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Home Matters: Work and household predictors of smoking and cessation among blue-collar workers

CA Okechukwu^a, LM Dutra^a, J. Bacic^{a,b}, A. El Ayadi^a, and KM. Emmons^{a,c}

^aHarvard University School of Public Health, Department of Society, Human Development and Health, 677 Huntington Avenue; Boston, MA 02115

^bBoston University School of Public Health, Department of Health Policy and Management, 715 Albany Street, Talbot Building, Boston, MA 02118

^cDana-Farber Cancer Institute, Center for Community Based Research, 44 Binney Street, Boston, MA 02115

Abstract

Objective—This study examined the joint influence of work- and household-related variables on smoking behavior among a population representative sample of blue-collar workers with live-in partners.

Methods—The study used data on 1,389 blue-collar workers from the Tobacco Use Supplement to the United States Current Population Survey 2002 to 2003 longitudinal overlap sample. Unadjusted and adjusted logistical regression analyses, which employed sampling and replicate weights to account for sampling design, were run to estimate independent and joint effects of the predictors.

Results—In adjusted analyses, partner smoking (OR=4.97, 95%CI=3.02–8.18) and complete and partial home smoking policy (OR=0.16, 95%CI=0.09–0.29 and OR=0.39, 95%CI=0.23–0.68, respectively) were significant predictors of smoking status, but worksite smoking policies and presence of a young child under 5 in the household were not ($p>0.05$). Baseline complete home smoking ban was a significant predictor of subsequent cessation (OR=3.49, 95%CI=1.19–10.23), while partner smoking status, workplace smoking policy, and the presence of a young child in the home did not predict cessation ($p>0.05$).

Conclusion—Household-related variables were significant predictors of smoking status and cessation among blue-collar workers. Current efforts to decrease smoking in this group, which are mostly focused on work-related risk factors, should consider how to incorporate household risk factors.

Keywords

smoking; occupational class; blue-collar; partner smoking

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Corresponding Author: Cassandra Okechukwu, Department of Society, Human Development, and Health, Harvard School of Public Health, Kresge Building, 7th Floor, 677 Huntington Avenue, Boston, Massachusetts 02115, Phone: 617.432.4486, Fax: 617.432.3123, cokechuk@hsph.harvard.edu.

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Introduction

The continuing decline of smoking in the US, to a current population prevalence of 19.3%, is cited as one of the greatest health advances in the past three decades (Schroeder, 2008; Syamlal et al., 2011). However, smoking prevalence among some blue-collar workers, such as construction and mining workers, is about 30% (Syamlal et al., 2011). Blue-collar workers have a younger age of smoking initiation, smoke more heavily, and have lower smoking cessation rates (Barbeau et al., 2004; Giovino et al., 2000). Blue-collar worksites are also less likely to provide social support for smoking cessation, and less likely to have workplace smoking policies or health insurance coverage for smoking cessation treatment (Barbeau et al., 2001; Shopland et al., 2004; Sorensen et al., 2002). The lack of workplace smoking policies is particularly important because these policies may increase smoking cessation attempts and success. A review of literature found that workers in workplaces with strict smoking policies were less likely to be smokers and more likely to quit smoking (Brownson et al., 2002). These findings were echoed in a longitudinal study; workers at worksites that adopted or maintained worksite smoking policies during the study period were almost twice as likely to quit smoking as workers whose worksites did not (Bauer et al., 2005).

Despite many studies on blue-collar workers and smoking, several gaps remain. First, these studies have not considered household-related risk factors that have been shown to impact smoking behaviors, such as home smoking restrictions, which, whether self-imposed or not, have been associated with decreased likelihood of smoking (Borland et al., 2006; Farkas et al., 1999; Hyland et al., 2009). Similarly, the smoking status of live-in partners has been shown to influence smoking behaviors (Dollar et al., 2009; Franks et al., 2002; Manchon Walsh et al., 2007). One study of blue-collar apprentices revealed that, compared to non-smokers, smokers were 13 times more likely to have partners who smoke (Okechukwu et al., 2010). Another potentially important household-related predictor of smoking behavior is the presence of young children because households with young children are more likely to restrict smoking within the home (Borland et al., 2006; Hawkins and Berkman, 2011).

Only one study has combined knowledge about work- and household-related smoking risk factors to investigate smoking outcomes (Farkas et al., 1999). Farkas and colleagues (1999) found that restricting smoking in homes and workplaces and living with a smoker were significant predictors of cessation attempts and success. However, the authors did not consider occupational class and used cross sectional data. The current study uses a population representative longitudinal sample of blue-collar workers to investigate the impact of both work- and household-related factors on smoking and smoking cessation and also evaluates the relative contribution of each factor to these outcomes.

Methods

Data Sources

Data for this study are from the 2002 and 2003 Tobacco Use Supplement to the Current Population Survey (TUS-CPS). The TUS-CPS uses a multistage probability sampling design to capture smoking behaviors, employment, and demographic information for a representative sample of US households (CPS, 2006; Soulakova et al., 2009). The TUS-CPS conducted a special cessation supplement in February 2003, which, because it overlapped with the February 2002 sample, provided longitudinal data.

The study sample included blue-collar workers (classified using the US Standard Occupational Classification System codes), who were ages 18 or older with live-in spouses or partners (n=1389). The final population representative sample of 1,008 blue-collar

workers was reached after excluding 381 subjects who were missing the key outcome and exposure variables of respondent smoking status (n=5), partner smoking status (n=104), workplace smoking policy (n=279), and home smoking policy (n=5). Some subjects had missing values for more than one variable. Given the proportion of respondents with missing information on household income (6%), a prediction algorithm established by the CPS was used to impute income (Clark, 2011).

Study Measures

Outcomes—Individuals were classified as *smokers* at baseline if they reported lifetime smoking of at least 100 cigarettes and smoking “every day” or “some days” in the 2002 survey (CDC, 1994). A smoker is considered to have quit if they reported smoking in 2002, but reported smoking “not at all” in the 2003 survey.

Exposures—The same criteria for respondent smoking status were used to define *partner smoking status*. *Home smoking policy* was based on answers to the question “Which statement best describes the rules about smoking inside your home?” Choices were “no one is allowed to smoke anywhere inside the home” (complete ban), “smoking is allowed in some places or at some times inside the home” (partial restriction) and “smoking is permitted anywhere inside the home” (no ban).

TUS-CPS classified *Workplace smoking policy* based on answers to the following questions: “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?” and “Which of these best describes your place of work’s smoking policy for work areas?” Classifications were complete ban (official policy banning smoking in all public or work areas), partial restriction (official policy but smoking allowed in some or all public or work areas) and no ban (no official policy). Those who reported that they work mostly outdoors or travel to different sites were grouped into their own separate category.

Presence of young children: TUS-CPS respondents who reported having a child under the age of 5 in the household were classified as “yes” while others were classified as “no.”

Covariates

Socio-demographic characteristics: Gender classifications were male or female. Annual household income was divided into four categories (less than \$25,000, \$25,000–\$49,999, \$50,000–\$74,999, and \$75,000 or greater), and educational attainment was categorized as high school graduate or non-high school graduate. Responses to the two race and ethnicity questions were combined to form four racial/ethnic categories: non-Hispanic white; non-Hispanic black; Hispanic; and other.

Statistical Analyses

All analyses were conducted in 2012 with a significance level of 0.05. SAS version 9.2 was used to obtain descriptive statistics. Models for each of the outcome variables were estimated using SAS-Callable SUDAAN version 10, which allows for calculation of standard errors and confidence intervals that are valid for the TUS complex sampling design. The values of all predictor variables and covariates were obtained from responses to the 2002 survey.

Model building began with the estimation of simple logistic regression models to obtain the unadjusted effect of each exposure. Multiple logistic regression analyses were then used to examine the independent and joint influence of exposure variables on smoking behaviors, controlling for age, gender, race/ethnicity, education, and household income. Interactions

among independent variables were also examined. Each model used a balanced repeated replication Fay's adjustment factor of 4 and the TUS-supplied longitudinal sampling and replicate weights to account for possible within-state clustering, the multistage sampling schema, and nonresponse.

The adequacy statistic, which reports the percentage of explainable variation in the outcome variable that can be explained by each predictor variable, was used to rank the main exposures by explanatory value. Total explainable variation is $-2 \times \log$ likelihood ($-2LL$) of the full model that contains all predictors from a given set. The explainable variation for each predictor is the $-2LL$ of the unadjusted model. Higher adequacy values indicate more explanatory power.

Results

The smoking prevalence among this sample of blue-collar workers was 26.3% in 2002 and 24.5% by 2003 (Table 1). Approximately 20% of respondents reported having smokers as partners in 2002; while 68.7% reported a complete home smoking ban, 17.4% reported a partial restriction, and 13.9% reported no ban. Thirty-seven percent of respondents reported a complete workplace smoking ban, 14.5% reported a partial restriction, 11.1% reported no restriction, and 38.0% reported working outdoors or traveling to different sites.

Smoking Status

Partner smoking status and home smoking policy were significantly associated with smoking status in both unadjusted and adjusted analyses (Table 2). In the single predictor multivariable model (model 1), partner smoking was associated with 8.6 times greater odds of being a smoker (95% CI: 5.64–13.09), which decreased to 5.0 in the final model (95% CI: 3.02–8.18). Complete home smoking ban was associated with significantly lower odds of smoking (OR: 0.09, 95% CI: 0.05–0.16); as was a partial restriction (OR: 0.35, 95% CI: 0.20–0.63) (model 2). Both remained significant predictors of smoking in the final model. Worksite smoking policy and presence of a young child were not significantly associated with smoking status in unadjusted or adjusted analysis.

Smoking Cessation

In unadjusted models of smoking cessation (Table 3), having a smoking partner led to significantly lower odds of cessation (OR: 0.38, 95% CI: 0.19–0.74). A complete home smoking ban significantly predicted cessation (OR: 4.34, 95% CI: 1.76–10.72), as did a partial restriction (OR: 3.16, 95% CI: 1.25–7.97), in comparison to no ban. Workplace smoking policy and presence of a young child were not significant predictors of smoking cessation.

After adjusting for covariates, partner smoking status was no longer significant (OR: 0.47, 95% CI: 0.20–1.12). Complete home smoking ban remained significant (OR: 3.89, 95% CI: 1.39–10.86), but partial restriction did not (OR: 3.05, 95% CI: 0.97–9.53). Workplace smoking policy and the presence of a young child remained non-significant. Only complete home smoking ban significantly predicted smoking cessation in the final model (OR: 3.49, 95% CI 1.19–10.23). None of the interaction terms tested was significant.

Adequacy Statistics

The total explainable variance for the multivariable model of smoking status and smoking cessation was 247.53 and 47.19 respectively ($-2 \times \log$ likelihood) (table 4). Examining the predictive ability of each independent variable, home smoking policy had the highest explainable variance for both smoking status and smoking cessation (63.4% and 30.8%

respectively); this was followed by partner smoking status (62.5% and 20.9% respectively). Workplace smoking policy and the presence of a young child had very low explanatory value for both smoking status and smoking behavior.

Discussion

This study examined the combined influence of work- and household-related risk factors for smoking status and cessation using a longitudinal population-representative sample of blue-collar workers. Home smoking ban and partner's smoking predicted smoking status but workplace smoking policy and presence of a child under five did not. Household-related predictors had the highest explainable variance in the final predictive models, but only complete home smoking ban was significantly associated with smoking cessation in longitudinal analyses.

Workplace smoking policy did not predict smoking in either cross-sectional or longitudinal analysis. This finding is contrary to Farkas and colleagues' analysis of cross-sectional data from the 1992 TUS-CPS (1999). The current study only involved blue-collar workers, but Farkas and colleagues conducted their analysis among all workers and did not control for occupational class. To understand differences between the two findings, the present study repeated the analysis done by Farkas and colleagues by using only 2002 cross-sectional data from all workers. In that analysis, workplace smoking policy predicted cessation when occupational class was not controlled for in the model. Other studies that did not consider household predictors have found associations between workplace policy and smoking (Brownson et al., 2002; Ham et al., 2011); but one study, which investigated specific workplaces instead of clustering all workplaces together found that the association between workplace policy and smoking differ by types of workplaces (Bitler et al., 2010).

This study did not find any association between presence of young children in households and smoking behavior. This finding is surprising because other studies found that presence of children in the household increases odds of home smoking ban, which is associated with smoking cessation (Hawkins and Berkman, 2011). Similar to present study, most studies have found that smokers are more likely to have partners who smoke, but studies of partner smoking cessation have been mixed. Two studies of non-US populations found an association between partner smoking and smoking cessation (Manchon Walsh et al., 2007; Monden et al., 2003) while a study with a US population did not find significant associations between partner smoking and smoking cessation (Franks et al., 2002). More studies are needed on the issue.

One limitation of the current study is potential exposure misclassification. For example, workers' own smoking behaviors may influence their views of smoking policies at home and work. There is currently no objective repository of home smoking rules. Objective measures of workplace policies, such as state and local clean indoor air laws, exist. However, these laws might not reflect actual exposures for many workers—especially blue-collar workers. First, private workplaces might institute smoking policies even when state and local policies do not exist. A recent qualitative analysis of construction workers' online discussions revealed that they are exposed to a variety of smoking restrictions based on job sites and contractors (Bondy and Bercovitz, 2011). This calls into question the classification of smoking policy for such blue-collar workers who are exposed to multiple workplaces over the course of the year. As we found here, there is a relatively large percentage of blue-collar workers who fall into this category. Second, most workers have to rely on their employer for enforcement of workplace smoking policies, and it is possible that there is differential enforcement of smoking policy by occupational class (Bitler et al., 2010).

Another study limitation is the use of self-reported smoking status without biochemical validation. However, the need for such validation in population-based studies has been questioned, and there is no expectation of potential differential misclassification of smoking by any of the exposure variables (Gorber et al., 2009; Murray et al., 2002). Unmeasured confounding is still a possibility, but multivariable analyses controlled for many potential confounding variables. Since this data were collected in 2002 and 2003, 26 US states have enacted workplace smoking bans and the number of home smoking bans has also increased (Mills et al., 2009). Nonetheless, these temporal trends are not expected to impact current findings regarding the strong effects of household-related risk factors on smoking and smoking cessation among blue-collar workers.

One strength of this analysis is the use of a longitudinal sample, which, though older, allowed for the establishment of temporal precedence and eliminated concerns about reverse causation with regards to smoking cessation. Also, the study was able to examine the influence of both work- and household-related risk factors for smoking in blue-collar workers, the occupational grouping with the highest prevalence of smoking. To our knowledge, this is the first examination of the influence of both work- and household-related risk factors for smoking among blue-collar workers.

Conclusion

Current efforts to decrease smoking among blue-collar workers have been focused on understanding and ameliorating work-related risk factors (Albertsen et al., 2006; Albertsen et al., 2003, 2004; Moher et al., 2005; Okechukwu et al., 2009; Sorensen et al., 2004). While this was a welcomed departure from the earlier focus on individual-level risk factors, these findings suggest that household risk factors are important drivers of smoking behaviors among blue-collar workers. Home smoking bans have tripled since the first TUS-CPS in 1992/1993; however, these bans are more likely in high education households (Mills et al., 2009). Blue-collar workers generally have lower education. Further longitudinal studies are needed to explicate possible occupational class differences in home smoking bans. Intervention studies are also needed to understand how to translate these findings into intervention activities.

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Highlights

We used longitudinal population representative data from blue-collar workers.

We examined household and work predictors of smoking status and smoking cessation.

Complete home smoking ban and partner smoking predicted smoking status.

Only complete home smoking ban predicted subsequent smoking cessation.

Presence of a child and workplace smoking policies were not significant predictors.

Table 1

Sociodemographic and smoking characteristics of blue collar workers and their partners, Tobacco Use Supplement – Current Population Survey Overlap Sample 2002–2003 (N=1008)

	n	% ^a
2002 Smoking Status		
Smoker	268	26.3
Non-smoker	740	73.7
2003 Smoking Status		
Smoker	238	24.5
Non-smoker	770	75.5
Successful Cessation Attempts		
Yes	58	21.1
No	210	78.9
Partner Smoking Status		
Smoker	219	19.8
Non-smoker	789	80.2
Partner Status		
Spouse	923	92.1
Partner	85	7.9
Race/Ethnicity		
White, non-Hispanic	803	64.9
Black, non-Hispanic	60	9.7
Other	18	2.9
Hispanic	127	22.6
Educational Attainment		
Non-high school graduate	174	23.3
High school graduate	834	76.7
Annual Family Income		
Less than \$25,000	139	16.9
\$25,000 – \$49,999	400	40.2
\$50,000 – \$74,999	289	27.6
\$75,000 or greater	180	15.3
Child under the age of 5		
No	769	70.3
Yes	239	29.7
Gender		
Female	187	14.8
Male	821	85.2
Work Location		
Mostly Indoors	606	59.2
Mostly Outdoors	221	20.7
Travel to Different Buildings/Sites	157	17.3

	n	% ^a
Other	24	2.8
Occupation Description		
Precision production, craft and repair occupations	467	45.8
Machine operators, assemblers and inspectors	220	21.2
Transportation and material moving occupations	199	19.0
Handlers, equipment cleaners, helpers and laborers	122	14.0
Home Smoking Policy		
No ban	166	13.9
Partial restriction	178	17.4
Complete ban	664	68.7
Work Place Smoking Policy		
No ban	110	11.1
Partial restriction	147	14.5
Complete ban	373	36.5
Work outdoors/Travel to different sites	378	38.0
Age		
Mean (SD)	43.2	(11.1)

^aPercentages are weighted.

Table 2

Association of work-related and home related risk factors with respondent smoking at baseline among blue collar workers, Tobacco Use Supplement – Current Population Survey Overlap Sample 2002–2003^a

N = 1008																		
	Unadjusted Models			Model 1		Model 2		Model 3		Model 4		Final Model						
	OR	95% CI		OR	95% CI	OR	95% CI	OR	95% CI	OR	95% CI	OR	95% CI					
Partner Smoking Status																		
Smoker	8.15	5.50	12.07	8.59	5.64	13.09						4.97	3.02	8.18				
Non-smoker	REF	-	-	REF	-	-						REF	-	-				
Home Smoking Policy																		
Complete ban	0.10	0.06	0.17				0.09	0.05	0.16			0.16	0.09	0.29				
Partial restriction	0.39	0.22	0.70				0.35	0.20	0.63			0.39	0.23	0.68				
No ban	REF	-	-				REF	-	-			REF	-	-				
Work Place Smoking Policy																		
Complete ban	0.66	0.37	1.17							0.64	0.35	1.16			0.83	0.39	1.78	
Partial restriction	1.04	0.55	1.96							0.96	0.51	1.79			1.17	0.55	2.50	
Work outdoors/Travel to different sites	0.83	0.48	1.42							0.85	0.49	1.46			1.23	0.62	2.43	
No ban	REF	-	-							REF	-	-			REF	-	-	
Child under the age of 5																		
Yes	0.95	0.65	1.40									0.85	0.50	1.43	1.20	0.66	2.19	
No	REF	-	-									REF	-	-	REF	-	-	
Age	1.00	0.98	1.01	1.01	0.99	1.02	0.99	0.97	1.01	1.00	0.98	1.01	0.99	0.97	1.01	1.01	0.98	1.03
Gender																		
Male	0.85	0.54	1.35	1.25	0.72	2.17	1.01	0.62	1.65	0.83	0.52	1.31	0.90	0.58	1.41	1.13	0.64	1.98
Female	REF	-	-	REF	-	-	REF	-	-	REF	-	-	REF	-	-	REF	-	-
Race/Ethnicity																		
White, non-Hispanic	1.54	0.97	2.45	1.47	0.75	2.89	1.25	0.63	2.49	2.20	1.20	4.04	2.25	1.23	4.14	1.04	0.52	2.05
Black, non-Hispanic	1.55	0.70	3.47	1.79	0.64	5.00	2.11	0.77	5.78	2.02	0.83	4.92	2.12	0.86	5.20	1.80	0.62	5.20
Other	1.12	0.24	5.26	1.61	0.28	9.44	0.79	0.10	6.31	1.78	0.38	8.23	1.72	0.37	8.12	1.00	0.13	7.83
Hispanic	REF	-	-	REF	-	-	REF	-	-	REF	-	-	REF	-	-	REF	-	-
Educational Attainment																		
Non-high school graduate	0.93	0.57	1.54	1.04	0.53	2.02	0.91	0.48	1.70	0.90	0.51	1.59	0.92	0.53	1.61	0.94	0.47	1.90

N = 1008																		
	Unadjusted Models		Model 1		Model 2		Model 3		Model 4		Final Model							
	OR	95% CI	OR	95% CI	OR	95% CI	OR	95% CI	OR	95% CI	OR	95% CI						
High school graduate	REF	-	REF	-	REF	-	REF	-	REF	-	REF	-						
Annual Family Income																		
Less than \$25,000	2.76	1.47	5.17	3.50	1.72	7.12	2.70	1.23	5.93	4.03	1.98	8.21	2.63	1.21	5.69			
\$25,000 – \$49,999	2.03	1.22	3.39	2.09	1.19	3.67	1.74	0.95	3.18	2.24	1.32	3.81	2.25	1.32	3.85	1.69	0.93	3.07
\$50,000 – \$74,999	1.26	0.71	2.23	1.10	0.58	2.08	1.05	0.54	2.06	1.30	0.73	2.32	1.30	0.73	2.31	0.94	0.48	1.86
\$75,000 or greater	REF	-	REF	-	REF	-	REF	-	REF	-	REF	-	REF	-	REF	-	REF	-

Table 3

Association of work-related and home related risk factors from 2002 with respondent cessation in 2003 among blue collar workers, Tobacco Use Supplement – Current Population Survey Overlap Sample 2002–2003^a

N = 268																		
	Unadjusted Models			Model 1		Model 2		Model 3		Model 4		Final Model						
	OR	95% CI		OR	95% CI	OR	95% CI	OR	95% CI	OR	95% CI	OR	95% CI					
Partner Smoking Status																		
Smoker	0.38	0.19	0.74	0.47	0.20	1.12						0.54	0.22	1.35				
Non-smoker	REF	-	-	REF	-	-						REF	-	-				
Home Smoking Policy																		
Complete ban	4.34	1.76	10.72				3.89	1.39	10.86						3.49	1.19	10.23	
Partial restriction	3.16	1.25	7.97				3.05	0.97	9.53						2.85	0.83	9.85	
No ban	REF	-	-				REF	-	-						REF	-	-	
Work Place Smoking Policy																		
Complete ban	0.54	0.18	1.58							0.49	0.14	1.70			0.39	0.11	1.38	
Partial restriction	0.24	0.04	1.61							0.32	0.06	1.90			0.27	0.04	1.87	
Work outdoors/Travel to different sites	0.65	0.25	1.71							0.56	0.19	1.72			0.50	0.16	1.57	
No ban	REF	-	-							REF	-	-			REF	-	-	
Child under the age of 5																		
Yes	0.87	0.35	2.19							0.62	0.21	1.81			0.48	0.16	1.48	
No	REF	-	-							REF	-	-			REF	-	-	
Age	1.01	0.98	1.05	1.01	0.97	1.05	1.02	0.98	1.06	1.01	0.97	1.06	1.00	0.97	1.05	1.00	0.96	1.05
Gender																		
Male	3.86	1.24	12.02	2.67	0.77	9.28	2.82	0.77	10.37	2.90	0.80	10.49	3.08	0.87	10.94	2.64	0.75	9.32
Female	REF	-	-	REF	-	-	REF	-	-	REF	-	-	REF	-	-	REF	-	-
Race/Ethnicity																		
White, non-Hispanic	0.27	0.11	0.67	0.32	0.12	0.85	0.43	0.16	1.18	0.26	0.09	0.74	0.25	0.09	0.67	0.38	0.12	1.20
Black, non-Hispanic	0.11	0.02	0.83	0.18	0.02	1.33	0.15	0.02	1.27	0.19	0.03	1.34	0.15	0.02	1.11	0.17	0.02	1.48
Other	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Hispanic	REF	-	-	REF	-	-	REF	-	-	REF	-	-	REF	-	-	REF	-	-
Educational Attainment																		
Non-high school graduate	1.88	0.76	4.68	1.06	0.38	2.95	1.29	0.44	3.72	1.13	0.43	3.00	1.21	0.45	3.21	1.10	0.35	3.40

N = 268																		
	Unadjusted Models		Model 1		Model 2		Model 3		Model 4		Final Model							
	OR	95% CI	OR	95% CI	OR	95% CI	OR	95% CI	OR	95% CI	OR	95% CI						
High school graduate	REF	-	REF	-	REF	-	REF	-	REF	-	REF	-						
Annual Family Income																		
Less than \$25,000	0.74	0.18	2.99	0.51	0.13	1.98	0.61	0.14	2.70	0.52	0.10	2.33	0.63	0.12	3.26			
\$25,000 – \$49,999	0.38	0.11	1.33	0.44	0.13	1.47	0.55	0.15	2.06	0.45	0.11	1.88	0.43	0.11	1.67	0.53	0.13	2.11
\$50,000 – \$74,999	0.55	0.15	2.00	0.78	0.21	2.90	0.82	0.20	3.33	0.85	0.21	3.39	0.70	0.17	2.80	1.09	0.27	4.42
\$75,000 or greater	REF	-	REF	-	REF	-	REF	-	REF	-	REF	-	REF	-	REF	-	REF	-

Table 4

Adequacy statistic for final model of work-related and home related risk factors from 2002 predicting respondent cessation in 2003 among blue collar workers, Tobacco Use Supplement – Current Population Survey Overlap Sample 2002–2003^a

Variable	Baseline Smoking Status		Smoking Cessation	
	–2LL	Adequacy (%)	–2LL	Adequacy (%)
Total explainable variance by the entire set of predictors	247.53	N/A	47.19	N/A
Partner smoking status	154.74	62.5	9.85	20.9
Home smoking policy	157.95	63.4	14.52	30.8
Workplace smoking policy	5.87	2.4	6.42	13.6
Child under the age of 5	0.09	0.04	0.16	0.34

^aModel controlled for age, gender, race/ethnicity, educational attainment, and household income.