



State of Wisconsin  
Department of Health Services

Tony Evers, Governor  
Kirsten L. Johnson, Secretary

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June 9, 2025

The Honorable Tony Evers  
Governor  
115 East State Capitol  
Madison, WI 53702

Dear Governor Evers:

The Wisconsin Department of Health Services (DHS) is pleased to submit the 2024 Annual Commercial Tobacco Use Cessation Report to the Governor and the Legislature per Wis. Stat. §255.15 (4).

First, the Wisconsin Commercial Tobacco Prevention and Treatment Program (CTPTP) acknowledges the cultural significance of sacred (or traditional) tobacco. Commercial tobacco differs from traditional tobacco, which has been used by American Indian communities for sacred purposes for generations. Unless noted, when “tobacco” is referenced in this report, it refers to *commercial tobacco* not *sacred tobacco*. Refer to the [Appendix A: Recognition of Sacred Tobacco](#) section for more information.

Despite the reduction of tobacco use among certain populations, the use of commercial tobacco continues to take a devastating toll on the health of Wisconsinites. Nationally, smoking is deadlier than alcohol, AIDS, car crashes, illegal drugs, murders, and suicides combined.<sup>1</sup> Wisconsin is no exception, with tobacco causing approximately 7,900 deaths annually—all preventable deaths. Nearly 30% of cancer deaths in Wisconsin are attributable to cigarette smoking. In addition, smoking causes an estimated \$3 billion in annual health care expenses, \$624.9 million in Medicaid claims, and \$5.6 billion in lost worker productivity in Wisconsin.<sup>2</sup> This amounts to \$944 in state and federal tax burden per household from smoking-caused government expenditures.<sup>1,2</sup>

Commercial tobacco companies are responsible for perpetuating this death, disease, and economic harm. To make a profit, the tobacco industry targets certain populations and promotes addiction to ensure and expand a clientele population to exploit as long as possible.

Everyone in Wisconsin deserves to live their best and healthiest life. To this end, CTPTP strives to protect and promote the well-being and safety of all Wisconsinites through the application of best practices in commercial tobacco prevention and treatment.

This report highlights the work of CTPTP in 2024 through following sections: State of Current Tobacco Use, Youth Prevention and Access, Smoke-free Air, and Tobacco Treatment. Within these three sections we detail the strategies and successes earned by CTPTP and highlight some opportunities for forward progress.

<sup>1</sup> [Campaign for Tobacco-Free Kids | The Toll of Tobacco in Wisconsin, 2024](#)

<sup>1</sup> [Partnership for a Tobacco-Free Wisconsin | 2024-25 Report & References](#)

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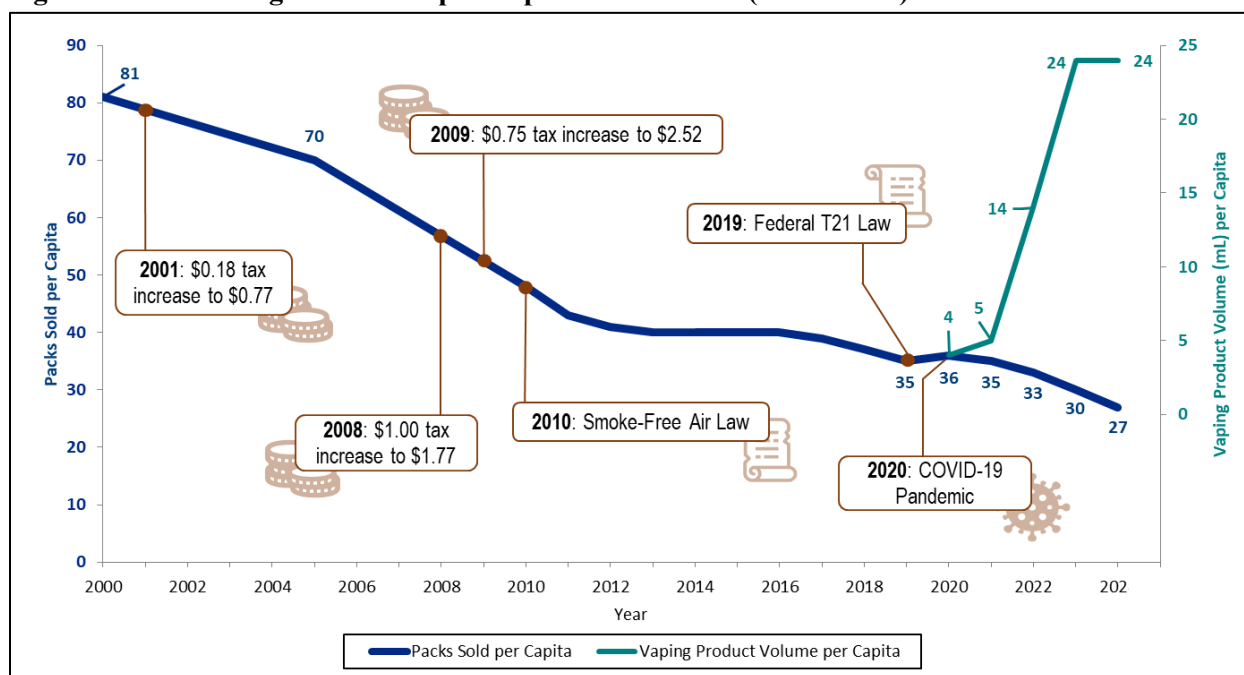
## State of Current Tobacco Use

### Tobacco Consumption

Commercial tobacco and nicotine products continue to harm Wisconsinites. Cigarette consumption has declined from 81 packs per capita in 2000 to 27 packs in 2024 (this is more than 161.6 million packs of cigarettes in 2024), as shown in **Figure 1**.<sup>1</sup> Tobacco prevention and treatment strategies at the local, state, and federal levels (e.g., tax increases and strengthening the smoke-free air law) decreased the use of commercial tobacco, reduced youth initiation, and protected people from secondhand smoke.

Although CTPTP and evidence-based policies facilitated positive results in Wisconsin, the continuously evolving commercial tobacco industry tactics (e.g., product development and marketing practices) make tobacco prevention and treatment work as important as ever. While cigarette sales have decreased in Wisconsin (see **Figure 1**), e-cigarette consumption has increased sharply. In 2024, more than 142.1 million milliliters (mL) of e-cigarette vape liquid was purchased in Wisconsin (equivalent to 24 mL of vaping product per person).<sup>3</sup> This is more than 37,500 gallons of vaping liquid, almost filling three-and-a-half large tank trailers used to transport liquid products like gasoline.<sup>2</sup>

**Figure 1. Packs of Cigarettes Sold per Capita in Wisconsin (2000 - 2024).**



#### Notes:

1. 2000-2019 Data: [CDC | The Tax Burden on Tobacco, 1970-2019](#)
2. 2020-2024 Data: [DOR | Cigarette & Other Tobacco Product Report](#) & [US Census](#) WI annual population estimate.
3. Effective October 1, 2019, an excise tax (5 cents per milliliter) is imposed on the liquid, gel, or other substance used in vaping devices, regardless of whether the liquid or other substance contains nicotine.

<sup>1</sup> [Wisconsin Department of Revenue Cigarette Tobacco Tax Report](#)

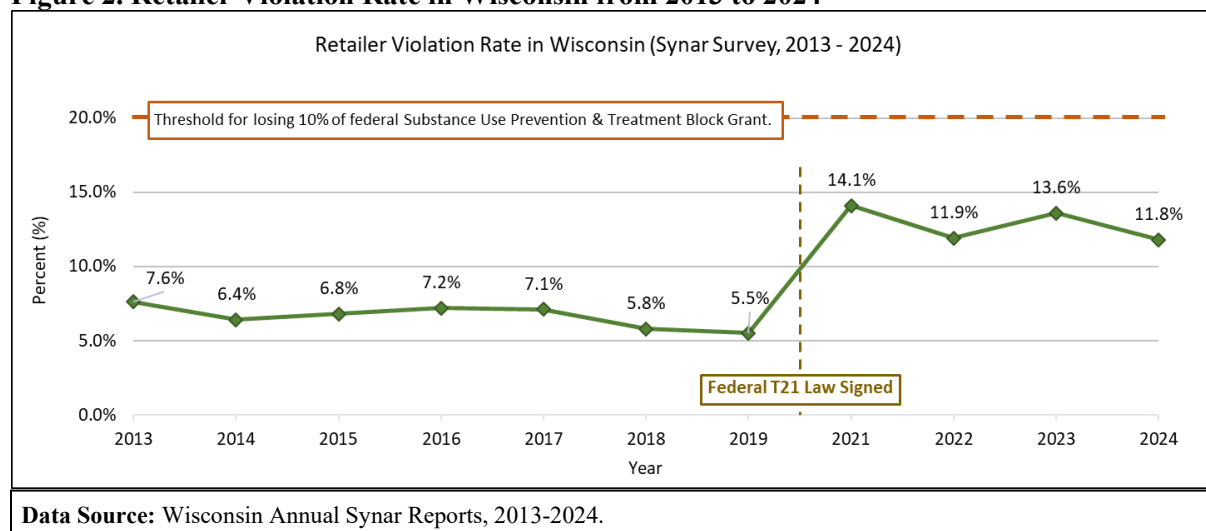
<sup>2</sup> [Harmon | How Much Does A Tank Trailer Hold? 2024](#)

## Commercial Tobacco Sales to Underage Youth

Commercial tobacco sales to underage youth remain high in Wisconsin. The commercial tobacco retailer violation rate in Wisconsin was 11.8% in 2024, remaining considerably higher than levels prior to 2020.<sup>3</sup> If the retailer violation rate surpasses 20%, the state could risk losing 10% of the federal Substance Use Prevention and Treatment Block Grant funding.

Not having a state-level Tobacco 21 (T21) law that raises the legal sales age of commercial tobacco and nicotine products to age to 21 in Wisconsin impedes CTPTP and local communities from effectively decreasing retail violations to pre-2020 levels. The discrepancy between state and federal law creates confusion among retailers, local leaders, the public, and, notably, local law enforcement officials who are charged with enforcing state laws. Moreover, current Wisconsin statute prevents local municipalities from increasing the sales age for commercial tobacco products to 21. Ultimately, not having a state-level 21 law makes commercial tobacco more accessible to youth.

**Figure 2. Retailer Violation Rate in Wisconsin from 2013 to 2024**



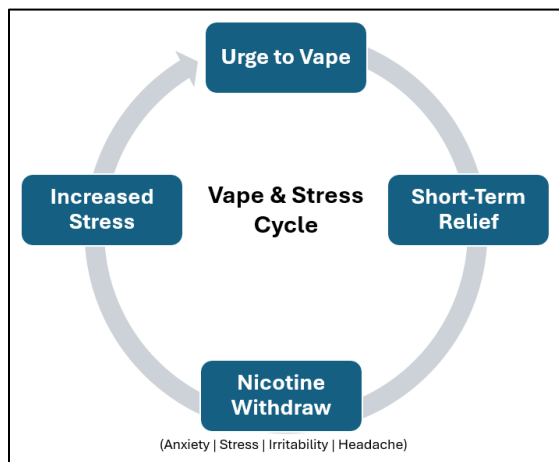
## Tobacco Use Among Youth

Wisconsin is experiencing an epidemic of commercial tobacco and nicotine use among young people (i.e., those in high school) that will negatively affect their long-term health and wellbeing. Understanding how the commercial tobacco industry markets to youth and young adults via strategies such as flavors and product design helps Wisconsin better protect youth and young adults from the harms of commercial tobacco and nicotine.

Nicotine addiction creates mental health concerns for users, especially youth. Nicotine is an addictive, poisonous chemical compound found in most commercial tobacco products. While marketed as a stress reliever, nicotine exacerbates anxiety and depression for users, perpetuating a cycle of addiction as shown in **Figure 3** (vaping as an example). Commercial tobacco use has a negative impact on the development of the brain, including areas related to mood, focus, learning, and impulse control.<sup>4</sup>

<sup>3</sup> [Annual Synar Report FFY2025 Wisconsin](#)

<sup>4</sup> [CDC | Smoking and Tobacco Use | Helpful Tips for Protecting Youth from the Harms of Vaping, 2024](#)

**Figure 3. Vape & Stress Cycle**

Nationwide, one in ten (10.1%) high schoolers currently use some form of tobacco product.<sup>5</sup> Since 2014, e-cigarettes (also known as electronic vaping products or vapes) remain the most popular tobacco product among U.S. youth, with 3.5% of middle schoolers and 7.8% of highschoolers reporting current use of these products. Although this constitutes a decrease in recent years, emerging commercial tobacco products pose a threat to improvements (see [Emerging Tobacco Products](#) in this report).

Despite a national decrease in commercial tobacco use among youth, data from Wisconsin tells a different story. In Wisconsin, about one in six (16.5%) high school students reported current use of any tobacco product.<sup>6,7,8</sup> While high school youth use of current conventional cigarette is 3.4%, about one of seven (15.7%) high schoolers currently use e-cigarettes. This is also notable since one-third (34.4%) of high schoolers stated ever having tried an e-cigarette product. **Figure 4** shows that although youth e-cigarette use has fluctuated up and down in recent history, e-cigarette use remains high. To further underscore the addictiveness of these products, frequent use of e-cigarettes (20 or more days during the previous 30 days) surpassed current smoking starting in 2019.

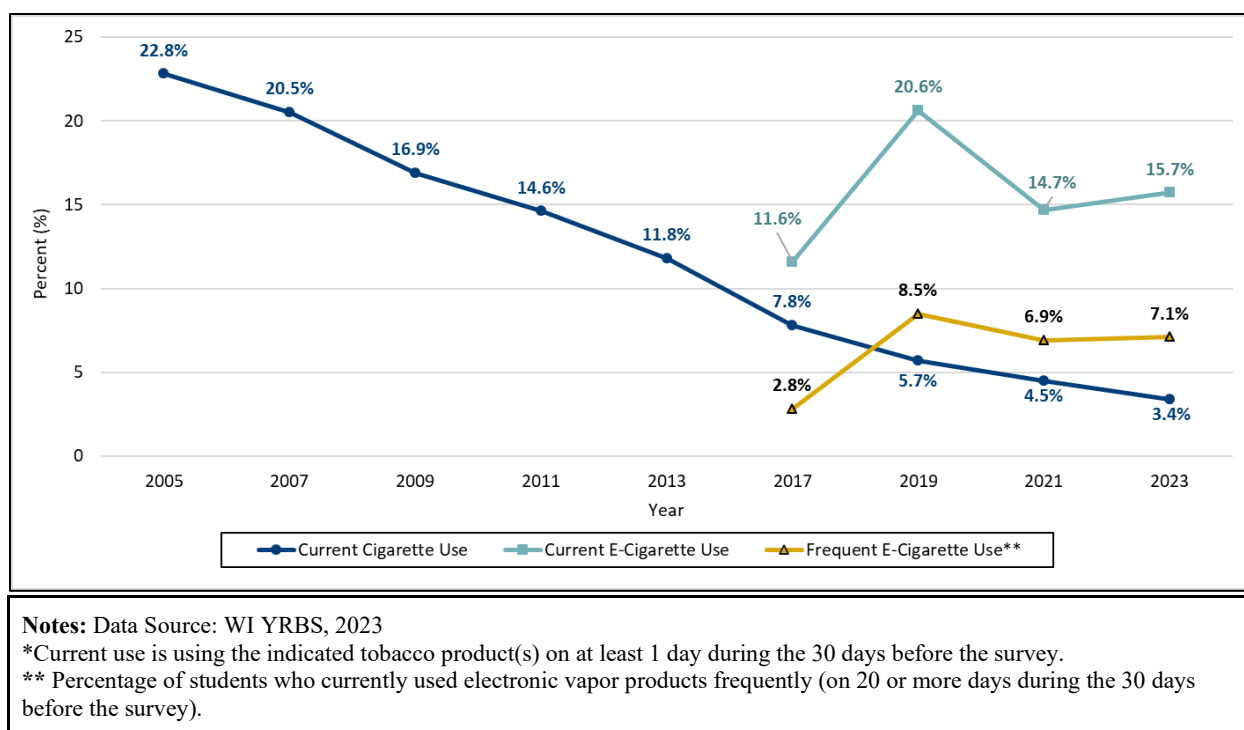
**Figure 4. Current Cigarette & Vaping Product Use Among Wisconsin High School Students**

<sup>5</sup> CDC | MMWR | Tobacco Product Use Among Middle and High School Students — National Youth Tobacco Survey, United States, 2024

<sup>6</sup> Defined as the use of cigarettes, cigars, smokeless tobacco, or electronic vapor products by the Wisconsin Youth Risk Behavior Survey (WI YRBS).

<sup>7</sup> WI YRBS, 2023

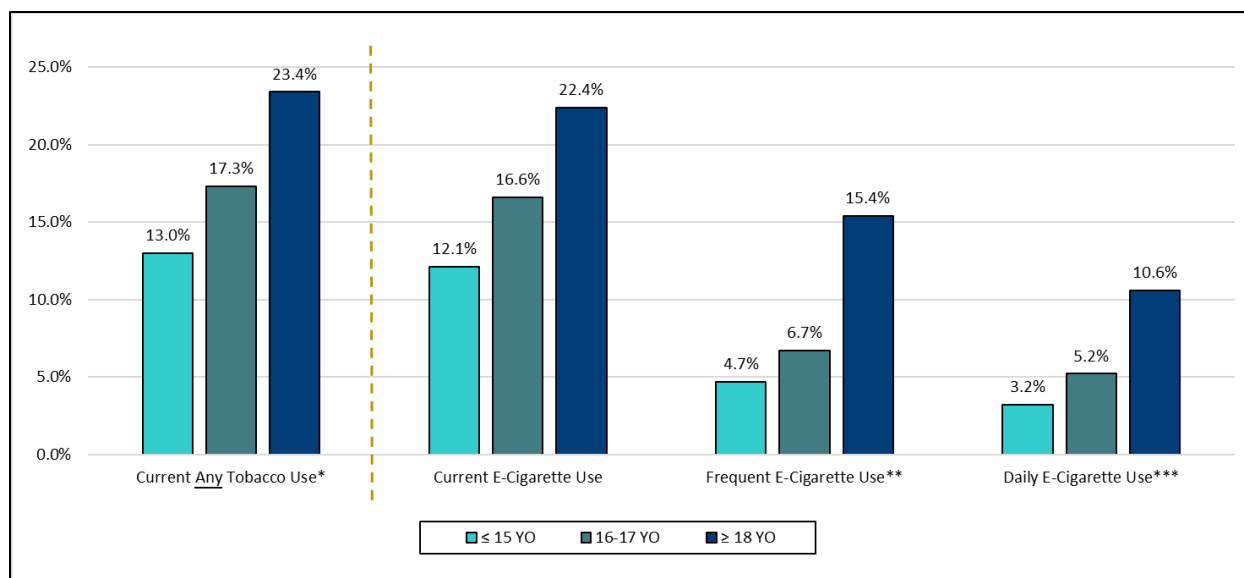
<sup>8</sup> For consistency throughout this report, electronic vaping products will be referred to as e-cigarettes for references to YRBS data. The YRBS inquires youth about the use of electronic vapor products (including e-cigarettes, vapes, vape pens, e-cigars, e-hookahs, hookah pens, and mods).



**Figure 5** not only demonstrates how e-cigarettes drive the high commercial tobacco use among youth, but also that older youth are at higher risk of tobacco use. Although not in the figure, it is notable that half (50.0%) of students 18 years and older reported experimenting with e-cigarettes and about one in five (22.4%) reported current e-cigarette use. Indicators of addiction are also a concern for this student age group, with about one in seven (15.4%) being frequent e-cigarette users and one in ten using them daily (10.6%).<sup>7</sup> Additionally, due to no state-level Tobacco 21 (T21) law in Wisconsin, older students may serve as source points to younger students, as evidence indicates that many (71.7%) youth under the age of 18 obtain e-cigarettes through social connections and the top reason for experimenting with e-cigarettes is that a friend uses them.<sup>9, 4</sup>

**Figure 5. Current Any Tobacco & E-Cigarettes Use Among WI High School Students by Age**

<sup>9</sup> [Do et al. | Underage Youth Continue to Obtain E-Cigarettes from Retail Sources in 2022: Evidence from the Truth Continuous Tracking Survey, 2023](#)



**Notes:** Data Source: WI YRBS, 2023

**YO** = “Years old” (age)

\* Students who currently smoked cigarettes or cigars or used smokeless tobacco or electronic vapor products.

\*\* Students who currently used electronic vapor products on 20 or more days during the 30 days before the survey.

\*\*\* Students who currently used electronic vapor products on all 30 days during the 30 days before the survey.

The strategies to address commercial tobacco use among Wisconsin youth are evidence-based, effective, and attainable. For example, a state-level T21 policy would prevent smoking initiation at the source, by reducing commercial tobacco products sales to high schoolers and reduce the social connections of younger students with older tobacco purchasers.

### Tobacco Use Among Young Adults

Although the current smoking rate among 18-24-year-olds is 4.6%, about one in six (17.9%) young adults in Wisconsin currently use e-cigarettes.<sup>10</sup> While being 12% of the adult population, this age group represents about one-third (32.4%) of all current adult e-cigarette users in Wisconsin.<sup>11</sup>

Over the last two decades e-cigarette campaigns have been aimed specifically at youth, resulting in a higher prevalence of e-cigarette use. E-cigarettes became commercially available in the late 2000s, and through tailored product design and advertising to youth, e-cigarettes became the most widely used tobacco product by youth in the US.<sup>12</sup> In 2019, e-cigarette use among Wisconsin high school students reached 20.6%.<sup>13</sup> This group has aged into the current young adult cohort.

### Tobacco Use Among Adults

About one-fifth (21.7%) of Wisconsin adults currently use tobacco products, with the adult cigarette smoking prevalence at 12.0%.<sup>14</sup> Additionally, cigarettes play a major role in tobacco initiation behavior,

<sup>10</sup> Wisconsin Behavioral Risk Factor Surveillance Survey (WI BRFSS), 2023

<sup>11</sup> [WISH | Population Module, 2023](#)

<sup>12</sup> [Truth Initiative | E-cigarettes: Facts, Stats and Regulations, 2024](#)

<sup>13</sup> WI YRBS, 2019

<sup>14</sup> WI BRFSS, 2022 & 2023

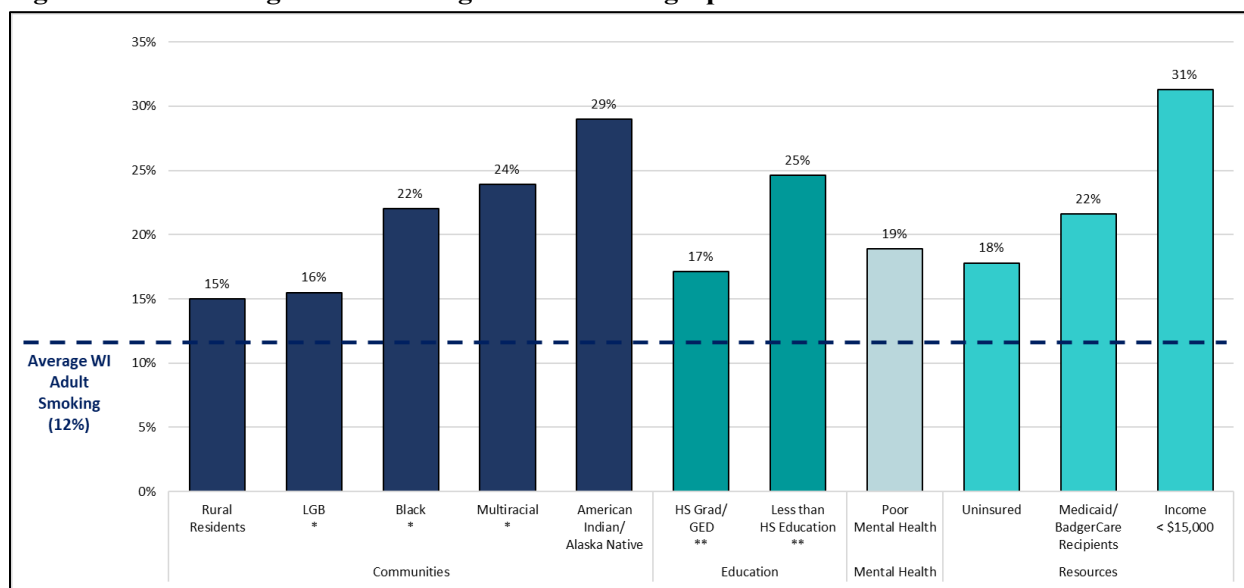


with conventional commercial cigarettes being the first tobacco product for 87.9% of adults ever trying cigarettes and e-cigarettes. Although the current use of e-cigarettes among adults is 6.6%, use is highest in the youngest groups of adults, with 71.0% of all adult current e-cigarette users being under the age of 40.

### Communities at Higher Risk of Tobacco Use

Certain populations are disproportionately influenced by the commercial tobacco industry that take advantage of environmental factors (e.g., lack of comprehensive tobacco-free policies). This results in disparate use of commercial tobacco products across communities in Wisconsin (see **Figure 6**).

**Figure 6. Current Cigarette Smoking in Adult Demographic & Communities in Wisconsin**



**Notes:** Main Data Source: WI BRFSS, 2023

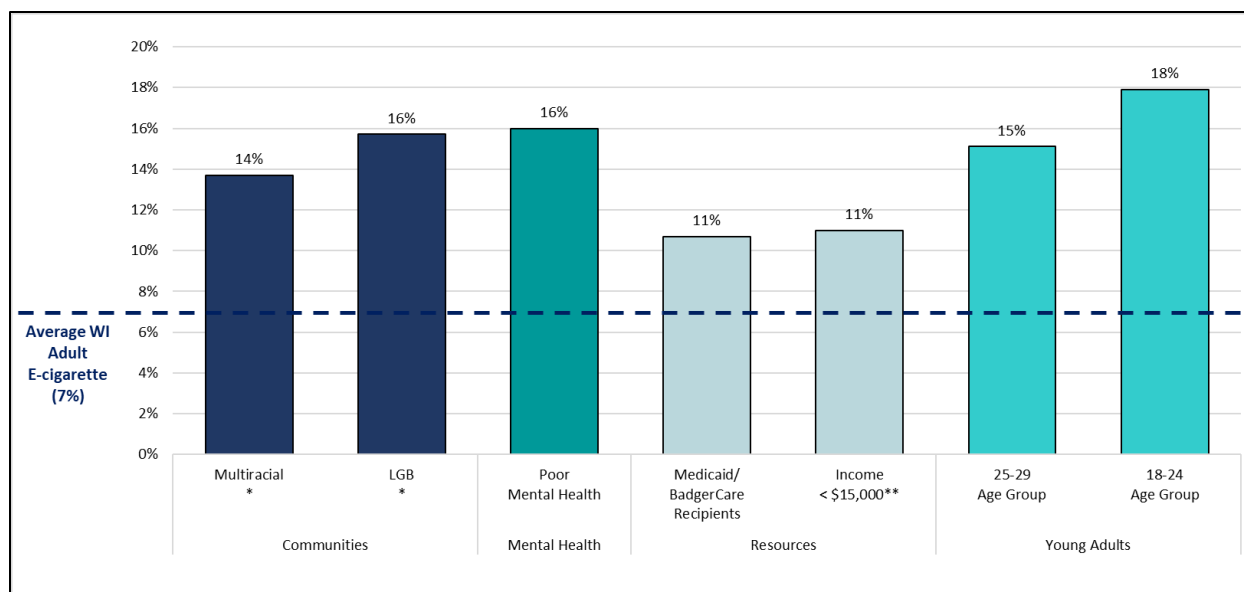
\* Analysis limited to 25+ year old adults to control for confounding of age with level of education.

\*\* Five years of data were merged to increase sub-sample sizes, thereby improving the reliability of estimates. Average Adult Current Cigarette Rate for Aggregated 5 Years (2019-2023): 13.7%.

\*\*\*Poor Mental Health is defined as reporting 14+ poor mental health days in the last 30 days.

As with conventional cigarette use, **Figure 7** demonstrates how e-cigarettes have also had a disproportionate impact on certain communities across Wisconsin.

**Figure 7. Current E-Cigarette Use in Adult Demographics & Communities in Wisconsin**



**Notes:** Main Data Source: WI BRFSS, 2023

\* Analysis limited to 25+ year old adults to control for confounding of age with level of education.

\*\* Five years of data were merged to increase sub-sample sizes, thereby improving the reliability of estimates. Average Adult Current Cigarette Rate for Aggregated 5 Years (2019-2023): 13.7%.

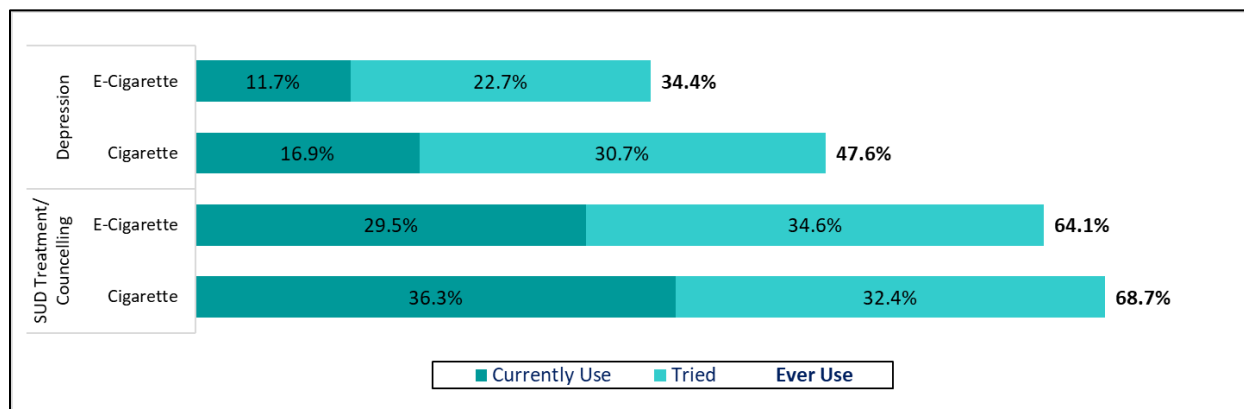
\*\*\*Poor Mental Health is defined as reporting 14+ poor mental health days in the last 30 days.

## Tobacco Use Among People with Behavioral and Mental Health Disorders

Due to commercial tobacco industry advertising tactics, people with behavioral health conditions, including mental illness and substance use disorders, are at an increased risk for commercial tobacco use and its associated morbidity and mortality.<sup>15</sup> Wisconsin adults who have been diagnosed with depression have a prevalence use of 11.7% and 16.9% for e-cigarettes and cigarettes, respectively.<sup>10</sup> Of Wisconsin adults who are receiving treatment or counselling for substance use, 29.5% are current e-cigarette users and 36.3% are current smokers. People with mental health disorders who use cigarettes have double the risk of an early death compared to people with behavioral health conditions who are non-smokers.

<sup>15</sup> [CDC | People with Behavioral Health Conditions Experience a Health Burden from Commercial Tobacco, 2024](#)

**Figure 8. Cigarette & E-cigarette Use Among Individuals with Depression or Receiving Treatment or Counselling for Substance Use**



**Notes:** Data Source: WI BRFSS, 2023

- Depression = Self-reporting ever told by a healthcare professional that they had a depressive disorder (including depression, major depression, dysthymia, or minor depression).
- SUD Treatment/Counselling = Self-reporting receiving substance use disorder (SUD) treatment or counselling from a healthcare professional in the last 12 months.
- Estimates for populations that have tried and are current e-cigarette users add up to the estimate of ever users.

## Youth Prevention & Access (Teens & Young Adult)

### Emerging Tobacco Products

Public health professionals have identified disconcerting trends in how commercial tobacco companies have recently marketed nicotine pouches and “smart” vapes to young people. Evidence describing the sharp increase in popularity and aggressive marketing practices show how we may be at the cusp of an increase in commercial tobacco use like the e-cigarette epidemic that developed in the 2010s.<sup>16</sup> To protect the health of children, Wisconsin leaders must be proactive; understanding these threats and knowing what best-practice policies work to protect our young people.

### Nicotine Pouches

Despite the lower use of nicotine pouches relative to other products such as e-cigarettes, national sales data from September 2024 show \$365 million in nicotine pouches, a 183% increase in two years.<sup>5,17</sup> Popular nicotine pouch brands emphasize flavors and how easy it is to conceal use, benefitting from promotion through social media, reward programs, and popular influencers who appeal to young audiences.<sup>18</sup>

States with a policy prohibiting tobacco flavors, including menthol, and which apply to nicotine pouches, have shown a lower uptick in sales, demonstrating a protection to their residents and young people.<sup>17</sup>

<sup>16</sup> [Campaign for Tobacco-Free Kids | Nicotine Pouches: A Potential Cause for Concern](#)

<sup>17</sup> [CDC Foundation | Data Brief | Monitoring Sales: Nicotine Pouch Trends, 2024](#)

<sup>18</sup> [Kostygina, Carter, & Emery | ‘O-ZYN-PIC’ and ‘ZYNCOIN’: how viral marketing, tokenisation and trendjacking boosted Zyn popularity in the USA | Tobacco Control, 2024](#)

## Smart Vapes

“Smart” vapes merge vaping product devices with digital displays that mimic smart phone or other electronic screen devices.<sup>19</sup> Echoing trends seen in other products marketed to youth and young adults, many are flavored. As of early 2025, all smart vapes being sold in Wisconsin are illegally marketed and sold since they have no FDA authorization to do so.<sup>20</sup>

This is another strategy by the commercial tobacco industry to profit at the expense of health by:

- a) Attracting youth into experimenting with electronic vaping products by incorporating flavors, technology, and gamification (i.e., games embedded on smart vapes or through reward programs).
- b) Maintaining youth clientele over time through addiction to nicotine or other substances.
- c) Promoting multiple addictive behaviors that may reinforce each other.

E-cigarette use and vaping product use is already high (see [Tobacco Use Among Youth](#) in this report). Strong policies like T21, statewide flavored product prohibitions, and increasing taxes on all commercial tobacco and nicotine products can help address these emerging public health threats.

## CTPTP Strategies: Youth and Young Adult Prevention

### *WI Wins*

Wisconsin Wins is a proven outreach and inspection program for tobacco and vape retailers across the state. Team members provide retailers with training, signage, and tools to help them comply with the federal tobacco sales law. One of those tools is the state-approved retailer training called WITobaccoCheck.org. This free online training equips retailers with the information needed to prevent underage sales of tobacco. In 2024, over 50,000 people received this required training. Local agencies also partner with law enforcement to conduct nearly 4,000 tobacco and vape retailer inspections per year. Earned media such as news releases, letters to the editor, and radio spots were completed by local agencies to educate about WI Wins inspections and federal tobacco sales law to further reduce youth access to commercial tobacco products.

### *Statewide Tobacco 21 Paid Media Campaign*

In 2024, a media campaign was implemented to increase the awareness of, and encourage adherence to, the federal T21 law. Media tactics included television, newspaper, digital out-of-home, online video, etc. The campaign resulted in 8.8 million impressions and substantial traffic to the [Tobacco 21 page on the DHS website](#).

### *Youth Engagement - FACT Movement*

FACT, managed by the American Lung Association (ALA), is a youth-driven movement of Wisconsin teens (grades 7-12) providing education on commercial tobacco. In calendar year 2024, the FACT website (FACTmovement.org) received a redesign. The redesign included new imagery, a new resource section, and easier navigation to help young people easily find what they are looking for on the site. With input from youth members, FACT staff made updates to their mental health focused Reach Out campaign. The campaign provides evidenced-based information and provides opportunities for young people to address their nicotine addiction and/or mental health concerns. Finally, FACT staff provided support to a

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<sup>19</sup> [UW Center for Tobacco Research and Intervention \(UW-CTRI\) | “Smart” Vapes](#)

<sup>20</sup> [North Carolina | CDC | Facts about Smart Vapes](#)

statewide activity, the Youth Voices Project, resulting in the collection of hundreds of inspiring, powerful personal statements about the impact of vaping and nicotine addiction on lives of Wisconsin youth.

### *SPARK*

SPARK groups perform outreach on the importance of tobacco-free college and university campuses and the harms of secondhand smoke and other tobacco products, with special focus on e-cigarettes. Since its start in 2011, SPARK has awarded 125 micro grants to 31 college campuses in Wisconsin to support the implementation of tobacco-free policies. Between January 1, 2024, and December 31, 2024, SPARK awarded seven grants to campuses across the state. One of those grants awarded to the Milwaukee Institute of Art & Design (MIAD) resulted in a policy update to cover all tobacco products.

There are 29 tobacco-free campus policies (34% of all Wisconsin college/university campuses) protecting 165,341 students; 21 of the 29 were passed after SPARK started in 2011. Thirteen campuses passed or updated policies based on their involvement with SPARK, protecting 81,603 students.

### *Youth Prevention Paid Media Campaign*

The “Behind the Haze” (BTH) media campaign aims to prevent and decrease e-cigarettes use among youth. In 2024, the campaign reached out to youth in Wisconsin ages 13–18 through digital out-of-home, streaming audio, online video, and paid social. **Table 1** shows highlights from this campaign.

**Table 1. “Behind the Haze” (BTH) Media Campaign in 2024**

Metric	Flight	Highlights
<b>Impressions</b>	18.6 Million	<ul style="list-style-type: none"> <li>40% more impressions than planned.</li> <li>81,800 sessions on the BTH web page.</li> <li>59,800 new users to the BTH web page</li> </ul>
<b>Clicks</b>	121,000	

### *Tobacco is Changing Campaign*

DHS’s Tobacco is Changing (TiC) campaign engages and informs parents and other trusted adults about the dangers of tobacco and nicotine use, encouraging them to communicate constructively to their children and teens about the topic. **Table 2** shows the 2024 statewide campaign that ran utilizing gamified ads and other promotions through Facebook, Instagram, Pinterest, streaming audio, print, etc.

**Table 2. Tobacco is Changing (TiC) Media Campaign in 2024.**

Metric	March-June Flight	Highlights
<b>Impressions</b>	1,285,032	16% increase in engagement on the TiC landing page compared to the previous year’s campaign.
<b>TiC Website Clicks</b>	27,006	

### *Comprehensive Tobacco-Free Policies & Alternative to Suspension Programs in Schools*

Schools play an important role in youth tobacco and nicotine prevention efforts. As of early December 2024, 344 school districts (82%) throughout Wisconsin have comprehensive tobacco-free school policies, which also include e-cigarettes.<sup>21</sup>

<sup>21</sup> Per [Neola | Wisconsin](#).

In addition to tobacco-free policies, there is a need for school districts to offer evidence-based Alternative to Suspension (ATS) interventions and cessation programs to students in violation of the district's tobacco-free policy. CTPTP funds the American Lung Association's INDEPTH (Intervention for Nicotine Dependence: Education, Prevention, Tobacco and Health) program and provides direct training and technical assistance to schools on the best ways of addressing these violations. Local alliances that are supported by CTPTP also collaborate with school administrators to provide best-practice policy language that includes alternatives to suspension approaches.

Coordinated by the University of Wisconsin Center for Tobacco Research and Intervention (UW-CTRI), an exploratory assessment project was established that aims to inform the Commercial Tobacco Prevention and Treatment Movement about the landscape of ATS policy and procedure language in Wisconsin high schools. UW-CTRI developed a tool that reviews school policies and procedures to better understand and describe the consequences for students found to use commercial tobacco at school. A better understanding of current practices, whether punitive or ATS, supports prevention and cessation efforts in Wisconsin schools.

### *Local Ordinances Passed*

**Table 3. Local Ordinances Passed in 2024**

Policy Type	Municipality	Highlights
Retailer Zoning	City of Superior	<ul style="list-style-type: none"> <li>Passed in July 2024.</li> <li>Limits where tobacco and e-cigarette retailers can open to reduce the density and amount of vape shops opening where young people spend time.</li> <li>Included a cap of allowing one retailer per 25,000 residents.</li> <li>Existing vape shops were unaffected.</li> </ul>
Retailer Zoning	City of Monona	<ul style="list-style-type: none"> <li>In June 2024, a 6-month vape shop moratorium prevented new vape shops from opening to explore language for a retailer density ordinance.</li> <li>The moratorium was extended in November 2024.</li> <li>Zoning ordinance was passed in early 2025.</li> </ul>
Temporary Vape Shop Moratorium	Mount Horeb Village	<ul style="list-style-type: none"> <li>Passed Dec 2024 and set for 180 days.</li> <li>Halts opening new retailers if more than 10% of space is used for e-cigarettes.</li> <li>Existing vape shops were unaffected.</li> </ul>

## **Smoke-Free Air (Secondhand Exposure)**

There is no safe level of exposure to secondhand smoke.<sup>22</sup> Secondhand smoke from tobacco affects the health of everyone who is exposed, and is especially harmful to infants, children, pregnant individuals, and those with respiratory conditions. Exposure to secondhand smoke can cause and trigger chronic and acute diseases such as coronary heart disease, stroke, lung cancer, and may also result in early death. Evidence also shows that secondhand exposure to aerosol from e-cigarettes can be harmful, as the

<sup>22</sup> [CDC | Smoking & Tobacco Use: Health Problems Caused by Secondhand Smoke, 2025](#)

aerosols contain nicotine, heavy metals, volatile organic compounds (VOCs), and ultrafine particulates that are known to cause cancer.<sup>23</sup>

Establishing comprehensive smoke-free air policies for indoor and outdoor spaces protects individuals from involuntary exposure to hundreds of toxic and cancer-causing chemicals, prevents youth from experimenting with tobacco products, and helps people successfully quit.

## State of Secondhand Smoke Exposure & Support for Smoke-Free Policies in Wisconsin

**Table 4** provides an overview of secondhand smoke exposure in Wisconsin indoor, outdoor, and multi-unit housing spaces.

**Table 4. Secondhand Smoke in Indoor, Outdoor, and Multi-Unit Housing Spaces in Wisconsin.**

WI Spaces	Current State
<b>Indoor</b>	As of 2024, CTPTP is aware of 66 municipalities and counties in Wisconsin that have passed local smoke-free air ordinances to include e-cigarettes.
<b>Outdoor</b>	Wisconsinites are also exposed to secondhand smoke in outdoor settings. 34.1% of Wisconsin adults are sometimes or often exposed in public outdoor settings. <sup>10</sup>
<b>Multi-Unit Housing</b>	Wisconsinites are exposed to secondhand smoke in multi-unit housing settings. Only 55.3% of adult multi-unit building residents indicate that smoking is prohibited in their building and 73.2% of these residents preferred that smoking not be allowed. <sup>24</sup> Almost 83% of non-smokers in multi-unit buildings hold this preference and even around a third (31.6%) of current smokers also prefer a non-smoking policy.

### WI CTPTP Strategies

In 2024, companion bills to allow new tobacco bars<sup>25</sup> were proposed in both the Assembly and Senate. These bills would have created a loophole and weakened Wisconsin's Smoke-free Air Law. The proposed legislation would have increased the number of places that allow indoor smoking of cigar or pipe tobacco products by allowing any bar meeting the 15% sales threshold to become a tobacco bar. These changes would have degraded decades of progress in reducing exposure to secondhand smoke and preventing tobacco use.

Smokefree Air Laws in Wisconsin are both longstanding and popular with the public. Wisconsin's current smoke-free air law is clear and prohibits smoking in indoor public places to protect workers and customers. A loophole would put people at risk of serious health issues, forcing workers to choose

<sup>23</sup> [National Academies of Sciences, Engineering, and Medicine: Public Health Consequences of E-Cigarettes, 2018](#)

<sup>24</sup> WI BRFS, 2019 & 2021

<sup>25</sup> Current law defines tobacco bars as any tavern that generates 15 percent or more of its annual gross income from cigar and/or pipe tobacco sales. Tobacco bars are currently only allowed if they existed before June 3, 2009.

between their health and a paycheck. The proposed bill did not pass out of the legislature in 2024 due to the educational outreach that community coalition members and tobacco prevention partners across the state completed.

Strengthening and preserving Wisconsin's smoke-free air law is the most impactful way to protect people from involuntary secondhand smoke and aerosol exposure. Currently, Wisconsin's smoke-free air law does not include e-cigarettes or cannabis. Secondhand aerosols from e-cigarettes and secondhand smoke from cannabis can pose the same health risks as secondhand smoke from tobacco. Strengthening the law would protect more individuals from involuntary exposure and subsequent health issues. Wisconsinites support these strong smoke-free measures. Over 75% of adult Wisconsinites support the prohibition of smoking in most indoor public places, including workplaces, offices, restaurants, and bars.<sup>10</sup> In addition, 65.4% of adult residents also support the prohibition of vaping in public indoor places.

### *Support Smoke-Free Multi-Unit Housing*

CTPTP will continue to support coalitions, property managers, and landlords in implementing smoke-free air policies within their lease agreements through the resources within the Clear Gains Initiative. CTPTP is also committed to attend trainings, conferences, and networking events related to smoke-free multi-unit housing to share evidence-based policy information.

### *Education on Best-Practice Smoke-Free Air Policies*

To address secondhand smoke, CTPTP works with national technical assistance agencies to promote best-practice smoke-free air policies to partners across the state. This includes information on including e-cigarettes and cannabis into smoke-free air laws and tobacco-free outdoor spaces.

### *Local Ordinances Passed*

**Table 5. Local Ordinances Passed in 2024**

Policy Type	Municipality	Highlights
Clean Air Policy	City of Appleton	<ul style="list-style-type: none"> <li>Passed in November 2024.</li> <li>Expanded their local clean air policy to prohibit smoking and vaping in outdoor areas around their library and transit center.</li> </ul>

## **Tobacco Treatment**

CTPTP uses a comprehensive approach to protect the health of Wisconsinites from commercial tobacco and is committed to offering a variety of tobacco cessation services to ensure that all Wisconsinites are provided with the tools to help them quit commercial tobacco.

### *WI CTPTP Strategies*

#### *Wisconsin Tobacco Quit Line*

In 2024, the Wisconsin Tobacco Quit Line (WTQL; 1-800-QUIT-NOW) continued to support individuals across the state in quitting tobacco. An expansion of services was implemented to accommodate modern communication methods, including one-on-one coaching through online chat, text, and virtual video in addition to the traditional phone call modality. To improve tracking services provided to people who use menthol cigarettes, in 2024, a question was added to the enrollment process that asks about menthol-flavored cigarette use.



**Table 6. Regular & Expanded Wisconsin Tobacco Quit Line (WTQL) Services in 2024**

Timeframe	Regular Services Include	Eligibility
All Year	<ul style="list-style-type: none"> <li>2-week shipment of NRT. <sup>26</sup></li> <li>Free, unlimited calls to the WTQL for coaching support. *</li> </ul>	<ul style="list-style-type: none"> <li>18+ Years of Age.</li> </ul>
Timeframe	Expanded Services	Additional Eligibility
January - June 2024	<ul style="list-style-type: none"> <li>Expanded NRT for an additional 10 weeks (12 total weeks of NRT).</li> <li>5 proactive calls** from the WTQL.</li> </ul>	<ul style="list-style-type: none"> <li>Menthol User.</li> </ul>
May - July 2024	<ul style="list-style-type: none"> <li>Expanded NRT for an additional 6 weeks (8 total weeks of NRT).</li> <li>5 proactive calls** from the WTQL.</li> </ul>	<ul style="list-style-type: none"> <li>18+ Years of Age.</li> </ul>

\*Calls initiated by recipients to the WTQL for prompt assistance.

\*\*Calls initiated by the WTQL staff as check-ins with the recipients.

The WTQL saw 5,256 inbound calls, 162 chat conversations, 53 group sessions, and 23 text interactions. There were 5,139 people who successfully enrolled for services (a 15% increase from 2023), including 330 re-enrollments. <sup>27</sup> There were 2,392 people who opted into receiving personalized coaching tips and strategies received via text message. Of those who enrolled in WTQL services, 85.6% were sent Nicotine Replacement Therapy (NRT). Regarding the type of tobacco product used, 80.9%, 10.2%, and 7.9% of participants were trying to quit tobacco only, both tobacco and e-cigarettes, and e-cigarettes only, respectively.

The University of Wisconsin Center for Tobacco Research and Intervention (UW-CTRI) manages the WTQL with funding and administrative support from CTPTP. Red Ventures Optum Health (RVO Health) is a national Quitline vendor that is contracted to provide all counseling services and NRT to individuals who call the WTQL.

### *Wisconsin American Indian Quitline (AIQL)*

American Indians in Wisconsin have one of the highest rates of commercial cigarette use at 29.0%.<sup>10</sup> Since 2021, the Wisconsin American Indian Quitline (AIQL) (1-888-7AI-QUIT) has provided free, culturally-tailored cessation services for commercial tobacco. Funded by CTPTP, the AIQL provides 7 free phone calls with dedicated American Indian quit coaches, as well as 12 weeks of NRT at no cost. In 2024, 116 enrollments were supported through the American Indian support track, representing all enrollments by individuals identifying as American Indian or Alaska Native. Moreover, 43 or a quarter (25.9%) of those 116 enrollments by American Indians were noted as using menthol cigarettes and 13% were eligible for expanded NRT services (see Table 6).

### *Live Vape Free*

Live Vape Free is an interactive vaping cessation program that helps youth quit the use of e-cigarettes. This program provides text support to Wisconsin youth ages 13 to 17, as well as young adults 18 to 26

<sup>26</sup> Nicotine Replacement Therapy (NRT) = Medically approved products that support people in their journey to becoming free of commercial tobacco. These items include nicotine patch, gum, lozenge, or a combination of products.

<sup>27</sup> Wisconsin Tobacco Quitline Report, 2024

years of age. In 2024, there were 169 enrollments in Live Vape Free. This included 13 enrollees ages 13 to 17 and 156 who were ages 18 to 26. In March 2024, young adults 18-26 who enroll in Live Vape Free began being offered 2-weeks of NRT.

### *Treatment Media Campaigns*

To promote the cessation services in Wisconsin, the following media campaigns were conducted in 2024:

**Table 7. Statewide Treatment Media Campaign Flights in 2024**

Treatment Program	Target Audience	Highlights / Notes
Wisconsin Tobacco Quit Line (WTQL)	Low-income Neighborhoods & Zip Codes	<ul style="list-style-type: none"> <li>14.8 million impressions.</li> <li>52,345 clicks to WTQL website.</li> </ul>
WTQL's Menthol & Other Flavors User Support Promotion	Statewide	<ul style="list-style-type: none"> <li>Timeframe: January 2024.</li> <li>Focus: Health effects &amp; impact of menthol products marketing on communities of color (esp. African Americans).</li> <li>Reached 323,000 people (incl. &gt; 91,000 via social media).</li> </ul>
Live Vape Free (LVF)	Wisconsin Youth Ages 13 to 26	<ul style="list-style-type: none"> <li>22.5 million impressions.</li> <li>Significant increase in engaged sessions.</li> <li>Increase in online registrations to LVF program.</li> </ul>

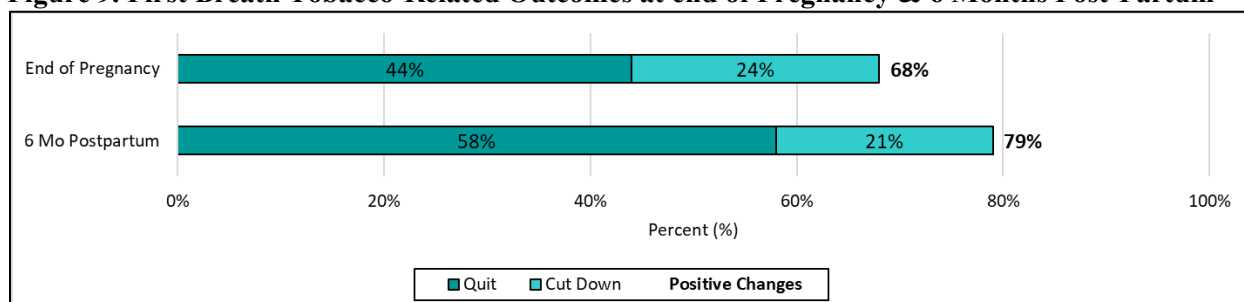
### *First Breath*

First Breath is a free, statewide program that facilitates positive changes to tobacco, alcohol, and other substance use during pregnancy and beyond. It is operated by the Wisconsin Women's Health Foundation and funded, in part, by CTPTP and other DHS programs. The program partners with local agencies such as OB/GYN clinics, WIC sites, PNCC programs, local health departments, Tribal Nations health centers, and federally qualified health centers that provide perinatal services.

In 2024, First Breath partnered with 290 sites and maintained one site in all 72 counties, successfully reaching communities most impacted by commercial tobacco.<sup>28</sup> Sites referred 697 individuals to First Breath, 91% were pregnant or postpartum individuals, and 9% were caregivers. Of all First Breath participants, 45% were Black, Indigenous, or people of color, 84% were Medicaid recipients, and 76% had a diagnosed mental or behavioral health disorder. As outlined in earlier sections of this report (i.e., "Communities at Higher Risk of Tobacco Use" and "Tobacco Use Among People with Behavioral and Mental Health Disorders"), these are populations that experience higher levels of tobacco use. In addition, these individuals may have limited access to preventative health services, with First Breath serving as an important program throughout their pregnancy.

There were 533 people enrolled in First Breath low-intensity services (texting) and 144 enrolled in intensive, one-to-one coaching services. By the end of their pregnancies and six months postpartum, positive changes to their tobacco use was reported by 68% and 79%, respectively. Seventy-nine percent of participants achieved fully smoke-free homes and 92% achieved zero-infant exposure to tobacco smoke. Additionally, during their pregnancy, 98% and 44% of participants made positive changes to their alcohol and cannabis use, respectively.

<sup>28</sup> WI First Breath Program, 2024

**Figure 9. First Breath Tobacco-Related Outcomes at end of Pregnancy & 6 Months Post-Partum**

**Notes:** Data Source: WI First Breath Program, 2024

### *Not On Tobacco (N-O-T)*

CTPTP funds the American Lung Association to provide direct training and technical assistance to schools on Not On Tobacco (N-O-T), an evidence-based youth cessation program. N-O-T helps teenagers quit tobacco use by addressing their health holistically to develop and maintain positive behaviors. It is facilitated by a trained and certified adult and uses a small group format that emphasizes support. In Wisconsin, 9 N-O-T facilitator scholarships and 8 implementation mini-grants were awarded in 2024.

### *Addressing Cigarette Smoking Among Medicaid Beneficiaries*

The current cigarette smoking prevalence for adult Wisconsin Medicaid or BadgerCare members is 21.6% and 48.7% have ever tried smoking.<sup>10</sup> Moreover, 10.7% of these adults are current e-cigarette users and 32.4% have tried e-cigarettes.

CTPTP works with the Wisconsin Division of Medicaid Services and UW-CTRI to promote the Medicaid cessation benefit. The benefit is also promoted by Medicaid providers and CTPTP state and local partners through advertising and promotional materials.

### *Wisconsin Nicotine Treatment Integration Project (WiNTiP)*

WiNTiP works with behavioral health systems and providers across Wisconsin to adopt commercial tobacco prevention and treatment policies that help patients and staff quit tobacco use and establish tobacco-free campuses. Coordinated by UW-CTRI, it is funded by, and receives support from, CTPTP.

**Table 8. WiNTiP Resources & Highlights in 2024**

WiNTiP Resources	Setting/Audience	2024 Highlights / Notes
Training & Technical Assistance (TTA)	Behavioral Health Facilities	<ul style="list-style-type: none"> <li>54 training requests received and completed.</li> <li>133 technical assistance requests addressed.</li> </ul>
	Correctional Facilities	<ul style="list-style-type: none"> <li>Focus on re-entry programs for people who are involved in the criminal justice system through assessment of tobacco use, treatment options, and how to provide relapse prevention support.</li> <li>25 correctional facilities received TTA.</li> </ul>
HelpUsQuit.org website	Substance Use Agencies	<ul style="list-style-type: none"> <li>Used to support substance use agencies and providers to integrate tobacco treatment.</li> </ul>
Bucket Approach Training <sup>29</sup>	Behavioral Health Clinicians	<ul style="list-style-type: none"> <li>Developed by UW-CTRI in 2019.</li> <li>Guidance for clinicians on how to support patients quitting tobacco.</li> <li>2,296 training enrollments (incl. 1,464 people from Wisconsin).</li> </ul>

### *Promoting Treatment through Outreach about Menthol & Other Tobacco Flavors*

Wisconsin DHS and CTPTP launched a digital education and outreach campaign in January 2024 to raise awareness about the health risks of menthol tobacco products, as described in **Table 7**.

In May of every year, No Menthol Sunday is an event that engages faith and community leaders to raise awareness about the negative impact of menthol and other flavored tobacco on Black communities. Led by the Wisconsin African American Tobacco Prevention Network, CTPTP partners work with retailers to halt sales of menthol products on No Menthol Sunday and promote free tobacco cessation services to those who are ready to quit. In 2024, 30 Milwaukee tobacco retailers agreed not to sell menthol tobacco products on No Menthol Sunday. More than 50 churches and thousands of congregants were reached through hosted No Menthol Sunday events. Additionally, an earned media campaign reached more than 100,000 people in Wisconsin through radio and social media advertisements.

An event called Menthol Funeral was held on June 23, 2024, where “Nasty Newport” was laid to rest in a symbolic menthol funeral at Mason Temple Church of God in Christ in Milwaukee. The funeral featured sermons, passionate speeches by individuals impacted by tobacco, a procession, and repast. Media coverage of the event reached an estimated 145,000 people.

An exhibit called “Same Game Different Smoker” was hosted over six months in four different libraries across Wisconsin reaching an estimated 31,000 visitors each month to raise awareness about menthol and tobacco use. Community events were hosted at each exhibit library, totaling over 175 attendees and earned media coverage of the exhibit reaching an estimated 216,000 people.

<sup>29</sup> [UW–Madison | UW-CTRI | The Bucket Approach](#)

## Looking Ahead

As CTPTP moves forward, our team is committed to continue:

- Implementing the five-year tobacco prevention and treatment movement state plan that was developed for 2020-2025 with statewide partners. The plan aims to ensure that strategic and measurable efforts are made to decrease tobacco-related disparities related to secondhand smoke, youth prevention, and cessation and treatment services.
- Funding local alliances.
- Utilizing funds from the JUUL multi-state settlement to enhance efforts of state and local partners in addressing the vaping epidemic.
- Collaborating with Wisconsin Division of Medicaid Services (DMS) to promote the Tobacco Cessation Medicaid Benefit. In 2025, Wisconsin plans to report the Medical Assistance with Smoking and Tobacco Use Cessation measure as part the CMS core set of measures, results expected in 2026.

In addition to the CTPTP Strategies outlined throughout the report, our program is committed to promoting policy measures that reduce commercial tobacco and e-cigarette use, initiation, and disparities. These best-practice and evidence-based policies include:

**Table 9. Evidence-Based Tobacco Prevention & Treatment Policy Measures & Benefits**

Policy Measure	Benefit
<b>Raising Wisconsin's tobacco sales age to 21</b>	<ul style="list-style-type: none"> <li>• Reduces or delays tobacco use initiation.<sup>30</sup></li> <li>• Reduces access to tobacco products to peers under 18.</li> <li>• Lowers commercial tobacco use among youth and adults.</li> </ul>
<b>Prohibiting Flavors</b> (including menthol)	<ul style="list-style-type: none"> <li>• Reduces health disparities among populations targeted by commercial tobacco companies.<sup>31</sup></li> <li>• Prevents youth from initiating commercial tobacco use.</li> <li>• Improves the success of commercial tobacco users to quit use.</li> <li>• Reduces appeal of commercial tobacco use.</li> <li>• Improves WI's grade on flavored tobacco (current grade: F).<sup>32</sup></li> </ul>
<b>Including E-cigarettes and cannabis in the Smoke-Free Air Law</b>	<ul style="list-style-type: none"> <li>• Protects community members from involuntary exposure to second-hand smoke and aerosols.</li> </ul>
<b>Increasing Wisconsin's Overall Tax on ALL Tobacco products</b> (including e-cigarettes)	<ul style="list-style-type: none"> <li>• Reduces commercial tobacco use among young adults.</li> <li>• Saves money by lowering health care costs related to commercial tobacco-products, including Medicaid expenses.</li> <li>• Every 10% increase in the price of cigarettes reduces consumption by about 4% among adults and about 7% among youth.<sup>33</sup></li> <li>• Improves WI's grade on tobacco taxes (current grade: D).<sup>32</sup></li> </ul>
<b>Closing the tax loophole on little cigars</b>	<ul style="list-style-type: none"> <li>• Reduces commercial tobacco use among young adults.</li> <li>• Reduces health disparities among populations marketed to by</li> </ul>

<sup>30</sup> [Glover-Kudon et al. | Association of Peer Influence and Access to Tobacco Products..., 2019](#)

<sup>31</sup> [Truth Initiative | Why Ending Menthol Cigarette Sales Would Benefit..., 2023](#)

<sup>32</sup> [American Lung Association | State of Tobacco Control | Wisconsin](#)

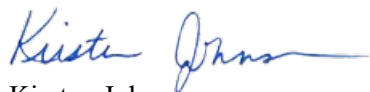
<sup>33</sup> [ALA | Cigarette & Tobacco Taxes, 2020](#)

	commercial tobacco companies.
<b>Moving ALL Tobacco Products Behind the Counter</b>	<ul style="list-style-type: none"> <li>• Protects children and youth from easy access to commercial tobacco and vape products.</li> <li>• Improves the success of commercial tobacco users to quit use.</li> <li>• Widely supported, including by current tobacco and vape users.</li> <li>• Helps limit shoplifting.</li> </ul>
<b>Making All Wisconsin Schools Tobacco-Free</b>	<ul style="list-style-type: none"> <li>• Protects students, teachers, school staff, and community members from second-hand smoke and vapor exposure.</li> <li>• Reduces commercial tobacco and nicotine use among students.</li> <li>• Improves the success of commercial tobacco and vape users to quit use.</li> </ul>
<b>Making All Wisconsin State-Funded College Campuses Tobacco-Free</b> (2-year, 4-year, & Tech Colleges)	<ul style="list-style-type: none"> <li>• Reduces commercial tobacco and nicotine use among young adults.<sup>34</sup></li> <li>• Economic and environmental benefits.</li> </ul>

**NOTE:** In all the items listed above, tobacco products include all commercial tobacco products, including e-cigarettes.

In 2024, CTPTP made great progress on priority projects. CTPTP believes that everyone in Wisconsin should have the opportunity to live their healthiest life. As such, CTPTP will continue to advance efforts toward a healthier future for all. Together, our healthiest Wisconsin is yet to come.

Sincerely,



Kirsten Johnson  
Secretary-designee

P-02160 (06/2025)

<sup>34</sup> [Truth Initiative | 3 Benefits of Tobacco-free policies at colleges and universities, 2017](#)

## Appendix A: Recognition of Sacred Tobacco, Tribal Sovereignty, & Public Health as a Collaborative Effort

It is important to recognize the role that sacred (or traditional) tobacco has in American Indian communities. American Indian communities consist of diverse people, tribes, and nations across Wisconsin. Furthermore, different American Indian communities have a distinct history and relationship with sacred tobacco. Although there are different ingredients and preparation methods across communities, sacred tobacco is usually hand-made and used for prayer, healing, and ceremony.

Commercial tobacco is intrinsically different from sacred tobacco. Commercial tobacco contains additives and is produced or advertised by tobacco companies for the sole purpose of making a profit in defiance to any and all negative effects to public health and the environment.

Acknowledging the sovereignty and independence of Tribal Nations, CTPTP is committed to fostering positive state-tribal relationships between the State of Wisconsin and Tribal Nations and collaborate in promoting the health of communities, as well as addressing the harm that commercial tobacco has on American Indian communities.<sup>35</sup>

In 2024, the name of the Wisconsin Tobacco Prevention and Control Program was changed to the Wisconsin Commercial Tobacco Prevention and Treatment Program (CTPTP). This change makes a clear and important distinction between mass-market commercial tobacco and vape products and sacred tobacco used by American Indians. CTPTP worked with Tribal partners from the Great Lakes Intertribal Council and the Wisconsin Native American Tobacco Network (WNATN) for the planning and development of this new name. CTPTP has been and will continue to integrate commercial and/or traditional language throughout all other program areas.

## Appendix B: External Funding & Donations for Tobacco Prevention

Funder	Contract Totals
Centers for Disease Control & Prevention Cooperative Agreement	<b>\$1,588,681.00</b>
Food and Drug Administration (FDA) Contract	<b>\$1,491,377.00</b>
Division of Care & Treatment Services (DCTS)/SAMHSA	<b>\$744,141.00</b>
JUUL Settlement Funds	<b>\$1,387,756.38</b>

<sup>35</sup> [Tribes of Wisconsin, 2011](#)

## Appendix C: Tobacco Program Budget Breakdown

<b>Cessation Services</b>	
UW-CTRI (Center for Tobacco Research and Intervention) - (Quitline)	<b>\$672,792</b>
UW-CTRI (Outreach)	<b>\$194,000</b>
UW-CTRI (WiNTiP)	<b>\$43,000</b>
Wisconsin Women's Health Foundation - First Breath	<b>\$300,000</b>
<b>WI Wins</b>	
Chippewa County Health Department	<b>\$4,620</b>
Clark County Health Department	<b>\$2,387</b>
Eau Claire City/County Health Department	<b>\$4,466</b>
Fond du Lac County Health Department	<b>\$9,471</b>
Juneau County Health Department	<b>\$8,393</b>
La Crosse County Health Department	<b>\$16,478</b>
Marathon County Health Department	<b>\$13,937</b>
Marinette County Health Department	<b>\$4,312</b>
Oneida County Health Department	<b>\$11,627</b>
Polk County Health Department	<b>\$19,866</b>
Public Health Madison & Dane County	<b>\$19,712</b>
City of Franklin Health Department	<b>\$1,078</b>
American Lung Association (Dodge, Jefferson, Waukesha, Milwaukee Suburban Counties)	<b>\$285,105</b>
American Lung Association (NW)	<b>\$12,628</b>
Arbor Place (Dunn County)	<b>\$2,695</b>
Community Action Healthy Living	<b>\$40,656</b>
Family Services of Rock County	<b>\$15,785</b>
Hope Council	<b>\$26,411</b>
Jump At the Sun (City of Milwaukee)	<b>\$12,166</b>
Community Advocates (City of Milwaukee)	<b>\$12,166</b>
UMOS (City of Milwaukee)	<b>\$12,166</b>
PARCC - Lodi School District - Columbia County	<b>\$3,850</b>



Northeastern WI Area Health Ed Center (NEWAHEC)	\$10,241
Elevate - Washington County Agency	\$5,236
<b>Youth Programs</b>	
American Lung Assoc (N-O-T)	\$38,800
American Lung Assoc - (SPARK) 18-24 (OTP)	\$96,000
American Lung Assoc (FACT)	\$203,344
Department of Public Instruction	\$60,000
<b>Media &amp; Counter Marketing</b>	
Knupp & Watson & Wallman	\$325,800
<b>Community Interventions</b>	
City of Franklin Health Department - FACT	\$3,500
Eau Claire City/County Health Department	\$50,000
Fond du Lac County Health Department	\$121,000
Juneau County Health Department	\$121,000
La Crosse County Health Department	\$121,000
Marathon County Health Department	\$121,000
Oneida County Health Department	\$121,000
Polk County Health Department	\$121,000
Public Health Madison & Dane County	\$121,000
American Lung Association (NW)	\$121,000
Building a Safer Evansville - FACT	\$3,500
Community Action Healthy Living	\$121,000
Family Services of Rock County	\$121,000
Great Lakes Inter Tribal Council	\$250,000
Hope Council	\$121,000
Jump At the Sun (City of Milwaukee)	\$250,000
PARCC - Lodi School District	\$50,000
UMOS (City of Milwaukee)	\$125,000
Community Advocates (City of Milwaukee)	\$125,000
Northeastern WI Area Health Ed Center (NEWAHEC)	\$50,000
<b>Training &amp; Technical Assistance</b>	

American Lung	<b>\$120,797</b>
UW Population Health Institute	<b>\$331,024</b>
<b>Surveillance Evaluation &amp; Research</b>	
UW Milwaukee CUPH	<b>\$432,000</b>
<b>Tobacco Program GPR Budget (Total)</b>	<b>\$5,611,009</b>