WE KNOW WHAT WORKS:

EVIDENCE BASED POLICY AND TOBACCO CONTROL

Promoting a Healthier Wyoming ● September 19, 2019
Tobacco Use is the Leading Cause of Preventable Disease, Disability, and Death in the United States

SOCIAL IMPACT

34M
An estimated 34.3 million U.S. adults smoked in 2017. ¹

2 in 5
About two in every five children are exposed to secondhand smoke. ³

480,000
Cigarette smoking and secondhand smoke exposure kill about 480,000 people in the U.S. each year.¹

1 VS. 30
For every one smoking-related death, at least 30 people live with a serious smoking-related illness. ²

$300B
Each year, cigarette smoking costs the US more than $300 billion, including $170 billion in direct medical costs and $156 billion in lost productivity.²,⁴

Sources:
GOOD NEWS: CIGARETTE SMOKING IS DOWN…

Source: Adult cigarette smoking prevalence data are from the National Health Interview Survey (NHIS). High school cigarette smoking prevalence data are from the National Youth Risk Behavior Survey.
ADULT PER CAPITA CONSUMPTION AND MAJOR SMOKING-AND-HEALTH EVENTS—U.S., 1900–2017

Sources: Adapted from Warner 1985 with permission; Department of Health & Human Services; Creek et al. 1994; U.S. Department of Agriculture; U.S. Census Bureau; U.S. Department of the Treasury.
BAD NEWS: DISPARITIES PERSIST

…AND THE TOBACCO PRODUCT LANDSCAPE CONTINUES TO EVOLVE
Individual

- Tobacco easily accessible
- Smoking in public legal
- Unfettered advertising
- Poor access to cessation help
- Products designed to addict

Tobacco Addiction

Society
CHANGING THE COST-BENEFIT CALCULUS

Individual

- Tobacco more expensive and less accessible
- Smoke-free policies
- Counter-marketing and promotion restrictions
- Easy access to help
- Products made less addictive

Society

Tobacco Addiction
TOBACCO INDUSTRY IS OUTSPENDING PREVENTION EFFORTS 19:1

State Tobacco Revenue (FY2017 CTFK Report) $27.3 billion
Federal Cigarette Tax Revenues (FY2017 Tax Burden on Tobacco) $12.8 billion
Tobacco Industry Marketing & Promotion Spending (2017 FTC) $9.4 billion Cigarettes And Smokeless
Total CDC-Recommended Spending Level $3.3 billion
State Tobacco Program Budgets FY2016 $0.5 billion

TOBACCO INDUSTRY IS OUTSPENDING PREVENTION EFFORTS 19:1

WE KNOW WHAT WORKS

CIGARETTE EXCISE TAXES
UNITED STATES
2000 – JUNE 2019

Source: Centers for Disease Control and Prevention (CDC). State Tobacco Activities Tracking and Evaluation (STATE) System. Updated 2019
INCREASING TOBACCO PRODUCT PRICE IS THE SINGLE MOST EFFECTIVE METHOD TO REDUCE CONSUMPTION

COMPREHENSIVE SMOKE-FREE LAWS
UNITED STATES
2000 – JUNE 2019

Source: Centers for Disease Control and Prevention (CDC). State Tobacco Activities Tracking and Evaluation (STATE) System. Updated 2019

- No State Law/Exemptions/ Ventilation/Separation (n = 13)
- Partial Law (One Location) (n= 5)
- Partial Law (Two Locations) (n = 5)
- Comprehensive Law (Worksites & Bars & Restaurants) (n = 28)
DISPARITIES IN SECONDHAND SMOKE EXPOSURE

SHS Exposure

Children

African Americans

Persons in Poverty

Renters

Evidence-based interventions that increase quit rates:

- Advice to quit from a health care professional
- Counseling: individual, group, telephone
- 7 FDA-approved medications
- Barrier-free insurance coverage of these treatments
- Health systems changes to integrate treatment into routine care

MASS MEDIA CAMPAIGNS

CDC’s Tips drives quits: 9M quit attempts and 500,000+ sustained quits among U.S. adults (2012–2015)
TIPS DRIVES CALLS: CAMPAIGN RESULTS 2012-2019

WE KNOW WHAT WORKS

IMMEDIATE IMPACT OF POLICY CHANGE: NEW YORK CITY


- City and State tax increases
- Smoke-free policy
- Aggressive media campaigns
- State and Federal Tax increases
- Even more aggressive media campaigns

Adult and Youth Percentages:
- 2001: 21.6% (Adult), 17.6% (Youth)
- 2002: 21.5% (Adult), 14.8% (Youth)
- 2003: 21.5% (Adult), 11.2% (Youth)
- 2004: 18.9% (Adult), 8.5% (Youth)
- 2005: 16.9% (Adult), 8.4% (Youth)
- 2006: 15.8% (Adult), 7% (Youth)

Percentages represent the 3-yr. average.
TOBACCO CONTROL VACCINE BOOSTER: Opportunities to Expand Reach

- Tobacco 21
- Smoke-free Multiunit Housing
- Tobacco-free College
- E-cigarettes & Policy
- Tobacco-free Pharmacies
- e-Referrals
- Tobacco-free Sports
- Movies/Digital Media
- Restrictions on Flavors
- Alternative Pricing Policies
GOOD NEWS: CIGARETTE SMOKING IS DOWN…

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AND THE TOBACCO PRODUCT LANDSCAPE CONTINUES TO EVOLVE
E-CIGARETTE MARKET SHARE, BY DOLLAR SALES, UNITED STATES, 2013-2018

CURRENT TOBACCO PRODUCT USE AMONG U.S. HIGH SCHOOL STUDENTS – NYTS 2011-2018

"We don’t think a lot about addiction here because we’re not trying to design a cessation product at all...anything about health is not on our mind”

JUUL R&D Engineer, quoted in The Verge, April 2015

OBJECTIVES: Assess use and reasons for use of electronic vapor products shaped like USB flash drives among adults in the US

DATA SOURCE: SummerStyles, an internet survey of US adults aged ≥18 (N=4088) fielded in June-July 2018

METHODS: Respondents were shown product images and asked about ever use, current (past 30 days) use and reasons for use. Weighted point estimates and adjusted ORs were assessed.
RESULTS - USE OF E-CIGARETTES SHAPED LIKE USB FLASH DRIVES AMONG ADULTS US, 2018

RESULTS (CONTINUED) - USE OF E-CIGARETTES SHAPED LIKE USB FLASH DRIVES AMONG ADULTS IN THE US, 2018

<table>
<thead>
<tr>
<th>Group</th>
<th>Ever Use</th>
<th>Current (Past 30 Day) Use</th>
</tr>
</thead>
<tbody>
<tr>
<td>Overall</td>
<td>7.9</td>
<td>11.2</td>
</tr>
<tr>
<td>White, non-Hispanic</td>
<td>6.7</td>
<td>8.3</td>
</tr>
<tr>
<td>Black, non-Hispanic</td>
<td>8</td>
<td>5.5</td>
</tr>
<tr>
<td>Other, non-Hispanic</td>
<td>10.2</td>
<td>1.5</td>
</tr>
<tr>
<td>Hispanic</td>
<td>11.2</td>
<td>1.6</td>
</tr>
<tr>
<td>College degree</td>
<td>5</td>
<td>2.4</td>
</tr>
<tr>
<td>Some college</td>
<td>8.3</td>
<td></td>
</tr>
<tr>
<td>High school</td>
<td>8.4</td>
<td></td>
</tr>
<tr>
<td>&lt;High school</td>
<td>13.5</td>
<td></td>
</tr>
</tbody>
</table>

NOTE: Black, non-Hispanic; Hispanic; and <high school results not shown for current use because small sample sizes resulted in unstable estimates.
RESULTS – REASONS FOR USE OF E-CIGARETTES SHAPED LIKE USB FLASH DRIVES AMONG ADULTS IN THE US, 2018

FINDINGS IN CONTEXT: CURRENT USE OF JUUL IS AT LEAST THREEFOLD HIGHER AMONG ADOLESCENTS THAN ADULTS

Note: Adolescents were asked about JUUL only in the Truth Longitudinal Cohort study. Adults were asked about JUUL and other USB flash drive-shaped e-cigarettes in the SummerStyles survey.

KEY FINDINGS

• Few adults use JUUL and other USB-shaped e-cigarettes overall
• Use of JUUL is more than threefold higher among youth ages 15-17 (6.1%) than adults (2%)
• Nicotine delivery and peer or family member use are primary reasons for use
• Smoking cessation is not the predominant reason for use among adults
• Products are being used to deliver marijuana, revealing the diverse landscape of EVP product offerings and patterns of use
PUBLIC HEALTH IMPLICATIONS

• Given that youth are more likely to report using JUUL than adults, efforts are warranted to prevent youth access to and use of flash-drive shaped e-cigarettes.

• Efforts to prevent youth access can occur as we simultaneously assess these products’ potential to help adult smokers quit.

• Surveillance systems need to account for use of electronic vapor products for nicotine and cannabis.

• Policies that prohibit e-cigarette use and smoking indoors can help prevent bystanders from exposure to secondhand tobacco product emissions.
Cigarette smoking remains the leading cause of preventable disease, disability, and death in the United States. The tobacco product landscape continues to diversify to include new and emerging products. We know what works. But core tobacco control strategies have not been fully implemented throughout the US and have not reached all populations in all states. It is critical that tobacco control strategies are modernized to keep pace with the changing tobacco product landscape.
THANK YOU

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The findings and conclusions in this report are those of the authors and do not necessarily represent the official position of the Centers for Disease Control and Prevention.