

TOBACCO

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INTRODUCTION

In spring 2023, the Colorado State Epidemiological Outcomes Workgroup (SEOW) published this seven-part document as an overview of opioids, cannabis, alcohol, tobacco, and stimulant use and related harms in Colorado. Each substance is presented in its own profile, with demographics and mental health profiles provided for additional state context. The profiles were designed to be readily usable to all people working in fields related to substance use. They include many data sources and aim to present the most current and actionable findings.

This profile is a snapshot of tobacco consumption and health effects among Coloradans. Data are presented for adults and youth, with a special section on youth protective factors against tobacco use.

Certain considerations were taken into account in compiling these data, including time frame and the intended audience. First, the profiles contain all publicly available data. This ensures that anyone can access the original source for more information on any data point in the profile. It was also important to use a timespan in which the most complete data could be found within and across substances. Lag-time for data to become publicly available can vary widely. While the profiles were in development during the summer and fall of 2022, the most complete data were found and used for calendar year 2021. Exceptions include figures/charts featuring trend data prior to 2021, data collected biennially for which 2020 was the most recent year, and aggregate data when no single year yields a large enough sample size to make definitive statements.

All Healthy Kids Colorado Survey (HKCS) data presented are for public high school students, grades 9-12.

Each page includes data sources and years. For more detailed information on references, please see our [references page](#).

The SEOW compiled the profiles with deliberate attention to our intended audience. They were designed to be practical and useful for all Coloradans who are interested in talking to others in their communities about substance use and related harms. This includes anyone from youth groups and community organizations to school superintendents and state legislators. The eight profiles can be used as stand-alone products or in conjunction with each other, as hard copy hand-outs or as a part of presentations.

WE STRONGLY RECOMMEND REVIEWING AND USING THE DEMOGRAPHICS AND MENTAL HEALTH PROFILES TO PROVIDE IMPORTANT CONTEXT TO DATA PRESENTED IN THE SUBSTANCE PROFILES.

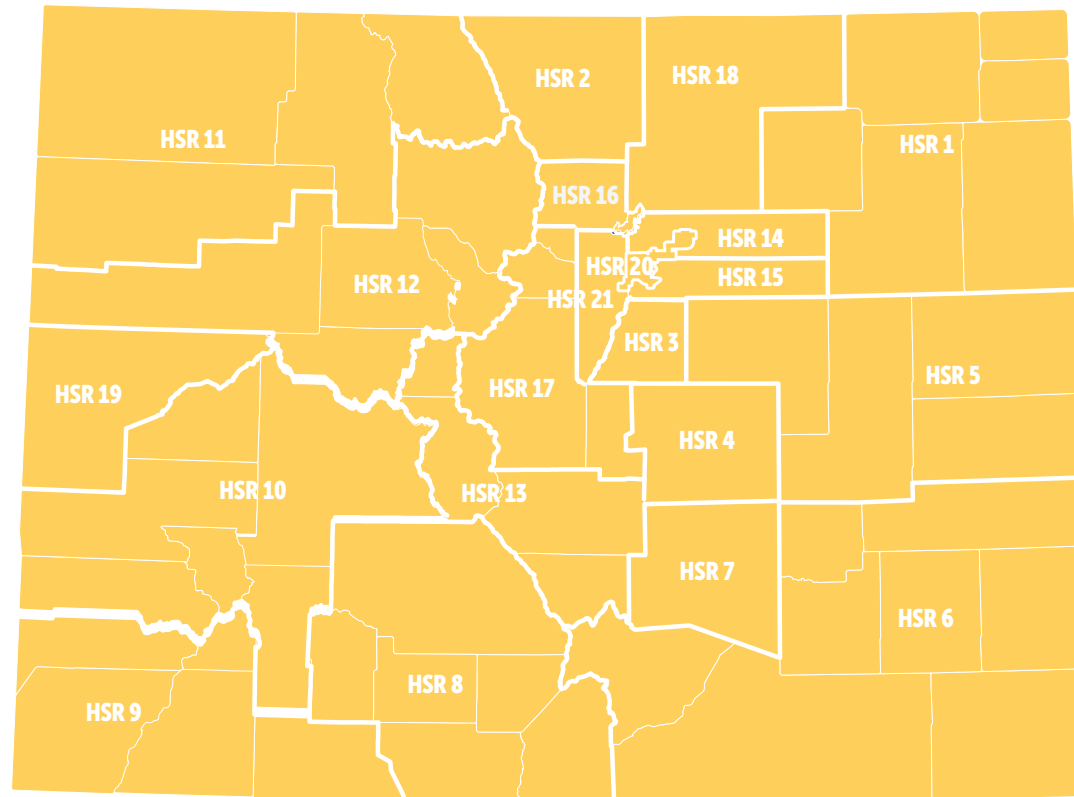
We hope the profiles facilitate conversation among Coloradans about the state of our state. For this reason, the profiles feature data from a variety of sources, include regional data when available, and introduce easily relatable use of benchmarks, such as national comparisons.

The SEOW partnered with The Evaluation Center – University of Colorado Denver on the development of the profiles, including the interpretation and visualization of data.

For more information, contact SEOW representative Sharon Liu (sharon.liu@state.co.us) at the Colorado Department of Public Health and Environment.

Colorado is divided into 21 Health Statistics Regions (HSR)

The boundaries of these regions were developed by the Colorado Department of Public Health and Environment and local public health professionals and agencies based on demographic and statistical criteria. Data within Colorado are frequently collected and presented at the HSR level.



HSR 1: Logan, Morgan, Phillips, Sedgwick, Washington, Yuma
HSR 2: Larimer
HSR 3: Douglas
HSR 4: El Paso
HSR 5: Cheyenne, Elbert, Kit Carson, Lincoln

HSR 6: Baca, Bent, Crowley, Huerfano, Kiowa, Las Animas, Otero, Prowers
HSR 7: Pueblo
HSR 8: Alamosa, Conejos, Costilla, Mineral, Rio Grande, Saguache
HSR 9: Archuleta, Delores, La Plata, Montezuma, San Juan

HSR 10: Delta, Gunnison, Hinsdale, Montrose, Ouray, San Miguel
HSR 11: Jackson, Moffat, Rio Blanco, Routt
HSR 12: Eagle, Garfield, Grand, Pitkin, Summit
HSR 13: Chaffee, Custer, Fremont, Lake
HSR 14: Adams
HSR 15: Arapahoe

HSR 16: Boulder, Broomfield
HSR 17: Clear Creek, Gilpin, Park, Teller
HSR 18: Weld
HSR 19: Mesa
HSR 20: Denver
HSR 21: Jefferson



ADULT CONSUMPTION

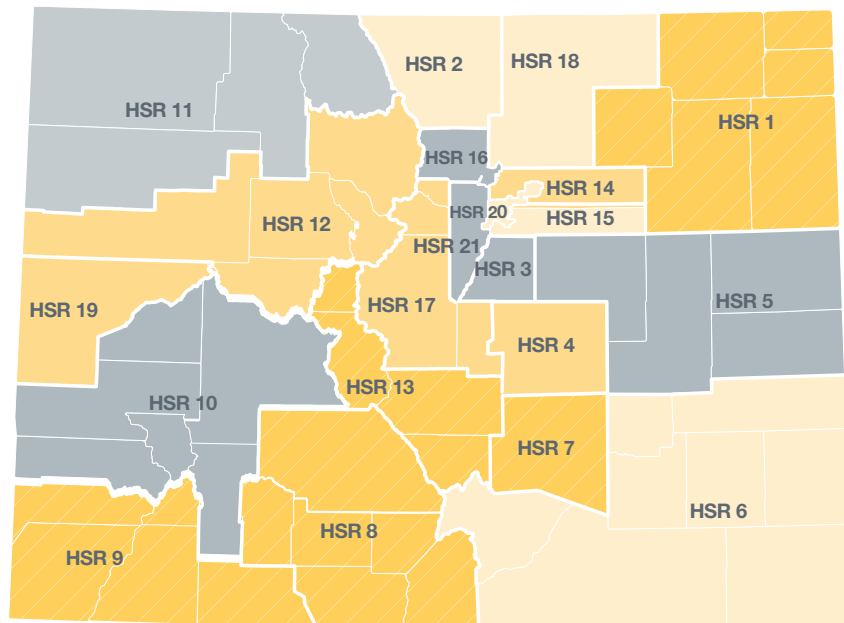


12%
of adults in Colorado used cigarettes in 2021.

THE PREVALENCE OF CIGARETTE SMOKING IN COLORADO REGIONS

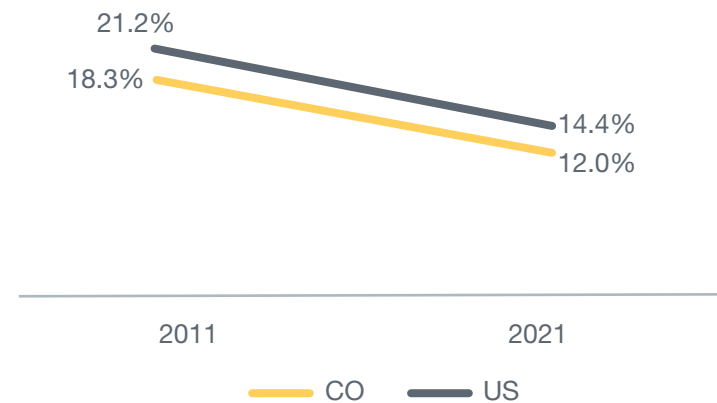
ranges from

5.5% IN HSR 3 TO 22.6% IN HSR 8.



There is no safe level of exposure to tobacco smoke. Any exposure to tobacco smoke—even an occasional cigarette or exposure to secondhand smoke—is harmful, according to the Surgeon General and Centers for Disease Control and Prevention.

Cigarette use in **Colorado** is declining similarly to national use.



ADULT CIGARETTE USE IN COLORADO DECLINED **34.4%** SINCE 2011.

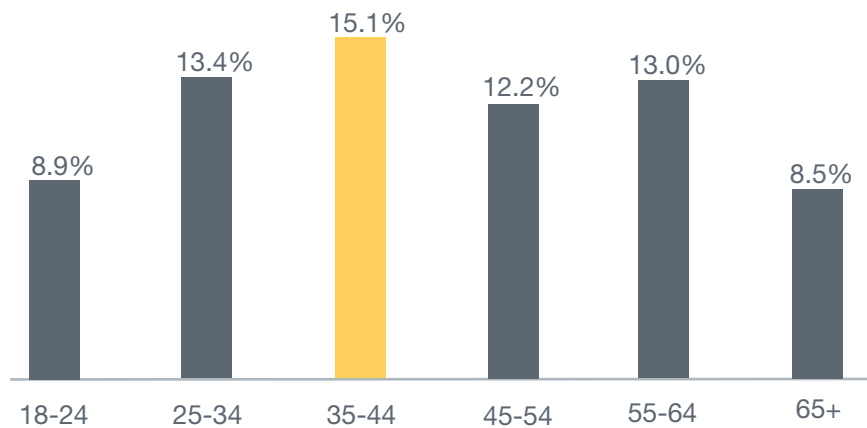


SOURCES: BEHAVIORAL RISK FACTOR SURVEILLANCE SYSTEM (BRFSS), 2011-2021; CENTERS FOR DISEASE CONTROL AND PREVENTION, 2010

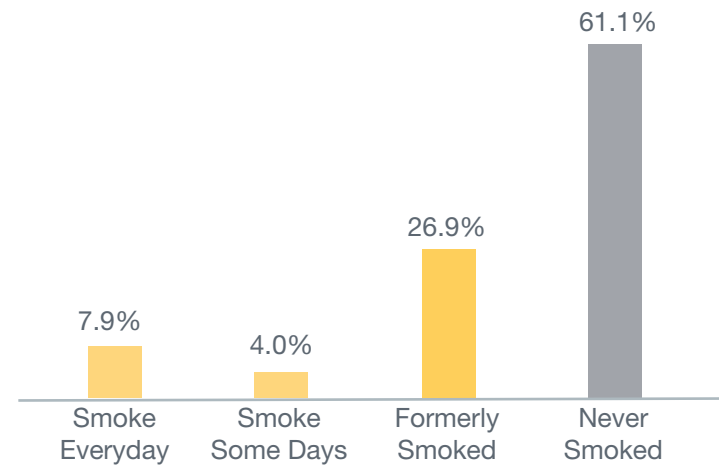
Cigarette smoking in Colorado is more common among males.

13.3% of males use cigarettes compared to **10.6%** of females.

Smoking cigarettes is most common among **35-44 year olds** in our state.



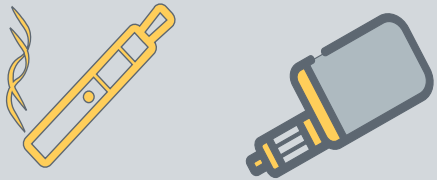
26.9% of Colorado adults previously smoked. There are over **2X** as many adults who used to smoke versus who currently smoke.



In addition to the 61.1% who never smoked, this amounts to

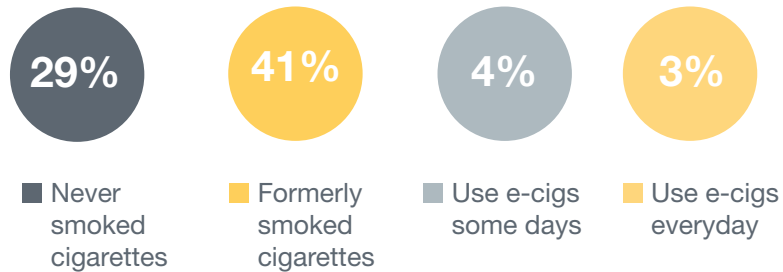
88% of adults who currently do not use cigarettes.

6.8% OF COLORADO ADULTS CURRENTLY USE E-CIGARETTES.



E-cigarettes simulate the experience of tobacco smoking. Many even look like a cigarette.
Other common terms: Vapes, vaporizers, vape pens, hookah pens, electronic cigarettes, and e-pipes.

Among e-cigarette users, 29% never smoked cigarettes.



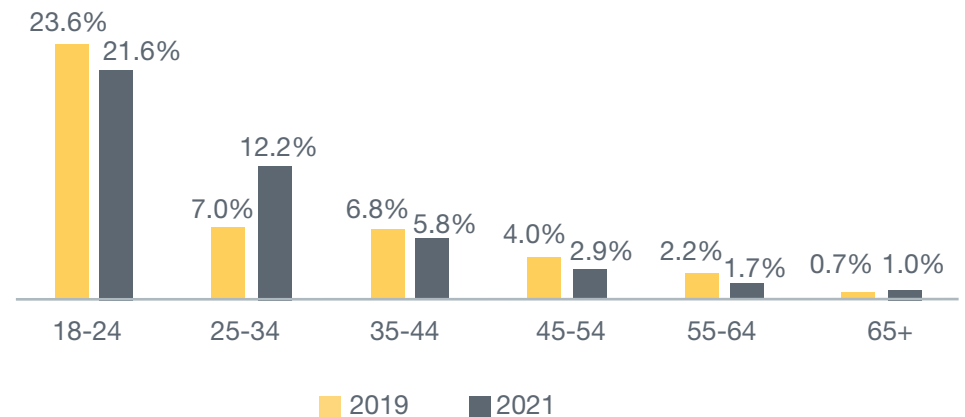
CONSISTENT WITH CIGARETTE USE, E-CIGARETTE USE IS MORE COMMON AMONG MALES THAN FEMALES.

8.4% of males

5.3% of females

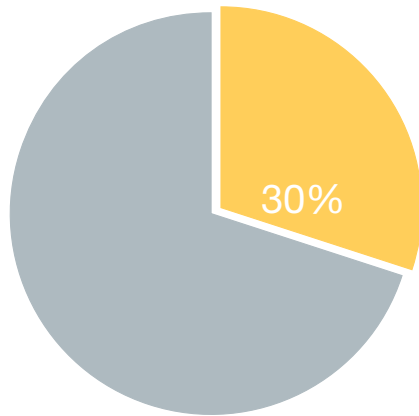
Male e-cigarette use rose significantly from 2020 (5.6%) to 2021 (8.4%)

Adults ages 18-24 use e-cigarettes at higher rates than other age groups.



Since 2017, adults ages 25-34 are the only age group to see increases in use rates.

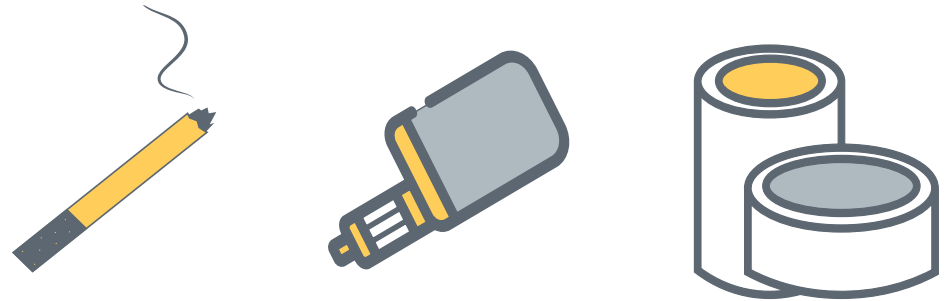
AMONG E-CIGARETTE USERS IN COLORADO, **30% ALSO USE CIGARETTES.**



Additionally, 61.5% of e-cigarette users also use cannabis and 41% also binge drink.

19.5% of Coloradans use tobacco

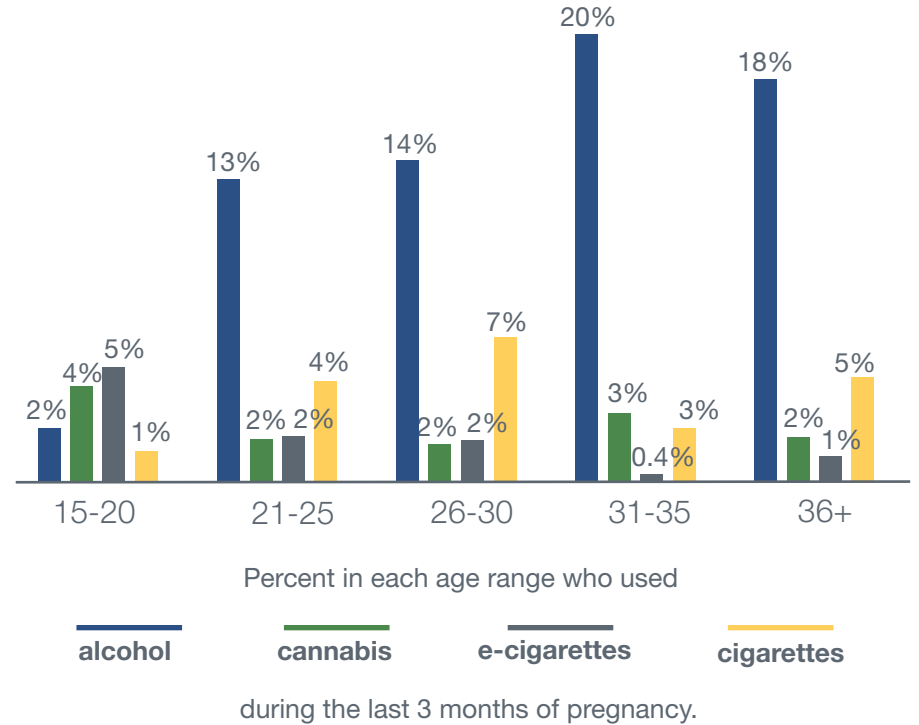
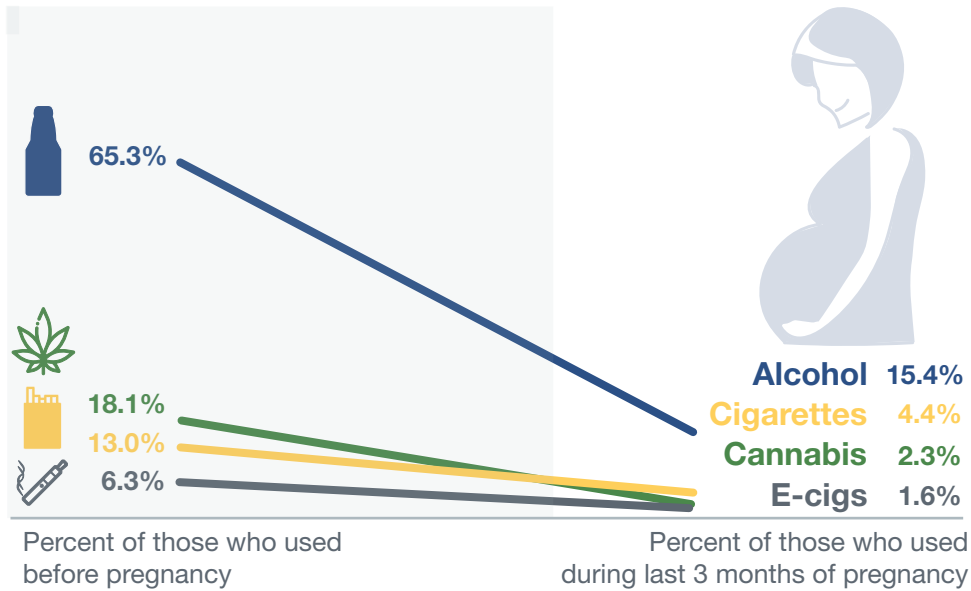
Including cigarettes, e-cigarettes, and chewing tobacco.



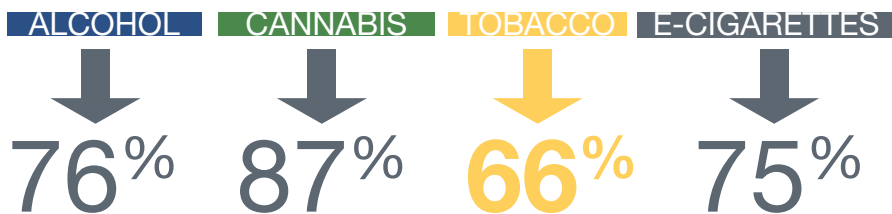
SMOKELESS TOBACCO (CHEW, SNUFF, SNUS) IS USED BY 3.4% OF COLORADANS.

2.0% everyday and 1.5% some days

Most of those who were pregnant in Colorado did not use any substance during the last 3 months of pregnancy in 2020.

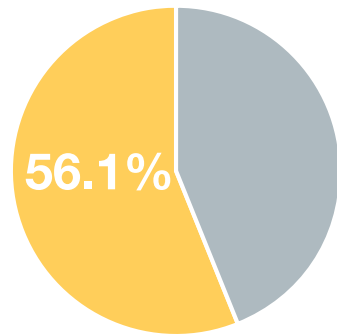


Tobacco use decreased the least from before pregnancy to during the last 3 months of pregnancy.



According to the Health eMoms survey, **ONLY 2.5%** OF THOSE WHO ARE 12-14 MONTHS POSTPARTUM USE TOBACCO OR E-CIGARETTES AS A COPING ACTIVITY WHEN FEELING DOWN OR DEPRESSED.

IN THE PAST YEAR, **56% OF COLORADO ADULTS, WHO CURRENTLY SMOKE, QUIT SMOKING FOR ONE DAY OR LONGER WITH THE INTENTION TO QUIT.**



During the same time, **QUIT ATTEMPTS AMONG ADULT SMOKERS**

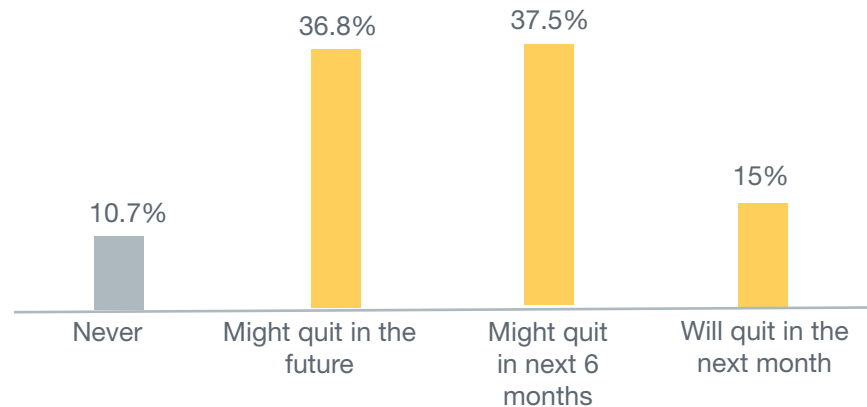
with a high school diploma/GED OR some post high school education was **2X HIGHER**

(31% and 37%)

than smokers with less than a high school degree OR college graduates

(14% and 17%)

NINE OUT OF TEN CURRENT ADULT SMOKERS MIGHT QUIT OR PLAN ON QUITTING SMOKING.



AMONG YOUTH WHO ATTEND PUBLIC HIGH SCHOOL AND CURRENTLY USE, **ALMOST HALF TRIED TO QUIT CIGARETTES (41.5%) OR E-CIGARETTES (50.8%).**

NOTE: THESE HEALTHY KIDS COLORADO SURVEY RESULTS ARE REPRESENTATIVE OF YOUTH WHO ATTEND PUBLIC HIGH SCHOOLS IN COLORADO



YOUTH CONSUMPTION

Since 2019, current tobacco use among Colorado youth in public high school has

SIGNIFICANTLY DECREASED.

16% use e-cigarettes

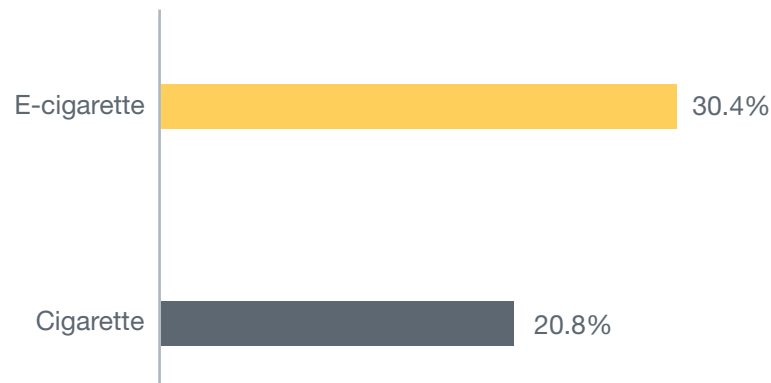
and

3% use cigarettes.

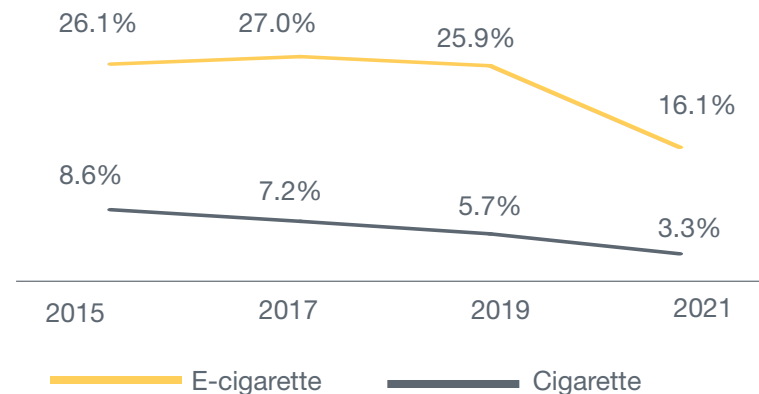
We cannot fully know the “why” behind youth substance use trends because the Healthy Kids Colorado Survey is a snapshot year-over-year rather than a longitudinal study that follows the same youth over time. What we know is schools were back in person in fall 2021 at the time of survey administration.

We observed decreases in sexual activity, decreases in participation in extracurricular activities and sports teams, and increases in parental monitoring — which all speaks to a continued, large-scale social disruption for young people at that time of the pandemic despite being back at school. We are very interested to see if these downward trends continue in 2023.

MORE PUBLIC HIGH SCHOOL STUDENTS HAVE EVER USED E-CIGARETTES THAN HAVE EVER USED CIGARETTES.



Current cigarette use **continues to decline** among Colorado youth attending public high school.

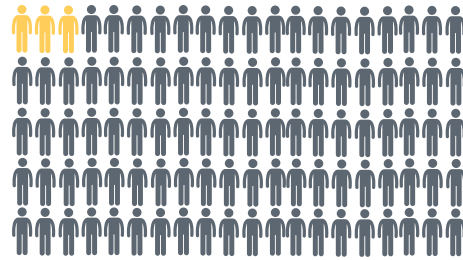


Cigar and chewing tobacco use is also declining. E-cigarette use in Colorado was unchanged since 2015, but declined sharply in 2021.

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SOURCE: HEALTHY KIDS COLORADO SURVEY (HKCS), HIGH SCHOOL, 2021

96.7%

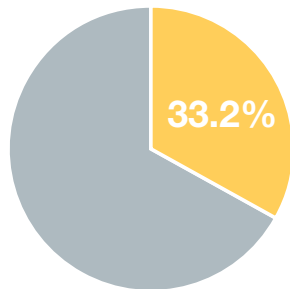
MOST COLORADO YOUTH WHO ATTEND PUBLIC HIGH SCHOOL DO NOT CURRENTLY USE CIGARETTES.



Use is at least 2x higher among genderqueer/nonbinary and gender questioning youth than youth who are male and female.

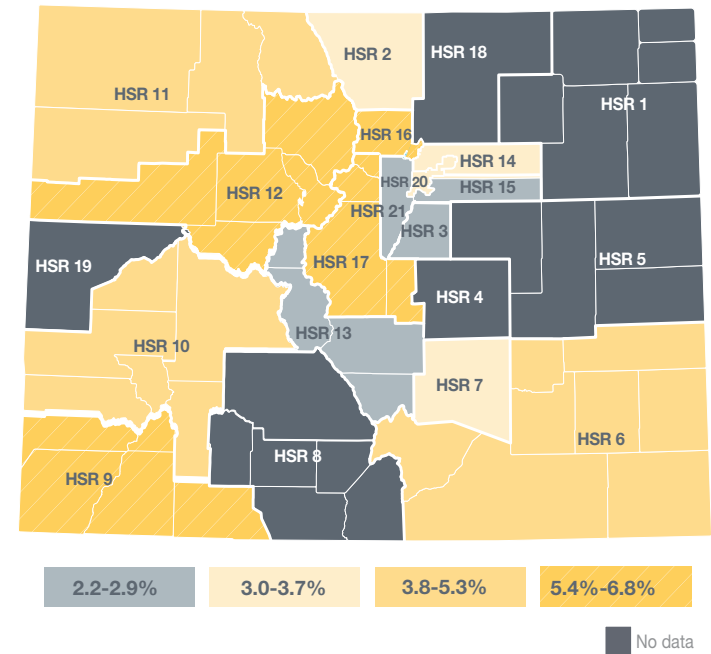
Use is also higher among youth who are lesbian, gay, bisexual or unsure of their sexual orientation than among their heterosexual peers.

Neither gender identity nor sexual orientation determines a propensity to use illegal substances. Rather, the environments in which young people grow up shape their behaviors. Many youth who are genderqueer, nonbinary, bisexual, gay, and lesbian do not have access to the same protective factors that their peers benefit from, increasing their risk of susceptibility to substance use.



AMONG PUBLIC HIGH SCHOOL STUDENTS WHO SMOKE CIGARETTES **33.2%** SMOKE MENTHOLS.

PREVALENCE OF YOUTH CIGARETTE SMOKING REACHES 6.8% IN SOME REGIONS.



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SOURCE: HEALTHY KIDS COLORADO SURVEY (HKCS), HIGH SCHOOL, 2021

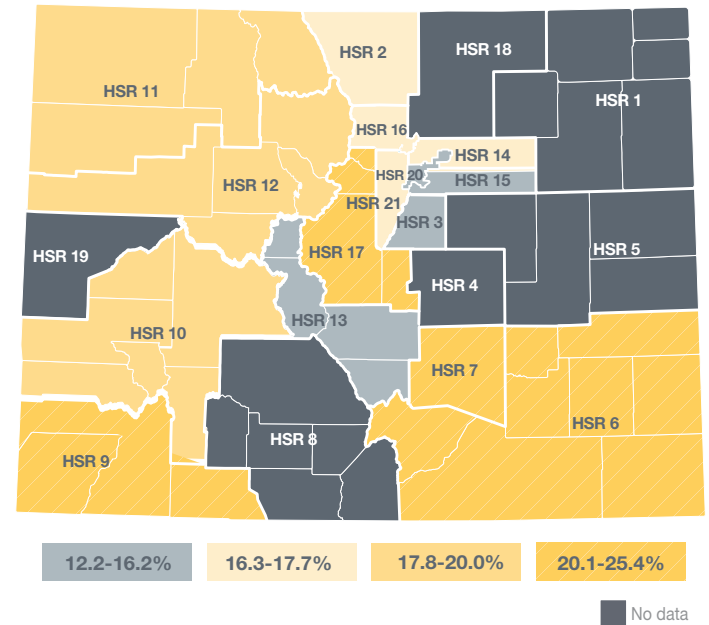
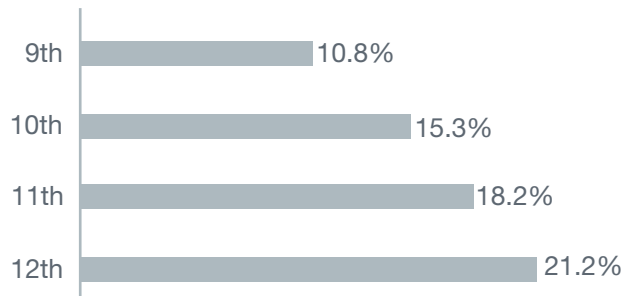
16.1%
OF YOUTH IN PUBLIC HIGH SCHOOL
CURRENTLY USE
E-CIGARETTES.



**PREVALENCE OF YOUTH
E-CIGARETTE SMOKING
EXCEEDS
25% IN SOME REGIONS.**

**Use is higher among female, genderqueer/
nonbinary, transgender, and gender questioning
youth (18.6-20.9%) than male youth (13.2%).**

USE INCREASES AS GRADE LEVEL INCREASES.



Similar to cigarettes and other substances, use is higher among lesbian, gay, or bisexual youth, who may not have access to the same protective factors as their peers who are heterosexual, increasing their risk of susceptibility to substance use.

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SOURCE: HEALTHY KIDS COLORADO SURVEY (HKCS), HIGH SCHOOL, 2021

Early initiation

USE BEFORE 13:

22.3%

of public high school students tried **e-cigarettes** before age 13. A significant increase from 2019.

6.9%

of public high school students tried **cigarettes** before age 13.

Access

EASY TO GET:

51.4%

of students who attend public high school report that it would be “sort of easy” or “very easy” to get **e-cigarettes** if they wanted.

41.7%

of public high school students report that it would be “sort of easy” or “very easy” to get **cigarettes** if they wanted.

YOUTH CONSIDER ALCOHOL EASIEST TO ACCESS

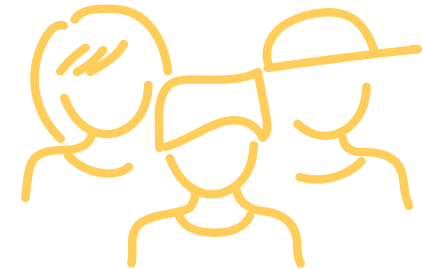
followed, in order by: E-CIGARETTES, CIGARETTES, CANNABIS, and PRESCRIPTION PAIN RELIEVERS

Perception of peer use

INACCURATE PERCEPTIONS:

50.3%

of public high school students overestimate how many of their peers use **e-cigarettes**.



According to the National Institute on Drug Abuse, “adolescence is a key window of vulnerability for using drugs and developing substance use disorders. The still-developing teenage brain is prone to act on impulse, take risks, and follow the influence of peers ... early intervention or treatment can prevent years of later problem drug use and keep young lives on a healthy track.”

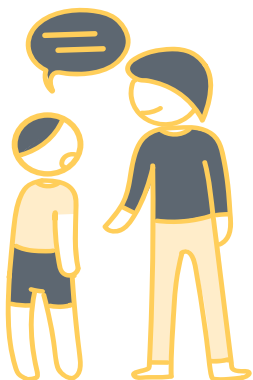
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SOURCE: HEALTHY KIDS COLORADO SURVEY (HKCS), HIGH SCHOOL, 2021

94% OF PUBLIC HIGH SCHOOL STUDENTS **THINK THEIR PARENT OR GUARDIAN WOULD FEEL IT IS WRONG IF THEY USE E-CIGARETTES.**

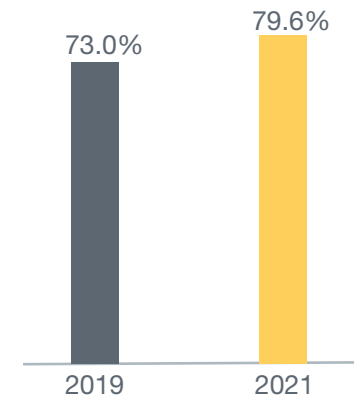
70% OF STUDENTS **THINK IT IS WRONG FOR SOMEONE THEIR AGE TO USE E-CIGARETTES.**

80% OF PUBLIC HIGH SCHOOL STUDENTS **THINK PEOPLE WHO USE E-CIGARETTES DAILY HAVE MODERATE OR GREAT RISK OF HARM.**

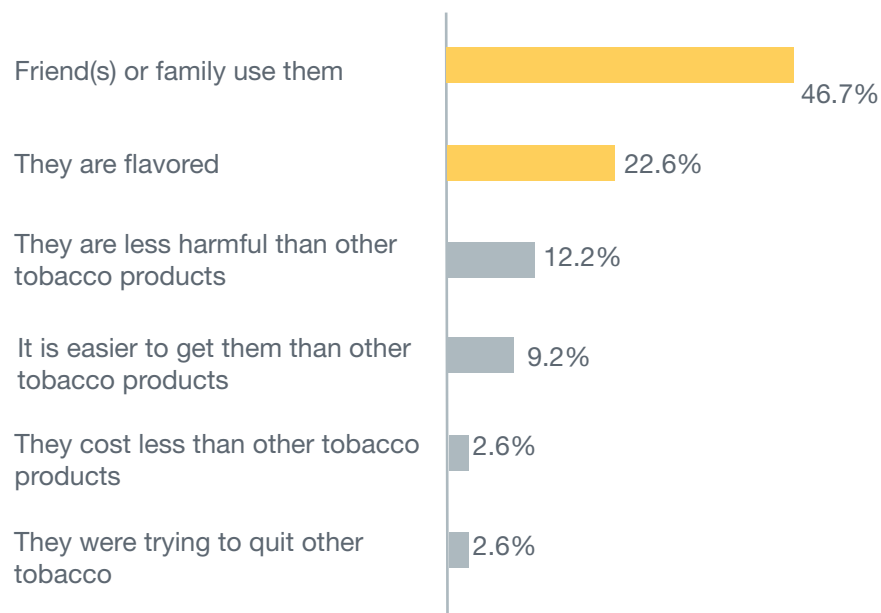


Perception of harm from using e-cigarettes daily increased slightly from 2019.

Perception of harm from breathing second hand vapor also increased slightly (from 55.1% to 59.4%).



The top two reasons youth use e-cigarettes are **FAMILY OR FRIENDS USE THEM** and **THEY ARE FLAVORED.**



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SOURCE: HEALTHY KIDS COLORADO SURVEY (HKCS), HIGH SCHOOL, 2021

USE OF E-CIGARETTES DIFFERS AMONG YOUTH WHO REPORT THE PRESENCE OF PROTECTIVE FACTORS IN THEIR LIFE.

AMONG YOUTH WHO ATTEND PUBLIC HIGH SCHOOL WHO:

have an adult to go to for help with a serious problem



who do not report this protective factor.



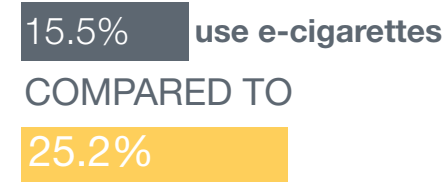
think family has clear rules



who do not report this protective factor.



have parents/guardians who ask if their homework is done



who do not report this protective factor.

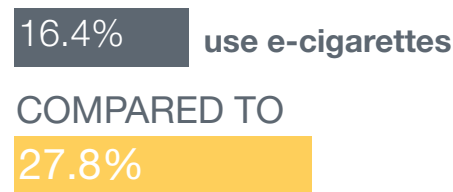


feel they belong at their school



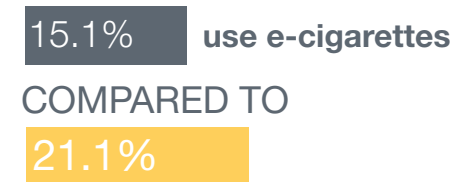
who do not report this protective factor.

feel safe at school



who do not report this protective factor.

think their teacher notices when they're doing a good job and lets them know



who do not report this protective factor.

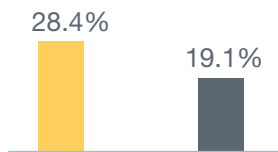
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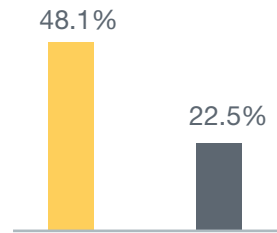
ADDITIONAL RISK FACTORS

Compared to adults who do not use tobacco,
A GREATER NUMBER OF ADULTS WHO USE TOBACCO:

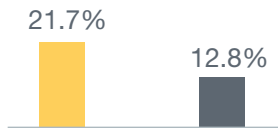
have been told they
HAVE A DEPRESSIVE DISORDER.



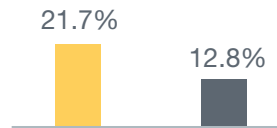
currently
USE CANNABIS.



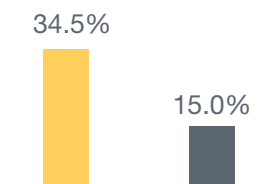
experienced 14+ days in the past 30-days of
POOR MENTAL HEALTH.



currently
DO NOT DO PHYSICAL ACTIVITIES OR EXERCISE.



currently
BINGE DRINK.



have ever been diagnosed with
COPD.*



*CHRONIC OBSTRUCTIVE PULMONARY DISEASE.

AMONG YOUTH WHO ATTEND PUBLIC HIGH SCHOOL, FEELINGS OF DEPRESSION* ARE MORE COMMON AMONG YOUTH WHO USE TOBACCO.

64%

among youth who used any tobacco
COMPARED TO

35%

among youth who do not use any tobacco.



*Where they felt so sad or hopeless and stopped doing usual activities almost every day for 2+ consecutive weeks during the past 12 months.

NOTE: THESE HEALTHY KIDS COLORADO SURVEY RESULTS ARE REPRESENTATIVE OF YOUTH WHO ATTEND PUBLIC HIGH SCHOOLS IN COLORADO

KEY TERMS

Aggregate	A mathematical computation using a set of values rather than a single value.
Average	A calculated central value of a set of numbers.
Electronic cigarette	A battery-powered device that heat a liquid into an aerosol that the user inhales. Usually containing nicotine derived from tobacco, flavorings, and other additives. Can also be used as a delivery system for cannabis and other illicit drugs.
Health Statistics Region	A geographic grouping based on demographic profiles and statistical criteria. Colorado has 21 Health Statistics Regions which correspond with existing county boundaries.
Nicotine	A highly addictive chemical compound present in the tobacco plant. Tobacco products, including cigarettes, cigars, smokeless tobacco, hookah tobacco, and most e-cigarettes, contain nicotine.
Per capita	Per person.
Prevalence	The proportion of a population who have specific characteristics in a given time period. Prevalence may be reported as a percentage (5%, or 5 people out of 100), or as the number of cases per 10,000 or 100,000 people.
Proportion	A proportion is a type of ratio that relates a part to a whole. For example, “One in five people” compares one person within a group to the whole group of people. This is equivalent to “four in twenty people” or “twenty in one hundred people.”
Protective Factors	Characteristics within the individual or conditions in the family, school or community that help someone cope successfully with life challenges.
Quartile	A group that contains 25% of the data set.
Ranking	Relative position.
Rate	The ratio between two related quantities.
Risk Factors	Characteristics within the individual or conditions in the family, school, or community that increase the likelihood someone will engage in unhealthy behaviors.
Tobacco	A plant that contains the chemical compound of nicotine. Products derived from tobacco are made for human consumption.
Significance	The probability is less than .05 that the difference or relationship happened by chance.



We appreciate your feedback!

[Click here](#) or scan above to let us know what you think.

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publications, please visit our website:
www.coloradoseow.org