

# African-Americans more active users of smoking 'quitlines'

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African-Americans are consistently more likely than white smokers to use telephone help lines to quit smoking, and are more responsive to mass media messages promoting the “quitline,” finds a long-term California study.

“California was the first state to establish a quitline in 1992. This paper is based on nearly 18 years of data,” said Shu-Hon Zhu, Ph.D., the lead study author. “Currently, every state has a quitline.”

Study participants included 61,096 African-American [smokers](#) and 279,042 white smokers who had used the state quitline. The researchers asked what had prompted them to call. Choices included the media, such as radio, TV and the Internet; health care providers; family and friends; and other sources, like nonprofits or churches.

The study, which appears in the May/June issue of the *American Journal of Health Promotion*, also uses survey data gathered between August 1992 and December 2009.

“African-Americans were 44 percent to 140 percent more likely to call the quitline than whites in five out of six study periods, and 10 percent less likely to call in one study period,” Zhu said.

He said that while the media proved to be the most significant source of information about the quitline for both ethnic groups, African-Americans seemed more responsive to [media messages](#) although “they

were no more likely to be exposed than white smokers. While there was some targeted advertising for African Americans, the campaign is mostly for general media market.”

Jennifer Unger, Ph.D., a professor of preventive medicine at the University of Southern California, called the findings “very important.” African-Americans have higher [smoking](#) rates than white Americans, she said, and a lower quitting success rate. She said that this might reflect their greater likelihood of smoking menthol cigarettes, which anesthetize the throat, allowing greater inhalation of nicotine.

“Effective smoking cessation programs exist, but there are many barriers to accessing them, including cost, time, transportation,” Unger said.

“Quitlines can be accessed easily by anyone with a phone. It is noteworthy that African-Americans were more likely than whites to use the California quitline. Calling a quitline can be the first step toward quitting smoking, which has significant long-term health benefits.”

“These findings represent rare, encouraging news because if you read the public health literature, [African-Americans](#) are often less likely to use services that might help them,” Zhu said. The study noted that some researchers have attributed avoidance of services to past experiences of discrimination within the health care system.

Quitlines work well, Zhu said. Free, convenient and anonymous, their effectiveness is supported with “robust” evidence according to the Surgeon's General's most recent guidelines on or treating tobacco use and dependence.

In the United States, a network of state quitlines now serves more than half a million people each year.

**More information:** Zhu S-H, et al. Quitline utilization rates of African-

American and white smokers: the California experience. Am J Health Promo 25(5s), 2011.

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