According to the results of the 2002-03 Los Angeles County Health Survey, 15.6% of adults 18 years and older (or an estimated 1,066,000 adults) currently smoke cigarettes, a significant decrease from the 18% of adults who reported smoking in 1997 and 1999 (Table 1). This decline means that approximately 175,000 fewer adults are smoking in LA County than if the rate of smoking had remained the same as in previous years. The smoking rate is now at the lowest level seen since the late 1980s when tracking was first initiated statewide, and is substantially lower than the national smoking prevalence of 23%.

### Breaking the Habit

Nearly three out of four (71%) adult smokers in Los Angeles County reported cutting down or trying to quit (stopping smoking for more than one day) smoking during the past year. The percentage of smokers who reported cutting down or trying to quit was highest among African-Americans (77%) and Asians/Pacific Islanders (77%) followed by Latinos (75%) and Whites (64%). Young adults aged 18-24 had the highest attempt rate (79%) for smoking reduction and/or cessation (Figure 1). The most frequently reported method of trying to quit was “cold turkey” (without the help of any outside aids), followed by nicotine replacement (e.g., nicotine patch, gum, or inhaler) and use of self-help materials (Figure 2).

Findings also revealed that approximately half (51%) of current smokers who had visited their health care

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1. Calculation based on 2002 population estimates.
practitioner within the last year were advised to quit smoking. CDC’s Clinical Best Practice Guidelines encourage health care practitioners to make screening and counseling for cigarette use a routine part of patient visits. These brief interventions could result in substantial reductions in smoking rates.

Reasons for Decline

The observed declines in smoking and evidence of smokers cutting down and/or trying to quit highlight the continued success of local and statewide efforts to reduce tobacco use. Stricter tobacco control laws have contributed to the decline in smoking. In addition, the higher prices of tobacco products may have produced further reductions in smoking (since 1999, the cost of cigarettes in California has increased by $1.20 per pack). California’s tobacco control efforts have been funded by the passage of Proposition 99 (in 1989) and Proposition 10 (in 1999), which increased the tax on cigarettes and allocated part of the resulting revenues for community-based tobacco prevention and for tobacco-related disease research. One example of the many funded efforts to reduce tobacco use is the statewide media campaign. Utilizing culturally relevant methods to target both adults and youth, this campaign has aimed to shift social norms against tobacco use. Studies have shown that the media campaign was directly responsible for reducing cigarette sales, increasing cessation attempts among smokers, and raising awareness about the dangers of secondhand smoke.

Disparities in Smoking

The prevalence of smoking in 2002 was nearly two times higher among men (20%) than women (11%) (Figures 3a and 3b). Among men, the prevalence was similar among all racial/ethnic groups, although both Whites and Latinos showed significant declines in smoking from 1997 to 2002 (Figure 3a). Among women, the prevalence was more than two times higher among African-Americans (19%) and Whites (16%) than among
is a national public health organization focusing on nicotine. It is a World Health Organization (WHO) cabinet that leads and coordinates strategic efforts to prevent smoking and tobacco-related diseases, and to reduce tobacco use and exposure to secondhand tobacco smoke. The two main goals are to provide all young people with the knowledge and tools to reject tobacco and to eliminate disparities in access to tobacco prevention and cessation services.

http://www.dhs.ca.gov/tobacco/

American Legacy Foundation is a national public health organization dedicated to helping young people quit using tobacco. The two main goals are to provide all young people with the knowledge and tools to reject tobacco and to eliminate disparities in access to tobacco prevention and cessation services.

http://www.americanlegacy.org/

Centers for Disease Control and Prevention (CDC), Office on Smoking and Health (OSH) leads and coordinates strategic efforts to prevent tobacco use among youth, promote smoking cessation among youth and adults, protect nonsmokers from secondhand smoke, and eliminate tobacco-related health disparities.

http://www.cdc.gov/tobacco/

National Institute on Drug Abuse (NIDA) service focusing on nicotine addiction and other dangers of tobacco use. NIDA is a part of the National Institutes of Health (NIH), which is the principal biomedical and behavioral research agency of the United States Government.

http://smoking.drugabuse.gov/

Tobacco Free Initiative (TFI) is a World Health Organization (WHO) cabinet project created to focus international attention, resources, and action on the global tobacco pandemic that kills 4.9 million people per year.

http://www.who.int/tobacco/en/

Cigarette smoking is the leading preventable cause of death (causing approximately 440,000 deaths in the U.S. each year) and exposure to secondhand smoke kills up to 65,000 Americans each year. Despite the efforts to reduce the smoking burden, economic costs related to smoking in LA County are estimated at $4.3 billion each year, including $2.3 billion in health care expenditures and $2.0 billion in indirect costs (e.g., lost productivity due to illness and premature death).

Results of the survey indicate that nearly one-in-six young adults aged 18 to 24 years reported cigarette smoking. Also, 48% of all adult smokers reported that they started smoking cigarettes fairly regularly before the age of 18. Results from the 2003 Youth Risk Behavior Survey (YRBS) found that 14% of high school students in the Los Angeles Unified School District have smoked cigarettes in the past month. These findings highlight the critical importance of...
maintaining tobacco control and prevention interventions among adolescents and young adults.

The Healthy People 2010 national goal is to reduce cigarette smoking among adults (aged 18 years and older) to 12% or less. In Los Angeles County, only two population groups currently meet this goal—Latinas and Asian/Pacific Islander women. In order to reduce the substantial toll of tobacco-related illness and death across all population subgroups, continued vigorous and comprehensive tobacco control efforts are needed. Such efforts should include countering pro-tobacco industry influences, decreasing the availability of tobacco products, reducing exposure to secondhand smoke, and promoting smoking cessation services that combine tobacco education and pharmacologic treatment.