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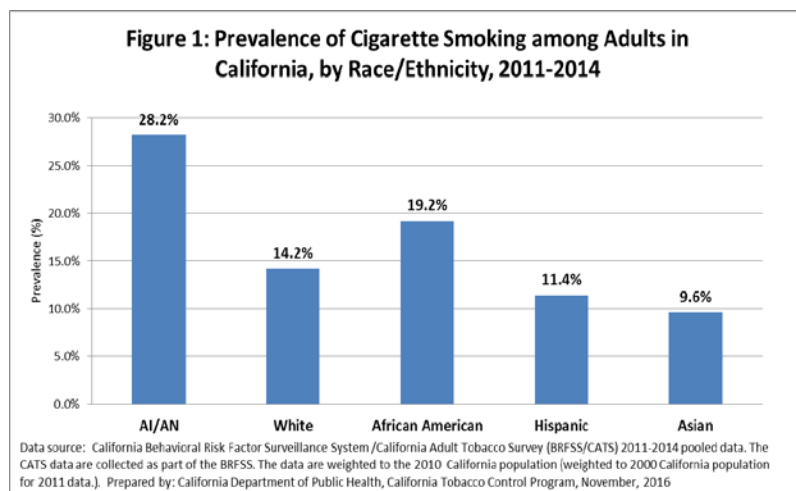
Tobacco Use among American Indian and Alaska Natives Populations

Tobacco use among American Indians and Alaska Natives in the United States

- American Indians and Alaska Natives (AI/AN) have the highest current cigarette smoking¹ rate of all other racial/ethnic groups (Whites, African Americans, Hispanics, Asians, and multiracial) in the United States (U.S.). In 2014, 29.2 percent of AI/AN adults in the U.S. smoked cigarettes, compared with 16.8 percent of all U.S. adults.[1]
- Over the last ten years, smoking rates among AI/AN women increased while smoking rates among AI/AN men decreased. In 2014, the cigarette smoking rate was about one in three among AI/AN women (32.5%), which reflected a 20.9 percent increase compared to the rate in 2005 (26.8%), and one in four among AI/AN men (25.6%), which reflected a 31.7 percent decrease compared to 2005 (37.5%).[1]
- One in four (26%) AI/AN women smoke cigarettes during pregnancy, the highest rate of any racial/ethnic group.[2]
- In 2015, 12.2 percent of AI/AN high school students were current cigarette smokers, while the smoking rate among all U.S. high school students was 10.8 percent.[3]
- In 2015, 9.3 percent of AI/AN high school students were current smokeless tobacco² users, equal to the rate for Whites, and higher than the rate for Hispanics (4.5%), African Americans (3.7%), and Asian Americans (3.2%).[3]

Tobacco use among American Indians and Alaska Natives in California³

- **Tobacco Use Rates**
 - From 2011-2014, AI/ANs in California had the highest cigarette smoking rate (28.2%) of any racial/ethnic group, including Whites (14.2%), African Americans (19.2%), Hispanics (11.4%), and Asians (9.6%) (Fig. 1). [4]



¹ Persons who reported smoking ≥ 100 cigarettes during their lifetime and who, at the time of interview, reported smoking every day or some days.

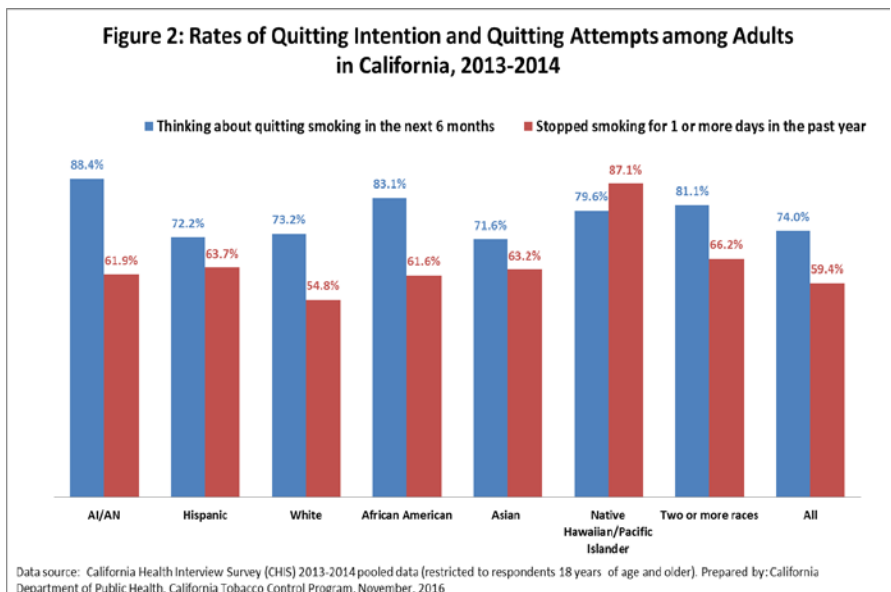
² Using chewing tobacco, snuff, or dip on at least 1 day during the 30 days before the survey

³ Most current California data were used where possible.

- During 2012-2014, 29.1 percent of California adult smokers reported that they usually smoked menthol cigarettes. AI/AN smokers had the second highest proportion (50.8%) of menthol cigarette use, after African American cigarette smokers (71.8%).[5]
- During 2012-2014, 6.6 percent of AI/AN adults were e-cigarette users, which was significantly higher than the overall rate of 2.9 percent among all California adults.[5]
- During 2013-2014, 18.4 percent of California AI/AN adult e-cigarette users reported using flavored³ e-cigarettes in the past six months, compared to 8.8 percent of White, 11.2 percent African American, 11.2 percent of Hispanic, and 14.1 percent of other racial/ethnic groups. However, AI/AN adults had a lower rate of using other flavored tobacco products⁴ (3.7%) than any other racial/ethnic groups.[5]
- During 2012-2014, the prevalence of cigarette smoking before (28.6%), during (9.0%), and after pregnancy (18.0%) among California AI/AN women with a live birth was significantly higher than the rates of all California women with a live birth before (11.7%), during (2.7%), and after pregnancy (5.6%).[6]

- **Cessation**

- While 88.4 percent of AI/AN cigarette smokers reported they intended to quit smoking in 2013-2014, more than any other racial/ethnic group, they made fewer quit attempts than any group except Whites, and African Americans in 2013-2014 (Fig. 2).[4]



- **Secondhand Smoke**

- During 2012-2014, 65.8 percent of AI/AN adults reported a smoke-free home where smoking was completely banned in their household, compared to 75.1 percent of all California adults.[5]

⁴ “Flavored” tobacco products are any tobacco product that contains an additive that creates a distinct taste or smell, such as the taste or smell of fruit, chocolate, vanilla, or honey.

⁵ “Other tobacco products” include chewing tobacco, snuff/dip, cigars/cigarillos/little cigars, and hookah.

- During 2012-2014, one in five (20.1%) AI/AN adults reported either no or few restrictions⁶ on smoking in the home, compared to one in seven (15.9%) among California adults overall.[5]
- During 2012-2014, 67.9 percent of California AI/AN adults reported that they have been exposed to tobacco secondhand smoke in the past two weeks, which was the highest rate among all racial/ethnic groups.[5]
- *Youth*
 - In 2011-2012, 19.6 percent of AI/AN middle school and high school students in California smoked cigarettes in the past 30 days, higher than the rate for Whites (11.2%), African Americans (8.1%), Hispanics (9.6%), and Asian/Pacific Islanders (5.4%).[7]
 - In 2011-2012, 44.6 percent of AI/AN adolescent smokers typically smoked menthol cigarettes, which was slightly lower than the rate of the general California adolescent population (47.8%).[7]
 - In 2011-2012, 27.8 percent of AI/AN high school students currently used other tobacco products, which was the highest among all racial/ethnic groups.[7]

Tobacco Use Health Consequences among American Indians and Alaska Natives

- Heart disease is the leading cause of death among AI/ANs, for which tobacco use is an important risk factor.[8] Heart disease death rates for AI/ANs show geographic disparities, with the highest rates occurring primarily in Northern Plains states, including North and South Dakota, as well as in Wisconsin and Michigan.[9]
- AI/ANs die from heart disease at a younger age than other racial/ethnic groups in the U.S.: 36 percent of those who die of heart disease die before age 65, compared to the rate of 16.8 percent for the general U.S. population.[10]
- Cancer is the second leading cause of death among AI/ANs, [8] with lung cancer as the second most common type of cancer diagnosis and the leading cause of cancer death.[11, 12]
- From 2001-2009, the vast majority of lung cancer deaths (88% for men, 84% for women) were attributable to smoking among AI/ANs over age 35 and living in Indian Health Service Contract Health Service Delivery Area⁷ counties.[13]
- Lung cancer rates among AI/ANs vary greatly by tribal region. Alaska and Northern Plains tribal members, who have the highest smoking prevalence among American Indians, also have the highest rates of lung cancer and heart disease.[14, 15]
- Lung cancer incidence in California's general population aged 35 and over decreased by 36.7 percent from 1988 to 2013. [12] However, the incidence rate in California's AI/AN 35-and-over population significantly increased by 33.4 percent from 77 per 100,000 in 1988 to 113.4 per 100,000 in 2013.[16]

⁶ "Few restrictions" means smoking was allowed in some rooms.

⁷ Indian Health Service Contract Health Service Delivery Area is the geographic area within which contract health services will be made available to the members of an Indian community who reside in the area. More details: https://www.ihs.gov/ihtm/index.cfm?module=dsp_ihm_pc_p2c3

- In 2013-2014, California AI/ANs had the highest asthma rate (14.3%) of any racial/ethnic groups. The finding that AI/AN populations are hard hit by asthma has been consistent over time.[4]
- In 2014, California AI/AN adults aged 18 and over had the second highest asthma emergency department (ED) visit rate (38.2 per 10,000) after African Americans (139.9 per 10,000). The rate among AI/AN youth aged 17 and under (61.6 per 10,000) ranked third after African American (278.8 per 10,000) and Hispanic (81.9 per 10,000) youth.[17]
- In 2011, the prevalence of chronic obstructive pulmonary diseases (COPD) among AI/ANs in the U.S. was 11.0 percent, which was significantly higher than the rates of White (6.9%), African American (6.5%), and Hispanic (4.1%) populations.[18]
- In 2014, California AI/AN adults 45 years and older had the highest mortality rate with COPD as underlying cause (128 per 10,000) of all racial/ethnic groups.[19]

Considerations for Tobacco Control Work Among American Indians and Alaska Natives

- 2010 U.S. Census data showed that California had the largest AI/AN population in the U.S. with over 360,000 residents.[20] According to the most recent California census estimate, conducted in 2015, California's AI/AN population has risen to around 665,000 people, nearly double the 2010 population.[21]
- Indian tribes have the right to make their own laws and be governed by them, therefore, many California laws, including tobacco laws regarding taxation, sales to individuals under 21, distribution of discount coupons, and clean indoor air, do not apply to on-reservation smoking or on-reservation sales to tribal members.[22, 23] Some California tribes have entered into compacts with the state that set a minimum sales age.
- For years the tobacco industry has strategically targeted AI/ANs and suggested a link between traditional and commercial tobacco, by funding cultural events like powwows and rodeos, and by using the imagery of traditional American Indians to promote brands like Natural American Spirit, Seneca, Cheyenne, and Smokin Joes.[24]
- Other states have taken a variety of policy approaches to regulate tobacco sales on tribal lands: 20 of the 34 states with tribal lands address tribal tobacco sales; 14 states address intergovernmental compacts (of which 11 are tobacco specific); 15 states address tribal tax stamps (of which Iowa and Wyoming prohibit stamping of tribally sold products to differentiate tribal from non-tribal sales); prepayment of excise tax is required in 12 states; and six states use quotas (allotments) to limit tax-free tobacco available to tribes.[25]

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