



Cessation & African Americans

- African American smokers face many barriers to smoking cessation, including high levels of nicotine dependence.
- African Americans absorb more toxins and nicotine than Whites absorb, and may also clear cotinine slower than Whites. Menthol cigarettes may increase nicotine and toxin absorption as smokers often take in more smoke and hold it in longer due to the numbing effect of menthol.
- 70% of African American smokers want to quit smoking.
- Prevalence of cessation (the percentage of persons who have smoked at least 100 cigarettes and quit) is higher among whites (50.7%) than African Americans (35.4%).
- Most effective method of smoking cessation is to combine pharmacotherapy with advice and behavioral support. In order for cessation programs within the African American community to be successful, community and faith-based programs should include one-on-one counseling, cultural appropriate self-help materials, and community wide activities which seek to communicate effective cessation guidelines.
- Enforcing laws that prohibit the sale of cigarettes to children have been found to be effective in reducing smoking among African American teens.
- Pharmacological interventions that maintain nicotine levels (e.g., bupropion and patches), as opposed to rapid release methods (e.g., inhalers and sprays), may be more beneficial.
- The Centers for Disease Control's *Pathways to Freedom: Winning the Fight Against Tobacco, Be Free Indeed! Tobacco Prevention Tools for the African American Church Toolkit* and *Not in Mama's Kitchen* program offers proven strategies for anyone who wants to quit. They deal with how the community and its leaders can promote the value of gaining freedom from tobacco.

References

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