

State of Wisconsin Department of Health Services

Tony Evers, Governor Andrea Palm, Secretary

April 30, 2019

Jeffrey Renk Senate Chief Clerk & Director of Operations Room B20 Southeast Madison, Wisconsin 53702

Patrick E. Fuller
Assembly Chief Clerk
12 West Main Street, Room 401
Madison, Wisconsin 53703

Dear Mr. Renk and Mr. Fuller:

The Department of Health Services is pleased to submit the 2018 Annual Report to the Governor and the Legislature on the status of smoking in Wisconsin and efforts to reduce this behavior as required by 2003 Wis. Act 33, SB 44, § 2462, 255.15 (4).

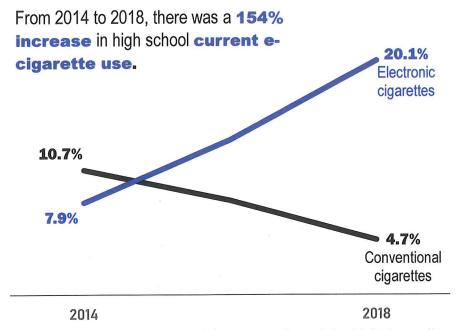
Tobacco contributes to the deaths of nearly 7,000 Wisconsin citizens every year and costs an estimated \$3 billion in annual health care costs and lost worker productivity (\$1.6 billion). The Wisconsin Tobacco Prevention and Control Program (TPCP) provides leadership, facilitates diverse partnerships, and administers funding and program activities. The TPCP continues to invest in comprehensive, evidence-based strategies to eliminate tobacco-related morbidity and mortality.

This report outlines 2018 highlights and challenges related to Wisconsin's efforts to prevent youth and young adult tobacco use, promote tobacco addiction treatment, eliminate tobacco-related disparities, and eliminate exposure to secondhand smoke.

Youth and Young Adults

- Middle school students who identified themselves as current cigarette smokers have declined from 12% in 2000 to 1.4% in 2018, an 88% decrease.¹
- High school students who identified themselves as current cigarette smokers have declined from 32.9% in 2000 to 4.7% in 2018, an 86% decrease.²
- Youth access to tobacco products has declined substantially from 24.6% of establishments selling to minors in 2000 to 5.8% in 2018, a 76% decrease.³
- An emerging issue is the use of other tobacco products:
 - o Middle school student current use of electronic cigarettes increased from 1.1% in 2014 to 4.1% in 2018, a 272% increase.¹

- O High school student current use of electronic cigarettes increased from 7.9% in 2014 to 20.1% in 2018, a 154% increase. Roughly 1 in 5 Wisconsin high schoolers currently use e-cigarettes.²
- o In 2018, 3.4% of middle school students, and 18% of high school students tried cigars, cigarillos, or little cigars. 1, 2
- O Approximately 1 in 4 high school students who have used electronic cigarettes first tried them before the age of 16. Ninety-six percent of middle school students who have used electronic cigarettes first tried them before the age of 13.^{1,2}



There is an e-cigarette epidemic among youth in Wisconsin and the U.S. According to the U.S. Health and Human Services Secretary Alex Azar, there has never been use of any substance by America's young people rise as rapidly as e-cigarette use is rising. In response to the dramatic increase in youth e-cigarette use, the Department of Health Services released a public health advisory in January 2019 about the e-cigarette epidemic of youth initiation and use. This followed the Advisory Report from Surgeon General Jerome Adams in late 2018 on e-cigarettes that stated nicotine exposure during adolescence can harm the developing brain, which continues to develop until around age 25, and can impact learning, memory, and attention. In order to further educate parents and those who teach, mentor, or work with youth, TPCP expanded the Tobacco is Changing media campaign.

In 2017, TPCP developed and launched a public education campaign called Tobacco is Changing to educate parents on the increasing popularity of flavored tobacco products among teens. The campaign's messaging was based on findings from focus groups with Wisconsin parents of teens and pre-teens. During the focus groups, parents shared that they were unaware of the products, but were very concerned about them—especially after seeing their colorful packaging and fruit and candy flavors.

The campaign's 2017-2018 run consisted of statewide digital advertising (including Facebook and YouTube), as well as billboard, print, and cinema ads in select areas of the state. All campaign elements encourage parents to visit tobaccoischanging.com to learn more about the many types of tobacco products tempting youth, explore issues like tobacco flavoring and packaging, and get tips for talking to their kids about the products. The campaign was relaunched in 2019 to reflect new changes in tobacco products, such as e-cigarettes that resemble flash drives.

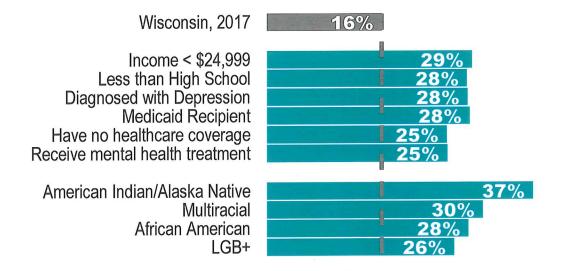
Initial results from the campaign include:

- 15 million campaign views, including four million video views
- 20,000+ web visits
- Hundreds of shares on Facebook and YouTube
- Increased interest in other DHS social media content—8,000 views generated for the DHS YouTube channel, with parents who watched a Tobacco is Changing ad viewing another DHS video within seven days

Another TPCP-funded program, SPARK, offers young adults, faculty, and staff a platform and an opportunity to be involved with and have a voice on their college or university campus. Since SPARK's inception in 2011, the program has worked with 26 college campuses throughout Wisconsin. SPARK groups have educated on the harms of secondhand smoke and other tobacco products, especially e-cigarettes, and the importance of tobacco-free campuses. Because of SPARK's efforts, 14 campuses have gone tobacco-free and additional campuses are working toward or implementing tobacco-free policies.

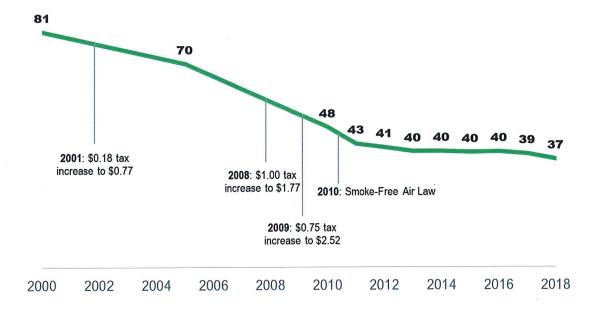
Adults

- In 2017, the adult conventional cigarette smoking rate dropped to 16%, after several years of remaining at 17%.⁴
- Smoking rates for certain groups remained high in 2017, including those with a total annual household income of less than \$24,000 (29%), those with less than a high school education (28%), individuals diagnosed with depression (28%), Medicaid recipients (28%), those who receive mental health treatment (25%), and individuals with no health care coverage (25%).
- The 2017 Behavioral Risk Factor Survey was unable to capture large enough sample sizes for certain populations with historically higher smoking rates than the general population. Due to the low sample size, rates were averaged from 2013-2017 for individuals who identify as American Indian/Alaska Native (37%), Multiracial (30%), African American (28%), and/or LGB+ (26%).



- Nearly 7,000 Wisconsinites die annually from smoking related illnesses, with associated direct health care costs estimated at approximately \$3.0 billion, and an additional \$1.6 billion in lost productivity.⁶
- Per capita consumption has declined from 80 packs sold in 2000 to 37 packs sold in 2018.⁵

Packs of cigarettes sold per capita have decreased over time, related to increased taxes and the Smoke-Free Air Law.



Treating Tobacco Dependence

- The Wisconsin Tobacco Quit Line (1-800-Quit-Now) received 11,766 inbound calls in 2018; there was a total of 7,588 registered callers. Callers who are trying to quit receive a two-week supply of no-cost nicotine replacement therapy (NRT) and free counseling. The University of Wisconsin Center for Tobacco Research and Intervention (UW-CTRI) coordinates the program with funding and administrative support from TPCP.
- Since 2001, First Breath, a program of the Wisconsin Women's Health Foundation, has helped over 20,000 pregnant and postpartum women who want to quit smoking. In 2018, 579 women enrolled in intensive First Breath Quit Coaching. Of those completing services at six months postpartum, 30% quit (biochemically verified), 74% reported zero infant exposure to tobacco smoke, and 80% reported their home was smoke-free. The First Breath Program expanded their services in 2018 to include family members of pregnant and postpartum women. As of January 2019, there are a total of 170 First Breath sites, with sites in each of the 72 Wisconsin counties.
- The Wisconsin Integration Nicotine Tobacco Initiative Program (WiNTiP) works with behavioral health systems and providers to adopt restrictive tobacco prevention and control policies to help patients and staff quit tobacco. WiNTiP is critical because it reaches individuals who struggle with behavioral health issues (mental illness and/or substance abuse), a population that has a smoking rate around 50%, which is nearly three times that of the general population. WiNTiP has had great success in educating mental health and substance use clinicians on the importance of addressing tobacco dependence and training them how to provide evidence-based tobacco dependence treatment. These efforts have included both in-person trainings and on-line training for which free CEUs are available. These efforts have also included key partnerships with local tobacco prevention and control coalitions throughout the state. A second on-line training course is currently being developed that tailors evidence-based tobacco dependence treatment for smokers coping with severe and persistent mental illness.

Secondhand Smoke Exposure

- Exposure to second-hand smoke continues to be high in homes for middle school (19.4%) and high school (19.3%) students.^{1,2} Exposure to second-hand smoke in vehicles is even higher for middle school (20.4%) and high school (24.2%) students.^{1,2}
- TPCP provided technical assistance to support the Clear Gains Network, Wisconsin's smoke-free housing initiative, which assisted in the implementation of the HUD smoke-free housing rule.

Cigarette Smoking Among Medicaid Beneficiaries

- The smoking rate for Wisconsin Medicaid members is 28%.⁴
- TPCP worked with the DHS Division of Medicaid Services and the UW-Center for Tobacco Research and Intervention to promote the Medicaid cessation benefit. Efforts were planned to coincide with the U.S. Housing and Urban Development Smoke-Free Housing Rule, which took effect at the end of July 2018.

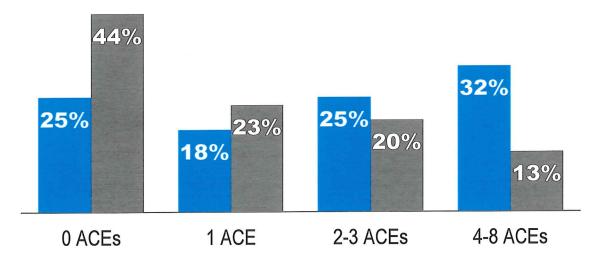
Looking Ahead

Research identifies that there are many populations in Wisconsin disproportionately impacted by the burden of tobacco. TPCP is dedicated to addressing the unique needs of these populations by partnering with local and state stakeholders to reduce the significant impact the use of tobacco has on the people of Wisconsin.

- Healthy Wisconsin, Wisconsin's Health Improvement Plan, highlights five priority areas for improving health, one of which is tobacco. TPCP has used this opportunity to collaborate and identify intersections with the other identified priority areas, including alcohol, suicide and depression, opioids, and nutrition and physical activity.
- Adverse childhood experiences (ACEs) are negative life events or experiences that occur during childhood (prior to the age of 18) and have the potential to hinder healthy child development. ACEs are connected to risk behaviors, such as tobacco use, and negative health outcomes in adulthood—both of which are leading costs to public health.

In Wisconsin, 75% of smokers have at least one ACE, compared to 57% of all Wisconsin residents.4 TPCP started conversations with UW-CTRI to examine how to incorporate trauma-informed care into cessation efforts across the state. Learning more about ACEs, and how they contribute to risk factors like tobacco use, is imperative to better understand how to provide resources and support to both those who use tobacco and the individuals who are providing them care (doctors, mental health professionals, etc.).

Current smokers have higher ACE scores than non-smokers.4



TPCP is committed to continuing the efforts described throughout this report to decrease tobacco use prevalence rates in Wisconsin, reduce exposure to secondhand smoke, and educate Wisconsinites on prevention and intervention best practice initiatives.

Sincerely,

Andrea Palm

Secretary - designee

Data Sources

- 1. Wisconsin 2018 Youth Tobacco Survey Middle School.
- 2. Wisconsin 2018 Youth Tobacco Survey High School.
- 3. State Fiscal Year 2018 Wisconsin Synar Report.
- 4. 2017 Wisconsin Behavioral Risk Factor Surveillance Survey (BRFSS).
- 5. Wisconsin Department of Revenue Cigarette Tobacco Tax Report
- 6. Burden of Tobacco in Wisconsin: 2015 Edition.
- 7. Wisconsin Tobacco Quitline Demographic Report, 1/1/2018 12/31/2018.
- 8. Wisconsin Women's Health Foundation First Breath 2018 Annual Report