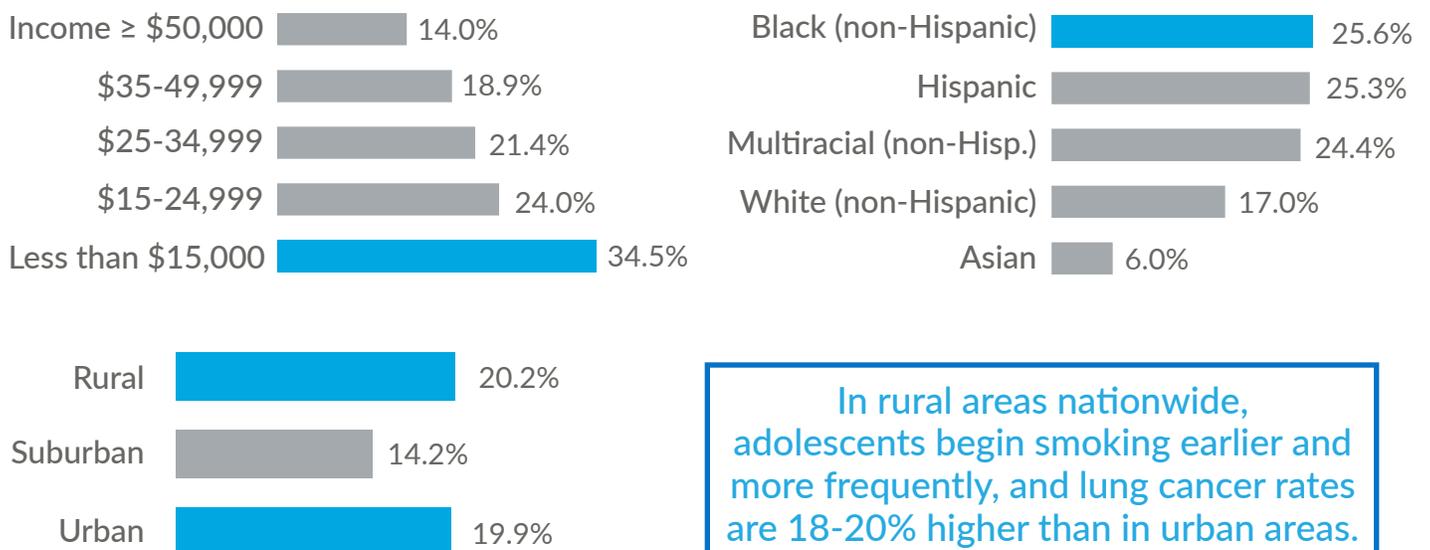


# Tobacco-related Health Disparities

Social determinants of health, tobacco industry influence, and a lack of comprehensive tobacco control policies contribute to and maintain tobacco-related health disparities across the US. Minority and low-income populations are disproportionately affected by cigarette smoking; they experience increased secondhand smoke exposure, lower rates of cessation coverage, lower rates of quit success, and higher incidence of lung cancer. The tobacco industry utilizes marketing and promotional strategies to target low-income, minority, young adult, and LGBT populations. Areas with large racial/ethnic minority and low-income populations also tend to have more tobacco retailers, increasing tobacco advertising exposure. Despite overall declines in smoking prevalence nationwide, significant disparities persist.

## Disparities in Smoking Prevalence Among Populations in PA



## LGBT Community

LGBT youth smoke at a higher rate (59%) than their heterosexual peers (35%). Only 77% of the LGB population and 57% of the transgender population have health insurance coverage, compared to 82% of the overall heterosexual population.

## Mental Illness & SUD

Adults with mental illness or substance use disorders (SUDs) have higher rates of cigarette smoking. While these adults only comprise 25% of the US, they consume almost 40% of all cigarettes smoked by adults.



**RECOMMENDATION:** Implement policies that decrease the density of tobacco retailers and restrict point-of-sale advertising.

### Sources:

CDC BRFSS 2015; CDC BRFSS 2014 via America's Health Rankings.  
 CDC. Smoking & Tobacco Use: *Tobacco-Related Disparities*. (2016). American Journal of Preventive Medicine.  
 Substance Abuse and Mental Health Services Administration, Center for Behavioral Health Statistics and Quality.

