

# Health Policy Fact Sheet

November 2006

# Adult Smoking Rate Declines, While Asthma, Diabetes and Obesity Rates Rise

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etween 2001 and 2005, adult smoking rates have declined in California, while rates of asthma, diabetes and obesity have increased. Using newly available data from the 2005 California Health Interview Survey (CHIS 2005), as well as data from CHIS 2001 and CHIS 2003, this fact sheet provides an early look at changes over time in the prevalence of smoking, asthma, diabetes, and overweight and obesity in California.

# **Smoking**

Cigarette smoking prevalence among adolescents in California increased slightly from 2003 to 2005 (Exhibit 1), but the increase was not statistically significant (comparable data is not available for 2001). Smoking prevalence among adults in California, already among the lowest of any state in the nation, declined at each time point. The 2005 smoking rate for adults, 15.2%, is statistically lower than it was in 2003 (16.5%) and 2001 (17.1%).

Exhibit 1: Prevalence of Current Smoking by Year, California

	2001	2003	2005	
	%	%	%	Number of people in 2005
Adolescents ages 12-17	n.a.	5.8	6.5	218,000
Adults ages 18 and over	17.1	16.5	15.2*†	3,999,000

<sup>\*</sup> Significantly different from 2001

Note: Current smoking prevalence refers to the percent of adults and adolescents who reported that they now smoke cigarettes every day or on some days. Source: California Health Interview Survey

## **Asthma**

Lifetime asthma prevalence increased in California between 2001 and 2005. Among children ages 1-17, lifetime asthma prevalence increased significantly from 14.1% in 2001 to 15.5% in 2003 (Exhibit 2). In 2005, 16.1% of children were reported to have been diagnosed with asthma, significantly higher than in 2001, but not a statistically significant increase from 2003. Among adults, lifetime asthma prevalence also increased significantly between 2001 and 2003, from 11.3% to 12.3%. In 2005, the prevalence was 12.7%, significantly higher than in 2001, but not a statistically significant increase from 2003.

Exhibit 2: Lifetime Asthma Prevalence by Age and Year, California

	2001	2003	2005	
	%	%	%	Number of people in 2005
Children ages 1-17	14.1	15.5*	16.1*	1,481,000
Adults ages 18 and over	11.3	12.3*	12.7*	3,356,000

<sup>\*</sup> Significantly different from 2001

Note: Lifetime asthma prevalence refers to the percent who reported being diagnosed with asthma.

Source: California Health Interview Survey

# **Diabetes**

The prevalence of diabetes in California also increased between 2001 and 2005. In 2001, 6.2% of adults age 18 and older reported being diagnosed with diabetes (Exhibit 3). In 2005, 7% of adults reported being diagnosed with diabetes, up from 6.6% in 2003. This



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Exhibit 3: Diabetes Prevalence by Year, Adults, California

	2001	2003	2005	
	%	%	%	Number of people in 2005
Adults ages 18 and over	6.2	6.6	7.0*	1,835,000

<sup>\*</sup> Significantly different from 2001

Note: Diabetes prevalence refers to the percent of adults who reported being diagnosed with diabetes.

Source: California Health Interview Survey

was not a significant increase from 2003, but was significantly higher than the prevalence in 2001.

# Overweight and Obesity

Trends in the prevalence of overweight among California adolescents between 2001 and 2005 indicate that this problem is worsening. In both 2001 and 2003, 12.4% of adolescents were overweight (Exhibit 4). In 2005, 14.2% were overweight. Although this increase is not statistically different from 2001 or 2003, overweight prevalence among adolescents in California is more than twice as high as the goal of 5% set by Healthy People 2010 (HP 2010 Objective 19-3).

Adult obesity has significantly increased over the same time period. The prevalence of obesity among adults rose from 19.3% in 2001,to 20.4% in 2003. In 2005, the prevalence reached 21.2%, a significant increase from 2003 and also significantly higher than in 2001. The 2005 adult obesity rate is a third higher than the HP 2010 objective (HP 2010 Objective 19-1 is 15% of adults).

Exhibit 4: Prevalence of Overweight and Obesity by Year, California

	2001	2003	2005	
	%	%	%	Number of people in 2005
Overweight Prevalence				
Adolescents ages 12-17	12.4	12.4	14.2	478,000
Obesity Prevalence				
Adults ages 18 and over	19.3	20.4*	21.2*†	5,595,000

<sup>\*</sup> Significantly different from 2001

Note: Obesity prevalence refers to the percent of adults with a Body Mass Index (BMI) of 30 or above based on self-reported height and weight. BMI is calculated as  $kg/m^2$ . Overweight prevalence refers to the percent of adolescents at or above the 95th percentile for age and gender appropriate BMI.

Source: California Health Interview Survey

### Conclusion

The findings presented in this fact sheet indicate that more Californians are burdened by chronic health conditions. These conditions incur substantial health care costs for medications, physician visits and hospitalizations — costs borne by individuals and their families, by business, and by government. These chronic diseases also result in poorer health, higher risks of disability and premature death, and lost earnings for individuals and families. The increasing prevalence of these conditions in California represents a growing challenge to the state's health care system and economy. California needs to take more effective and aggressive steps to prevent these chronic conditions and, when they do occur, manage them effectively.

#### **Data Source**

The information provided in this fact sheet is based on data from the California Health Interview Survey (CHIS), which collects information about the health of California's diverse population for a broad set of indicators including health conditions, health behaviors, and health insurance coverage. CHIS 2005 provides the most recent information available on the health of Californians, for the state and most counties. Statistically significant differences were determined using p<0.05. More extensive CHIS 2005 data will be available early in 2007. For more information on the California Health Interview Survey, please visit www.chis.ucla.edu.

# **Author Information**

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# **Funding**

This fact sheet was developed with a grant from The California Endowment.

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