

# Special Populations II:

*Members of Racial or Ethnic Minority Groups;  
People who are Lesbian, Gay, Bisexual, or  
Transgender; Persons with Psychiatric Disorders*

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# Disclosure

**In the past 12 months, I have had no relevant financial relationships with the manufacturers of any commercial product or providers of commercial services discussed in this CME activity. I do not intend to discuss an unapproved or investigative use of a commercial product or device in my presentation.**

# **Learning Objectives: Members of Racial/Ethnic Minority Groups**

- **At the conclusion of this session, participants will be able to:**
  - **Describe and discuss the unique risk factors associated with tobacco use and dependence among members of racial or ethnic minority groups**
  - **List the barriers to treatment of members of racial or ethnic minority groups**
  - **Discuss the need for additional research into the tobacco use behaviors of members of racial or ethnic minority groups**

# **Learning Objectives, People who are Lesbian, Gay, Bisexual, or Transgender**

- **At the conclusion of this session, participants will be able to:**
  - **Describe the unique risk factors associated with the increased tobacco use prevalence among LGBT populations**
  - **Discuss the need for additional research into the tobacco use behaviors of adult and adolescent LGBT populations**

# **Learning Objectives, Persons with Psychiatric Disorders**

- **At the conclusion of this session, participants will be able to:**
  - **Discuss the relationship between tobacco use, abuse of other substances, and mental illnesses.**
  - **Discuss challenges to tobacco use cessation in this population, smoke free institutional policies, and pharmacological effects of nicotine withdrawal.**

# Minority Groups

## Adult Smoking Prevalence

<b>African-American</b>	<b>20%</b>
<b>Asian-American</b>	<b>11%</b>
<b>Caucasian</b>	<b>22%</b>
<b>Hispanic</b>	<b>15%</b>
<b>Native American</b>	<b>33%</b>

# **Tobacco Use Is Not The Same Disease in All Groups**

- **Cultural differences**
- **Gender role differences**
- **Metabolic differences**
- **Differences in susceptibility to tobacco use-induced diseases**

# Tobacco Use by African-Americans

- 20% of AA adults smoke
- Males (24%) > females (17%)
- AA youth start smoking at older ages - Making it out of high school without starting doesn't mean they'll never start
- Menthol cigarettes popular
- ~1/3 of AA metabolize nicotine more slowly than Caucasians

# Menthol Cigarettes

- **> 75 % of AA smokers use mentholated brands; < 25% of Caucasians**
- **Local anesthetic – relieves throat irritation**
- **May increase absorption of toxins**
- **Cooling, numbing properties may permit larger puffs, deeper, longer inhalations**

# Tobacco Use and Asian-Americans

- 11% of adult Asian-Americans smoke
- Males (18%) > females (5%)
- Asian-Americans initiate smoking later in life
- Most successful at quitting permanently
- Most metabolize nicotine more slowly than Caucasians

# Tobacco Use and Hispanics

- 15% of Hispanic adults smoke
- Males (19%) > females (11%)
- Hispanic smokers are more likely to make a quit attempt than whites, less likely to receive counseling or medications
- Hispanic households likely to have smoking bans
- Significant gender role differences

# **Tobacco Use and American Indians and Alaskan Natives**

- **33% of adult American Indians and Alaska Natives smoke**
- **Males (37%) > females (29%)**
- **Teen use estimated at 46%**
- **Tobacco plays an important cultural role as a sacred gift of the earth (Cigarettes are NOT sacred)**

# Gay, Lesbian, Bisexual and Transgender

- Little research
- Higher prevalence of tobacco use
- Bars and dance clubs are typical social outlets
- Reduced access to health care
- Targeting by tobacco industry

# **LGBT Adolescents**

- **Even less known about tobacco use by LGBT adolescents**
- **Identity issues and stress**
- **Increased feelings of alienation**
- **Decreased support from friends, family, community**
- **Exposure to environments that support smoking**

# Persons with Mental Health Disorders (Including Addiction)

- Are parents, too!
- 2-3x more likely to be tobacco dependent
- Use ~1/2 of cigarettes smoked in US
- Increased risk of tobacco-related illness

# Special Considerations

- **Be aware of increased tobacco use in persons with these illnesses**
- **Users with mental health disorders may require more intensive interventions**
- **Address tobacco use in all settings, including inpatient psychiatric facilities, detention centers, etc.**

# Will Cessation Affect Their Illness?

- Limited research
- Treatment safe and usually well tolerated
- Some theoretical concerns about drug metabolism – check blood levels
- Association between tobacco use cessation and decreased relapse to alcohol and/or drug use!

# **Barriers To Treatment for ALL Groups**

- **Cost**
- **Language**
- **Culture**
- **Geographic access**
- **Gender role issues**

# Summary

**Members of minority groups; people who are gay, lesbian, bisexual or transgender; and people with mental health disorders deserve treatment!**

New  
crush-proof box.



**MERIT**  
A world of flavor in a low tar.

© Philip Morris Inc. 1994

Warning: The Surgeon General Has Determined  
That Cigarette Smoking is Dangerous to Your Health.

9 mg "tar", 0.8 mg nicotine av. per cigarette by FTC method.

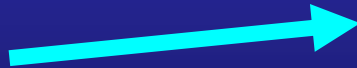
**Role  
Playing  
Exercises**

# The Rules

- **Role playing exercises can help you become “comfortable” with new language**
- **Role playing exercises DON'T work if you DON'T say the words out loud**
- **Be silly. Have fun!**

# Everyone Should Have

- Handout *Number 2*
- Some “you can quit” cards



You can **QUIT!** Call Toll Free  
1-800-QUITNOW (1-800-784-8669)

Whether you've already started or are just thinking about it, talk to an expert who can help you build a Quit Smoking plan that works for you.

Deaf/Hearing Impaired 1-800-332-8615  
Smoke Free Homes  
[www.kidslivesmokefree.org](http://www.kidslivesmokefree.org)

# General Format

- Take turns as the “clinician” and “patient” or “parent”
- ASK
  - Ask about tobacco use and SHS exposure
- ASSIST and REFER
  - Advise users to quit and all families to make their home and cars smoke free
  - Refer to outside resources