period 2014-2015. It is important to note that tobacco-related indicators in the NM BRFSS do not distinguish between commercial and ceremonial tobacco use.

CURRENT SMOKER – BY RACE/ETHNICITY

FIGURE 1: Percent of American Indian Adults (age 18+) who Currently Smoke Cigarettes by Race/Ethnicity – New Mexico Statewide (2014-2015).

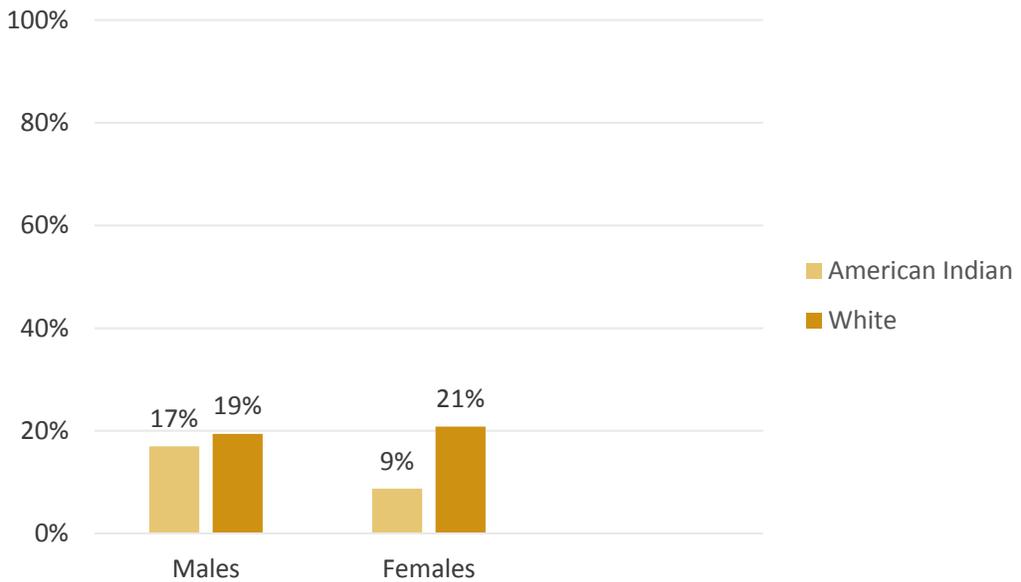


During the period 2014-2015, 13% of American Indian adults (age 18+) were current cigarette smokers. This was significantly lower than the non-Hispanic White rate in New Mexico (20%). However, both rates exceed the Healthy People 2020 national target goal of 12%.

Data Source: *New Mexico's Indicator-Based Information System (NM-IBIS); Age-adjusted.*

CURRENT SMOKER – BY GENDER

FIGURE 2: Percent of American Indian Adults (age 18+) who Currently Smoke Cigarettes by Gender – New Mexico Statewide (2014-2015).

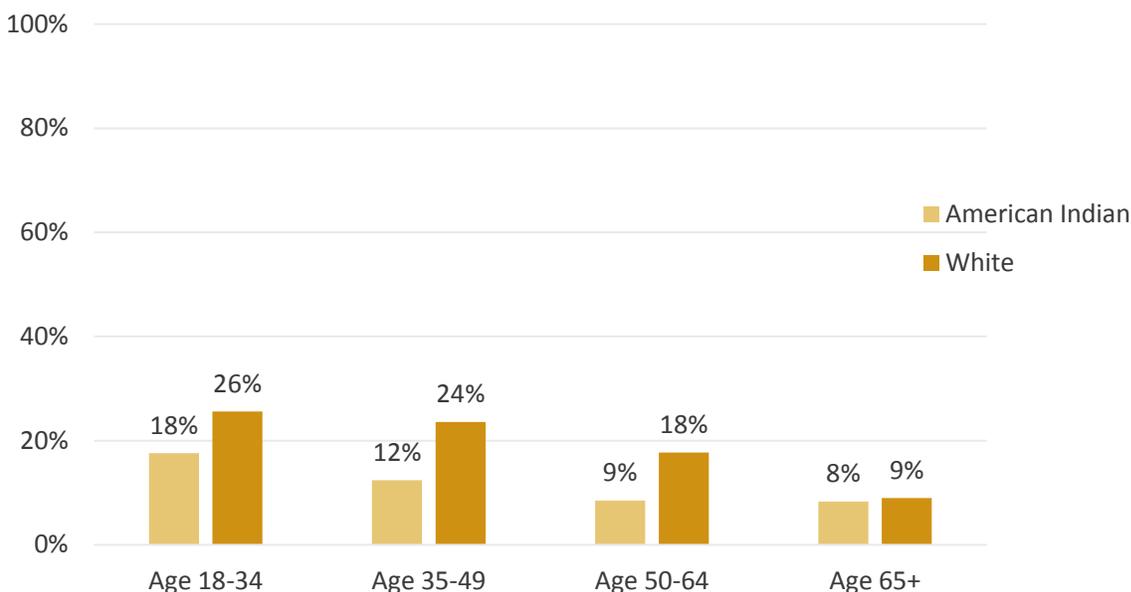


During the period 2014-2015, significantly less American Indian females (9%) currently smoke cigarettes than Non-Hispanic White females (21%) as well as American Indian males (17%). Among males, American Indian (17%) and Non-Hispanic Whites (19%) reported similar current cigarette smoking behavior.

Data Source: *New Mexico's Indicator-Based Information System (NM-IBIS); Age-adjusted.*

CURRENT SMOKER – BY AGE GROUP

FIGURE 3: Percent of American Indian Adults (age 18+) who Currently Smoke Cigarettes by Age Group – New Mexico Statewide (2014-2015).

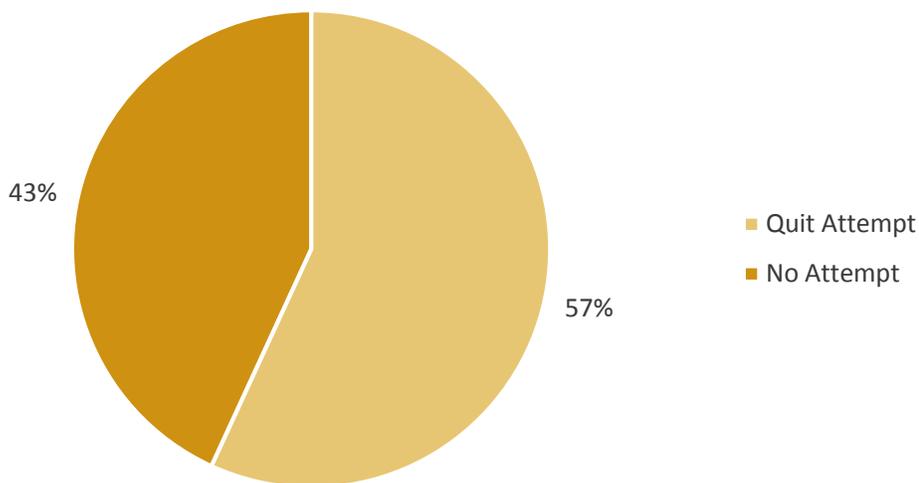


On average, as age *increases*, the rate of current cigarette use *decreases*. Among American Indian adults age 65+, only 8% currently smoke cigarettes compared to 18% of American Indian adults age 18-34. The rate of current cigarette use among American Indian adults is lower than the rate observed in the non-Hispanic White population for all age groups.

Data Source: *New Mexico's Indicator-Based Information System (NM-IBIS); Crude rate.*

QUIT ATTEMPTS

FIGURE 4: Percentage of American Indian Adult Current Smokers who Made a Quit Attempt in the Past 12 Months – New Mexico Statewide (2014-2015).

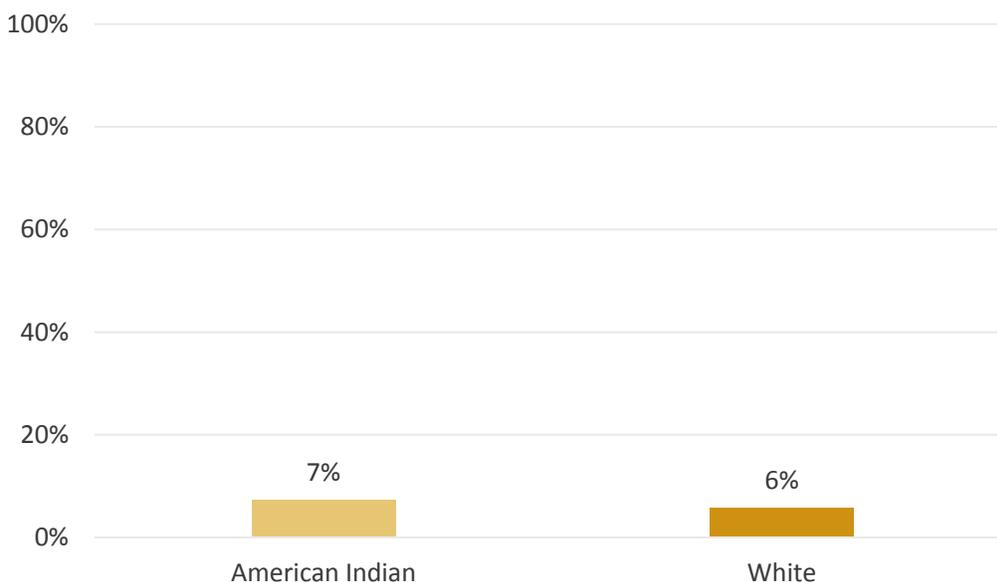


57% of American Indian adults who currently smoke made at least one quit attempt in the past 12 months. Assisting adults in successfully quitting commercial tobacco use may therefore be an important public health intervention.

Data Source: *New Mexico's Indicator-Based Information System (NM-IBIS); Age-adjusted.*

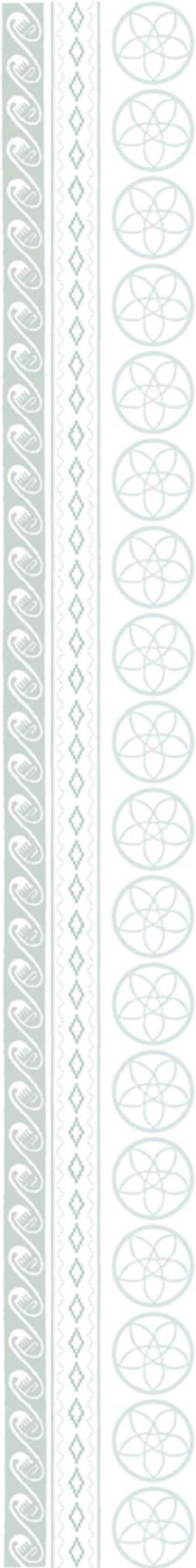
SMOKELESS TOBACCO

FIGURE 5. Percent of American Indian Adults (age 18+) who currently use smokeless tobacco by Race/Ethnicity – New Mexico Statewide (2014-2015).



Overall, relatively few American Indian adults currently use smokeless tobacco (7%). Slightly more American Indian adults currently use smokeless tobacco compared to the White population in New Mexico (6%). American Indian males (12%) were significantly more likely to currently use smokeless tobacco than American Indian females (3%).

Data Source: *New Mexico's Indicator-Based Information System (NM-IBIS); Age-adjusted.*



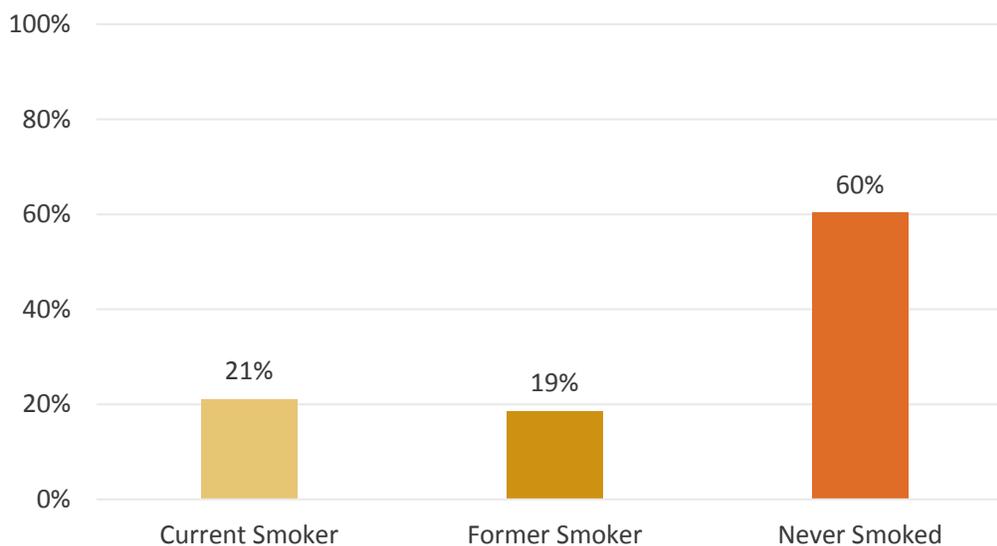
TRIBAL BEHAVIORAL RISK FACTOR SURVEILLANCE SYSTEM (BRFSS)

TRIBAL BRFSS – TOBACCO DATA

During the period 2007-2013, AASTEC partnered with 11 Tribes to conduct a household behavioral risk factor surveillance system survey (BRFSS) separate from the telephone-based State of NM BRFSS survey. A random sample of over 2,000 adult tribal members was selected to participate in this survey. The majority of these surveys was administered in-person rather than via telephone. All surveys took place with adult tribal members living in a tribal community. The population of American Indian adults in this Tribal BRFSS survey may therefore differ from those that participated in the statewide NM BRFSS survey because of the different survey administration mode and the fact that the NM BRFSS included American Indians living off-reservation and in urban settings. The data presented in this section of the report come from all participating Tribes in the AASTEC-sponsored Tribal BRFSS combined.

SMOKING STATUS

FIGURE 6: Current Smoking Status of American Indian Adults (age 18+) – Tribal BRFSS Survey 2007-2013.

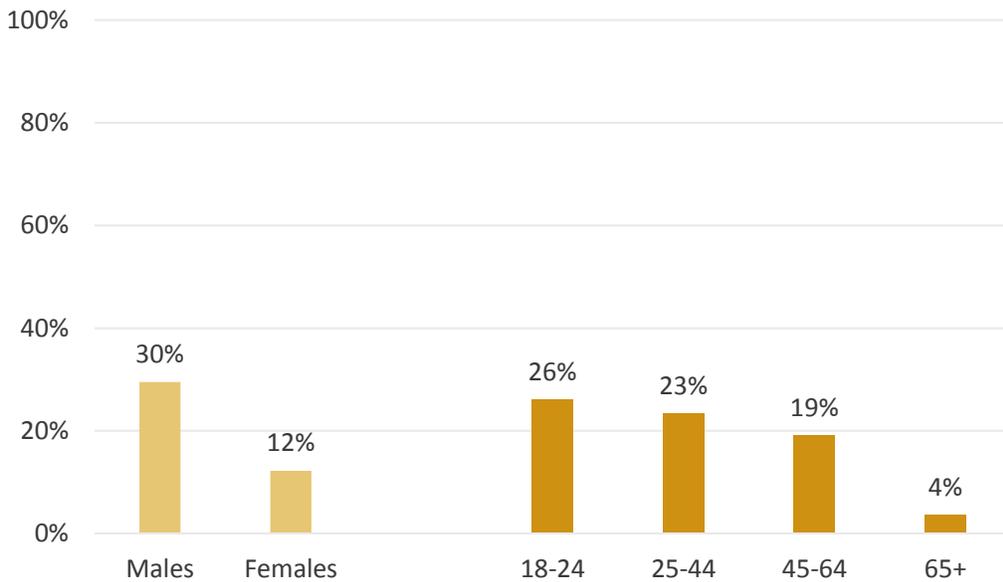


More than 1 in 5 American Indian adults (21%) from all participating communities in the Tribal BRFSS combined currently smoke cigarettes. This rate significantly exceeds the rate observed in the State of NM BRFSS survey for American Indian adults (13%) as well as the Healthy People 2020 national target goal of 12%.

Data Source: *Tribal BRFSS Survey 2007-2013*

SMOKING STATUS – BY GENDER & AGE

FIGURE 7: Current Smoking Status of American Indian Adults (age 18+) by Gender and Age – Tribal BRFSS Survey 2007-2013.

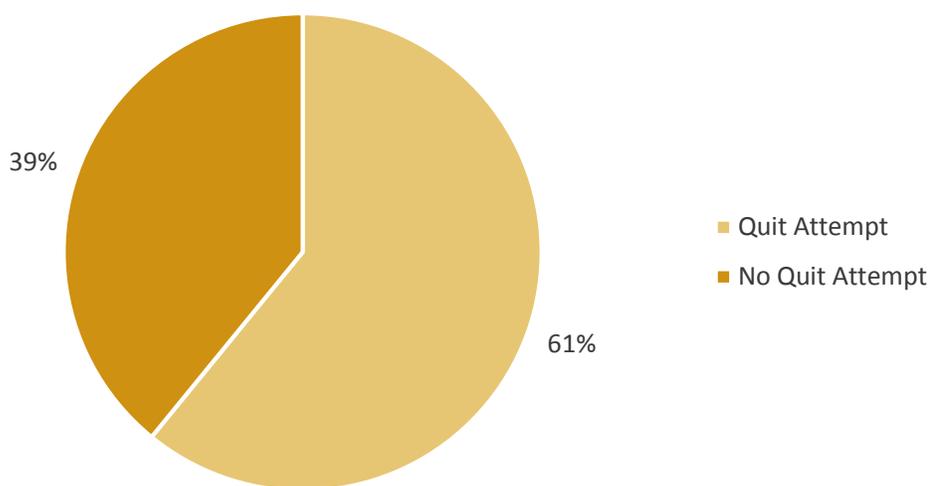


Almost 1 in 3 American Indian adult males (30%) from all Tribes combined are current cigarette smokers. This rate significantly exceeds the rate observed among American Indian female adults (12%). Tobacco use *decreases* with *increasing* age where approximately one quarter of American adults age 18-24 (26%) currently smoke compared to only 4% of American Indian adults age 65 and older.

Data Source: *Tribal BRFSS Survey 2007-2013*

QUIT ATTEMPTS

FIGURE 8: Percentage of American Indian Adult Current Smokers who Made a Quit Attempt in the Past 12 Months – Tribal BRFSS Survey (2007-2013).

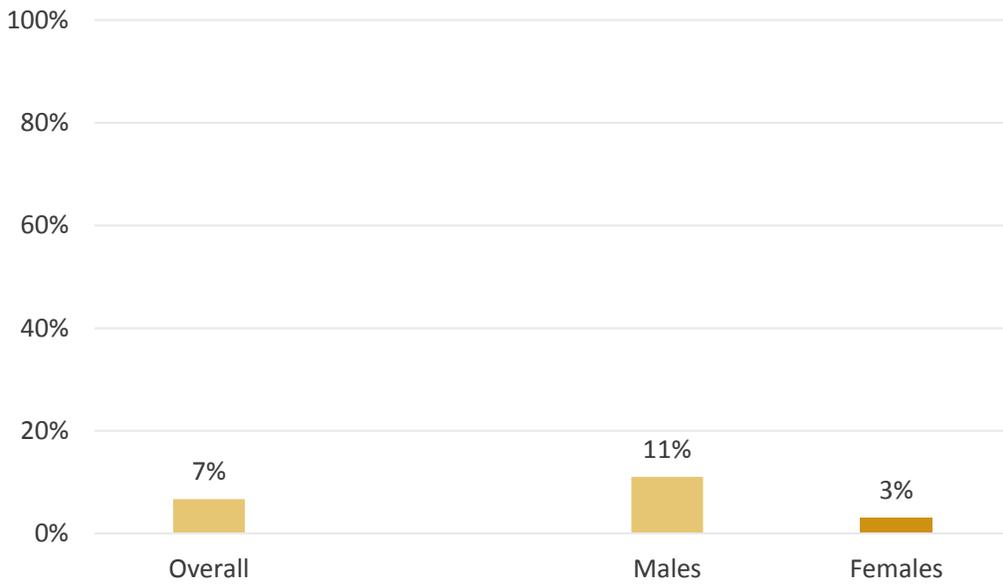


More than 3 in 5 (61%) of American Indian adults who currently smoke made at least one quit attempt in the past 12 months. Assisting adults in successfully quitting commercial tobacco use may therefore be an important public health intervention.

Data Source: *Tribal BRFSS Survey 2007-2013*

CHEWING TOBACCO

FIGURE 9: Current Chewing Tobacco Use among American Indian Adults (age 18+) – Tribal BRFSS Survey (2007-2013).



The percentage of American Indian adults (age 18+) who currently use chewing tobacco is 6.7%. American Indian males were significantly more likely to use chewing tobacco than American Indian females (11.4% vs. 2.5% respectively).

Data Source: *Tribal BRFSS Survey 2007-2013*

OTHER TOBACCO-RELATED MEASURES

TABLE 1. Health Care System Tobacco-Related Measures for American Indian Adults (age 18+) – Tribal BRFSS Survey (2007-2013).

Measure	Percentage	95% CI
Health Care Provider Talked to Current Smoker about the Risks of Tobacco Use	61.7%	57.5 – 66.0
Health Care Provider Advised Current Smoker to Stop Smoking	35.4%	31.2 – 39.5
Current Smokers who would Like More Tobacco Cessation Services at IHS/Tribal Health Facility	57.5%	53.1 – 61.9

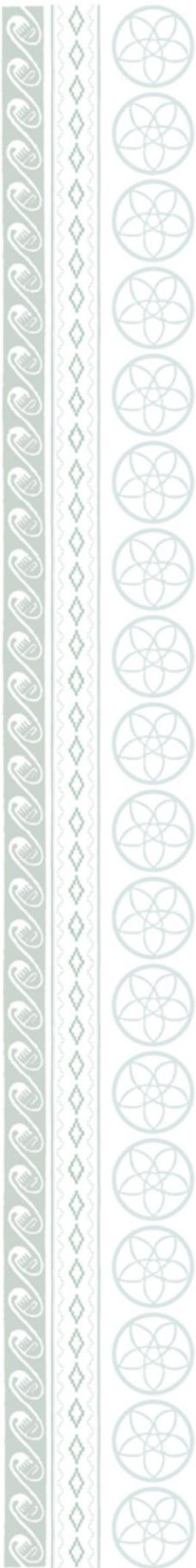
Almost two-thirds (61.7%) of American Indian adults who currently smoke had a health care provider talk with them about the risks of tobacco use, but only about one-third (35.4%) were directly advised to stop smoking by their health care provider. A majority of American Indian adults who currently smoke (57.5%) indicated that they would like more services at their local IHS/Tribal health facility to help them stop smoking.

A Note about Confidence Intervals

95% CI stands for the 95% Confidence Interval. Confidence intervals are often reported with survey data when only some people in a community are interviewed. Because this survey included a random sample of community adults, not the whole population, 95% confidence intervals were reported for each finding highlighted in the data tables.

The percentages highlighted in this report are best estimates of the “true” percentages for the population. The confidence interval is a measure of certainty associated with reported findings. For example, if the percentage of adults who are overweight is reported as 30% (95% CI 28.2 - 32.1), 30% is the best estimate of the number of adults whom are overweight in the population, and it is with 95% confidence that the “true” value for the population is between 28.2% and 32.1%.

Data Source: *Tribal BRFSS Survey 2007-2013*



INDIAN HEALTH SERVICE ALBUQUERQUE AREA CLINICAL DATA

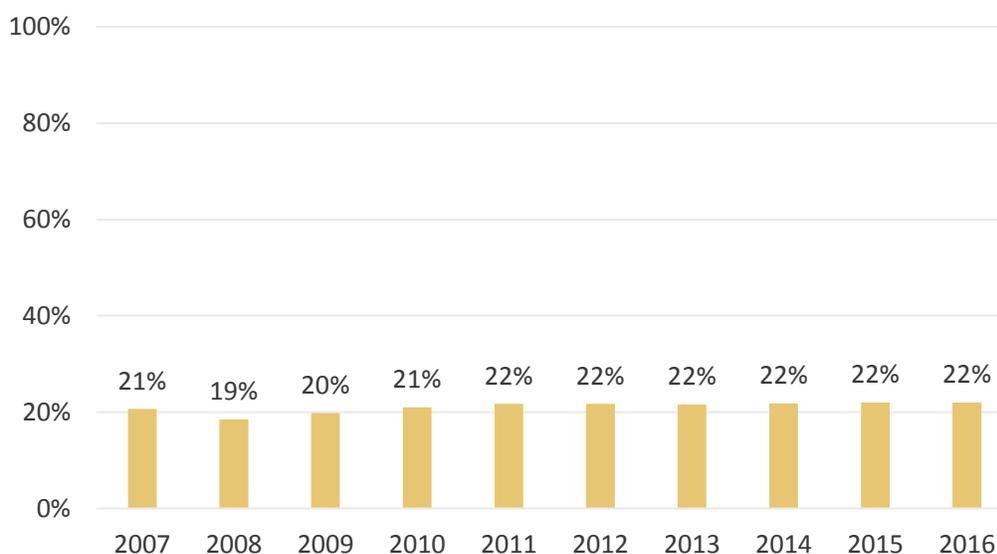
Tobacco Use Among American Indian Adults in New Mexico

Albuquerque Area Indian Health Service – Tobacco Data

Tobacco-specific data for American Indian adults is also available from the Indian Health Service clinical data systems. The data in this section come from the 2013 Albuquerque Area Indian Health Service GPRA (Government Performance and Results Act) Report and the Indian Health Service EpiDataMart for all adult users of health care services within the IHS Albuquerque Area.

TOBACCO USE

FIGURE 10: Trends in Tobacco Use Among American Indian Adults who are Active Users of Health Care Facilities within the IHS Albuquerque Area (2007-2016).

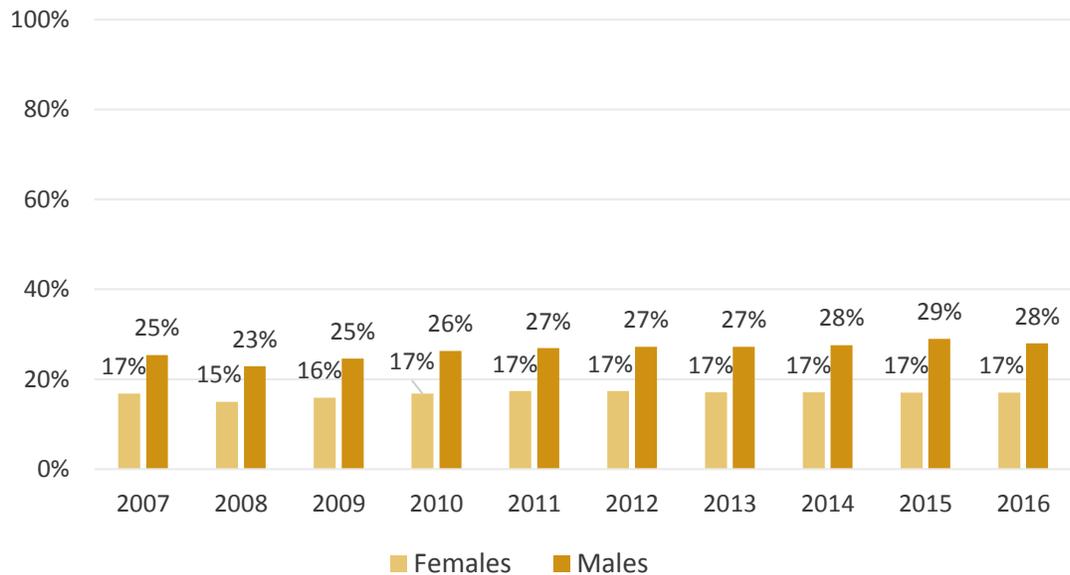


The rate of tobacco use among American Indian adults who are active users in an IHS/Tribal health facility within the IHS Albuquerque Area has remained relatively steady for the 10-year period from 2007-2014. In 2016, 22% of American Indian adults indicated that they are current tobacco users. This rate was similar to the rate observed in the AASTEC-sponsored Tribal BRFSS survey (21%), which took place during the 2007-2013 time period. This rate significantly exceeds the Healthy People 2020 target of 12%.

Source: *Indian Health Service EpiDataMart*

TOBACCO USE – BY GENDER

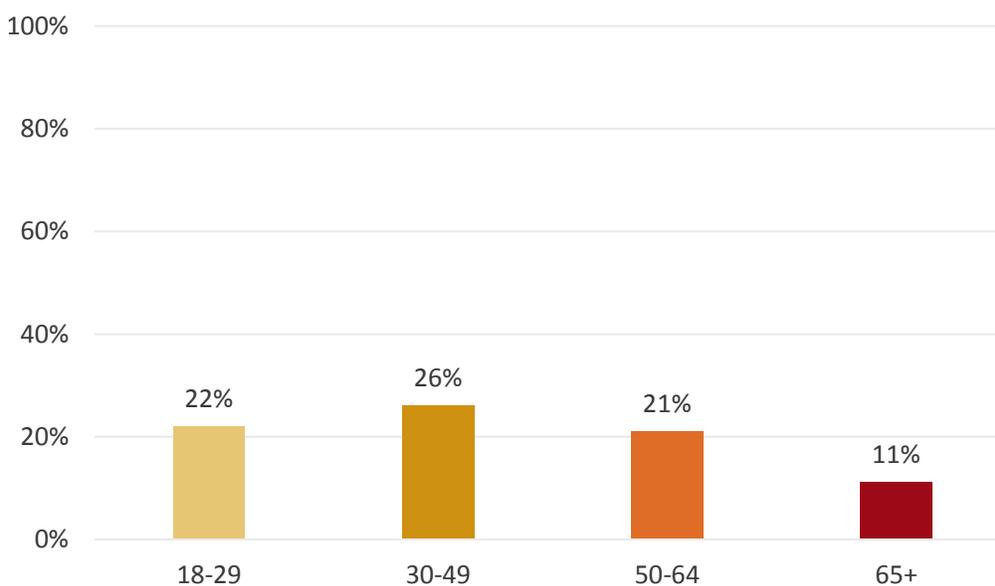
FIGURE 11: Trends in Tobacco Use among American Indian Adults who are Active Users at Health Care Facilities within the IHS Albuquerque Area – By Gender (2007-2016).



The rate of tobacco use by gender among American Indian adults in the IHS Albuquerque Area has remained relatively steady for the 10-year period from 2007-2016. American Indian males are significantly more likely to use tobacco than females. In 2016, more than 1 in 4 adult American Indian males used tobacco (28%), compared to 17% of American Indian females.

Source: *Indian Health Service EpiDataMart*

TOBACCO USE – BY AGE

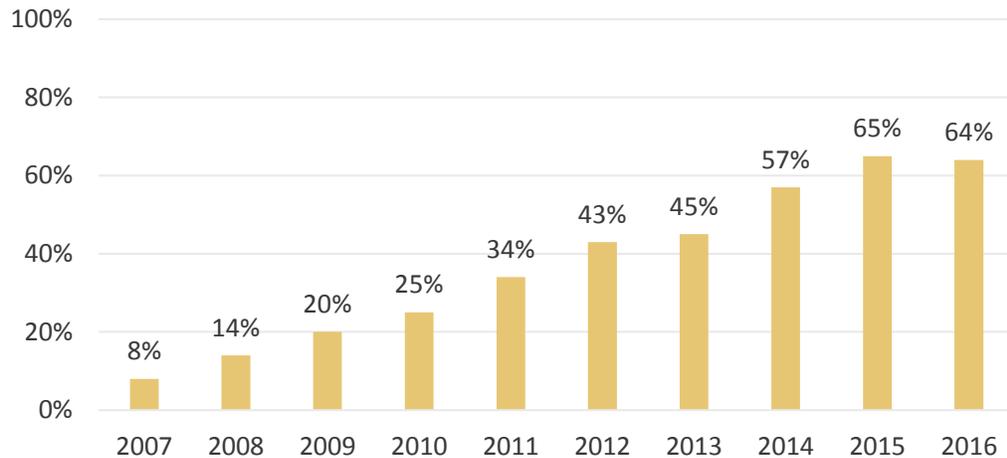
FIGURE 12: Tobacco Use among American Indian Adults who are Active Users at Health Care Facilities in the IHS Albuquerque Area – By Age Group (2016).

Among American Indian adults, those in younger age groups (age 18-29 and 30-49) have the highest rates of tobacco use within the IHS Albuquerque Area, 22% and 26%, respectively. The lowest rate of tobacco use was observed among American Indian adults age 65 and older (11%).

Source: *Indian Health Service EpiDataMart*

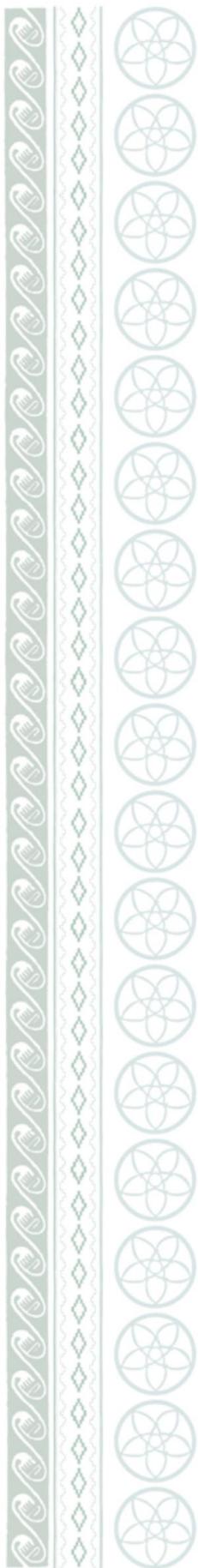
TOBACCO CESSATION

FIGURE 13: Trends in Percentage of Tobacco-Using Patients in the Indian Health Service Albuquerque Area who Received Tobacco Cessation Intervention within the Past Year (2007-2016).



Since 2007, the percentage of American Indian current smokers in the IHS Albuquerque Area who received tobacco cessation intervention at their local IHS or tribal health facility has increased each year. In 2016, almost two-thirds (64%) of American Indian adult smokers received some type of tobacco cessation intervention at their local IHS/Tribal health facility.

Source: *IHS GPRA Report 2008-2016*



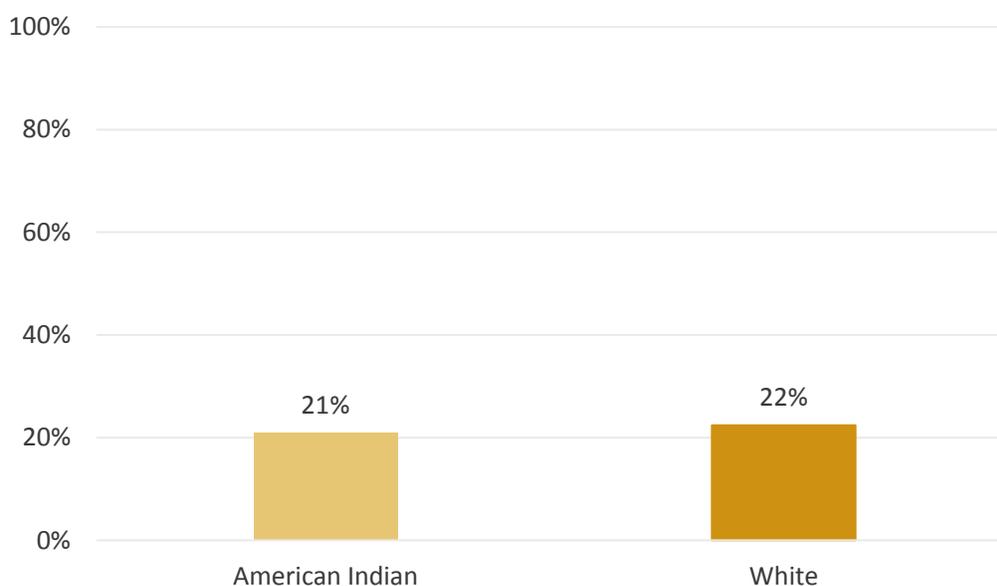
STATE OF NEW MEXICO PREGNANCY RISK ASSESSMENT MONITORING SYSTEM (PRAMS)

State Of New Mexico PRAMS – Tobacco Data

The Pregnancy Risk Assessment Monitoring System (PRAMS) survey is a national health survey led by the Centers for Disease Control and Prevention (CDC) in partnership with states. In New Mexico, the survey is mailed to a random sample of women two to six months after delivering their baby. The survey asks mothers about their behaviors and experiences before, during and after pregnancy, including tobacco use. The data presented in this section of the report comes from American Indian new mothers in New Mexico who delivered their baby during the period 2011 to 2014 combined. The PRAMS survey does not distinguish between commercial and ceremonial tobacco use.

CIGARETTE USE BEFORE PREGNANCY

FIGURE 14: Percentage of Women in New Mexico who Smoked Cigarettes 3 Months Before Pregnancy – By Race/Ethnicity (2011-2014)

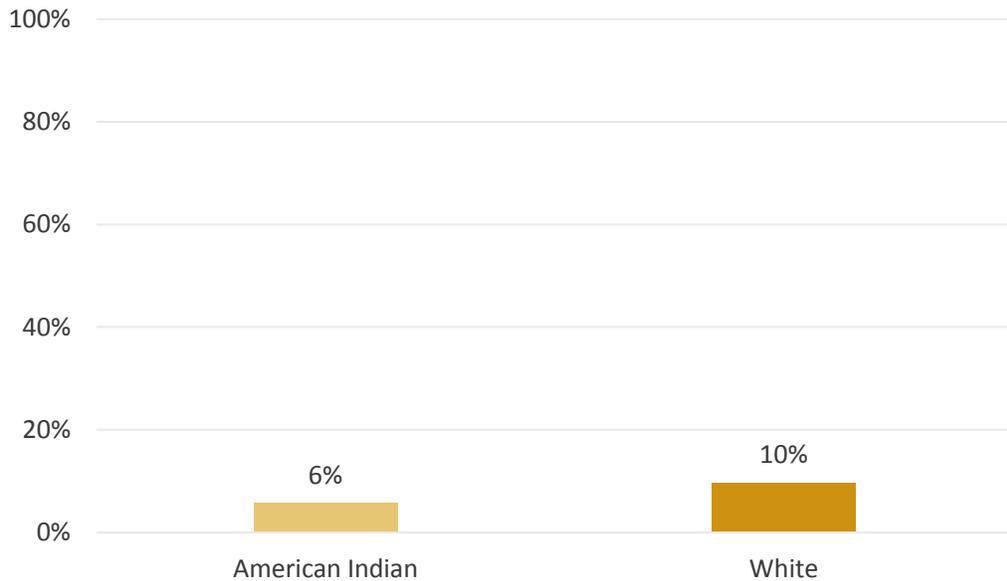


During the period 2011-2014, 21% of American Indian new mothers indicated that they smoked cigarettes during the 3 months before their pregnancy. This rate was similar to that observed among non-Hispanic White women (22%).

Source: *NM PRAMS, 2011-2014*

CIGARETTE USE DURING PREGNANCY

FIGURE 15: Percentage of Women in New Mexico who Smoked Cigarettes During the Last 3 Months of their Pregnancy – By Race/Ethnicity (2011-2014)

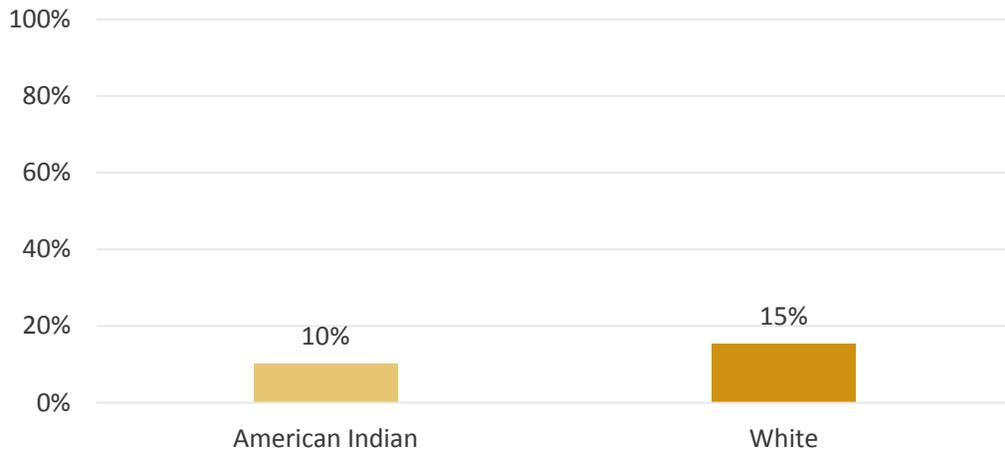


During the period 2011-2014, 6% of American Indian new mothers indicated that they smoked cigarettes during the last 3 months of their pregnancy. This rate was significantly lower than that observed among non-Hispanic White women (10%).

Source: *NM PRAMS, 2011-2014*

CIGARETTE USE AFTER PREGNANCY

FIGURE 16: Percentage of Women in New Mexico who Smoked Cigarettes After their Pregnancy – By Race/Ethnicity (2011-2014)

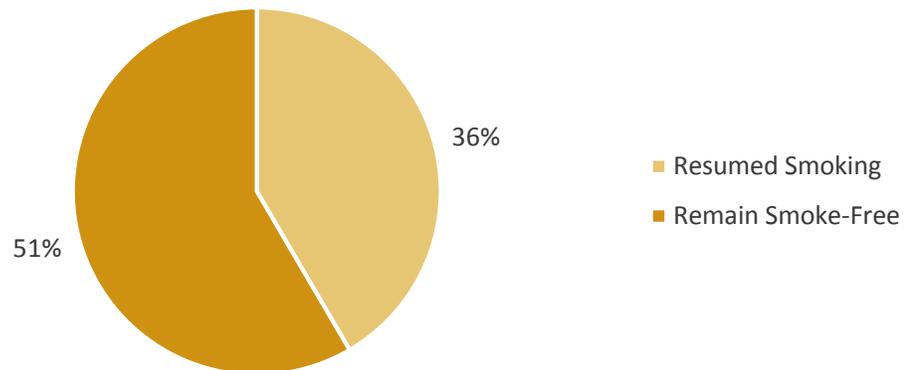


During the period 2011-2014, 10% of American Indian new mothers smoked cigarettes after their pregnancy. This rate was approximately one-half of percentage of American Indian women who smoked cigarettes before pregnancy (21%) and significantly lower than that observed among non-Hispanic White women (15%).

Source: *NM PRAMS, 2011-2014*

POSTPARTUM SMOKING RELAPSE

FIGURE 17: Percentage of American Indian Women in New Mexico who Smoked Cigarettes Before Pregnancy and Resumed Smoking after Pregnancy (2011-2014).



Over one-third (36%) of American Indian mothers who smoked cigarettes before their pregnancy (and quit during pregnancy), resumed smoking 2-6 months after pregnancy. This data suggests that the maintenance of cessation following pregnancy remains an important public health challenge for American Indian women who smoked cigarettes prior to pregnancy.

Source: *NM PRAMS, 2011-2014*



Albuquerque Area Southwest Tribal Epidemiology Center
Albuquerque Area Indian Health Board