The 2001-2002 Tobacco Use Supplement to the Current Population Survey (TUS-CPS): Representative Survey Findings¹

Anne Hartman, Gordon Willis, Deirdre Lawrence Division of Cancer Control and Population Sciences National Cancer Institute

James T. Gibson, Ginger Carter Information Management Services, Inc.

December 31, 2004

1. Introduction: The TUS-CPS

This document presents the results of several analyses of data from the Tobacco Use Supplement to the 2001-2002 Current Population Survey (TUS-CPS). The TUS-CPS is a Federal tobacco survey that has been sponsored by the National Cancer Institute (NCI) and administered as a part of the CPS, a continuing monthly labor force survey sponsored by the U.S. Bureau of Labor Statistics and conducted by the U.S. Census Bureau. Although several Federal surveys are used to track tobacco usage in the U.S. population, the TUS-CPS is a key source of data on smoking, other tobacco use, workplace and home smoking rules, and attitudes toward tobacco control policies. Each TUS cycle involves a large, nationally representative sample of about 240,000 individuals 15 years of age and older. Over the 1990s the NCI-sponsored TUS-CPS was administered in 1992-93, 1995-96, and 1998-99, and also in 2000 – therefore providing a decade of tobacco-related trend data. Starting in 2001, sponsorship of the TUS-CPS is shared between NCI and the Centers for Disease Control and Prevention (CDC).

TUS-CPS data can be used by researchers to compute estimates of tobacco use at the national and state levels, to monitor progress in the control of tobacco use, for tobacco-related research, and to evaluate tobacco programs. Although the TUS has changed slightly between 1992 and the present, it has generally contained about 40 items, covering the following topics:

- Cigarette smoking prevalence
- Smoking history
- Current and past cigarette consumption
- Cigarette smoking quit attempts and intentions to quit
- Medical and dental advice to quit smoking
- Cigar, pipe, chewing tobacco and snuff use
- Workplace smoking policies
- Smoking rules in the home
- Attitudes toward smoking in public places
- Opinions about the degree of youth access to tobacco in the community
- Attitudes toward the advertisement and promotion of tobacco

¹ This document is the downloadable version of information contained on the NCI Website: http://riskfactor.cancer.gov/studies/tus-cps/.

Results of analyses of past Tobacco Use Supplements are contained in NCI's Tobacco Monographs and in other scientific and technical publications (see Section 4 of this document: *Additional reports based on TUS-CPS data*).

For more detailed information about the TUS-CPS, including instructions for obtaining 2001-2002 or earlier data files, questionnaires, and for a summary of plans for surveys conducted between 2003 - 2009, see: http://riskfactor.cancer.gov/studies/tus-cps/.

2. Sample data tables

The tables presented in this report summarize several key analyses of the 2001-2002 TUS-CPS data files (June 2001, November 2001, and February 2002). They are intended to provide examples of the types of information that are available to potential data users, in the hope of encouraging further analysis. Tables 1 through 4 contain simple parameter estimates (percentages), and measures of variance in the form of confidence intervals. These confidence intervals were estimated using replicate weights. Alternative estimates of variance and confidence intervals can be made for simple analyses using Attachment 17 of the 2001-2002 Tobacco Use Supplement of the U.S. Census Bureau Technical Documentation. Replicate weights ² necessary for more complex analysis such as regression or analysis of variance are available from NCI.

2.1. Smoking prevalence. As an example of the analysis of cigarette smoking prevalence, Table 1 contains estimates for several categories of smoking behavior. Smoking status was determined by asking self and proxy respondents: "Do you now smoke cigarettes everyday, some days, or not at all?" Current smoking is therefore represented as the sum of Everyday and Some-day smoking. Former smokers are defined as those who have smoked 100 or more cigarettes, but who were no longer smoking at the time of the interview, and Never smokers were defined as those who had smoked less than 100 cigarettes in their lifetime. Notes pertaining to region, race/ethnicity, and data weighting are contained in Section 3.

1. Korn EL, Graubard BI. Analysis of Health Surveys. New York: Wiley; 1999. 34 p.

²References:

^{2.} Judkins D. Fay's Method for Variance Estimation. J Official Statistics 1990;6:223-39.

^{3.} SUDAAN User's Manual. Release 8.0. Research Triangle Park, NC: Research Triangle Institute; 2001. p. 110-11.

³ Respondents are first asked "Have you smoked at least 100 cigarettes in your entire life," and those who answer <u>yes</u> are then asked whether they smoke everyday, some days, or not at all.

Table 1. 2001-2002 Tobacco Use Supplement to the Current Population Survey (TUS-CPS): Smoking Status - Percentage Estimates (95% Confidence Intervals) of the U.S. Household Population, 18 or older, by Demographic Subgroups.*

	Current Smoker (%)				Population		
		Every	Some	Former	Never	Size	Sample
	Current**	Day	Days	Smoker	Smoked	(thousands)	Size
Total	20.5	16.5	4.0	20.6	58.9	203,113	234,227
	(20.2-20.7)	(16.2-16.7)	(3.9-4.1)	(20.4-20.9)	(58.6-59.2)	203,113	234,227
Male	23.0	18.5	4.5	23.9	53.1	97,298	109,993
T 1	(22.6-23.4) 18.1	(18.1-18.9) 14.6	(4.4-4.7)	(23.6-24.2) 17.6	(52.7-53.5) 64.3	,	,
Female	(17.9-18.4)	14.6 (14.4-14.9)	(3.4-3.6)	(17.3-17.9)	(63.9-64.7)	105,815	124,234
Region:	(17.5-10.4)	(14.4-14.2)	(3.4-3.0)	(17.5-17.7)	(03.7-04.7)		
Northeast	19.3	15.7	3.6	22.8	57.9	1	
Northeast	(18.7-19.8)	(15.2-16.1)	(3.4-3.9)	(22.3-23.3)	(57.3-58.6)	38,714	51,451
Midwest	23.2	19.0	4.2	21.5	55.4	46,389	50 070
	(22.6-23.7)	(18.5-19.5)	(3.9-4.4)	(21.0-21.9)	(54.8-56.0)	40,389	58,870
South	21.6	17.7	3.8	19.2	59.2	72,357	67,396
	(21.1-22.1)	(17.3-18.2)	(3.6-4.0)	(18.8-19.7)	(58.6-59.7)	12,331	07,370
West	16.9	12.6	4.3	20.1	62.9	45,652	56,510
D /5:1	(16.4-17.5)	(12.1-13.1)	(4.1-4.6)	(19.7-20.6)	(62.2-63.7)	10,000	,
Race/Ethnicity	y***:	101	1 0.	1 22.0		1	
White	21.7 (21.4-22.0)	18.1 (17.8-18.3)	3.6 (3.5-3.7)	23.9 (23.6-24.2)	54.4 (54.1-54.8)	147,986	182,085
D11-	20.2	15.4	4.9	12.5	67.3	·	
Black	(19.5-21.0)	(14.7-16.0)	(4.5-5.2)	(11.9-13.1)	(66.4-68.2)	23,477	20,879
American							
Indian / AK	32.2	25.3	6.9	19.0	48.7	1,628	2,760
Native	(29.1-35.6)	(22.6-28.3)	(5.7-8.3)	(16.7-21.5)	(45.2-52.3)	1,026	2,700
Asian / Pac.	11.9	8.6	3.3	10.5	77.7	7,960	8,777
Islander	(11.1-12.7)	(7.9-9.3)	(2.8-3.8)	(9.8-11.2)	(76.7-78.6)	7,900	0,777
Hispanic	14.7 (14.1-15.4)	9.2 (8.7-9.7)	5.5 (5.1-6.0)	11.1 (10.5-11.7)	74.2 (73.3-75.1)	22,062	19,726
Age:	(14.1 15.4)	(0.7).7)	(3.1 0.0)	(10.5 11.7)	(73.3 73.1)		
18-24	23.1	17.7	5.4	6.3	70.6	I	
10-24	(22.5-23.7)	(17.0-18.3)	(5.1-5.7)	(6.0-6.7)	(69.9-71.3)	26,803	26,400
25-44	23.8	18.9	4.9	13.7	62.5	80,811	01 221
	(23.4-24.2)	(18.4-19.3)	(4.8-5.1)	(13.3-14.0)	(62.1-63.0)	80,811	91,231
45-64	20.9	17.6	3.3	27.4	51.7	62,827	75,030
	(20.6-21.3)	(17.3-17.9) 7.4	(3.2-3.5)	(26.9-27.8)	(51.2-52.2)	,	,
65+	(8.7-9.5)	7.4 (7.1-7.7)	(1.6-1.9)	36.6 (36.1-37.2)	54.2 (53.7-54.8)	32,672	41,566
Education***		(**************************************	(12 12)	(2.27.27.7)	(======================================		
<12 years	24.7	20.7	4.0	21.6	53.7	27.411	20.700
-12 y cuis	(24.0-25.4)	(19.9-21.4)	(3.7-4.3)	(21.0-22.3)	(52.8-54.5)	27,411	30,709
12 years	25.5	21.7	3.8	23.2	51.3	55,996	67,431
	(25.1-25.9)	(21.3-22.0)	(3.6-4.0)	(22.7-23.7)	(50.8-51.8)	33,770	07,731
13-15 years	21.3	17.0	4.3	24.0	54.7	44,976	53,662
17	(20.9-21.8)	(16.6-17.4)	(4.1-4.5)	(23.6-24.4)	(54.1-55.2)	,	,
16+ years	9.9 (9.5-10.2)	6.8 (6.6-7.1)	3.0 (2.9-3.2)	21.9 (21.5-22.3)	68.2 (67.8-68.7)	47,926	56,025
	(9.3-10.2)	(0.0-7.1)	(2.9-3.2)	(21.3-22.3)	(07.6-08.7)	I.	

^{*} Based on the 2001-2002 CPS Tobacco Use Supplement questions:
a) Have you smoked at least 100 cigarettes in your entire life?; and b) Do you now smoke cigarettes every day, some days, or not at all?

^{**} Current = Every Day + Some Day

^{***} White = White/Non-Hispanic; Black = Black/Non-Hispanic

**** For analysis involving educational level, only respondents 25 or older are included, as many respondents between 18 and 24 have not yet completed formal education/training.

2.2 Smoking restriction at home and at work. Table 2 reflects the percentage of survey respondents self-reporting: a) that smoking is not allowed inside their home, and b) that cigarette smoking is not allowed in their place of business.

Home-ban values are determined from the item: "Which statement best describes the rules about smoking in your home: No one is allowed to smoke anywhere, smoking is permitted in some places or at some times, or smoking is permitted anywhere?" Responses of "No one is allowed to smoke anywhere" are tabulated for this table.

Complete restriction of smoking at work was determined by asking respondents who worked indoors (and who are not self-employed, or working in someone else's home, in several buildings, or in a motor vehicle) three questions (see Table footnote for question wording).

Table 2. 2001-2002 Tobacco Use Supplement to the Current Population Survey (TUS-CPS): Percentage Estimates (95% Confidence Intervals) of the 18+ population living in households in which cigarette smoking is not allowed, and working in environments in which smoking is not allowed.

	Smoking not allowed at home* (%)	Population Size (thousands)	Sample Size	Smoking not allowed at work** (%)	Population Size (thousands)	Sample Size	
Total	67.2 (66.8-67.6)	201,443	182,971	70.8 (70.4-71.1)	95,784	85,135	
Male	65.7 (65.2-66.1)	96,456	79,955	66.0 (65.5-66.6)	44,241	35,447	
Female	68.7 (68.3-69.0)	104,987	103,016	74.9 (74.4-75.4)	51,544	49,688	
Region:							
Northeast	66.0 (65.2-66.7)	38,273	38,109	75.9 (75.1-76.7)	18,490	18,094	
Midwest	61.1 (60.3-61.8)	45,957	47,562	67.6 (66.8-68.5)	23,380	23,628	
South	65.9 (65.0-66.7)	71,783	53,326	67.2 (66.4-68.1)	33,087	23,627	
West	76.6 (75.8-77.4)	45,430	43,974	75.4 (74.4-76.4)	20,826	19,786	
Race/Ethnicity**	Race/Ethnicity***:						
White	65.8 (65.4-66.2)	146,595	144,876	71.7 (71.3-72.1)	69,577	66,929	
Black	62.4 (61.3-63.5)	23,349	16,235	69.4 (68.1-70.6)	11,448	7,729	
American Indian / Alaska Native	58.9 (54.5-63.1)	1,767	2,180	65.7 (61.1-69.9)	704	917	
Asian / Pacific Islander	79.9 (78.3-81.4)	7,766	5,819	71.8 (69.4-74.1)	4,273	3,149	
Hispanic	78.2 (77.1-79.2)	21,967	13,861	65.9 (64.4-67.4)	9,782	6,411	

^{*} Based on question: "Which statement best describes the rules about smoking in your home: No one is allowed to smoke anywhere, smoking is permitted in some places or at some times, or smoking is permitted anywhere." Percentages

- represent choice "no one is allowed so smoke anywhere."
- ** Assessed by asking: "Does your place of work have an official policy that restricts smoking in any way?"; "Which of these best describes your place of work's smoking policy for indoor public or common areas, such as lobbies, rest rooms, and lunch rooms?"; and "Which of these best describes your place of work's smoking policy for work areas" [with response categories: "Not allowed in any (public/work) areas/Allowed in some (public/work) areas/Allowed in all (public/work) areas"]. Percentages represent those reporting smoking is "not allowed in any public area" and "not allowed in any work area" among indoor non-self-employed workers.
- *** White = White/Non-Hispanic; Black = Black/Non-Hispanic

2.3. Attitudes toward cigarette smoking in public places. Table 3 illustrates the percentage of the household population believing that each of a variety of public areas should be smoke-free. The values presented are determined by tabulating answers of "not allowed at all" from the TUS-CPS question: "In (PUBLIC AREA), do you think that smoking should be allowed in all areas, allowed in some areas, or not allowed at all?"

Table 3. 2001-2002 Tobacco Use Supplement to the Current Population Survey (TUS-CPS): Attitudes toward smoking in public places-- Percentage Estimates (95% Confidence Intervals) of the U.S. household population, 18 or older, who believe that public areas should be smokefree.*

	Total	Male	Female	
Public Area:	(%)	(%)	(%)	
Restaurants	57.5	54.2	60.5	
Restaurants	(57.1-57.8)	(53.8-54.7)	(60.1-60.9)	
Hagnitals	86.7	85.1	88.2	
Hospitals	(86.4-87.0)	(84.7-85.5)	(87.9-88.5)	
Indoor work areas	74.3	69.9	78.4	
muoor work areas	(74.0-74.7)	(69.5-70.4)	(78.0-78.7)	
Bars and cocktail	33.9	31.0	36.7	
lounges	(33.6-34.3)	(30.6-31.4)	(36.3-37.1)	
Indoor sporting events	76.8	73.1	80.2	
indoor sporting events	(76.4-77.2)	(72.6-73.5)	(79.8-80.7)	
Indoor shopping malls	76.0	72.8	79.0	
Indoor shopping malls	(75.6-76.4)	(72.3-73.2)	(78.6-79.3)	
Population size**	196,939	94,611	102,328	
(thousands)	190,939	74,011		
Sample size**	178,745	78,381	100,364	

^{*}Assessed by asking: "In (PUBLIC AREA), do you think that smoking should be allowed in all areas, allowed in some areas, or not allowed at all?"

^{**}Based on population/sample size applying to the item in the series having the fewest respondents providing other than a Don't Know or Refusal response.

2.4. Cigarette smoking cessation behavior. Two measures of smoking cessation behavior are represented in Table 4. Both measures involve individuals who were daily smokers one year prior to the CPS interview. The first column is a measure of any cessation activity within the past year -- it combines: a) daily smokers having one or more (24-hour or longer) quit attempts in past year, b) current some-day smokers who had previously smoked daily about 12 months ago, c) former smokers who quit less than 3 months prior to the interview, and d) former smokers who quit 3 or more months prior to interview (for more information on this definition of quitting behavior, see Shopland, Burns, Amacher, and Ruppert, 2000, Chapter 2).

The second column, labeled "Had quit smoking for 3+ months," is the subset of former daily smokers who at the time of the interview had not smoked within the previous three months, and who are considered by definition to represent former smokers.

Table 4. 2001-2002 Tobacco Use Supplement to the Current Population Survey (TUS-CPS): Percentage Estimates (95% Confidence Intervals) of cigarette quitting and quit attempts in the U.S. household population, 25 years and older.

Those smoking everyday one year previously who at the time of the TUS-CPS interview --

at the time of the TUS-CPS interview								
	Had <u>any</u> cessation activity in the past year, including quitting* (%)	Had quit smoking for 3+ months* (%)	Population Size	Sample				
			(thousands)	Size				
Total	34.3 (33.5-35.2)	4.3 (3.9-4.6)	29,378	28,231				
Male	33.8 (32.7-34.8)	4.3 (3.8-4.7)	15,630	13,681				
Female	35.0 (34.0-36.0)	4.3 (3.9-4.8)	13,748	14,550				
Region:								
Northeast	35.6 (34.1-37.1)	4.7 (3.9-5.6)	5,544	5,836				
Midwest	34.5 (33.0-36.0)	4.1 (3.6-4.6)	7,651	7,866				
South	31.2 (29.8-32.6)	3.8 (3.3-4.3)	11,080	8,672				
West	39.5 (37.6-41.4)	5.3 (4.4-6.2)	5,104	5,857				
Race/Ethnicity**:								
White	33.7 (32.9-34.6)	4.5 (4.1-4.8)	23,593	23,754				
Black	36.9 (34.6-39.2)	3.8 (2.9-4.6)	3,120	2,259				
American Indian / Alaska Native	35.5 (29.2-42.4)	4.2 (2.3-7.6)	389	505				
Asian / Pacific Islander	41.3 (36.4-46.4)	4.1 (2.5-6.6)	586	512				
Hispanic	35.3 (31.9-38.7)	3.0 (2.0-4.1)	1,691	1,201				
Age:								
25-44	37.2 (36.2-38.3)	4.3 (3.9-4.8)	15,530	14,350				
45-64	31.3 (30.3-32.4)	3.9 (3.5-4.4)	11,372	11,135				
65+	30.0 (27.7-32.3)	5.7 (4.4-6.9)	2,476	2,746				
Education:	Education:							
<12 years	29.3 (28.1-30.5)	3.5 (2.9-4.1)	5,571	5,139				
12 years	32.1 (31.0-33.2)	3.7 (3.2-4.2)	12,099	11,806				
13-15 years	38.8 (37.5-40.1)	4.8 (4.2-5.4)	8,147	7,974				
16+ years	39.7 (37.5-41.9)	6.5 (5.4-7.6)	3,561	3,312				

- * See text preceding table for definitions of quitting behavior.
- ** White = White/Non-Hispanic; Black = Black/Non-Hispanic

3. Technical notes for Tables 1-4.

- a. Table 1 data are weighted for the sample design and for CPS Smoking Supplement non-response. Values in Tables 2 through 4 are weighted for the sample design and for Smoking Supplement self-response.
- b. Tabled values may not sum exactly to 100% due to rounding error.
- c. Tables 1 through 4 contain simple parameter estimates (percentages), and measures of variance in the form of confidence intervals. These confidence intervals were estimated using replicate weights. Alternative estimates of variance and confidence intervals can be made for simple analyses using Attachment 17 of the 2001-2002 Tobacco Use Supplement of the U.S. Census Bureau Technical Documentation. Replicate weights necessary for more complex analysis such as regression or analysis of variance are available from NCI.
- d. Region: Northeast = Connecticut, Maine, Massachusetts, New Hampshire, New Jersey, New York, Pennsylvania, Rhode Island, Vermont; Midwest = Illinois, Indiana, Iowa, Kansas, Michigan, Minnesota, Missouri, Nebraska, North Dakota, Ohio, South Dakota, Wisconsin; South = Alabama, Arkansas, Delaware, District of Columbia, Florida, Georgia, Kentucky, Louisiana, Maryland, Mississippi, North Carolina, Oklahoma, South Carolina, Tennessee, Texas, Virginia, West Virginia; West = Alaska, Arizona, California, Colorado, Hawaii, Idaho, Montana, Nevada, New Mexico, Oregon, Utah, Washington, Wyoming

4. Additional reports based on TUS-CPS data

Elliott MR, Davis WW. Obtaining cancer risk factor prevalence estimates in small areas: combining data from two surveys. *J R Stat Soc Ser C App Stat* (in press).

American Legacy Foundation. Secondhand smoke tearing families apart: the health and economic burden of smoking on children. Legacy Policy Report 02. Washington, DC: American Legacy Foundation; 2004.

Augustson E, Marcus S. Use of the current population survey to characterize subpopulations of continued smokers: a national perspective on the "hardcore" smoker phenomenon. *Nicotine Tob Res* 2004;6(4):621-9.

Biener L, Garrett CA, Gilpin EA, Roman AM, Currivan DB. Consequences of declining survey response rates for smoking prevalence estimates. *Am J Prev Med* 2004;27(3):254-7.

Cancer Progress Report - 2003 Update, National Cancer Institute, NIH, DHHS, Bethesda, MD, February 2004, http://progressreport.cancer.gov/.

Etter JF. Associations between smoking prevalence, stages of change, cigarette consumption, and quit attempts across the United States. *Prev Med* 2004;38(3):369-73.

Gilpin EA, Lee L, Pierce JP. Changes in population attitudes about where smoking should not be allowed: California versus the rest of the USA. *Tob Control* 2004;3(1):38-44.

Guse CE, Marbella AM, Layde PM, Christiansen A, Remington P. Clean indoor air policies in Wisconsin workplaces. *WMJ* 2004;103(4):27-31.

Levy DT, Romano E, Mumford EA. Recent trends in home and work smoking bans. *Tob Control* 2004;13(3):258-63.

Mumford EA, Levy DT, Romano EO. Home smoking restrictions. Problems in classification. *Am J Prev Med* 2004;27(2):126-31.

National Center for Chronic Disease Control and Health Promotion (U.S.). *State Tobacco Control Highlights* – 1999. Atlanta: Centers for Disease Control and Prevention, National Center for Chronic Disease Control and Health Promotion, Office on Smoking and Health; CDC Pub. No. 099-5621, 1999. Updates from 2000 – 2004 available from: Centers for Disease Control and Prevention. State Tobacco Activities Tracking and Evaluation (STATE) System. Available at: http://apps.nccd.cdc.gov/statesystem/

Rivara FP, Ebel BE, Garrison MM, Christakis DA, Wiehe SE, Levy DT. Prevention of smoking-related deaths in the United States. *Am J Prev Med* 2004;27(2):118-25.

Shopland DR, Anderson CM, Burns DM, Gerlach KK. Disparities in smoke-free workplace policies among food service workers. *J Occup Environ Med* 2004;46(4):347-56.

Trinidad DR, Gilpin EA, Lee L, Pierce JP. Do the majority of Asian-American and African-American smokers start as adults? *Am J Prev Med* 2004;26(2):156-8.

Baluja KF, Park J, Myers D. Inclusion of immigrant status in smoking prevalence statistics. Am J Public Health 2003; 93(4):642-6.

Burns DM, Major JM, Anderson CM, Vaughn JW. Chapter 8. Changes in cross-sectional measures of cessation, numbers of cigarettes smoked per day, and time to first cigarette -- California and national data. In: Ruppert W, Amacher RH, Marcus SE, Shopland DR, eds. *Those Who Continue to Smoke: Is Achieving Abstinence Harder and Do We Need to Change Our Interventions?* Smoking and Tobacco Control Monograph No. 15. Bethesda, MD: U.S. Department of Health and Human Services, Public Health Service, National Institutes of Health, National Cancer Institute; NIH Pub. No. 03-5370, September 2003:101-25.

Burns DM, and Warner KE. Chapter 1. Smokers who have not quit: Is cessation more difficult and should we change our strategies. In: Ruppert W, Amacher RH, Marcus SE, Shopland DR, eds. *Those Who Continue to Smoke: Is Achieving Abstinence Harder and Do We Need to Change Our Interventions?* Smoking and Tobacco Control Monograph No. 15. Bethesda, MD: U.S. Department of Health and Human Services, Public Health Service, National Institutes of Health, National Cancer Institute; NIH Pub. No. 03-5370, September 2003:11-31.

Gilpin EA, White MM, White VM, Distefan JM, Trinidad DR, James L, Lee L, Major J, Kealy S, Pierce JP. *Tobacco control successes in California: a focus on young people, results from the California Tobacco Surveys, 1990-2002.* Final Report. La Jolla, CA: University of California, San Diego; 2003: 1-390.

Hassmiller KM, Warner KE, Mendez D, Levy DT, Romano E. Nondaily smokers: who are they? *Am J Public Health* 2003;93(8):1321-7.

Jemal A, Cokkinides VE, Shafey O, Thun MJ. Lung cancer trends in young adults: an early indicator of progress in tobacco control (United States). *Cancer Causes Control* 2003;14(6):579-85.

Marbella AM, Riemer A, Remington P, Guse CE, Layde PM. Wisconsin physicians advising smokers to quit: results from the Current Population Survey, 1998-1999 and Behavioral Risk Factor Surveillance System, 2000. *WMJ* 2003;102(5):41-5.

Stillman FA, Hartman AM, Graubard BI, Gilpin EA, Murray DM, Gibson JT. Evaluation of the American Stop Smoking Intervention Study (ASSIST): a report of outcomes. *J Natl Cancer Inst* 2003;95(22):1681-91. Erratum in: *J Natl Cancer Inst* 2004; 96: 1404.

Wewers ME, Stillman FA, Hartman AM, Shopland DR. Distribution of daily smokers by stage of change: Current Population Survey results. *Prev Med* 2003;36(6):710-20.

Levy DT, Friend K. Examining the effects of tobacco treatment policies on smoking rates and smoking related deaths using the SimSmoke computer simulation model. *Tob Control* 2002;11(1):47-54.

Levy DT, Friend K. A simulation model of policies directed at treating tobacco use and dependence. *Med Decis Making* 2002;22(1):6-17.

McGrady GA, Pederson LL. Do sex and ethnic differences in smoking initiation mask similarities in cessation behavior? *Am J Public Health* 2002;92(6):961-5.

Shopland DR. Environmental tobacco smoke in the workplace: trends in the protection of U.S. workers. In: Work, Smoking, and Health. A NIOSH Scientific Workshop. June 15-16, 2000; Washington, DC; NIOSH Pub. No. 2002-148, 2002. p. 52-62.

Anderson C, Burns DM, Major J, Vaughn JW, Shanks TG. Chapter 8. Changes in adolescent smoking behaviors in sequential birth cohorts. In: Burns DM, Amacher RH, Ruppert W, eds. *Changing Adolescent Smoking Prevalence: Where It Is and Why.* Smoking and Tobacco Control Monograph No. 14. Bethesda, MD: U.S. Department of Health and Human Services, Public Health Service, National Institutes of Health, National Cancer Institute; NIH Pub. No. 02-5086, November 2001:141-55.

Cancer Progress Report 2001, National Cancer Institute, NIH, DHHS, Bethesda, MD, December 2001, http://progressreport.cancer.gov/2001/.

Levy DT, Friend K, Polishchuk E. Effect of clean indoor air laws on smokers: the clean air module of the SimSmoke computer simulation model. *Tob Control* 2001;10(4):345-51.

Levy DT, Friend K. A computer simulation model of mass media interventions directed at tobacco use. *Prev Med* 2001;32(3):284-94.

Shopland DR, Gerlach KK, Burns DM, Hartman AM, Gibson JT. State-specific trends in smoke-free workplace policy coverage: the current population survey tobacco use supplement, 1993 to 1999. *J Occup Environ Med* 2001;43(8):680-6.

Anderson C, Burns DM. Patterns of adolescent smoking initiation rates by ethnicity and sex. *Tob Control* 2000;9(Suppl 2):ii4-ii8.

Farkas AJ, Gilpin EA, White MM, Pierce JP. Association between household and workplace smoking restrictions and adolescent smoking. *JAMA* 2000;284(6):717-22.

Gilpin EA, Stillman FA, Hartman AM, Gibson JT, Pierce JP. Index for US state tobacco control initial outcomes. *Am J Epidemiol* 2000;152(8):727-38.

Gower KB, Burns DM, Shanks TG, Vaughn JW, Anderson CM, Shopland DR, Hartman AM. Section III. Workplace smoking restrictions, rules about smoking in the home, and attitudes toward smoking restrictions in public places. National and state-specific estimates from the Current Population Survey. In: Shopland DR, Hobart R, Burns DM, Amacher RH, eds. *State and*

Local Legislative Action to Reduce Tobacco Use. Smoking and Tobacco Control Monograph No. 11. Bethesda, MD: U.S. Department of Health and Human Services, Public Health Service, National Institutes of Health, National Cancer Institute; NIH Pub. No. 00-4804, August 2000:185-340.

Hollis JF, Bills R, Whitlock E, Stevens VJ, Mullooly J, Lichtenstein E. Implementing tobacco interventions in the real world of managed care. *Tob Control* 2000;9(Suppl 1):i18-i24.

Levy DT, Cummings KM, Hyland A. Increasing taxes as a strategy to reduce cigarette use and deaths: results of a simulation model. *Prev Med* 2000;31(3):279-86.

Levy DT, Cummings KM, Hyland A. A simulation of the effects of youth initiation policies on overall cigarette use. *Am J Public Health* 2000;90(8):1311-4.

Population Based Smoking Cessation: Proceedings of a Conference on What Works to Influence Cessation in the General Population. Smoking and Tobacco Control Monograph No. 12. Shopland DR, Burns DM, Amacher RH, Ruppert W, eds. Bethesda, MD: U.S. Department of Health and Human Services, Public Health Service, National Institutes of Health, National Cancer Institute; NIH Pub. No. 00-4892, November 2000.

Sweeney CT, Shopland DR, Hartman AM, Gibson JT, Anderson CM, Gower KB, Burns DM. Sex differences in workplace smoking policies: results from the current population survey. *J Am Med Womens Assoc* 2000;55(5):311-5.

Farkas AJ, Distefan JM, Choi WS, Gilpin EA, Pierce JP. Does parental smoking cessation discourage adolescent smoking? *Prev Med* 1999;28(3):213-8.

Farkas AJ, Gilpin EA, Distefan JM, Pierce JP. The effects of household and workplace smoking restrictions on quitting behaviours. *Tob Control* 1999;8(3):261-5.

Farrelly MC, Evans WN, Sfekas AE. The impact of workplace smoking bans: results from a national survey. *Tob Control* 1999;8(3):272-7.

Gilpin EA, Choi WS, Berry C, Pierce JP. How many adolescents start smoking each day in the United States? *J Adolesc Health* 1999;25(4):248-55.

Harris JE, Chan SW. The continuum-of-addiction: cigarette smoking in relation to price among Americans aged 15-29. *Health Econ* 1999;8(1):81-6.

Stillman F, Hartman A, Graubard B, Gilpin E, Chavis D, Garcia J, Wun LM, Lynn L, Manley M. The American Stop Smoking Intervention Study. Conceptual framework and evaluation design. *Eval Rev* 1999;23(3):259-80.

Kerner JF, Breen N, Tefft MC, Silsby J. Tobacco use among multi-ethnic Latino populations. *Ethn Dis* 1998;8(2):167-83.

Pierce JP, Gilpin EA, Emery SL, White MM, Rosbrook B, Berry CC, Farkas AJ. Has the California tobacco control program reduced smoking? *JAMA* 1998;280(10):893-9.

US Department of Health and Human Services. Tobacco use among U.S. racial/ethnic minority groups--African Americans, American Indians and Alaska Natives, Asian Americans and Pacific Islanders, Hispanics. A Report of the Surgeon General. Executive summary. *MMWR Recomm Rep* 1998;47(RR-18):1-16.

Arday DR, Tomar SL, Nelson DE, Merritt RK, Schooley MW, Mowery P. State smoking prevalence estimates: a comparison of the Behavioral Risk Factor Surveillance System and current population surveys. *Am J Public Health* 1997;87(10):1665-9.

Gerlach KK, Shopland DR, Hartman AM, Gibson JT, Pechacek TF. Workplace smoking policies in the United States: results from a national survey of more than 100,000 workers. *Tob Control* 1997;6(3):199-206.

Ohsfeldt RL, Boyle RG, Capilouto E. Effects of tobacco excise taxes on the use of smokeless tobacco products in the USA. *Health Econ* 1997;6(5):525-31.

Shopland DR, Hartman AM, Gibson JT, Mueller MD, Kessler LG, Lynn WR. Cigarette smoking among U.S. adults by state and region: estimates from the current population survey. *J Natl Cancer Inst* 1996;88(23):1748-58.

Cummings KM, Shah D, Shopland D. Trends in smoking initiation among adolescents and young adults--United States, 1980-1989. *MMWR Morb Mortal Wkly Rep* 1995;44(28):521-5.

Shopland DR, Hartman AM, Repace JL, Lynn WR. Smoking behavior, workplace policies, and public opinion regarding smoking restrictions in Maryland. *Md Med J* 1995;44(2):99-104.