

2022

New York State Smokers' Quitline Statewide Highlights



Who we served, and why it matters.

Of those enrolled with
the Quitline...

24%

**Were people
with disability.**

Significantly higher
smoking prevalence.
Smoking can worsen
existing disabilities
and can also cause
some disabilities.¹

21%

**Were people who
identify as Black or
African American.** Smoke
fewer cigarettes, but more
likely to die from smoking-
related disease.²

43%

**Were people who
experience mental
health conditions.**
Die almost fifteen years
earlier. Smoking can
impact effectiveness
of medication.³

31%

**Were people who have
an income of less than
\$15,000.** Less likely to
use, or have access to,
proven treatment.⁴

Nicotine addiction - perpetuated by the tobacco industry.

The tobacco industry pressures some groups with tailored marketing tactics and pushes flavored tobacco products to certain populations. Disparities in commercial tobacco use, secondhand smoke exposure, related health problems, and access to treatment can exist based on income, education, health insurance, and other social and demographic factors such as race, ethnicity, age, sexual orientation, and disability.⁵ More than 28,000 New Yorkers die from smoking and exposure to secondhand smoke⁶, with an estimated 30% of all cancer deaths and about 90% of all lung cancer deaths caused by smoking.⁷

Vaping and youth.

E-cigarettes, vaping, and nicotine use is especially harmful to youth and young adults. Nicotine addiction can harm brain development which continues into the early to mid-20's. E-cigarettes can also contain harmful substances besides nicotine.⁸ In NYS, 22.5% of youth currently vape and roughly 2.4% use commercial tobacco products.⁹

The price of tobacco hits

hard. Smoking is a dangerous addiction, and it cuts into individual and family livelihoods. New York healthcare spends an average \$9.7 billion a year on preventable smoking related healthcare costs.¹⁰ New York state smokers spend an average of over \$3,000 a year on their tobacco use.^{11,12} Each year, smoking steals as much as 20% of New Yorkers' annual income.¹³

Offering choices. The Quitline offers tailored counseling from a team of Specialists, free medications, texting and chat support, tools, and local and partner resources, as well as professional guidance for health care providers. The New York State Smokers' Quitline is here for all NYS residents to become and stay tobacco and vape free.

Media makes a difference.

Nearly 70% of people who smoke want to quit.¹⁴ Those who do attempt to quit make many attempts, often without support — building frustration and doubt. To be successful, it is important to keep trying. Effective, evocative media ads work to motivate attempts and drive individuals to Quitline services. Media alone accounted for hundreds of thousands of visitors to the Quitline's website. Media is crucial in saving lives and decreasing the cost burden for individuals and healthcare.

Nicotine addiction - treatment

works. Nicotine addiction treatment services that pair behavioral support and medications can double an individual's chances of quitting and staying quit. However, more is needed to be done to reduce the barriers to treatment that certain populations encounter.

2022

New York State Smokers' Quitline Capital Region Highlights



Who we served, and why it matters.

Of those enrolled with
the Quitline...

26%

**Were people
with disability.**

Significantly higher
smoking prevalence.
Smoking can worsen
existing disabilities
and can also cause
some disabilities.¹

8%

**Were people who
identify as Black or
African American.** Smoke
fewer cigarettes, but more
likely to die from smoking-
related disease.²

51%

**Were people who
experience mental
health conditions.**

Die almost fifteen years
earlier. Smoking can
impact effectiveness
of medication.³

32%

**Were people who have
an income of less than
\$15,000.** Less likely to
use, or have access to,
proven treatment.⁴

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New York State Smokers' Quitline Central Region Highlights



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Of those enrolled with
the Quitline...

28%

**Were people
with disability.**

Significantly higher
smoking prevalence.
Smoking can worsen
existing disabilities
and can also cause
some disabilities.¹

7%

**Were people who
identify as Black or
African American.** Smoke
fewer cigarettes, but more
likely to die from smoking-
related disease.²

49%

**Were people who
experience mental
health conditions.**

Die almost fifteen years
earlier. Smoking can
impact effectiveness
of medication.³

34%

**Were people who have
an income of less than
\$15,000.** Less likely to
use, or have access to,
proven treatment.⁴

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22%

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Significantly higher
smoking prevalence.
Smoking can worsen
existing disabilities
and can also cause
some disabilities.¹

29%

**Were people who
identify as Black or
African American.** Smoke
fewer cigarettes, but more
likely to die from smoking-
related disease.²

39%

**Were people who
experience mental
health conditions.**

Die almost fifteen years
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New York State Smokers' Quitline Western Region Highlights



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25%

**Were people
with disability.**

Significantly higher
smoking prevalence.
Smoking can worsen
existing disabilities
and can also cause
some disabilities.¹

11%

**Were people who
identify as Black or
African American.** Smoke
fewer cigarettes, but more
likely to die from smoking-
related disease.²

48%

**Were people who
experience mental
health conditions.**

Die almost fifteen years
earlier. Smoking can
impact effectiveness
of medication.³

32%

**Were people who have
an income of less than
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