

## **Tobacco Summit**

# ***Tobacco Use Among College and University Students***

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BOYNTON HEALTH SERVICE, UNIVERSITY OF MINNESOTA

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## **BACKGROUND**

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Data on the health risk behaviors of college students demonstrate that the use of tobacco has increased dramatically during the 1990s and is at an alarmingly high level. To examine the extent of tobacco use by college students and to identify ways to address this problem, experts in the fields of tobacco research, policy, advocacy, prevention, and cessation were brought together on April 27, 2001 for a one-day Tobacco Summit. The findings and recommendations of the Tobacco Summit are summarized in this report. For more information about the Tobacco Summit go to <[www.bhs.umn.edu/smoking](http://www.bhs.umn.edu/smoking)>.

## **FINDINGS**

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There is limited information about the use of tobacco by college students or about what are effective prevention and cessation strategies for this group. Even less is known about the 18-24 year olds who are not enrolled in post-secondary education. Most of the information on college students that is available has only been collected and reported in the last couple of years. However, the data that are available from national and local surveys are remarkably consistent in their findings about the use of tobacco among college students – the rate of tobacco use is alarmingly high and steadily increased during the 1990s. Data on tobacco in any form other than cigarettes are almost non-existent.

The focus of tobacco company marketing appears to have shifted to the 18-24 year old population. Tobacco company sponsorship of music events targeted to 18-24 year old tastes and special events at bars frequented by young adults are an indication of the approach that tobacco companies are taking to attract new smokers. In addition, the distribution of tobacco-related merchandise continues to be an effective marketing strategy.

Students entering college now are being labeled as the “millennial generation.” Their values and approaches to life appear to be markedly different than those of the generation that they are following (Generation X). The implications of this transition on tobacco use remains to be seen but it will require a reassessment of the programmatic approaches taken by colleges and universities in many areas especially those related to public health issues like tobacco use.

### **Tobacco Use:**

- Tobacco use among college students throughout the country is at a high level. (In 1999 approximately 40% of students were current tobacco users.)
- From 1991 to 1998 tobacco use by college students rose steadily (approximately 40% increase). Since 1998, the rates have remained relatively stable.
- How “tobacco use” is defined varies among studies.

- Research should include what works for 18- to 24-year-olds and specific measures and guidelines. All prevention, cessation, and policy approaches to tobacco use reduction should include an evaluation component
- Develop universal definitions of tobacco use so research/survey data can be compared. This should include annual use, current use, infrequent use, regular use, frequent use, etc.
- Information is needed on tobacco use other than cigarettes.
- College enrollment should be a question on the Behavioral Risk Factor Surveillance System (BRFSS) that is conducted by CDC.
- Review tobacco company documents to determine the tobacco industry's view of college students.
- Use the information from tobacco industry marketing for possible interventions.
- Specific research questions that need to be answered include:

#### **Policy:**

- What are the true costs (cleaning, insurance, litter, health) of smoking to a university?
- To what extent is tobacco money on campus?
- What is the link between tobacco, alcohol, and other consequences?
- Does smoking affect employability?

#### **Prevention:**

- Which prevention messages work? Should these messages be different for college and non-college individuals?
- Which messages turn people off?
- Is the social norms approach effective in reducing tobacco use among college students?
- How well does the stages of change model apply to college students?
- What is the impact of environmental policies on decreasing the initiation of tobacco use by college students and non-college students?
- What is the progression of chippers (infrequent smokers) to regular users?
- What are protective factors for infrequent users who don't graduate to frequent use?

#### **Cessation:**

- What works to recruit student smokers/users to cessation efforts?
- What is the appropriate number and intensity of cessation sessions for college students?
- What is the best way to optimize the help of a smoker's "concerned others"?
- Are carbon dioxide machines and pulmonary function tests useful diagnostics to increase concern of smokers?
- Help-Lines have had some success with adolescents. Do they work with a college population?
- How effective are web-based cessation strategies (e.g. Joe Chemo, American Lung Association, [www.mpaat.org](http://www.mpaat.org), virtual support groups)?
- What is the impact of environmental policies on increasing desire to quit?
- How effective are contests such as "Butt Out" and "Quit to Win"?
- What incentives work with college students?
- What problem solving and coping skills are helpful to develop in smokers/users wishing to quit?
- What messages work to get smokers into that first session (to quit smoking)?
- How well does the stages of change model apply to college students?
- Where would college students go for help?

## RECOMMENDATIONS

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In response to the findings of the Tobacco Summit on Tobacco Use Among College and University students, the following recommendations were made:

### Policy:

- Add college students as priority population for funding from tobacco settlements.
- The priorities for the funding that are currently being used to study alcohol use among college students should be expanded to include tobacco-related issues.
- Establish a goal of a smoke-free campus and develop an incremental plan to achieve this goal.
- Advocate for the college/university to show their commitment to reducing tobacco use by dedicating resources to that goal.
- Make all residence halls totally smoke-free.
- Ban smoking around building entrances and open windows.
- Prohibit the selling of tobacco on campus.
- Lobby for an increase in the price of tobacco.
- Advocate to have health insurance plans for college students cover cessation.
- Eliminate tobacco company sponsorship of scholarships, research, endowed chairs, events, and programs on campus.
- Prohibit tobacco company job recruitment on campus.
- Eliminate investments in tobacco company stock by the college/university.

### Prevention:

- Work with campus newspapers to place tobacco use prevention ads and eliminate tobacco advertising.
- Form prevention partnerships with community hospitals/clinics, local and state health department, non-profits (American Cancer Society, American Lung Association), insurance companies, marketing/advertising agencies, etc.
- Be sure adequate cessation programs are in place before starting any prevention effort because prevention programs will increase demand for cessation.
- Many of the Policy recommendations and/or environmental approaches to tobacco control are effective prevention strategies.

### Cessation:

- Develop stage-based (stages of change and stages of tobacco use) prevention and cessation programs.
- Use Clinical Preventive Services Task Force guidelines during each health service visit by a patient.
- An attempt should be made to compile a "best practices" document for tobacco use cessation for college students.
- Until more research is done on the 18- to 24-year-old population, guidelines and measures for adults should be used for nicotine replacement.
- Advocate to have insurance for college students cover cessation.
- Develop recruitment strategies that target particular majors to promote cessation.
- Nicotine suckers are a new therapy that needs more research.

### Research:

- Tobacco control researchers need to add 18-24 year old college students and non-college students to their research agendas.
- Longitudinal studies need to be done on tobacco use among college students.

- Since 1991, rates of tobacco use have increased for males and females.
- Among 20 – 24 year olds (not college specific) African Americans have lower rates of use of tobacco. Black females have very low rates of use.
- Over 20% of tobacco users in college started after enrollment in college. A large number (15% - 30%) of students, who started using tobacco before college, reinitiated or increased amount of tobacco use in college.
- Females initiate tobacco use at a later age than males.
- The frequency of use of tobacco by males and females vary. Among students who smoke, females are more likely to be frequent smokers.
- College students who are frequent users of tobacco generally started smoking at an earlier age than infrequent smokers.
- The number of former smokers has decreased during the 1990s. (Quitting rates have declined in the 1990s.)
- Students' perception of the number of students using tobacco is much higher than the actual level of use.
- Young adults (18-22) enrolled full time in college were less likely than their peers who were not enrolled full time to report current tobacco use in 1999.
- At least 40% of college students who use tobacco report some measure of tobacco dependency. Tobacco use is linked to poorer academic performance.
- Tobacco use is linked with marijuana use.
- Tobacco use is tightly correlated with alcohol use.
- There is a strong correlation between the age of first use of tobacco and the age of first use of alcohol and marijuana. There is a positive correlation between tobacco use and alcohol use. The more frequent smokers drink more alcohol. Most "binge" drinkers are frequent smokers. College students know about the risks of tobacco use.
- Peer influences, stress, and tobacco company marketing are major reasons why college students begin or continue to use tobacco.

#### **Prevention:**

- There are few prevention programs for college students that have been adequately evaluated.
- There is disagreement about the efficacy of a social norms approach in reducing tobacco use among college students.
- Students claim that peer pressure and stress are the main reasons they initiate tobacco use in college.
- Policy and environmental strategies increase price, restrict access to tobacco, increase smoke free areas, limit advertising, etc. are most likely the best prevention initiatives.
- Prevention efforts usually increase demand for cessation programs so prevention and cessation programs need to be coordinated.

#### **Cessation:**

- Not much is known about smoking cessation strategies for college students.
- There are few cessation programs being offered for use by college students and few, if any of those being tried, have been adequately evaluated.
- Compared to the number of users, there is not a great demand by college students for cessation help.
- Getting smoker/user to the first session is key.
- Convenience of the cessation program is critical.
- Students are hesitant to spend money on nicotine replacement therapies.
- Nicotine gum is OK to prescribe with lighter smokers.
- Zyban/Wellbutrin appears to work for a lot of smokers.
- Students seem to be motivated to receive a certificate of completion.
- Students are more interested in individual counseling sessions than group sessions.
- Stress management is integral to successful cessation.