



# Priority: Tobacco

Tobacco<sup>A</sup> use and exposure is the leading cause of preventable death in Wisconsin, linked to 7,900 deaths and \$4.72 billion in health care and lost productivity each year.<sup>1</sup> There is a need for programs and policies to keep people from using tobacco in the first place, to help people quit using tobacco, and to prevent exposure to e-cigarette aerosol and secondhand smoke.

## Background and Data

Even though the rate of adult smoking is at an all-time low in Wisconsin (17%), many populations are disproportionately burdened by tobacco, such as African Americans (31%), those impacted by depression (29%), and Medicaid recipients (29%).<sup>2</sup> In addition, new tobacco products threaten the progress made in preventing kids from using tobacco. E-cigarette use among high school students increased nearly 600% from 1.9% in 2012 to 13.1% in 2016, and the rising popularity of cigar use among high school boys is also a concern.<sup>3</sup>

## ACEs and Tobacco

Certain adverse childhood experiences (ACEs) are connected to risk behaviors (like tobacco use) and linked to negative health outcomes in adulthood. Data show that 72% of all smokers in Wisconsin have experienced at least one ACE, compared with 53% of non-smokers in Wisconsin. Each additional ACE is correlated with higher smoking prevalence. Efforts are underway in Wisconsin to explore integrating trauma informed practices with treatment efforts while continuing to focus on the strong connection between tobacco use and adversity in childhood.<sup>2</sup>

## Current Activities

Organizations and communities across Wisconsin are applying many strategies to reduce tobacco use and reduce exposure to e-cigarette aerosol and secondhand smoke with the support of the Tobacco Priority Action Team (PAT). The Tobacco PAT consists of members from a variety of organizations key to the implementation of *Healthy Wisconsin*.

Work is ongoing to increase access to and utilization of tobacco treatment services and benefits among populations disproportionately burdened by tobacco. One successful effort has been the availability of free continuing education credits upon completion of tobacco treatment integration training for behavioral and mental health providers through UW-CTRI in collaboration with the Wisconsin Nicotine Treatment Integration Project.

A media campaign encouraging use of the state's Medicaid Cessation Benefit launched to coincide with the U.S. Department of Housing and Urban Development's (HUD) smoke-free rule that took effect in August 2018. The ads encourage tobacco users to take advantage of the free help and builds on the education outreach local coalitions had been doing with HUD residents for the 18 months leading up to the rule change. The Tobacco is Changing campaign ([TobaccoisChanging.com](http://TobaccoisChanging.com)) aims to curb youth use of candy-flavored tobacco products. The multi-media approach combines billboards, cinema, social media, and a website to educate parents about these new and deadly tobacco products. Overall, the campaign generated 29 million impressions, 19,000 unique website visits, and strong social media engagement. Current plans are underway to extend the campaign through additional marketing and advertising.

The Wisconsin Retail Assessment Project (WRAP) is working across *Healthy Wisconsin* priority areas to assess the availability and advertising of tobacco, alcohol, and nutritious food within Wisconsin communities. WRAP has been bringing together local health departments, local prevention coalitions, and the Department of Health Services, to complete assessments, analyze the results, and educate retail partners and communities about the importance of access to healthy options for all populations; and to eliminate youth access to addictive substances.

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<sup>A</sup> *Healthy Wisconsin* recognizes the sacred use of ceremonial tobacco among Native Americans, and uses the word "tobacco" to refer to commercial tobacco use.



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Goal: Prevent and reduce smoking and other tobacco products

## Objective 1

Reduce adult smoking rate from 17.3% in 2014 to 16.3% in 2020 (BRFS):<sup>2</sup>

2015: 17%

2016: 17%

## Strategies

Strategy 1: Increase utilization of evidence-based tobacco cessation services, focusing outreach toward at-risk populations,\* Medicaid recipients, and pregnant and postpartum women and their families.

Strategy 2: Integrate tobacco cessation into behavioral health care treatment and services and educate tobacco users with behavioral health concerns about benefits of quitting smoking.

Strategy 3: Train stakeholders and professionals working in tobacco prevention and intervention about the connection between adverse childhood experiences (ACEs) or trauma, and tobacco use. These trainings should include an overview of how ACEs contribute to dual addictions, and highlight how trauma-informed approaches can serve as a response.

Strategy 4: Increase access and utilization of tobacco treatment services and benefits among public housing residents. **(New)**

Strategy 5: Collaborate with partners to ensure no-cost comprehensive cessation services (counseling and all FDA-approved cessation medications), as outlined by the American Lung Association, for low-income tobacco users. **(New)**

## Objective 2

Reduce use of other tobacco products by adults:

- › Reduce the percentage of adults that have ever used electronic cigarettes from 21.8% in 2016 to 18.5% in 2020 (BRFS) **(New)**<sup>2</sup>

2017: 19.3%

- › Reduce use of smokeless tobacco among men from 8.0% in 2016 to 6.8% in 2020 (BRFS) **(New)**<sup>2</sup>

2017: 7.8%

## Strategies

Strategy 1: Implement tobacco-free policies on college campuses.

Strategy 2: Educate and engage at-risk populations\* about the dangers of other tobacco products.

\*At-risk populations include behavioral health, low-income, racial and ethnic minorities, and LGBTQ.

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## Objective 3

Reduce use of other tobacco products by youth:

- › Reduce use of other tobacco products among middle school youth from 5.2% in 2014 to 4.5% in 2020 (YTS)<sup>3</sup>  
2016: 9.9%
- › Reduce use of other tobacco products among high school youth from 33.7% in 2014 to 31% in 2020 (YTS)<sup>3</sup>  
2016: 31.6%

## Strategies

Strategy 1: Educate and engage youth and school officials about the dangers of other tobacco products and implement tobacco-free school policies.

Strategy 2: Increase the number of compliance checks conducted and education outreach to retailers.

Strategy 3: Identify and implement evidence-informed policies to reduce youth use.

Strategy 4: Raise awareness of other tobacco products among Wisconsin parents. **(New)**

Strategy 5: Enhance surveillance to improve the monitoring of youth access to tobacco and youth tobacco behaviors. **(New)**

## References

<sup>1</sup> Campaign for Tobacco-Free Kids. "The Toll of Tobacco in Wisconsin." [www.tobaccofreekids.org/problem/toll-us/wisconsin](http://www.tobaccofreekids.org/problem/toll-us/wisconsin).

<sup>2</sup> Wisconsin Department of Health Services, Division of Public Health. "Wisconsin Behavioral Risk Factor Survey." [www.dhs.wisconsin.gov/stats/brfs.htm](http://www.dhs.wisconsin.gov/stats/brfs.htm).

<sup>3</sup> Wisconsin Department of Health Services, Division of Public Health, Wisconsin Tobacco Prevention and Control Program. Wisconsin Youth Tobacco Survey (YTS)

