Tobacco use remains the single largest preventable cause of death and disease in the United States\textsuperscript{1}. Every year smoking kills almost one in five adults. In 2010 approximately 17% of deaths were attributable to smoking\textsuperscript{1}.

Data from the 2014 Behavioral Risk Factor Surveillance System (BRFSS)\textsuperscript{2} show smoking habits among Oregonians with and without disabilities. The BRFSS is a telephone based survey that is conducted annually in all 50 states in the US and collects information related to health behaviors, chronic health conditions, and use of preventive services.

**Figure 1. Smoking and Disability, BRFSS 2014 Data**

These data show that people with disabilities are much more likely to smoke currently, or to have smoked in the past. Nationally, 26.6% of people with disabilities are current smokers compared to 14.6% people without disabilities. In Oregon,

- 27.3% of adults with disability are current smokers compared to 12.6% of adults without a disability.
- 34.9% of adults with disability are former smokers compared to 26% of adults without a disability.
- 37.7% of adults with disability have never smoked, compared to 61.4% of adults without a disability.

**How does Smoking affect health?**

- Tobacco smoking has been associated with multiple forms of cancer such as, lung, throat, esophagus, and mouth cancer.
- Smoking damages the immune system and compromises the body’s ability to fight infections and diseases.
- Smoking has been associated with increased risk for vascular disease which includes: coronary heart disease, heart attack, hypertension, and stroke.
Tobacco smoking increases the risk for recurrent asthma episodes and other lung related diseases such as pneumonia and emphysema.

Smoking not only affects your health, but also the health of those around you, especially children and older adults.

**What are the benefits of quitting smoking?**

- After 20 minutes, your heart rate drops.
- After 12 hours, the carbon monoxide level in your blood drops to normal.
- After 2-3 weeks, your risk for a cardiovascular event starts to drop and your lung function starts to improve.
- After 1-9 months, your coughing and shortness of breath decreases.
- After 1 year, your risk for coronary heart disease is half that of a smoker.
- After 2-5 years, your risk of stroke is reduced to that of a nonsmoker.
- After 5 years, your risk of cancer of the mouth, throat, esophagus, and bladder is cut in half.
- After 10 years, your risk for lung cancer is about half that of a smoker and your risk for kidney and pancreas cancers decreases.
- After 15 years, your risk of coronary heart disease is back to that of a nonsmoker.

**How can we help people with disabilities stop smoking?**

The Center for Disease Control and Prevention (CDC) recommends the following strategies for helping people with disabilities stop smoking:

- Update existing health promotion campaigns with smoking cessation messages specifically targeting people with disabilities.
- Disseminate information about the hazards of cigarette smoking to people with disabilities.
- Adapt tobacco cessation material to meet the needs of people with disabilities, especially those with visual and hearing disabilities.
- Train Quitline staff on appropriate communication with the deaf community.
- Train tobacco helpline counselors about disparities in smoking rates between people with and without disabilities.

**To learn more about quitting smoking visit the following:**

- Smokefree.gov
- CDC Quit Smoking
- American Cancer Society: Guide to Quitting Smoking
- American Heart Association: Quite Smoking
- American Lung Association: How to Quit Smoking

**For support in quitting**, including free quit coaching, a free quit plan, free educational materials, and referrals to local resources, 24/7

- Call 1-800-QUIT-NOW (1-800-784-8669)

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