



THE IMPACT OF REDUCTIONS TO STATE TOBACCO CONTROL PROGRAM FUNDING

States that have implemented comprehensive tobacco prevention and cessation programs have achieved significant reductions in tobacco use among both adults and youth; however, many state tobacco control programs, even the model ones, have recently experienced drastic reductions in funding. Cuts to program funding are taking their toll – reductions in youth smoking have stalled, and sales of tobacco to youth and youth susceptibility to smoking are on the rise.

A study by the U.S. Centers for Disease Control and Prevention (CDC) found that kids are being exposed to fewer state-sponsored television ads that discourage them from smoking. The study used Nielsen television ratings data to measure the exposure of 12-17 year olds to anti-tobacco advertising in the 75 largest media markets. The study found that exposure to anti-tobacco advertising among youth increased between 1999 and 2002, but declined in 2003. Between 1999 and 2002, monthly youth exposure to anti-tobacco ads increased from .04 exposures per month to .80 per month (1.0 equals exposure to one state-funded anti-tobacco advertisement per month). In 2003, however, exposure declined to .63 exposures per month. The decline in state spending on tobacco prevention has resulted in a dramatic and perhaps dangerous decline in the number of television ads sponsored by the states that discourage kids from smoking. These results are troubling because well-funded state tobacco prevention programs, including TV ad campaigns, have proven highly effective at reducing youth smoking, cutting smoking rates by more than half in some states.¹

Even more alarming is how quickly progress can be slowed or reversed. Minnesota experienced an increase in youth susceptibility to smoking just months after funding for its Target Market program was eliminated.

California

California launched its new Tobacco Control Program in 1990 following the approval of Proposition 99, a ballot initiative that increased state cigarette taxes by 25 cents per pack, with 20 percent of the new revenues (over \$100 million per year) earmarked for health education against tobacco use. The California tobacco control program has dramatically reduced adult and youth smoking rates and cigarette consumption in California, however the program produced much larger smoking reductions in the early years of the program, when the program was funded at its highest levels, than during subsequent years, when program funding was substantially reduced. When the state program's funding was cut in the mid 1990s, its progress in reducing adult and youth smoking rates stalled, but it got back on track when program funding was partially restored.² Progress also halted between 2002 and 2005, following significant cuts to program funding in FY2003.³

- Implementation of the California Tobacco Control Program was associated with a 36 percent increase in the rate of decline of smoking prevalence; however, between 1994 and 1996, there was no significant decline in smoking prevalence in California.
- Once funding was partially restored, California began to experience additional reductions in smoking. From 1996 to 2003, smoking declined by more than 60% among eighth grade students and by more than half among tenth grade students. From 2000 to 2003 alone, smoking prevalence decreased by more than 30 percent among twelfth grade students.⁴ Unfortunately, more recent data suggest that youth smoking declines have stalled. Smoking among high school students increased from 13.2 percent to 15.4 percent between 2004 and 2006.⁵ Additionally, the percentage of youth who perceive a benefit to smoking increased to 56.7 percent in 2005, similar to the 1993 level.⁶
- Between 1988 and 2003, cigarette consumption in California declined by 60 percent, compared to just 38 percent for the country as a whole.⁷ However, following significant cuts to program funding in FY2003, declines in cigarette consumption came to a virtual standstill between 2002 and 2005.⁸

Massachusetts

For years, Massachusetts was a leader in addressing tobacco use and experienced declines in cigarette consumption at rates significantly greater than the nation as a whole. In 1992, Massachusetts took aggressive action to lower tobacco use among adults and youth in the state by significantly increasing the state's cigarette tax and using some of the new tax revenues to fund the Massachusetts Tobacco Control Program (MTCP),

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one of the nation's first comprehensive tobacco prevention and cessation programs. The state's early investment in the program paid off – the MTCP achieved considerable success when it was well-funded and comprehensive.

- Between 1992 and 2003, per capita cigarette consumption declined by more than 47 percent in Massachusetts, compared to just 28 percent nationally.⁹
- From 1995 to 2001, current smoking among Massachusetts high school students dropped by 27 percent, while the nationwide rate dropped by 18 percent.¹⁰

Despite the considerable success achieved in Massachusetts, funding for the state's tobacco prevention program was cut by 95 percent - from a high of approximately \$54 million per year to just \$2.5 million in FY2004, although funding for the program has increased slightly in recent years. This drastic reduction in funding has taken its toll in Massachusetts – cigarette consumption actually increased, reductions in youth smoking have stalled, and sales of tobacco to youth have dramatically increased.

- While youth smoking in Massachusetts declined significantly throughout the 1990s, declines in youth smoking stalled between 2003 and 2005 after funding was significantly reduced in FY2003 and FY2004. Smoking among Massachusetts high school students declined from 35.7 percent in 1995 to 20.9 percent in 2003 but remained virtually the same in 2005 at 20.5 percent.¹¹
- Between 1992 and 2003, per capita cigarette consumption declined at a higher rate in Massachusetts as it did in the country as a whole (47 percent v. 28 percent). However, from 2003 to 2006, Massachusetts' per capita cigarette consumption declined a mere seven percent (from 47.5 to 44.1 packs per capita), while the U.S. average cigarette consumption declined by ten percent (from 67.9 to 61.1 packs per capita). Most recently, between 2005 and 2006, Massachusetts' per capita cigarette consumption *increased* by 3.2 percent (from 42.7 to 44.1 packs per capita), while nationwide, per capita consumption *declined* by 3.5 percent (from 63.3 to 61.1 packs per capita).¹²
- Between 2002 and 2003, cigarette sales to minors increased by 74 percent, from 8 percent to 13.9 percent in communities that lost a significant portion of their enforcement funding. Over the same time period, cigarette sales to minors increased by 98 percent in communities that lost all of their local enforcement funding.

Florida

With funding from its 1997 settlement with the tobacco industry, the state of Florida funded a comprehensive tobacco prevention program modeled on the programs in California and Massachusetts but targeted at youth. The program produced substantial early success in preventing and reducing smoking among kids, but despite the program's steady success, program funding was under consistent attack.¹³ In 2003, Florida's governor and legislature virtually eliminated this highly successful program which halted the program's early progress, especially among younger kids, who are not only entering the most vulnerable years for starting to smoke but also are now receiving a weak, watered down version of the state program's efforts to help protect them from becoming addicted smokers.

- Cigarette use among middle school and high school students decreased faster between 1998 and 2001 than during 2002-2005. In the first three years of the Florida program, from 1998 to 2001, current smoking declined by 47 percent among middle school students (from 18.5% to 9.8%) and by 30 percent among high school students (from 27.4% to 19%). From 2002 to 2005, current smoking declined by 19.5 percent (from 9.2% to 7.4%) among middle school students and by 11.7 percent (from 17.8% to 15.7%) among high school students.¹⁴ Progress in reducing youth smoking rates has continued to be slow in recent years as funding for the program remained minimal. Smoking among high school students declined by just 7.6 percent between 2005 and 2008.
- Social attitudes toward tobacco changed significantly from pro-tobacco to anti-tobacco among middle school students between 1998 and 2000, but did not change significantly between 2000 and 2004. Among high school students, the social attitudes toward tobacco changed significantly from pro-tobacco to anti-tobacco during 1998-99, but have not changed since 1999.¹⁵

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- After increasing steadily between 1998 and 2000, the percentage of middle school students who were “committed never smokers” remained unchanged between 2001 and 2002. Similarly, the percentage of Florida high school students who were committed never smokers rose to 41.8% in 2001, but remained virtually unchanged at 43.2% in 2002.

Funding for the Florida tobacco prevention program was restored to \$58 million in FY2008 following a constitutional amendment approved by voters to require that the state spend 15 percent of its annual tobacco settlement revenue on tobacco prevention. Because of this investment, Florida can again be a national leader in reducing smoking and the toll of tobacco.

Indiana

In 2000, Indiana implemented a comprehensive tobacco prevention and cessation program with revenue received from the state’s tobacco settlement. The Indiana Tobacco Prevention and Cessation (ITPC) program has contributed to significant declines in smoking among both adults and youth in Indiana, but in FY2004 state leaders cut funding for the highly effective program by almost 70 percent. Subsequently, progress in reducing smoking rates stalled.

- Behavior Risk Factor Surveillance System data show that 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. Indiana’s adult smoking rate is one of the nation’s highest at 26.1 percent.¹⁶
- Smoking among Indiana high school students declined by 32.5 percent between 2000 and 2004, from 31.6 percent to 21.6 percent, but actually increased in 2006 to 23.9 percent.¹⁷

Minnesota

Although Minnesota’s program was successful right from the start, program funding was reduced from \$23.7 million to \$4.6 million in July 2003, and the Target Market campaign, the linchpin of the program, was eliminated. Just six months afterward, awareness of the Target Market campaign among 12-17 year olds had already declined from 84.5 percent to 56.5 percent and youth susceptibility to smoking increased by 22 percent.¹⁸

Campaign for Tobacco-Free Kids. December 31, 2009 /Meg Riordan

Related Campaign Fact Sheets (available at <http://www.tobaccofreekids.org/research/factsheets>)

¹ CDC, “Estimated Exposure of Adolescents to State-Funded Anti-Tobacco Television Advertisements --- 37 States and the District of Columbia, 1999—2003,” *Morbidity and Mortality Weekly Report*, 54(42), October 28, 2005.

² Pierce, JP, et al., “Has the California Tobacco Control Program Reduced Smoking?,” *Journal of the American Medical Association* 280(10):893-899, September 9, 1998.

³ Al-Delaimy, WK et. Al., The California Tobacco Control Program: Can We Maintain the Progress? Results from the California Tobacco Survey, 1990-2005. Tobacco Control Section, California Department of Health, 2008 <http://www.cdph.ca.gov/programs/tobacco/Documents/CTCP-CTSReport1990-2005.pdf>.

⁴ California Department of Health Services, Tobacco Control Section, executive Summary of the Final Report, In-School Evaluation of Tobacco Use Prevention Education in California 2001-02. <http://www.dhs.ca.gov/tobacco/documents/ietp01-02.pdf>

⁵ California Student Tobacco Survey.

⁶ Overview of Evaluation in the California Tobacco Control Program.

⁷ Cigarette Consumption, California Department of Health Services, Tobacco Control Section, 2005. <http://www.dhs.ca.gov/tobacco>.

⁸ Al-Delaimy, WK et. Al., The California Tobacco Control Program: can we Maintain the Progress? Results from the California Tobacco Survey, 1990-2005. Tobacco Control Section, California Department of Health, 2008 <http://www.cdph.ca.gov/programs/tobacco/Documents/CTCP-CTSReport1990-2005.pdf>.

⁹ Data from Orzechowski & Walker, *Tax Burden on Tobacco 2006* [an industry-funded report]. Per capita cigarette consumption is measured as per capita cigarette pack sales.

¹⁰ High school smoking data are from the Youth Risk Behavioral Surveillance System.

¹¹ CDC, Youth Risk Behavior Survey, 1005-2005.

¹² Data from Orzechowski & Walker, *Tax Burden on Tobacco 2006* [an industry-funded report]. Per capita cigarette consumption is measured as per capita cigarette pack sales.

¹³ Florida Department of Health, *2002 Florida Youth Tobacco Survey*, Volume 5, Report 1; May, 2003.

¹⁴ 2005 Florida Youth Tobacco Survey. http://www.doh.state.fl.us/disease_ctrl/epi/FYTS/Fact_Sheet1_Cigarette_Use.pdf

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¹⁵ 2004 Florida Youth Tobacco Survey. http://www.doh.state.fl.us/disease_ctrl/epi/FYTS/2004_FYTS.htm

¹⁶ CDC, "State-specific Secondhand Smoke Exposure and Current Cigarette Smoking Among Adults - United States, 2008," *MMWR* 58(44): 1232-1235, November 13, 2009, <http://www.cdc.gov/mmwr/preview/mmwrhtml/mm5844a3.htm>.

¹⁷ Indiana Youth Tobacco Survey, http://www.in.gov/itpc/files/youth_fact_sheet_Jan08.pdf

¹⁸ Sly, D., et al., "Effect of Ending an Antitobacco Youth Campaign on Adolescent Susceptibility to Cigarette Smoking - Minnesota, 2002-2003," *Morbidity and Mortality Weekly Report*, 53(14):301-304, 2004. <http://www.cdc.gov/mmwr/PDF/wk/mm5314.pdf>