



## TOBACCO USE AND ETHNICITY

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Adult and youth tobacco use rates and related smoking-caused death rates vary considerably among different ethnic groups in the United States.

### **Adult Prevalence\***

13.9 percent of American adults are current smokers, including 15.8 percent of men and 12.2 percent of women.<sup>1</sup>

#### ***African Americans***

- 15.1 percent of African American adults are current smokers.<sup>2</sup>
- 85 percent of all African American smokers smoke menthol cigarettes, compared to 29 percent of all Caucasian smokers.<sup>3</sup>
- African Americans tend to start smoking at a later age and are more likely to attempt to quit smoking but are less likely to succeed in quitting than their Caucasian counterparts.<sup>4</sup>

#### ***Hispanics***

- 9.7 percent of Hispanic adults are current smokers.<sup>5</sup>
- Among the major Hispanic subgroups, Puerto Ricans and Cubans have the highest rates of smoking (21.6 and 18.2 respectively), with rates being higher among men than women, and higher among U.S.-born than foreign-born populations.<sup>6</sup>

#### ***American Indian/Alaska Natives***

- American Indian/Alaska Native (AI/AN) adults have the highest tobacco use rates of all major racial/ethnic groups in America. 31.8 percent of AI/AN adults current smoke (29.3% of men and 34.3% of women).<sup>7</sup>

#### ***Asian Americans***

Asian Americans have the lowest smoking rate of all major American racial/ethnic groups (9.0%), though smoking among Asian American men is significantly higher than smoking among Asian-American women. 4.6 percent of Asian-American women currently smoke, compared to 14.0 percent of Asian American men.<sup>8</sup>

### **Youth Prevalence†**

Nationwide, 7.6 percent of all high school students are current smokers, including 7.6 percent of males and 7.5 percent of females.<sup>9</sup>

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\* Adult prevalence data for the overall population and for African-Americans and Hispanics are early release data from the 2017 National Health Interview Survey. Adult prevalence data for American Indian/Alaska Natives and Asian Americans are from the 2016 National Health Interview Survey because 2017 prevalence estimates for these populations are not yet available.

† Youth prevalence data for the overall population and for African-Americans and Hispanics are from the 2017 National Youth Tobacco Survey. Youth prevalence data for American Indian/Alaska Natives and Asian Americans are from the 2017 Youth Risk Behavior Survey. Because of methodological differences, these surveys are not comparable.

### **African Americans**

- African American high school students have traditionally smoked at lower rates than their white and Hispanic peers. 2.8 percent of African American high school students are current smokers.<sup>10</sup>
- Smoking among African American high school students increased from 12.6 percent in 1991 to a high of 22.7 percent in 1997 before beginning to decline in 1999.<sup>11</sup>

### **Hispanics**

- In 2017, 6.2 percent of Hispanic high school students smoked, a 73 percent decrease from the 2000 smoking rate, when it was 22.6 percent.<sup>12</sup>

### **American Indian/Alaska Natives**

- AI/AN high school students have traditionally had the highest smoking prevalence of all racial/ethnic groups. In 2017, 18.7 percent of AI/AN high school students were current smokers.<sup>13</sup>

### **Asian Americans**

- 2.2 percent of Asian American high school students smoke, the lowest smoking prevalence of all racial/ethnic groups.<sup>14</sup>

## **Morbidity/Mortality**

More than 480,000 people die each year from tobacco related diseases.<sup>15</sup> If current trends continue, 5.6 million kids under age 18 alive today will eventually die from smoking-related diseases.<sup>16</sup> Smoking causes nearly 90 percent of all cases of lung cancer and is a contributing factor in at least 30 percent of all cancer deaths.<sup>17</sup>

### **African Americans**

- More than 45,000 African Americans die from smoking-related illnesses annually.<sup>18</sup>
- Both the tobacco-related cancer incidence and death rates are higher for African Americans than other racial/ethnic groups. More than 72,000 African Americans are diagnosed with a tobacco-related cancer each year and more than 39,000 die from a tobacco-related cancer each year.<sup>19</sup>
- Both incidence and death rates for lung cancer are higher among African American men than among white men, partly because of differences in smoking behavior. Although African-American men begin smoking at a later age than white men and smoke fewer cigarettes per day, on average, than white men, they tend to smoke cigarettes more intensively and are more likely to smoke mentholated cigarettes.<sup>20</sup> 85 percent of African American smokers smoke mentholated cigarettes, compared to 29 percent of white smokers.<sup>21</sup> Because of the cooling sensation produced by menthol, smokers can inhale more deeply and hold the smoke inside longer than smokers of non-mentholated cigarettes. This inhalation pattern may cause greater harm to the smoker's health.
- Lung cancer is the second most common cancer in both African American men and women, but it kills more African Americans than any other type of cancer. In fact, in 2016, it is estimated that 24,700 African Americans will be diagnosed with lung cancer and 17,000 African Americans will die from it.<sup>22</sup>
- The rate of all kinds of cancer among African Americans increased 66 percent between 1957 and 1987, mainly due to lung cancer. During the same 30 years, the rate of lung cancer among African American men increased by 259 percent and quadrupled for African American women.<sup>23</sup> Since the mid-1980's, the rate of lung cancer among African American men has been decreasing, though it continues to be higher than in white men.<sup>24</sup> From 2003-2012, lung cancer death rates have declined faster among African Americans than whites, which has greatly reduced lung cancer disparities.<sup>25</sup> The declines are the result of decreases in smoking prevalence over the previous 40 years.

### **Hispanics**

- Cancer is the leading cause of death among Hispanics.<sup>26</sup> More than 43,000 Hispanics are diagnosed with a tobacco-related cancer each year and more than 18,000 die from a tobacco-related cancer each year.<sup>27</sup>
- Lung cancer is the third most commonly diagnosed cancer in Hispanic men and the fifth most common in Hispanic women. In 2015, more than 9,500 new cases of lung cancer are expected to occur among Hispanics/Latinos; and more than 5,500 Hispanics/Latinos are expected to die from this disease.<sup>28</sup>
- Cardiovascular disease is the second leading cause of death among Hispanics.<sup>29</sup> Tobacco use is an important risk factor for cardiovascular disease.

### **American Indian/Alaska Natives**

- Cancer is the second leading cause of death among AI/ANs.<sup>30</sup> More than 3,800 AI/ANs are diagnosed with a tobacco-related cancer each year and more than 1,800 die from a tobacco-related cancer each year.<sup>31</sup> Lung cancer is the second leading cause of cancer incidence and the leading cause of cancer death.<sup>32,33</sup>
- Lung cancer rates among AI/ANs vary greatly by tribal region. Rates are highest in the Northern Plains, Alaska and the Southern Plains and lowest in the Southwest.<sup>34</sup> From 1994–1998, rates of lung cancer death among AI/ANs in the North Plains and Alaska regions were higher than the U.S. rate for all racial/ethnic populations combined.<sup>35</sup>
- Disparities in lung cancer rates persist. From 1999–2004, lung cancer rates among AI/AN males remained unchanged, while rates among non-Hispanic white males decreased significantly.<sup>36</sup>
- Heart disease is the leading cause of death among AI/ANs, for which tobacco use is an important risk factor.<sup>37</sup> Heart disease death rates for AI/ANs show geographic disparities, with the highest rates occurring primarily in Northern Plains states, including North and South Dakota, as well as Wisconsin and Michigan.<sup>38</sup> The CDC estimates that racial/ethnic disparities for smoking-attributable mortality are most pronounced for cardiovascular disease. From 2001–2009, smoking-attributable mortality for ischemic heart disease, other heart disease and stroke for AI/AN women over age 35 was double that of White women, among those living in 637 HIS CHSDA counties.<sup>39</sup>

### **Asian American, Native Hawaiians, and Pacific Islanders**

- Cancer is the leading cause of death among Asian Americans, Native Hawaiians and Pacific Islanders (AANHPIs).<sup>40</sup> More than 19,000 Asian American/Pacific Islanders are diagnosed with a tobacco-related cancer each year and more than 9,000 die from a tobacco-related cancer each year.<sup>41</sup>
- Although they have lower rates of lung cancer and lung cancer deaths than non-Hispanic whites, lung cancer still is a leading cause of suffering and death among AANHPIs.<sup>42</sup> In 2016, more than 6,000 new cases of lung cancer are expected to occur among AANHPIs.<sup>43</sup> Among both men and women, Samoans and Native Hawaiians have the highest rates of lung cancer, while Asian Indians and Pakistanis have the lowest.<sup>44</sup>
- Cardiovascular disease is the second leading cause of death among Asian Americans and Pacific Islanders.<sup>45</sup> As noted previously, tobacco use is an important risk factor for cardiovascular disease.

***Campaign for Tobacco-Free Kids, June 20, 2018 / Laura Bach***

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<sup>1</sup> Centers for Disease Control and Prevention (CDC), "Early Release of Selected Estimates Based on Data from the 2017 National Health Interview Survey," June 19, 2018, <https://www.cdc.gov/nchs/nhis/releases/released201806.htm#8>. Current smoking is defined as persons who reported having smoked  $\geq$  100 cigarettes during their lifetimes and, at the time of the survey, reported smoking every day or some days.

- <sup>2</sup> CDC, "Early Release of Selected Estimates Based on Data from the 2017 National Health Interview Survey," June 19, 2018, <https://www.cdc.gov/nchs/nhis/releases/released201806.htm#8>.
- <sup>3</sup> Villanti, AC, et al., "Changes in the prevalence and correlates of menthol cigarette use in the USA, 2004-2014," *Tobacco Control*, published online October 20, 2016.
- <sup>4</sup> CDC, "Quitting Smoking Among Adults—United States, 2001–2010," *MMWR* 60(44):1513-151907, November 11, 2011, [http://www.cdc.gov/mmwr/preview/mmwrhtml/mm6044a2.htm?s\\_cid=%20mm6044a2.htm\\_w](http://www.cdc.gov/mmwr/preview/mmwrhtml/mm6044a2.htm?s_cid=%20mm6044a2.htm_w). HHS, "Tobacco Use Among US Racial/Ethnic Minority Groups – African Americans, American Indians and Alaskan Natives, Asian Americans and Pacific Islanders, and Hispanics: A Report of the Surgeon General," 1998, [http://www.cdc.gov/tobacco/data\\_statistics/sgr/1998/index.htm](http://www.cdc.gov/tobacco/data_statistics/sgr/1998/index.htm). See also, HHS, *The Health Consequences of Smoking—50 Years of Progress: A Report of the Surgeon General*, 2014, <http://www.surgeongeneral.gov/library/reports/50-years-of-progress/>.
- <sup>5</sup> CDC, "Early Release of Selected Estimates Based on Data from the 2017 National Health Interview Survey," June 19, 2018, <https://www.cdc.gov/nchs/nhis/releases/released201806.htm#8>.
- <sup>6</sup> CDC, "Vital Signs: Leading Causes of Death, Prevalence of Diseases and Risk Factors, and Use of Health Services Among Hispanics in the United States—2009-2013," *Morbidity and Mortality Weekly Report*, 64(17): 469-478, May 8, 2015, [http://www.cdc.gov/mmwr/preview/mmwrhtml/mm6417a5.htm?s\\_cid=mm6417a5\\_w#Tab1](http://www.cdc.gov/mmwr/preview/mmwrhtml/mm6417a5.htm?s_cid=mm6417a5_w#Tab1).
- <sup>7</sup> CDC, "Current Cigarette Smoking Among Adults—United States, 2016," *Morbidity & Mortality Weekly Report*, 67(2):53-59, January 19, 2018, <https://www.cdc.gov/mmwr/volumes/67/wr/pdfs/mm6702a1-H.pdf>.
- <sup>8</sup> CDC, "Current Cigarette Smoking Among Adults—United States, 2016," *Morbidity & Mortality Weekly Report*, 67(2):53-59, January 19, 2018, <https://www.cdc.gov/mmwr/volumes/67/wr/pdfs/mm6702a1-H.pdf>.
- <sup>9</sup> CDC, "Tobacco Use Among Middle and High School Students—United States, 2011-2017," *MMWR*, 67(22): 629-633, June 7, 2018, <https://www.cdc.gov/mmwr/volumes/67/wr/pdfs/mm6722a3-H.pdf>. The 2016 NYTS found a 8.0% high school smoking rate. The 2015 Youth Risk Behavior Survey, using a different methodology than the NYTS, found that 10.8% of high school students were current smokers. Current smoker defined as having smoked in the past month.
- <sup>10</sup> CDC, "Tobacco Use Among Middle and High School Students—United States, 2011-2017," *MMWR*, 67(22): 629-633, June 7, 2018, <https://www.cdc.gov/mmwr/volumes/67/wr/pdfs/mm6722a3-H.pdf>.
- <sup>11</sup> CDC, "Cigarette Use Among High School Students—United States, 1991-2009," *MMWR* 59(26):797-801, July 9, 2010, <http://www.cdc.gov/mmwr/preview/mmwrhtml/mm5926a1.htm>.
- <sup>12</sup> CDC, "Tobacco Use Among Middle and High School Students—United States, 2011-2017," *MMWR*, 67(22): 629-633, June 7, 2018, <https://www.cdc.gov/mmwr/volumes/67/wr/pdfs/mm6722a3-H.pdf>.
- <sup>13</sup> CDC, 2017 High School Youth Risk Behavior Survey Data. Available at <http://nccd.cdc.gov/youthonline/>. Accessed on June 20, 2018.
- <sup>14</sup> CDC, 2017 High School Youth Risk Behavior Survey Data. Available at <http://nccd.cdc.gov/youthonline/>. Accessed on June 20, 2018.
- <sup>15</sup> HHS, *The Health Consequences of Smoking—50 Years of Progress: A Report of the Surgeon General*, 2014, <http://www.surgeongeneral.gov/library/reports/50-years-of-progress/>.
- <sup>16</sup> HHS, *The Health Consequences of Smoking—50 Years of Progress: A Report of the Surgeon General*, 2014, <http://www.surgeongeneral.gov/library/reports/50-years-of-progress/>.
- <sup>17</sup> HHS, *The Health Consequences of Smoking—50 Years of Progress: A Report of the Surgeon General*, <http://www.surgeongeneral.gov/library/reports/50-years-of-progress/>. See also, American Cancer Society, "Cancer Facts and Figures," 2014, <http://www.cancer.org/acs/groups/content/@research/documents/webcontent/acspc-042151.pdf>.
- <sup>18</sup> HHS, "Tobacco Use Among US Racial/Ethnic Minority Groups – African Americans, American Indians and Alaskan Natives, Asian Americans and Pacific Islanders, and Hispanics: A Report of the Surgeon General," 1998, [http://www.cdc.gov/tobacco/data\\_statistics/sgr/1998/index.htm](http://www.cdc.gov/tobacco/data_statistics/sgr/1998/index.htm).
- <sup>19</sup> CDC, "Vital Signs: Disparities in Tobacco-Related Cancer Incidence and Mortality—United States, 2004-2013," *Morbidity & Mortality Weekly Report*, 65(44): 1212-1218, <http://www.cdc.gov/mmwr/volumes/65/wr/mm6544a3.htm>.
- <sup>20</sup> Villanti, A., et al., "Changes in the prevalence and correlates of menthol cigarette use in the USA, 2004–2014," *Tobacco Control*, published online October 20, 2016. Roberts, ME, et al., "Understanding tobacco use onset among African Americans," *Nicotine & Tobacco Research*, 18(S1): S49-S56, 2016; Alexander, LA, et al., "Why we must continue to investigate menthol's role in the African American smoking paradox," *Nicotine & Tobacco Research*, 18(S1): S91-S101, 2016. HHS, "Tobacco Use Among US Racial/Ethnic Minority Groups – African Americans, American Indians and Alaskan Natives, Asian Americans and Pacific Islanders, and Hispanics: A Report of the Surgeon General," 1998, [http://www.cdc.gov/tobacco/data\\_statistics/sgr/1998/index.htm](http://www.cdc.gov/tobacco/data_statistics/sgr/1998/index.htm).
- <sup>21</sup> Villanti, AC, et al., "Changes in the prevalence and correlates of menthol cigarette use in the USA, 2004-2014," *Tobacco Control*, published online October 20, 2016.
- <sup>22</sup> American Cancer Society, "Cancer Facts & Figures for African Americans, 2016-2018," 2016, <http://www.cancer.org/acs/groups/content/@editorial/documents/document/acspc-047403.pdf>.
- <sup>23</sup> HHS, "Tobacco Use Among U.S. Racial and Ethnic Minority Groups: A Report of the Surgeon General," 1998, [http://www.cdc.gov/tobacco/data\\_statistics/sgr/1998/index.htm](http://www.cdc.gov/tobacco/data_statistics/sgr/1998/index.htm).
- <sup>24</sup> American Cancer Society, "Cancer Facts & Figures for African Americans, 2016-2018," 2016, <http://www.cancer.org/acs/groups/content/@editorial/documents/document/acspc-047403.pdf>.
- <sup>25</sup> American Cancer Society, "Cancer Facts & Figures for African Americans, 2016-2018," 2016, <http://www.cancer.org/acs/groups/content/@editorial/documents/document/acspc-047403.pdf>.
- <sup>26</sup> CDC, "Vital Signs: Leading Causes of Death, Prevalence of Diseases and Risk Factors, and Use of Health Services Among Hispanics in the United States—2009-2013," *Morbidity and Mortality Weekly Report*, 64(17): 469-478, May 8, 2015, [http://www.cdc.gov/mmwr/preview/mmwrhtml/mm6417a5.htm?s\\_cid=mm6417a5\\_w#Tab1](http://www.cdc.gov/mmwr/preview/mmwrhtml/mm6417a5.htm?s_cid=mm6417a5_w#Tab1).

- <sup>27</sup> CDC, "Vital Signs: Disparities in Tobacco-Related Cancer Incidence and Mortality—United States, 2004-2013," *Morbidity & Mortality Weekly Report*, 65(44): 1212-1218, <http://www.cdc.gov/mmwr/volumes/65/wr/mm6544a3.htm>.
- <sup>28</sup> American Cancer Society, "Cancer Facts & Figures for Hispanics/Latinos 2015-2017," 2015 <http://www.cancer.org/acs/groups/content/@research/documents/document/acspc-046405.pdf>.
- <sup>29</sup> CDC, "Vital Signs: Leading Causes of Death, Prevalence of Diseases and Risk Factors, and Use of Health Services Among Hispanics in the United States—2009-2013," *Morbidity and Mortality Weekly Report*, 64(17): 469-478, May 8, 2015, [http://www.cdc.gov/mmwr/preview/mmwrhtml/mm6417a5.htm?s\\_cid=mm6417a5\\_w#Tab1](http://www.cdc.gov/mmwr/preview/mmwrhtml/mm6417a5.htm?s_cid=mm6417a5_w#Tab1).
- <sup>30</sup> Deaths: Final Data for 2012. NVSR Volume 63, Number 9. 85 pp. (PHS) 2014 -1120. [http://www.cdc.gov/nchs/data/nvsr/nvsr63/nvsr63\\_09.pdf](http://www.cdc.gov/nchs/data/nvsr/nvsr63/nvsr63_09.pdf)
- <sup>31</sup> CDC, "Vital Signs: Disparities in Tobacco-Related Cancer Incidence and Mortality—United States, 2004-2013," *Morbidity & Mortality Weekly Report*, 65(44): 1212-1218, <http://www.cdc.gov/mmwr/volumes/65/wr/mm6544a3.htm>.
- <sup>32</sup> Kohler, BA, et al. "Annual Report to the Nation on the Status of Cancer, 1975-2011, Featuring Incidence of Breast Cancer Subtypes by Race/Ethnicity, Poverty, and State," *J Natl Cancer Inst*, 107(6).
- <sup>33</sup> American Cancer Society. *Cancer Facts and Figures 2014*. Atlanta: American Cancer Society, 2014.
- <sup>34</sup> Bliss, A, et al. "Lung Cancer Incidence Among American Indians and Alaska Natives in the United States, 1999–2004," *Cancer Supplement*, 113(5):1168–1178, September 1, 2008.
- <sup>35</sup> CDC, "Cancer Mortality Among American Indians and Alaska Natives—United States, 1994–1998," 52(30):704–707, August 1, 2003, <http://www.cdc.gov/mmwr/preview/mmwrhtml/mm5230a4.htm>.
- <sup>36</sup> Bliss, A, et al. "Lung Cancer Incidence Among American Indians and Alaska Natives in the United States, 1999–2004," *Cancer Supplement*, 113(5):1168–1178, September 1, 2008.
- <sup>37</sup> Deaths: Final Data for 2012. NVSR Volume 63, Number 9. 85 pp. (PHS) 2014 -1120. [http://www.cdc.gov/nchs/data/nvsr/nvsr63/nvsr63\\_09.pdf](http://www.cdc.gov/nchs/data/nvsr/nvsr63/nvsr63_09.pdf). See also, HHS, *The Health Consequences of Smoking—50 Years of Progress: A Report of the Surgeon General*, <http://www.surgeongeneral.gov/library/reports/50-years-of-progress/>; HHS, "Tobacco Use Among U.S. Racial and Ethnic Minority Groups, Report of the Surgeon General," 1998, [http://www.cdc.gov/tobacco/data\\_statistics/sqr/sqr\\_1998/index.htm](http://www.cdc.gov/tobacco/data_statistics/sqr/sqr_1998/index.htm).
- <sup>38</sup> Casper, M., et al. "Atlas of Heart Disease and Stroke Among American Indians and Alaska Natives," 2005, [http://www.cdc.gov/dhdsp/atlas/aian\\_atlas/](http://www.cdc.gov/dhdsp/atlas/aian_atlas/).
- <sup>39</sup> Mowery, P.D., et al., "Disparities in Smoking-Related Mortality Among American Indian/Alaska Natives," *Am J Preve Med*, published online July 6, 2015.
- <sup>40</sup> American Cancer Society, *Cancer Facts & Figures 2016*, <http://www.cancer.org/acs/groups/content/@research/documents/document/acspc-047079.pdf>.
- <sup>41</sup> CDC, "Vital Signs: Disparities in Tobacco-Related Cancer Incidence and Mortality—United States, 2004-2013," *Morbidity & Mortality Weekly Report*, 65(44): 1212-1218, <http://www.cdc.gov/mmwr/volumes/65/wr/mm6544a3.htm>.
- <sup>42</sup> American Cancer Society, *Cancer Facts & Figures 2016*, <http://www.cancer.org/acs/groups/content/@research/documents/document/acspc-047079.pdf>.
- <sup>43</sup> American Cancer Society, "Cancer Facts & Figures for Hispanics/Latinos 2015-2017," 2015 <http://www.cancer.org/acs/groups/content/@research/documents/document/acspc-046405.pdf>.
- <sup>44</sup> American Cancer Society, *Cancer Facts & Figures 2016*, <http://www.cancer.org/acs/groups/content/@research/documents/document/acspc-047079.pdf>.
- <sup>45</sup> CDC, "Deaths: Leading Causes for 2010," Table D, *National Vital Statistics Reports*, 62(6), December 20, 2013, [http://www.cdc.gov/nchs/data/nvsr/nvsr62/nvsr62\\_06.pdf](http://www.cdc.gov/nchs/data/nvsr/nvsr62/nvsr62_06.pdf). See also, HHS, *The Health Consequences of Smoking—50 Years of Progress: A Report of the Surgeon General*, <http://www.surgeongeneral.gov/library/reports/50-years-of-progress/>.