



Indiana Must Increase Funding for ITPC to Further Reduce Smoking

New data shows stalling of progress in reducing the number of adult smokers in Indiana

New data from the 2005 Indiana Behavior Risk Factor Surveillance System survey show that Indiana's adult smoking rate increased from 24.9 percent in 2004 to 27.3 percent in 2005. While this change is not statistically significant, it represents a troubling reversal from recent years as Indiana's adult smoking rate declined from 27.7 percent in 2002 to 24.9 percent in 2004. Indiana now has the second highest adult smoking rate in the country after Kentucky.

This disappointing news is not surprising because state leaders in recent years cut funding for the highly effective Indiana Tobacco Prevention and Cessation Agency (ITPC) by almost 70 percent and the state's cigarette tax rate remains significantly below the national average and most neighboring states. If Indiana is to succeed in reducing smoking and its terrible toll in health, lives and money, it is imperative that the state's leaders restore funding for the ITPC program to minimum levels recommended by the U.S. Centers for Disease Control and Prevention (CDC) and significantly increase the cigarette tax as well.

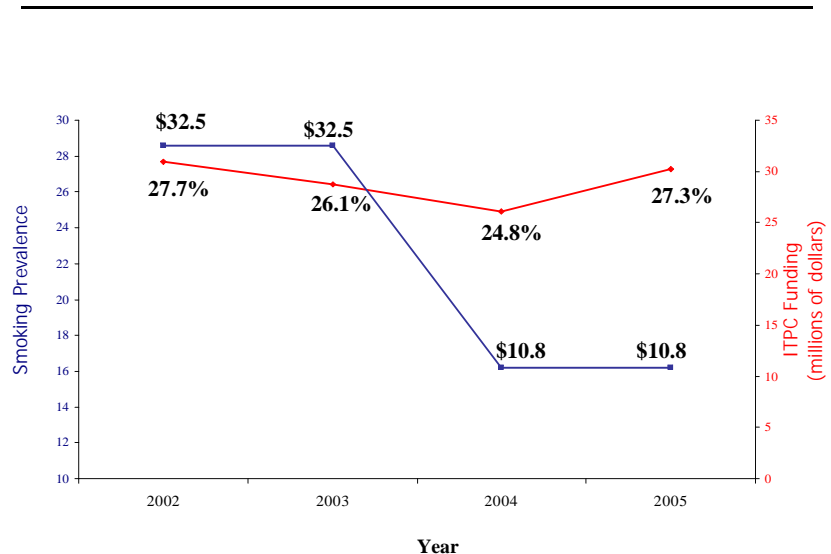
Reversal of Progress Coincides with Cut in Tobacco Prevention and Cessation Funding

This reversal of progress follows deep cuts to funding for the Indiana Tobacco Prevention and Cessation Agency. Adult smoking rates in Indiana declined by more than 10 percent between 2002 and 2004, but declines reversed after funding was cut in Fiscal Year 2004 and subsequent years. The chart below illustrates the clear correlation between the level of funding for ITPC and Indiana's progress in reducing adult smoking.

Indiana now funds tobacco prevention at just 31 percent of the minimum amount of \$34.8 million a year recommended by the CDC.

In contrast, the tobacco companies have increased their marketing expenditures in Indiana to a record \$475 million a year, amounting to 44 times what the state currently spends on programs to prevent kids from smoking and help smokers quit. Just recently, Indianapolis was selected to once again serve as a test market for new tobacco products, further hurting the state's image as unhealthy.

Adult Smoking Prevalence and ITPC Funding 2002-2005



Note that ITPC funding levels are calendar year

Before the budget cuts, ITPC was recognized nationally as one of the most effective state tobacco prevention programs and contributed to significant declines in smoking among both adults and youth in Indiana. ITPC is still recognized as a national leader in managing its

program and pursuing the best practices in tobacco control, however reduced funding has significantly restricted its reach.

- Adult smoking rates in Indiana declined by more than 10 percent between 2002 and 2004, when the program was funded at higher levels.
- Smoking among Indiana high school students declined by 32.5 percent between 2000 and 2004 (2004 is the most recent youth data available), from 31.6 percent to 21.3 percent.
- Smoking among middle school students declined by 20 percent, from 9.8 percent to 7.8 percent, between 2000 and 2004.

Despite budget cuts, ITPC continues to do excellent work to prevent kids from smoking and help smokers quit throughout Indiana, and the increase in adult smoking likely would have been even greater without its efforts.

At peak funding, ITPC closely followed CDC's best practice guidelines, implementing them in innovative ways specifically tailored to Hoosiers. Best practices recommends a comprehensive approach to tobacco prevention programs, including: public education and advertising campaigns to counter the pro-smoking messages of the tobacco industry; community and school-based education campaigns; programs to help smokers quit; effective enforcement of laws prohibiting tobacco sales to minors; and careful monitoring and

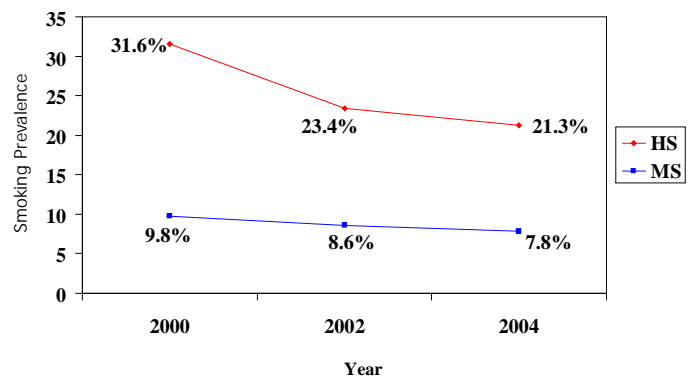
evaluation. The monitoring and evaluation component is particularly important to assess progress and further improve performance. Ongoing evaluation and oversight from the leading experts in the state ensured ITPC programs were achieving their benchmarks and desired outcomes. However, budget cuts have forced ITPC to eliminate or reduce many programs. While the mission of the ITPC to implement a comprehensive program based on best practice has not changed, the practical reality of available funding is that this goal can not be met. For example, statewide grants were slashed, community grants cut, and ITPC's advertising campaign went almost a year with no ads. The results are as were predicted to legislators and state leaders-- the slowing, and perhaps even reversal, of progress. Indiana's experience is similar to what has happened in other states that have cut funding for tobacco prevention.

While there is no silver bullet to solving tobacco-caused death and disease, successful programs have all followed an essential formula which includes:

- ❑ Adequate and consistent funding
- ❑ Programming that is consistent and builds on success over time
- ❑ Programming that is comprehensive and heavily integrated among the six components outlined in CDC's Best Practices
- ❑ Strong staff leadership as well as detailed oversight from public health experts
- ❑ Freedom from influence of the tobacco industry and its allies

Building a successful program takes time, experience, and dedication. Although we know a lot about what works, one should not underestimate how difficult it is to build a program that has been as successful as ITPC.

Indiana Youth Smoking, 2000-2004



Data are from the Indiana Youth Tobacco Survey