

Stepping up to the Future

NH CITIZENS HEALTH INITIATIVE

A Pound of Prevention:

2008 Tobacco Action Plan



New Hampshire Citizens Health Initiative
Health Promotion and Disease Prevention Policy Team

Tobacco Workgroup

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All tobacco workgroup meeting agendas, presentations and meeting summaries are posted on the Citizens Health Initiative website at www.stepsupnh.org.

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The Time for Action is Now

The 2007 document *A Pound of Prevention*¹ released by the Health Promotion and Disease Prevention (HPDP) policy team ended with a section titled “Call to Action”. This action plan takes off from that point, outlining the tobacco priority areas for the Health Promotion and Disease Prevention (HPDP) policy team for 2008 and 2009 developed with expert partners.

The gravity of the tobacco problem in New Hampshire was outlined in *A Pound of Prevention*. The document brought forth evidence that tobacco use and exposure in New Hampshire is the leading actual cause of death, is the most preventable cause of death, and contributes substantially to health costs in our state. Given the overwhelming evidence of the health effects of tobacco, it is alarming that the rate of tobacco use has reached a plateau after decades of decline² and young people continue to take up the habit³. With this understanding, the HPDP policy team convened a group of experts, HPDP tobacco workgroup, to develop this action plan.

Recognizing the purchase of tobacco is legal for those over 18 and that individual choice is an important aspect of New Hampshire culture, the HPDP tobacco workgroup sought to identify evidence-based policy to create environments in which tobacco purchase and use are less *desirable* and increase educational opportunities. The tobacco industry spends millions of dollars in our state marketing tobacco products.⁴ As a state, we do not have the financial resources to combat the industry dollar for dollar, however, we can use proven policy interventions to reduce tobacco use.

Developing the Action Plan

In spring of 2007 the Citizens Health Initiative HPDP policy team formed the tobacco workgroup. The tobacco workgroup was charged with recommending three–five policy focus areas to the HPDP policy team. In addition, the tobacco workgroup identified longer term projects some of which are opportunities to work along side other Citizens Health Initiative efforts to reduce tobacco use in the state. The recommendations will drive the HPDP policy team agenda in 2008 and help plan long-term policy projects. Recognizing that a collaborative, focused approach will accomplish more to improve New Hampshire’s health status, the workgroup agreed that the top two–three policy priorities recommended by the workgroup should coordinate with the top priorities of all the organizations involved in the workgroup.

The tobacco workgroup process included: Review of evidence-based policy and programs, consideration of current policy and laws, appreciation for individual choice, understanding of New Hampshire’s current population health infrastructure, and ability to monitor and enforce new policy and/or incorporate new projects.

Tobacco-related policy recommendations go back to 1964 when the first Surgeon General report was published on the health effects of tobacco. More recently the Institute of Medicine 2007 report “Ending the Tobacco Problem: A Blueprint for the Nation”, provides evidence-based research and clear policy recommendations for the group to consider and New Hampshire to act upon. The Institute on Medicine (IOM) report is a comprehensive federal and state, multi-area strategy which includes funding, licensing, taxation, clean air initiatives, prevention and cessation programs, and health insurance coverage.

Examining proven recommendations is only one part of creating effective policy for our state. Consideration of current tobacco policy related to access, exposure, and cessation coverage are critical aspects in moving New Hampshire forward. In addition, advocates and community health organizations lending their knowledge of policy history in New Hampshire allows us to build upon past success. Creating an environment in New Hampshire in which access and exposure are minimized must balance the libertarian culture in our state.

The Health Effects of Tobacco Use

Smoking is a core risk factor for many chronic diseases (including heart disease and cancer) and a trigger for others such as asthma.⁵ The use of smokeless tobacco products has been linked to oral cancer and gum disease.⁶ Overall, tobacco use is the leading cause of preventable death in the United States.⁵ It is estimated that for each person who dies from a smoking-related disease, 20 more are living with a smoking-attributable illness.⁷ Smoking also increases the risk for pregnancy complications, premature delivery, low-birth-weight infants, still birth, and sudden infant death syndrome.⁸

Secondary exposure to smoke is linked to acute respiratory infections, ear problems, and more severe asthma in children.⁹ For adults, secondary exposure affects the cardiovascular system and causes coronary heart disease and lung cancer.⁵ Nationally, secondhand exposure to smoke is estimated to lead to approximately 35,000 heart disease deaths a year.¹⁰

The Key Facts

- In 2006, 18.7% (17.4–20.0) of New Hampshire adults reported being current smokers. This is a decrease from 20.4% (19.1–21.7) in 2005 and comparable to the national average of 20.0%.¹¹
- In 2007, 26.6% of New Hampshire high school students reported smoking cigarettes or cigars or used chewing tobacco, snuff, or dip one or more days in the past thirty days. This total percentage has not changed significantly since 2003. In 2007, 17.2% of New Hampshire high school students reported using cigars, cigarillos, or little cigars on one or more of the past 30 days. This is a significant increase since 2003.³
- 1,688 New Hampshire residents died from a smoking-related illness, representing 18% of all deaths statewide.(1999)¹²
- Estimates project that 31,000 youth under 18 currently living in New Hampshire will die prematurely from smoking.¹³

Cost of Tobacco Use

- It is estimated that \$608 million per year of New Hampshire's health care costs are due to smoking.¹⁴
- \$115 million of New Hampshire health care costs associated with smoking are shouldered by Medicaid. Since Medicaid costs are split 50-50 in New Hampshire, the state share is \$57.5 million.(2004)¹⁵
- Smoking is estimated to lead to \$405 million dollars annually in lost worker productivity in New Hampshire.(2004)¹³

Prevention Spending

- Though it is estimated for FY 2008 New Hampshire will receive \$211.8 million in tobacco tax revenues and receive \$48 million in tobacco settlement dollars, tobacco prevention spending is only \$1.3 million, only 12% of the CDC minimum target.¹⁶
- The CDC recommends that the state spend a minimum of \$10.9 million on comprehensive prevention programming¹³ in an effort to counter the estimated \$141.7 million the tobacco industry spends on marketing in New Hampshire.⁴

The health effects and key facts could take up the entire document, however, the story has been told before in U.S. Surgeon General reports and New Hampshire DHHS reports. The tobacco workgroup is focused on providing evidence-based, actionable recommendations for the state. The group is committed to working together and with the general public and policy makers in New Hampshire to implement comprehensive tobacco prevention policy.

The May 2007 Legislator Policy Brief from The Council of State Government outlines five goals to guide legislators in developing a comprehensive tobacco prevention programs

1. To prevent youth and young adults from beginning to use tobacco,
2. To promote retailer compliance with youth tobacco sales restrictions combined with other interventions to decrease minors' ability to buy tobacco,
3. To promote tobacco cessation,
4. To eliminate exposure to secondhand smoke, and
5. To identify and eliminate the use and impact of tobacco disparities.

The priority policy actions for the 2008 legislative session and the ongoing work identified below follow these five goals. These actions in 2008 will continue to build on past efforts while leading us forward for continued tobacco prevention strategies in 2009.

2008 Legislative Action

Transfer Tobacco Sales Licensing Process to Liquor Commission

The IOM report states that licensing retail sales outlets that sell tobacco products as an important piece of a comprehensive tobacco control policy. Licensing provides an opportunity to educate businesses on tobacco laws and monitor and enforce those laws. One of the most important tobacco control laws in our state is the restriction of sales to those less than 18 years of age. Currently, the process of tobacco retail licensing is split between two government agencies. The Department of Revenue processes the retail license and the Liquor Commission hears all administrative cases. However, the Liquor Commission can only assess fines up to \$750 and can only recommend suspending licenses to the Department of Revenue. This leaves loop holes in the system such as; if a retailer does not pay a fine owed to the Liquor commission, they may still be issued a license from the Department of Revenue.

- The benefits of taking this action include:
 - i. Improved education and enforcement of the tobacco retail laws through a streamlined licensing process and strong enforcement ability of the Liquor Commission
 - ii. Retailers will only have one department to apply to for both alcohol and tobacco sales
- Both the Department of Revenue and the Liquor Commission support transferring the licensing process to the Liquor Commission.

Define Cigars in New Hampshire Such That They are Categorized Comparable with All Other Tobacco Products:

- As noted in the "Key Facts" section above, cigar use among New Hampshire's high school students has increased significantly since 2003. The American Cancer Society (ACS) states the health risks associated with cigar smoking (included in health section above) and reports on the alarming increase of cigar use among young adults nationally.¹⁷ This is also true in New Hampshire based on 2007 Youth Risk Behavior Survey data included in the Key Fact section above. In addition, cigar secondhand smoke gives off comparable toxins as cigarettes.
- The IOM report and other studies concur that tobacco tax is an effective measure to reduce tobacco use, especially among youth.¹⁸ The Campaign for Tobacco Free Kids supports states defining cigars along side all other tobacco products as price is a deterrent for youth.¹⁹ Current state tobacco tax laws (Section 78:1) define "tobacco products" as "cigarettes, loose tobacco, and smokeless tobacco" and

“cigarette means any roll for smoking made wholly or in part of tobacco, and wrapped in any material except tobacco”. These current definitions result in excluding cigars from taxation that is comparable with other tobacco products.

Establishing comprehensive tobacco prevention policy in New Hampshire is an achievable goal. Given our low levels of prevention funding it is going to take a combination of initiatives to achieve success. While supporting efforts in both retail licensing and cigar definitions in 2008, there is groundwork for 2009. The following is a summary of actions of the tobacco workgroup in preparation for 2009.

On-going Actions for 2008

Align Reimbursement with Tobacco Prevention

Aligning public and private insurance reimbursement for extensive coverage of evidence-based tobacco counseling, information and referral, and pharmacological coverage. Work along side public and private partners and integration with other Citizens Health Initiative projects:

- *The NH Purchasers Group on Health:* Current members include the University System of New Hampshire, The Local Governance Center, SchoolCare, and the State of NH. These employers are interested in understanding and incorporating wellness and prevention in their work places and in their health insurance plans. Efforts to expand the QuitWorks referral system and provide support for expanding cessation programs are key areas of focus with the purchasers group.
- *The Reimbursement Workgroup:* This workgroup comprises representation from the major insurance companies operating in New Hampshire. In 2008 they are focusing on defining and implementing the medical home in New Hampshire. The medical home includes a care-coordinator who can coordinate and follow up on tobacco cessation referral.

Expand Effective Clinical Intervention Programs

- The New Hampshire QuitWorks program is an evidence based referral program. While other programs exist in New Hampshire, they may not be based fully on evidence-based practices such as QuitWorks.
- Explore a pilot project with a group of clinicians to discover how we can integrate tobacco prevention initiatives into the context of the physician practice.

The tobacco workgroup comprises New Hampshire organizations that see tobacco prevention and control as a priority area. We welcome other organizations who are interested in participating. During the months of January through March 2008, a weekly conference call will be held. This will allow the group to stay informed and coordinate the 2008 policy priorities outlined. In addition, the work group will meet quarterly to work on the long-term projects included in this report. All meeting information is posted on the Citizens Health Initiative website.

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