

Young Adult Smokers Want to Quit, But Most Do Not Seek Proven Treatment

Despite tried and true methods to quit smoking, Helping Young Smokers Quit (HYSQ) researchers report that young adults do not take advantage of proven smoking cessation treatments that can double their chances of quitting.

The research is published online and will appear in the August issue of the *American Journal of Public Health* at <http://www.ajph.org/>.

Young adult smokers are highly motivated to quit -- about 49 percent have tried to quit in the past year -- but they are much less likely to use some proven treatments to help them quit smoking when compared to adult smokers, said Susan Curry, director of the UIC Institute for Health Research and Policy and lead author of the study.

Using data from the 2005 National Health Interview Survey, the researchers compared young adult smokers (ages 18 to 24) to older smokers (ages 25 and older). They found that young adults are more likely to smoke (24 percent) compared to other smokers (20 percent).

Approximately 70 percent in both age groups said they wanted to completely quit smoking, but only 4-5 percent of smokers in both age groups use any evidence-based behavioral treatment. As few as 1 percent reported using specific types of behavioral treatment such as group classes, quit lines or internet programs.

According to researchers, only 17 percent of young adults used pharmacotherapy – approved drugs such as nicotine gum, the nicotine patch, or bupropion – in their most recent quit attempt. Among adult smokers, 32 percent reported using pharmacotherapy.

Smokers in both age groups reported support from friends and family as the most common form of stop-smoking treatment.

“Receiving advice from health care providers, having higher educational attainment, and having health insurance that might cover the cost of treatment are associated with using proven treatments,” Curry said. “However, young adults are less likely to have health insurance, less likely to go to the doctor, and when they do go to the doctor they are much less likely to be asked about their smoking and to be advised to quit.”

Even though young adults were less likely to see a health care provider than other adults, 74 percent reported seeing a provider at least once in the previous year.

Other studies have shown that younger smokers tend to have many misconceptions about treatment, said Curry. For example, young smokers incorrectly believe that nicotine replacement therapy is dangerous, and that nicotine causes cancer.

Curry suggests that it may be necessary to demystify and correct misperceptions about treatment and to take advantage of missed opportunities during health care visits to address smoking and promote treatment.

“We don't know from this study whether the issue is lack of interest in treatment, lack of awareness of treatment, or lack of treatments that appeal to young adult smokers,” Curry said. “There's definitely room for more research to understand how we might spur demand for treatment among young adult smokers.”

Co-authors include Amy Sporer, Oksana Pugach, Richard Campbell, and Sherry Emery of the UIC Institute for Health Research and Policy. The study was funded by The Robert Wood Johnson Foundation, National Cancer Institute, and the Centers for Disease Control and Prevention.

The research appears in a special issue of the *American Journal of Public Health*, which focuses on the results of young adult tobacco cessation programs in recent years and highlights research identifying the hidden challenges to quitting. The issue is sponsored by the Youth Tobacco Cessation Collaborative, which represents major organizations that fund research, program, and policy initiatives related to controlling youth tobacco use, including the American Cancer Society, the Robert Wood Johnson Foundation, the American Lung Association, and the National Cancer Institute.

For more information about Helping Young Smokers Quit, visit www.hysq.org.

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