



TOBACCO USE AMONG AFRICAN AMERICANS

Each year, approximately 45,000 African Americans die from smoking-related disease.¹ Smoking-related illnesses are the number one cause of death in the African American community, surpassing all other causes of death, including AIDS, homicide, diabetes, and accidents.² Death from smoking-caused disease is higher among African Americans than among whites, despite the fact that African Americans typically smoke less.³ An estimated 1.6 million black Americans alive today, who are now under the age of 18, will become regular smokers, and about 500,000 of these will die prematurely from a tobacco-related disease.⁴

Current Use Rates & Disturbing Trends

- 20.6 percent of African American adults are current smokers, which is slightly higher than the national rate of smoking (19.3%). Smoking among African American men is higher than among African-American women (24.8% vs. 17.1%).⁵
- One in every 10 pregnant African American women reports smoking during pregnancy.⁶
- African American high school students smoke at lower rates than their White and Hispanic peers. Currently, 9.5 percent of African American high school students smoke, compared to 22.5 percent of white high school students and 18.0 percent of Hispanic high school students.⁷
- African American middle school students also smoke at lower rates than their White and Hispanic peers, although the differences in smoking between the groups are not that large. 5.5 percent of African American, 6.8 percent of Hispanic and 6.5 percent of White middle school students smoke.⁸
- According to a recent study, 42 percent of low-income African Americans smoke; half of those who did not graduate from high school smoked, compared with 33.5 percent who were high school graduates, and 36 percent who had some college education.⁹

Disproportionate Harms to African Americans from Smoking

African Americans tend to smoke fewer cigarettes per day and begin smoking later in life than whites, but their smoking-related disease mortality is still significantly higher.¹⁰ As a result of this disturbing paradox, the years of potential life lost before the age of 65 is two times higher in black smokers than white smokers.¹¹ Furthermore, African American teen smokers have a greater risk of developing long-term consequences from smoking than other ethnic groups, and are in danger of experiencing the negative effects of tobacco earlier in their lifetimes.¹²

Smoking is responsible for almost 90 percent of all lung cancer cases and is also a major cause of heart disease and stroke – the only conditions that kill more people in the African American community than lung cancer.¹³ Smoking is also a major cause of chronic bronchitis, emphysema, gastric ulcers, and cancers of the mouth, pharynx, larynx, esophagus, pancreas, uterine cervix, kidney, stomach, and bladder.¹⁴

African Americans are more likely to develop and die from cancer than persons of any other racial or ethnic group. Lung cancer is the second most common cancer in both African American men and women and it kills more African Americans than any other type of cancer. In fact, in 2009, over 22,000 new cases of lung cancer are expected to occur among African Americans and more than 16,000 African Americans are expected to die from this disease.¹⁵ African American men appear to bear the biggest burden in terms of tobacco-related morbidity and mortality. From 2001 to 2005, the average incidence rate of lung and bronchus cancers was 36 percent higher in African American men than in white men. The average death rate was 30 percent higher among African American men compared to white men.¹⁶

A recent study found that African American smokers in California are disproportionately affected by their smoking. Despite making up 6 percent of the total state adult population, African Americans accounted for 8 percent of smoking-attributable healthcare costs and 13 percent of mortality costs in the state. The total cost of smoking per African American smoker in California was 30 percent higher than that for all smokers in the state.¹⁷

African Americans & Menthol Cigarettes

The higher rates of some tobacco-caused disease among African Americans than whites may result, in part, from African American smokers being much more likely to smoke menthol cigarettes than whites.¹⁸ More than 75 percent of African American smokers smoke menthol cigarettes, as compared to 23 percent of white smokers.¹⁹ The popularity of menthol cigarette brands appears to be continuing among African-American teens, with 80.4 percent preferring Newport.²⁰ In contrast, the predominant brand among white youths is non-menthol Marlboro.

Mentholated cigarettes may increase the risk of both lung and bronchial cancer more than regular cigarettes by promoting lung permeability and diffusability of smoke particles.²¹ Menthol cigarettes have also been shown to have higher carbon monoxide concentrations than regular cigarettes, and may be associated with a greater absorption of nicotine.²² In fact, smokers of menthol cigarettes do have higher levels of cotinine (the most common chemical produced by the body from nicotine) in their bloodstream than non-menthol smokers.²³ Among other harms, the high levels of cotinine among menthol smokers may cause smoking among Black women during pregnancy to have a greater adverse effect on infants than smoking among white pregnant women.²⁴ Smoking during pregnancy is related several adverse health outcomes, including low birth weight and premature births, of which African Americans have the highest rates among all ethnic groups in the United States.²⁵

Reducing Tobacco Use among African Americans

Seventy percent of current African American smokers want to quit; and African American smokers are more likely than white smokers to have quit for at least one day in the previous year. In fact, research has shown that African American smokers are more likely to think that smoking is socially unacceptable and are highly motivated to quit.²⁶ Nevertheless, the percentage of African American smokers who ultimately quit smoking is lower than among whites (50.5 percent vs. 35.4 percent).²⁷ African Americans may have lower cessation rates than whites because African Americans generally have higher levels of nicotine dependence, as a consequence of the high cotinine levels in mentholated cigarettes.²⁸

Research studies have established that cigarette price increases prevent and reduce smoking especially well among African Americans, youths, males, and persons in low-income households.²⁹ For example, a 10 percent increase in cigarette prices will reduce overall youth smoking by about seven percent but will reduce smoking among African American male teenagers by 16 percent.³⁰ Although price increases are the most powerful anti-smoking factor among all youths, enforcing laws that prohibit sales of cigarettes to kids have also been found to be especially effective in reducing smoking among African American teens.³¹

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More information on Tobacco and African Americans is available at
http://www.tobaccofreekids.org/facts_issues/fact_sheets/toll/populations/african_americans/.

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