

## Abstract

**Background:** Smoking prevalence in Serbia is high both among general and vulnerable populations. Interventions should be evidence based and in line with needs of each population group. The highest prevalence of smoking is among vulnerable groups, where interventions beyond those aimed at general population are required. **Aims:** To analyze and compare smoking prevalence and its patterns, exposure to tobacco smoke and their correlates among general population and vulnerable groups and to identify gaps and needs for monitoring and policy. **Material and methods:** Secondary analysis of data obtained through different surveys implemented in 2013 and 2014 was conducted. Databases from three general population surveys and six surveys among selected vulnerable groups (prisoners, men having sex with men, sex workers, people living with HIV, Roma youth, institutionalized children) were used. **Results:** Data show high smoking prevalence among adults (34.7%) with gender differences. Lower socioeconomic status is the strongest factor associated with smoking among adults. Smoking prevalence is the highest in the age group 35-45 years (47.0%). Among Serbian youth, perceived availability and being taught in school about tobacco are important correlates of smoking. More than half of adults and youth are exposed to tobacco smoke at various places. Smoking is socially highly acceptable in Serbian society and risk perception is at low level. Smoking status is correlated with frequent drinking, frequent binge drinking and recent cannabis use. Smoking prevalence is significantly higher among stigmatized populations compared to general population, both among adults and youth, with highest prevalence among sex workers (90.5%). **Conclusions:** There is an urgent need for strengthening smoking cessation services and for targeted actions to substance users and people under psychological distress. Better regulation of promotion of tobacco products and stronger compliance with selling ban to youth are needed. Among vulnerable populations, harm reduction approaches including those reducing smoking could be initiated; they should take into account stigmatization, cultural sensitive issues and hidden nature of these population groups.

**Key words:** tobacco use – general population – vulnerable groups – substance use – interventions – monitoring