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Smoking Isn't Falling as Fast as Officials Hoped: Report

## State Tobacco Control a Mixed Bag

Though there has been progress, the challenges continue, experts say

By Steven Reinberg HealthDay Reporter

FRIDAY, June 12 (HealthDay News) -- Efforts to help people quit smoking vary from state to state, and despite progress over the years, there is still a long way to go, a new report concludes.



The news appears particularly timely given Thursday's historic Senate vote to put tobacco products under federal control.

The report, Cigarette Smoking Prevalence and Policies in the 50 States: An Era of Change -- the Robert Wood Johnson Foundation ImpacTeen Tobacco Chart Book, is a systematic review of national trends and tobacco-control policy and smoking behaviors in all 50 states.

"There are some areas of progress, and some areas where we are not doing so good," said study author Gary G. Giovino, chair of the Department of Health Behavior at the University of Buffalo School of Public Health and Health Professions. Giovino presented the report Wednesday at the National Conference on Tobacco or Health meeting in Phoenix.

Progress includes more people living in smoke-free homes and more states passing smoke-free air laws, Giovino said. "The country is becoming a smoke-free society," he said.

But at the same time, states are cutting funding for tobacco-control programs, Giovino added. "Over the years, states have taken more money in from excise taxes and the tobacco settlement payments, and yet they have cut back on tobacco-control funding," he said. "That doesn't seem right to me."

According to the report, after 40 years of efforts to get people to stop smoking, onefifth of American adults still smoke. Smoking among those with lower levels of education and income, Native Americans and people with psychiatric and substanceabuse problems is even more prevalent.

Another group that needs to be targeted is young adults, where smoking rates are increasing, Giovino said.

In addition, disparities in tobacco policies exist among the states.

For example, the prevalence of smoking among those aged 18 to 29 is 2.5 times

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higher in Kentucky than in California (36.2 percent vs. 14.4 percent). Moreover, by 2007, 66 percent of those 30 and older in New Hampshire had quit smoking, but only 45 percent of West Virginians in the same age group had quit.

The report also says that in states with the fewest smokers, those still smoking are less likely to be dependent on smoking and more likely to want to quit, compared with smokers in states with a high prevalence of smokers.

States need to do more to educate people not to smoke and help smokers quit, Giovino said.

"There is wide variation in cigarette-smoking prevalence across states and a clear relationship between smoking prevalence and the rate of mortality that can be attributed to smoking," Giovino said. "Strong tobacco-control programs save lives."

While outreach programs, legislation, cigarette price increases and coverage for and access to stop-smoking treatment work, most states are not fully implementing these approaches to reduce smoking rates and protect nonsmokers, the report said.

For example, about 27 percent of people receiving Medicaid smoke, which is significantly more than the 17 percent of people with private health insurance who smoke. Yet, 12 states do not provide Medicaid coverage to help people quit.

Making smoking more expensive through excise taxes on cigarettes is a proven way to get people not to start smoking or to quit, the report says. But taxes vary by state -- Rhode Island's tax of \$3.46 a pack is the highest; South Carolina's 7-cent tax is lowest

Combined state and federal cigarette taxes make up a smaller percent of the cost of a cigarette pack in 2009, at 40 percent, than they did in 1970, at 49 percent, the authors noted.

On the bright side, state programs have shown progress in reducing smoking and exposure to secondhand smoke from the early 1990s to 2007.

- The number of smokers has dropped, from 24.5 percent to 18.5 percent.
- The percentage of people living in a home where smoking is not allowed inside increased, from 43 percent to 79.1 percent.
- The percentage of smoke-free workplaces has increased, from 46 percent to 75 percent.

Data in the report came from different sources, including the Tobacco Use Supplement to the Current Population Survey, the Youth Risk Behavior Surveillance System and the ImpacTeen State Legislative database. The ImpacTeen State Level Tobacco Control Policy and Prevalence Database

An earlier study supports the idea that states with strong tobacco-control programs can make a significant dent in smoking. According to a March report from the U.S. Centers for Disease Control and Prevention, differences in tobacco marketing and promotion and tobacco-control programs are among the reasons why adult smoking rates are almost twofold higher in some states than others.

For example, about 28 percent of adults in Kentucky smoke, and 27 percent in West Virginia, compared with 14 percent of adults in California and 12 percent in Utah, the report found.

Dr. Norman H. Edelman, a scientific consultant to the American Lung Association, thinks that while the number of smokers has gone down, attention needs to be paid to young adults and teens.

"Clearly we have made progress in reducing smoking," Edelman said. "But we seem to be coming down to a hardcore smoker -- a young adult or teenager, poorly educated

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and from a low socioeconomic status -- and that's problematic. We need to focus more on those groups."

## More information

For more information on smoking, visit the **U.S. National Institutes of Health**.

SOURCES: Gary G. Giovino, Ph.D., professor and chair, Department of Health Behavior, University of Buffalo School of Public Health and Health Professions, N.Y.; Norman H. Edelman, M.D., scientific consultant, American Lung Association; June 10, 2009, report, Cigarette Smoking Prevalence and Policies in the 50 States: An Era of Change -- the Robert Wood Johnson Foundation ImpacTeen Tobacco Chart Book; June 10, 2009, Associated Press

Last Updated: June 12, 2009

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