

Study looks at discrimination's impact on smoking

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Smoking, the leading preventable cause of mortality in the United States, continues to disproportionately impact lower income members of racial and ethnic minority groups.

In a new study published in the [American Journal of Public Health](#), Jason Q. Purnell, PhD, assistant professor at the Brown School at Washington University in St. Louis, looked at how perceived discrimination influences smoking rates among these groups.

"We found that regardless of race or ethnicity, the odds of current smoking were higher among individuals who perceived that they were treated differently because of their race, though racial and ethnic minority groups were more likely to report discrimination," he says.

"In follow-up analyses considering specific types of discrimination, only worse treatment in the workplace was significantly associated with current smoking after accounting for other factors; individuals who reported worse treatment in the workplace were 42 percent more likely to smoke."

The study also found that people who reported better treatment in health care settings than other races were 21 percent less likely to be current smokers."

"It's important to understand the factors that promote smoking among racial and ethnic minority groups," Purnell says.

Analyzing a multistate, multiethnic study of over 85,000 individuals by the [Centers for Disease Control and Prevention](#) (CDC), Purnell used data from 2004-08 from the CDC's [Behavioral Risk Factor](#) Surveillance System (BRFSS). Beginning in 2002, an optional module, Reactions to Race, was added to the BRFSS and adopted by several states in an attempt to capture data on perceived [racial discrimination](#) and its effects in a population-based sample.

"As expected, everyday smokers were more likely than occasional smokers, and occasional smokers were in turn more likely than nonsmokers, to report being the [target](#) of perceived discrimination in both health-care settings and the workplace," he says.

"Smokers were more likely than [nonsmokers](#) to report emotional and physical symptoms in response to perceived discrimination, although [occasional smokers](#) were more likely than everyday smokers to report both emotional and physical symptoms."

Purnell says the study highlights a potentially high-risk group of individuals who report feeling unfairly treated because of their race and who may be smoking as a means of coping with the psychological distress associated with discrimination.

"Identifying these individuals for targeted smoking cessation interventions may improve cessation rates," he says.

"Our findings also suggest that alternative forms of coping with discrimination may be a fruitful area of discussion in counseling interventions designed to help individuals quit smoking."

Provided by Washington University in St. Louis

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