# Tobacco Use, Quitting, and Service Access for Northern California Arab Americans: A Participatory Study

Juliet P. Lee, PhD<sup>1, ORCID: 0000000323303736</sup>, Lina Salam, MS<sup>1</sup>, Gamila Abdelhalim, LLM<sup>2</sup>, Robert Lipton, PhD<sup>1</sup>, Mark Myers, PhD<sup>3,4</sup>, Sarah Alnahari, MsPH<sup>5</sup>, and Walid Hamud-Ahmed, MD<sup>6</sup>

(1) Pacific Institute for Research and Evaluation-CA; (2) Communities Upwards; (3) VA San Diego Healthcare System; (4) UC San Diego Department of Psychiatry; (5) UC Merced, School of Public Health; (6) USCF Fresno, Emergency Medicine

## What Is the Purpose of this Study?

 The study aimed to understand tobacco product use, readiness to quit, and access to treatment and prevention services for Arab Americans.

#### What Is the Problem?

Due to numerous social, structural, and commercial determinants of health, Arab Americans are at risk for tobacco
product use, particularly waterpipe tobacco smoke. Because population health in the United States is assessed using racialethnic groups which do not necessarily align with tobacco-related disparities, Arab Americans may be both understudied
and underserved in tobacco research and practice.

### What Are the Findings?

Arab Americans, both men and women, used waterpipes for smoking tobacco, yet healthcare providers do not ask about
this. People in the community preferred talking with their providers in Arabic, but very few had access to that service.
Tobacco cessation services in Arabic were only available to people with private insurance, which was less than half the
tobacco users in our study.

#### Who Should Care Most?

• Health care providers in areas with Arab American communities should care about this study.

#### Recommendations for Action

• Our study indicates a need for commercial tobacco treatment and prevention research and services that are culturally and linguistically appropriate for Arab Americans.