



# **TOBACCO USE AMONG AFRICAN-AMERICANS IN MINNESOTA:**

A Survey and Conversations With African-American Communities

**EXECUTIVE SUMMARY**

July 2009

As the leading cause of preventable death and disease in the United States,<sup>1</sup> tobacco use poses a serious health threat. The impact of smoking within African-American communities is even more devastating than in the population as a whole in terms of premature death from heart disease and stroke — the number one cause of death in African-Americans — and most smoking-related cancers.<sup>2, 3</sup> At the same time, tobacco companies target African-Americans with advertising for menthol cigarettes,<sup>4</sup> which are associated with greater absorption of the harmful chemicals in cigarette smoke<sup>5</sup> and greater nicotine dependence.<sup>6</sup>

In an important effort to reverse the pattern of smoking in African-American communities in Minnesota, individuals and organizations came together to form the Minnesota African/African-American Tobacco Education Network (MAAATEN). MAAATEN is a coalition of African and African-American community leaders working to engage African and African-American communities to help reduce the harms of tobacco use.

In 2007 MAAATEN partnered with Blue Cross and Blue Shield of Minnesota, ClearWay Minnesota<sup>SM</sup> and the Minnesota Department of Health to build upon the Minnesota Adult Tobacco Survey (MATS) initiative and produce the first detailed study of tobacco use among Minnesota's U.S.-born African-Americans. MATS is the most thorough source of information about tobacco use prevalence, quitting behaviors, and secondhand smoke exposure in the adult Minnesota population and has served as a tool for measuring the progress of Minnesota's tobacco control efforts since 1999.

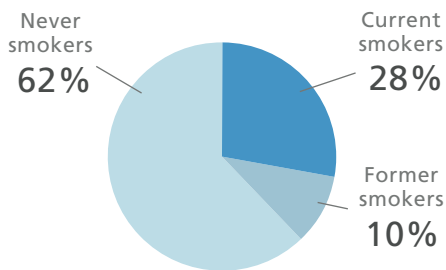
The 2007 MATS was designed to survey more African-Americans than in previous years. U.S.-born African-American respondents were then analyzed exclusively (n=232).<sup>7</sup> In 2008, this quantitative research was complemented by a qualitative study that included five focus groups with African-American community members (n=30) and interviews with African-American community leaders (n=15). The combined results paint a picture of tobacco use by Minnesota's African-Americans that can be used to develop tailored strategies to ultimately reduce tobacco use and exposure to secondhand smoke.

A full report of the quantitative and qualitative research is available at [www.mnadulttobaccosurvey.org](http://www.mnadulttobaccosurvey.org).

## Smoking Prevalence

The 2007 Minnesota Adult Tobacco Survey (MATS) African-American study found that 28 percent<sup>8</sup> of U.S.-born African-American adults in Minnesota are current smokers (Figure 1).

**Figure 1** Twenty-eight percent of African-American adults in Minnesota smoke.



Yet, despite this large percentage, many African-American community members said in focus groups that it likely underestimates the true smoking rates in their communities.

*“The results should be flipped — 10 percent should be classified as never smokers, 28 percent as former smokers and 62 percent as current smokers.”*

— Female focus group participant, Minneapolis

*“It’s a lie. Everyone I know smokes.”*

— Male focus group participant, Minneapolis

In focus groups and interviews, community members and leaders described a number of underlying issues that influence smoking and the ability to quit smoking among African-Americans. These include stress, socioeconomic factors, growing up among smokers, social relationships built around smoking and the addictive power of nicotine.

*“Smoking may be an outlet for all of the pain stemming from African-Americans’ history of oppression.”*

— Female community leader, Minneapolis

*“Smoking is more of a class issue than a race issue. It just so happens that many African-Americans are in the lower class.”*

— Male focus group participant, Minneapolis

*“Smoking plays a social role at first, but then addiction takes hold.”*

— Female focus group participant, Minneapolis

### Recommendations from the community leaders:

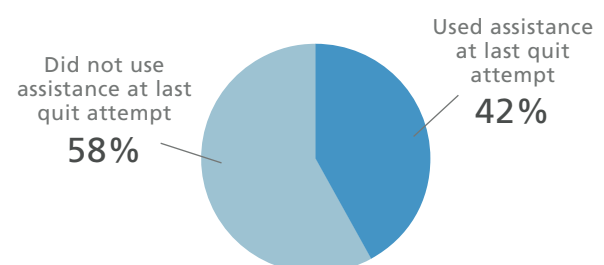
- Create interventions and outreach that build on the assets, strengths and unique experiences of African-American communities.
- Ensure that interventions address the underlying issues that influence African-Americans to smoke and, in particular, emphasize alternative ways to deal with life’s stresses.

## Quitting Smoking: Awareness of Assistance

Most current smokers in Minnesota’s African-American communities try to quit. In fact, nearly three-quarters (71 percent) reported in the MATS African-American study that they had tried to quit smoking within the 12 months before the survey.

Yet only 42 percent of those who tried to quit used some form of assistance, either medication or behavioral counseling, or other assistance, such as print materials or websites (Figure 4). This means that more than half attempted to quit with no assistance, despite reports by 70 percent of current smokers in the survey that they would be willing to use stop-smoking assistance if cost were not an issue.

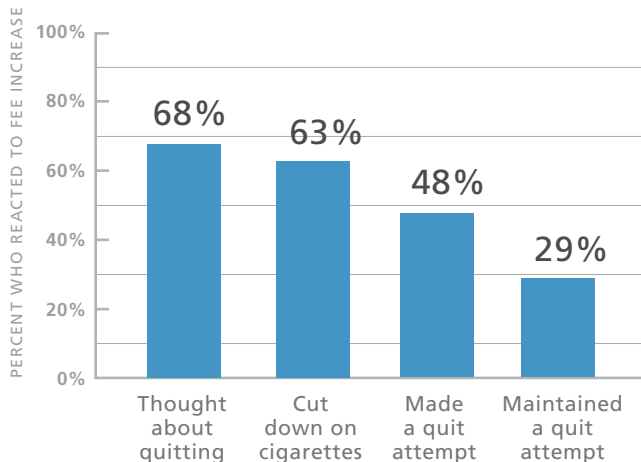
**Figure 4** Less than one-half of African-American adult smokers with a quit attempt in the past year used any form of assistance.



## Quitting Smoking: Policy Influences

In 2005 Minnesota increased the total taxes and fees on a pack of cigarettes by 75 cents, to \$1.48. The MATS African-American study found that African-American current smokers and former smokers who quit within two years after the fee increase reported that this price increase helped them to think about quitting (68 percent), to cut down on cigarettes (63 percent), to make a quit attempt (48 percent), and to maintain a quit attempt (29 percent) (Figure 2).

**Figure 2** African-American current and former adult smokers report that the 2005 fee increase encouraged them to reduce or quit smoking.



Community members in the focus groups mostly were not surprised that use of stop-smoking assistance was not more widespread. Reasons given for African-Americans not using assistance included lack of awareness of its availability, concerns about stop-smoking medications, reluctance to ask for help to quit smoking and a belief that only willpower works to quit.

*“Smokers might not know about the wide variety of antismoking aids available beyond patches or gum.”*

— Male focus group participant, Minneapolis

*“A lot of people I know would rather quit smoking on their own because they don’t want any type of assistance.”*

— Female focus group participant, Brooklyn Park

At the time of the 2007 MATS study, local smoke-free policies were in place in several Minnesota communities.<sup>9</sup> African-American current smokers and former smokers who quit in the previous five years reported that these policies helped them to think about quitting (67 percent), to cut down on smoking (67 percent), to make a quit attempt (28 percent), and to maintain a quit attempt (20 percent).

Yet the comments from the community-based focus groups provide a different perspective. While some community members felt that policies might encourage thoughts of quitting, many said that the power of tobacco addiction was a stronger influence than fee increases.

*“Everybody I know said they were going to quit when the price increased, but they didn’t.”*

— Male focus group participant, Minneapolis

*“People will save the cigarette butts and try to re-light them.”*

— Female focus group participant, Minneapolis

### Recommendations from the community leaders:

- Continue price increases and environmental policy approaches to reduce tobacco use and exposure to secondhand smoke.
- Do not rely on public policy alone: mobilize the community around the underlying issues related to tobacco use.

*“It’s a mind thing — we don’t need Nicorette. When we want to quit, we’ll just quit.”*

— Male focus group participant, Minneapolis

The MATS African-American study found that 75 percent of smokers who tried to quit in the previous 12 months say that they do not know enough about stop-smoking medications to use them properly (Figure 5). Community members in the focus groups generally agreed with the finding.

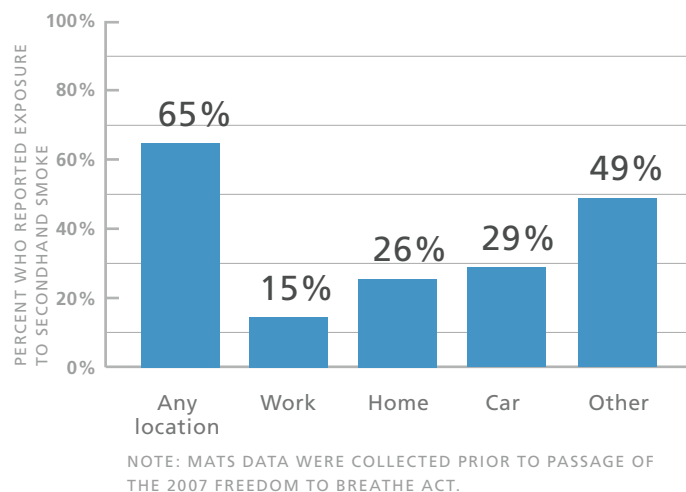
*“The doctor may not always give you all the information you need to know, but that’s where you need to come in as an individual to seek information and get what you need.”*

— Male focus group participant, Brooklyn Park

## Secondhand Smoke Exposure

Nearly two-thirds (65 percent) of respondents in the MATS African-American study reported breathing secondhand smoke in their home, at work, in a car, or at another location in the week prior to the survey (Figure 3).

**Figure 3** Nearly two-thirds of African-American adults reported exposure to secondhand smoke in the past seven days.



In focus groups, community members said that this figure was an underestimate and that secondhand smoke is pervasive in their communities.

*“The percentage exposed to secondhand smoke seems too low. It should probably be higher to truly represent the African-American community.”*

— Male focus group participant, St. Paul

In the MATS African-American study, nearly all African-Americans — 95 percent — reported that they believe secondhand smoke is harmful. In contrast, some community members in the focus groups expressed skepticism about this finding.

*“We don’t know that secondhand smoke kills — it’s based on a rumor.”*

— Male focus group participant, Brooklyn Park

Fifty-nine percent of African-Americans in the MATS study said that smoking is not allowed anywhere in their homes. This means that more than 40 percent of African-Americans in Minnesota still live in homes where smoking is allowed, potentially exposing them or their children to the dangers of secondhand smoke. This fact underscores perceptions, expressed by community leaders, that the community does not really know or believe the true dangers of secondhand smoke.

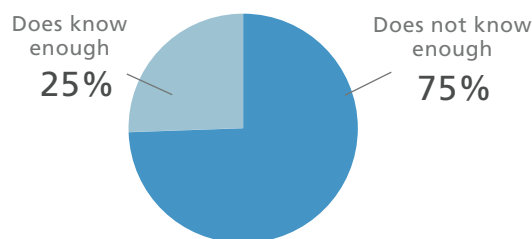
*“People don’t seem to make the connection that they’re hurting other people besides themselves when they smoke.”*

— Female community leader, Minneapolis

### Recommendations from the community leaders:

- Conduct aggressive public education and outreach that convincingly drives home the truth about the harms of secondhand smoke.
- Use a tailored multimedia approach to promote tobacco control messages that truly resonate with African-Americans.

**Figure 5** Three-quarters of African-American adult smokers with a quit attempt in the past year report not knowing enough about stop-smoking medications to use them properly.



### Recommendations from the community leaders:

- Use social networks, including faith communities, as a channel for stop-smoking efforts.
- Draw upon African-American individuals who have successfully quit smoking as the messengers for stop-smoking information.
- Dramatically improve culturally-specific information, outreach and access around stop-smoking assistance.



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6. Gandhi KK et al. Lower quit rates among African American and Latino menthol cigarette smokers at a tobacco treatment clinic. *International Journal of Clinical Practice* 2009; 63(3):360–7.
7. To be included in the analysis, respondents had to report (1) that they were “black or African-American”, (2) that “black or African-American” best described their race if they provided more than one race, and (3) that they were born in the United States.
8. Margin of error is plus or minus 12 percentage points. The prevalence of current smoking among U.S.-born African-American adults in Minnesota reported here is consistent with what other recent studies have found. See Appendix 3 of the full report for more detail.
9. Data for the 2007 Minnesota Adult Tobacco Survey were collected before the statewide law that ensures smoke-free air in restaurants and bars (Freedom to Breathe) was implemented in October 2007. However, at the time data were collected, a number of communities, including St. Paul and Minneapolis, already had local ordinances in effect that prohibited smoking in public places, including bars and restaurants. In fact, 82 percent of African-Americans participating in MATS in 2007 reported that there was a ban on smoking in bars and restaurants in their area.

#### Suggested citation:

Blue Cross and Blue Shield of Minnesota, ClearWay Minnesota™, Minnesota African/African-American Tobacco Education Network, Minnesota Department of Health. *Tobacco use among African-Americans in Minnesota: a survey and conversations with African-American communities*. July 2009.