As the leading cause of preventable death and disease in the United States,1 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.2 At the same time, tobacco companies target African-Americans with advertising for menthol cigarettes,3 which are associated with greater absorption of the harmful chemicals in cigarette smoke4 and greater nicotine dependence.5

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-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 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 1995.

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). 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 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.

References:
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. The health consequences of smoking: a report of the Surgeon General. 1998. Available at: http://www.cdc.gov/tobacco/data_statistics/sgr/1998/index.htm.

Tobacco Use Among African-Americans in Minnesota: A Survey and Conversations With African-American Communities

EXECUTIVE SUMMARY

TOBACCO USE AMONG AFRICAN-AMERICANS IN MINNESOTA: A Survey and Conversations With African-American Communities

July 2009

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In 2007 MAAATEN partnered with Blue Cross and Blue Shield of Minnesota, ClearWay Minnesota 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.

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7. TolIntentions, are tended to resist (1) that they were “black or African-American” (2) that “black or African-American” was heard in the context of exclusive smoking, and (3) that they were not in the right situation. 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 increased from 1999 to 2007, with about three of five adults reporting they smoke (Figures 1 and 2 are based for both states). 9. Data for the 2007 Minnesota Adult Tobacco Survey were collected before the statewide law that ensures smoke-free air in restaurants in their area. 10. Suggested citation: Blue Cross and Blue Shield of Minnesota, ClearWay Minnesota, Minnesota African-American Tobacco Education Network, Minnesota Department of Health, ClearWay Minnesota, and the Minnesota African-American Tobacco Education Network. Tobacco use among African-Americans in Minnesota: A survey and conversations with African-American communities. 2007. Online: www.mnadulttobaccosurvey.org.

The 2007 Minnesota Adult Tobacco Survey (MATS) African-American study found that 28 percent of 540 current African-American adults in Minnesota are current smokers (Figure 1).

Quitting Smoking: Policy Influences

In 2005 Minnesota increased the total taxes and fees on a pack of cigarettes by 75 cents, to $3.25. 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 (64 percent), to cut down on cigarettes (63 percent), to make a quit attempt (48 percent), and to maintain a quit attempt (26 percent) (Figure 2).

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 stronger than the fee increase.

The percentage exposed to secondhand smoke seems too low. It should probably be higher to truly represent the true dangers of secondhand smoke. This finding.

Community members in the focus groups mostly were not surprised that use of stop-smoking assistance would be unplanned. Reasons given for African-American not using assistance included lack of awareness of its availability, concerns about stop-smoking medication, reluctance to help quit smoking and a belief that only willpower works to quit smoking.

Nearly two-thirds (65 percent) of respondents in the MATS African-American study reported knowing about secondhand smoke in their homes, at work, or at one location within the past year to the survey (Figure 3).

Nearly three-quarters (75 percent) of respondents in the MATS African-American study reported knowing about stop-smoking medications to use them properly.

Recommendations from the community leaders:

• Do not rely on public policy alone: mobilize the community — Male focus group participant, Minneapolis
• Draw upon African-American individuals who have made a quit attempt and that you may need or believe the true dangers of secondhand smoke
• Use a tailored multimedia approach to promote tobacco control messages that truly resonate with African-Americans.

Recommendations from the community leaders:

• Use culturally-relevant education and outreach; continue to provide trainings for the health professionals and others about the harms of secondhand smoke
• Use a tailored multimedia approach to promote tobacco control messages that truly resonate with African-Americans.

Figure 2

Figure 3

Secondhand Smoke Exposure

NOTE: MATS DATA WERE COLLECTED PRIOR TO PASSAGE OF THE 2007 FREEDOM TO BREATH ACT.
Quitting Smoking: Influence Policies

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 tax increase—reported that this price increase helped them to think about quitting (66 percent), to cut down on cigarettes (63 percent), to make a quit attempt (48 percent), and to maintain a quit attempt (28 percent) (Figure 2). Yet the comments from the community-based focus groups provide a different perspective. While some community members felt that price increases encouraged thoughts of quitting, many said that the power of tobacco addiction was stronger than the increase.

At the time of the 2007 MATS study, local smoke-free policies were in place in several Minnesota communities. African-American current smokers and former smokers who quit in the previous five years reported that these policies helped them to think about quitting (61 percent), to cut down on smoking (55 percent), to make a quit attempt (50 percent), and to maintain a quit attempt (20 percent). The percentage from the community-based focus groups provide a different perspective. While some community members felt that price increases encouraged thoughts of quitting, many said that the power of tobacco addiction was stronger than the increase.

Figure 2

African-American current and former adult smokers report that the 2005 tax increase encouraged them to reduce or quit smoking. Yet the comments from the community-based focus groups provide a different perspective. While some community members felt that price increases encouraged thoughts of quitting, many said that the power of tobacco addiction was stronger than the increase.

Recommendations from the community leaders:
• Create interventions and outreach that build on the assets, strengths, and experiences of African-American communities.
• Ensure that interventions address the underlying issues that influence African-Americans to use tobacco products, in particular, alternative employment ways to deal with life’s stresses.

PErCENT WHO REACTED TO FEE INCREASE

Figure 3

Nearly two-thirds (65 percent) of respondents in the MATS African-American adult smokers reported avoiding secondhand smoke in their home, at work, in a car, or at another location in the week prior to the survey (Figure 3). This means that more than 40 percent of African-Americans—95 percent—reported that they believe the harms 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 are more affected by other people’s cigarettes when they smoke.

— Male community leader, Minneapolis

Recommendations from the community leaders:
• Conduct aggressive public education and outreach to dramatically improve culturally-specific information, outreach, and resources.
• Draw upon African-American individuals who have successfully quit smoking as the messengers for stop-smoking approaches to reduce tobacco use and exposure to secondhand smoke.
• Do not rely on policy alone; realize the community around the underlying issue related to tobacco use.

Secondhand Smoke Exposure

In the MATS African-American study, nearly all African-Americans—95 percent—reported that they believe the harms of secondhand smoke is true but it probably should be higher to truly represent the African-American community.

— Male focus group participant, Minneapolis

The percentage of exposure to secondhand smoke seems too low; it should probably be higher to truly represent the African-American community.

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Nearly two-thirds (65 percent) of respondents in the MATS African-American adult smokers reported avoiding secondhand smoke in the past seven days.

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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 (46 percent), to cut down on cigarettes (63 percent), to make a quit attempt (48 percent), and to maintain a quit attempt (28 percent). At the time of the 2007 MATS study, local smoke-free policies were in place in several Minnesota communities. In the MATS African-American study, nearly all African-Americans (96 percent) reported being located in secondhand smoke-free homes in their house, at work, or a car, or at another location in the past week prior to the survey (Figure 3).

“People may have said they were going to quit when the price increased, but they didn’t.”
— Male focus group participant, Minneapolis

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

Figure 3

Secondhand Smoke Exposure

In the MATS African-American study, nearly all African-Americans — 96 percent — reported that they believed secondhand smoke is harmful. In contrast, some community members said that the focus groups expressed skepticism about this finding.

“We don’t know that secondhand smoke is bad — it doesn’t hurt me.”
— 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 home. This means that more than 40 percent of African-Americans are potentially exposing their 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 you’re hurting other people besides yourself when they smoke.
— Male community leader, Minneapolis

Recommendations from the community leaders:

• Understand that local smoke-free laws can be potentially empowering in reducing the risk of exposure to secondhand smoke.
• Use a tailored multimedia approach to promote tobacco control messages that truly resonate with African-Americans.

Figure 4

Three-quarters of African-American adult smokers reported to secondhand smoke in the past year not knowing enough about stop-smoking medications to use them properly.

Recommendations from the community leaders:

• Dramatically improve culturally-specific information, outreach, and compliance messages that truly resonate with African-Americans.
• Use social networks, including faith communities, as a tool to address the underlying issues related to tobacco use.
• Draw upon African-American individuals who have successfully quit smoking to share their story and potentially empower others.
• Use local policies and local community leaders to leverage change through the harms of secondhand smoke.

NOTE: MATS DATA WERE COLLECTED PRIOR TO PASSAGE OF local smoke-free policies in Minnesota communities.

Quitting Smoking: Awareness of Assistance

Most current smokers in Minnesota’s African-American community try to quit. In fact, nearly three-quarters (77 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. This means that nearly half of those who attempted to quit with no assistance, despite reports by 30 percent of current smokers in the survey that they would willing to use stop-smoking assistance if cost were not an issue.

“People don’t seem to make the connection that ‘it’s a lie. Everyone I know smokes.’
— Female focus group participant, Minneapolis

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, Minneapolis

Figure 2

Nearly one-third (30 percent) of respondents in the MATS African-American study reported needing assistance in smoking in their home, at work, as a car, or at another location in the past week prior to the survey (Figure 3).

“Secondhand smoke exposure is too low. It should probably be higher to truly represent the African-American community.”
— Male focus group participant, Minneapolis

Recommendations from the community leaders:

• Do not rely on public policy alone: mobilize the community around the underlying issues related to tobacco use.
• Do not rely on policy alone: realize the community around the underlying issues related to tobacco use.

Figure 1

Nearly two-thirds of African-American adult smokers reported to secondhand smoke in the past seven days.

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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.

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