

Prevalence and Trends

The Prevalence of Tobacco use in the Military

In 2008, the most recent year for which data are available, current smoking rates among military personnel were 31%--a rate which has steadied since 2002.¹ When asked what contributes to the high rate of smoking in the military, service members name stress management, boredom, anxiety, sleep deprivation, proximity to danger in the field trumping health impacts of smoking, and an environment that facilitates smoking as the major factors.²

- Of all branches of the military, members of the Marine Corps reported the highest percentage of smokers (37%), followed by the Army (33%), Navy (31%), Coast Guard (28%), and the Air Force (23%), which has the lowest percentage of smokers.¹
- Thirty-two percent of men in the military were smokers along with 21% of women.¹
- There is an inverse relationship between smoking in the military and pay grade; the lowest paid military personnel had a much higher smoking prevalence than the highest paid officers.¹
- In the same survey, 14% of military personnel reported using smokeless tobacco. The Marine Corps reported the highest rate of smokeless tobacco use (22%) compared with 16% of those in the Army, 10% of the Navy, 9% of the Air Force and 13% of the Coast Guard.¹
- From 2003-2007 veterans had higher smoking rates than nonveterans of a similar age (27% and 21% respectively).³
- The prevalence of cigarette use was not significantly different for military personnel compared to the civilian population with similar demographics; however, for those aged 36 to 64, smoking rates were significantly lower among military personnel.¹

Smoking Initiation in the Military

Studies indicate that military recruits are particularly vulnerable to smoking initiation and that smoking rates increase between recruitment and active duty.

- One study found that tobacco use was 2-4 times higher in men in active duty compared to male recruits.⁴
- Another study found that about 50% of Naval recruits used tobacco in the year before their enlistment.⁵
- Nearly one-third of smokers in the military began smoking after joining,¹ and among junior enlisted personnel who smoke, 40% report initiating smoking after joining the military.⁶
- Military deployment is associated with smoking initiation and, more strongly, with smoking recidivism, particularly among those with prolonged deployments, multiple deployments, or combat exposures.⁷
- A study of U.S. military members by the Department of Defense found that combat exposure significantly increases smoking initiation; non-smokers are 1.6 times more likely to start smoking after deployment and past smokers are 1.3 times more likely to resume smoking after deployment when compared to non-smokers and past smokers who had not seen combat.⁷

Trends in Military Tobacco Use

- Among military personnel, those who smoke are more likely to be male, single, White, enlisted men between age 18 and 20 years with low levels of education serving in the Army or Marine Corps.⁸
- The prevalence of smoking declined significantly among all military personnel between 1980 and 2002. However, there was not a statistically significant decline between 2002 and 2008.¹
- The overall prevalence of heavy smoking among military personnel declined from 13% in 2002 to 10% in 2008, an all-time low; this is also a significant decrease from 34% in 1980.¹
- A study that followed two cohorts of Air Force recruits (one entering the Air Force between August 1995 and August 1996, and another entering between October 1999 and September 2000) found that smoking rates increased significantly between the two cohorts. While the second cohort smoked fewer cigarettes on average, they had an overall higher prevalence of smoking and reported being less motivated to quit.⁹

Tobacco Control Efforts

Despite multiple attempts in various branches to initiate smoke free policies, no military branch is smoke free.

- The DoD tobacco control policy (set forth in Health Promotion policy Directive 1010.10 and Directive 1010.15) prohibits smoking in indoor facilities; however many exemptions were made to the smoking ban in indoor facilities.¹⁰
- The goal of the DoD to lower the smoking prevalence to below 12 % by 2010 was not achieved.¹¹
- The Air Force does not allow its personnel to smoke in military buildings except in specified areas, recruits are not allowed to smoke during basic training, and advertising is forbidden in Air Force publications.¹²
- Despite these regulations, nearly 10% of military newspapers contain tobacco advertisements. Tobacco control messages in military newspapers are less prevalent than other health issues, using less effective messaging strategies.¹³
- In April 2010, the Commander of Submarine Forces affected a policy banning smoking below decks aboard all U.S. Navy submarines. The smoking ban, announced via naval message, will become effective no later than Dec. 31, 2010.¹⁴

Effects of Tobacco on the Military Population

Multiple studies have found adverse effects on military personnel for a variety of outcomes due to smoking.

- Military personnel who smoke are less productive and do not perform as well on physical fitness tests relative to nonsmoking personnel.^{15,16}
- In a study of how smoking status and overweight predict fitness levels among a military population, smoking was a stronger and more consistent predictor of fitness for duty (including physical and mental health) than overweight.¹⁷
- A study of women joining the Navy found that smoking was predictive of poorer job performance and higher attrition rates.¹⁸
- A recent study of young US Navy female recruits found that the average number of days hospitalized was significantly longer by about half a day for those that were daily smokers compared to those who were former smokers or smoked only occasionally.¹⁹

Tobacco Cessation Among Military Personnel

- Like civilian smokers, many smokers in the military report trying to quit. In 2008, 16% of military personnel that were smokers in the past year had quit, and 48% had tried unsuccessfully to quit.¹
- A smoking cessation intervention organized through Veterans Affairs for recently returned veterans resulted in a 38% rate of abstinence from smoking after two months. Participants were referred to the NCI Quitline and offered local VA pharmacological treatment.²⁰
- Cessation medications are not currently covered by TRICARE. However, the military does provide a 24-hour quit line and web-based quit assistance to its personnel (<http://www.ucanquit2.org/>).

A Culture that Encourages Tobacco Use

- Documents reveal that the tobacco industry has targeted the military for decades, using unique strategies to reach this market.²¹
- When asked about quitting smoking, soldiers believed that one needed to “leave the Army” in order to be successful due to the difficulty one would have abstaining given the availability of tobacco and the high use by other soldiers around them.²²
- Focus groups with junior enlisted personnel revealed that they believed that even though the military has placed bans on tobacco, smoking was still very convenient and was even encouraged through smoking breaks, designated smoking areas, and cheap tobacco products sold at military installations. Smoking was also seen as a way in which to deal with the stress and boredom along with avoiding weight gain.²³
- In 2009, the Institute of Medicine Committee on Smoking Cessation in Military and Veteran Populations made recommendations to the Department of Defense and the Department of Veterans Affairs on strategies to reduce initiation and cessation in active-duty and veteran populations. In order to alleviate the health and financial burden of tobacco use on military personnel, retirees, families, and veterans, the committee recommended DoD prohibit all tobacco use on military installations and stop selling tobacco products in commissaries and exchanges; congressional requirements for designated smoking areas at VA health-care facilities should be repealed; and comprehensive tobacco-control programs be implemented and their progress tracked and reported on publicly.²⁴

SOURCES

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