



## **NBNA Resolution**

### **Title: Nicotine Dependence & Tobacco Use: Creating and Supporting Tobacco Free Environments**

**Whereas**, smoking is one of the most preventable chronic causes of death around the world. Cigarette smoking accounts for more than 480,000 deaths each year in the United States, which is nearly one in five deaths.

**Whereas**, smoking rates in adults have declined from 20.9% in 2005 to 15.1% in 2015, which means that 36.5 million people continued to smoke in 2015.

**Whereas**, cigarette smoking is one of the largest public health threats.

**Whereas**, African Americans and Whites smoking rates are nearly equal, African Americans experience tobacco-related deaths at a higher rate than any other racial or ethnic groups.

**Whereas**, African Americans on average have a slower rate of nicotine metabolism and smoke fewer cigarettes than Whites, African Americans are less likely to quit smoking.

**Whereas**, African Americans begin smoking at a later age than Whites.

**Whereas**, African Americans have a significantly lower prevalence of cigarette smoking than Whites and Hispanics, they are more likely to die from the chronic effects of tobacco.

**Whereas**, cotinine is a byproduct of nicotine. African American non-smokers have higher levels of cotinine compared to other racial groups suggestive of second-hand tobacco exposure.

**Whereas**, cigarette smoking has been linked to third-hand tobacco exposure due to nicotine residue found on indoor surfaces.

**Whereas**, African Americans typically prefer mentholated cigarettes. Previous research findings have suggested that mentholated cigarettes were more addictive than non-mentholated cigarettes and reinforces smoking behavior.

**Whereas**, cigarette smoking is linked to a \$300 billion direct health care cost and productivity loss.

**Whereas**, exposure to second-hand smoke has been causally linked to cancer, cardiovascular disease, and respiratory disease.



**Whereas**, the American Academy of Nursing, in response to the United States Department of Health and Human Services' call for smoke-free policies, urges implementation of smoke-free policies and educational programs to educate nurses about the danger of tobacco as well as the benefits of cessation.

**Whereas**, the harmful effects of tobacco use appear to have little impact on smoking cessation rates, which may be associated with barriers that prevent clinicians' ability to maximize intervention strategies within the primary care setting.

**Whereas**, a study indicated that only 15% of smokers who were evaluated by a physician in the past year were initially aided with smoking cessation. Out of that proportion, only 3% of the smokers were given a follow-up appointment to discuss possible interventions relative to smoking cessation.

**Whereas**, the level of nicotine dependence contributes to an individual's ability to quit smoking.

**Whereas**, nicotine dependence is a chronic relapsing disease requiring medical care and should be treated as a chronic disease like diabetes, hypertension, and hyperlipidemia.

**Whereas**, the ability for nurse clinicians to recognize nicotine dependence as a chronic disease could be the stimulus needed to initiate interventional discussions with at-risk patients. Until nicotine dependence is conceptualized as a chronic disease, it will be difficult to effectively address smoking cessation in our society.

**Whereas**, urgent action is required as tobacco-related deaths are expected to rise to more than 8 million per year by 2030. Now,

**Therefore, Be it Resolved:** The National Black Nurses Association, Inc (NBNA) recognizes nicotine dependence, and tobacco use disorders as a chronic disease.

**Therefore, Be it Resolved:** The NBNA supports the five Major Steps to Intervention (Ask, Advise, Assess, Assist, and Arrange) in addressing nicotine dependence and tobacco use every patient clinical visit.

**Therefore, Be it Resolved:** The NBNA supports nurses' engagement in continuing education activities in the area of smoking cessation to facilitate greater understanding of the chronicity and health disparities associated with smoking and cessation efforts.

**Therefore, Be it resolved:** The NBNA joins the efforts of the World Health Organization and the American Academy of Nursing in recognizing May 31<sup>st</sup> as "NBNA World No Tobacco Day."



**Therefore, Be it Resolved:** The NBNA supports the translation of research findings from clinical trials into culturally appropriate smoking cessation strategies for African Americans across the lifespan.

**Therefore, Be it Resolved:** The NBNA supports the use of anti-smoking policies to reduce the risks of exposure to secondhand and thirdhand smoke.

**Therefore, Be it Further Resolved:** The NBNA highlights the health hazards associated with tobacco use and advocate for effective comprehensive strategies and healthcare policies to reduce tobacco use and increase cessation efforts in African American Communities.

**Signature:** (Requires original hand signatures)

Name:  Date: 02/28/2018

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