Secondhand Smoke and Vapor Exposure among Vermont Adults

August 2024

No level of secondhand smoke exposure is safe, with even brief exposure linked to increased risk of stroke and heart attacks among adults as well as respiratory issues for youth.

Additionally, vapor from e-cigarettes usually contain harmful substances such as nicotine and cancer-causing chemicals.²

From 1964 to 2014, 2.5 million Americans who did not smoke died from secondhand smoke exposure.¹ Approximately 7,300 deaths from lung cancer and 34,000 deaths from heart disease are attributable to secondhand smoke exposure annually.

This brief presents data from the <u>2022 Vermont Adult Tobacco</u> <u>Survey (ATS)</u> and all secondhand smoke and vapor exposure (SHS) estimates are reported in the past week at the time of survey completion.

KEY POINTS

- Four in ten Vermont adults report exposure to secondhand smoke or vapor in the past week, with half being exposed in public.
- Adults 18-34, insured by Medicaid, or living in multi-unit housing report higher rates of secondhand smoke or vapor exposure.
- Exposure to secondhand smoke or vapor is associated with increased risk of poor mental and general health and higher rates of substance use.

Vermont SHS Exposure Prevalence

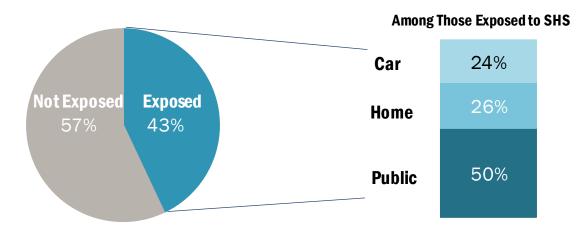


Note: Comparison between years should be made with caution due to SHS definition changes.

In 2022, 43% of adults reported SHS in the past seven days in the home, car, or a public setting, lower than the 52% who reported exposure to secondhand smoke in 2014.

Half of Adults Exposed to SHS are Exposed in Public

Among the two in five adults who are exposed to SHS, half are exposed in a public setting, with around a quarter exposed in the home or the car.

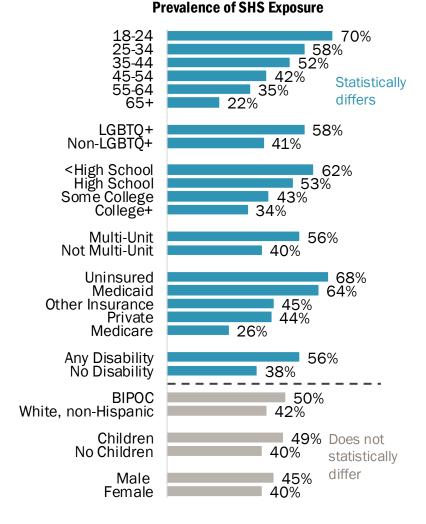


Demographics of SHS Exposure

Statistically, SHS exposure differs by age, sexual orientation/gender identity (LGBTQ+), educational attainment, living situation, insurance status and disability status.

- Adults ages 18-34 are more likely to report exposure to SHS than those 45+.
- Adults with less than a high school education are more likely to be exposed to SHS than those with at least a college education.
- Uninsured adults and those insured by Medicaid are more likely to report exposure to SHS than those with other insurance or insured privately.
- LGBTQ+ adults, those who live in multi-unit housing, and those with a disability are more likely to report SHS exposure.

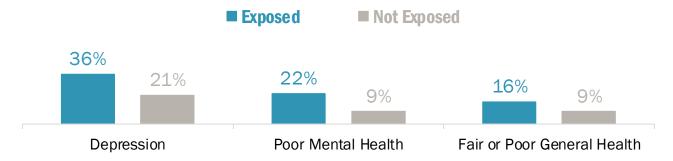
Exposure to SHS does not differ statistically by race/ethnicity, having children under age 18, or sex assigned at birth.



Adults who Report SHS Exposure Experience Poorer Health

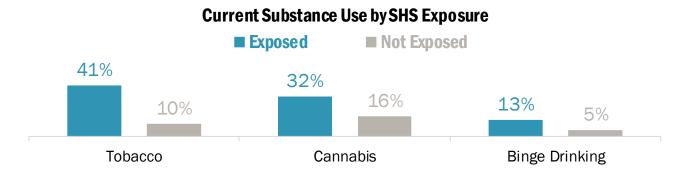
Adults who are exposed to SHS are significantly more likely to report having been diagnosed with a depressive disorder than adults who are not exposed to SHS. Compared to unexposed adults, adults experiencing SHS are nearly twice as likely to report fair or poor general health and more than two times as likely to report poor mental health, both statistically significant differences.

General and Mental Health Statuses by SHS Exposure



Adults Exposed to SHS Use Substances at Higher Rates

Adults who report exposure to SHS are two to four times more likely to currently use tobacco, cannabis, or binge drink, all statistically significant differences.



Secondhand Smoke Policy and Progress in Vermont

Vermont has been at the forefront of legislation around secondhand smoke and vapor exposure, passing multiple pieces of legislation in the past decade to reduce exposure.

- 2014: Act 135 extends secondhand smoke protections in workplaces, motor vehicles, public places, on school grounds and in childcare settings.
- 2016: Act 108 included more protection from secondhand vapor exposure in Vermont.

While Vermont continues to make strides in reducing exposure to secondhand smoke and vapor, inequities persist by several demographic populations and exposure has wide ranging consequences to all populations. Continued work on reducing tobacco use in Vermont and exposure to secondhand smoke and vapor is critical to protecting the health of all Vermonters.

References:

¹Health Problems Caused by Secondhand Smoke: https://www.cdc.gov/tobacco/secondhand-smoke/health.html

² About E-Cigarettes (Vapes): https://www.cdc.gov/tobacco/e-cigarettes/about.html

Data Notes:

Poor mental health is defined as 14 or more days with poor mental health in the past 30 days.

Tobacco use includes: cigarettes, e-cigarettes, cigars, cigarillos, little cigars, smokeless tobacco, heat-not-burn tobacco, nicotine pouches, pipe, hookah, bidi, and others.

Current tobacco, cannabis, and binge drinking is defined as use within the past 30 days.

BIPOC: Black, Indigenous, and People of Color.

For More Information:

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