

Collaborating to reduce tobacco use for a healthier Vermont

vermont 2008 & 2009 TOBACCO CONTROL WORKPLAN

Tobacco Control Highlights 2006–2007

Preventing Youth Smoking

- The smoking rate for youth in grades 8-12 declined steeply from 31 percent in 1999 to 16 percent in 2007.
- 94 percent of school grantees had a tobacco use policy incorporating elements of the CDC's model policy in FY2007.
- 88 percent of Vermont tobacco retailers passed the compliance check and did not sell tobacco to minors in 2007.

Helping Smokers Quit

- The smoking rate for adults decreased from 22 percent in 2001 to 18 percent in 2007.
- 85 percent of Vermont smokers were aware of local programs to help people quit smoking in 2007.
- 4,242 adult smokers were served by **Vermont Quit Network** in 2007.
- Over 95 percent of Vermont smokers reported awareness of at least one smoking cessation media message in 2007.

Reducing Secondhand Smoke Exposure

- 87 percent of Vermonters, with children, prohibited smoking in their homes in 2007.
- 92 percent of Vermonters, with children, prohibited smoking in their car in 2007.

A Comprehensive Approach

Vermont's Tobacco Control Program brings together partners from the Department of Health, the Department of Education, the Department of Liquor Control, the Vermont Tobacco Evaluation and Review Board, health care providers, local community organizations and businesses to coordinate efforts across the state.

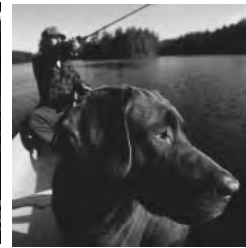


This comprehensive program, created in 2001 and based on proven strategies, set ambitious goals to:

- Reduce the prevalence of smoking among Vermont youth from a rate of 31 percent in 1999 to 15 percent in 2010.
- Reduce the prevalence of smoking among Vermont adults from a rate of 22 percent in 2000 to a rate of 11 percent in 2010.
- Reduce the exposure of all Vermonters to secondhand smoke.

The comprehensive program includes seven components that the Centers for Disease Control and Prevention (CDC) recommend as essential to success:

- Tobacco-free community coalitions
- School-based tobacco use prevention program
- Cessation smoking services
- Statewide training of health care providers
- Media and public education
- Enforcement of laws banning tobacco sales to minors
- Evaluation



Moving Forward

Vermont has made significant progress in lowering youth smoking rates and Vermonters' exposure to secondhand smoke. However, tobacco use remains the number one cause of preventable death in the state. Although the recent decrease in the adult smoking rate to 18 percent is good news, some segments of the population have significantly higher

than average smoking rates. These groups include older teens, young adults, low income Vermonters and clients of mental health and substance abuse services. Research shows that those states that spend more on tobacco control have greater reductions in smoking, and the longer states invest those funds, the greater the impact. With current efforts

Vermont will not reach its goal of 11 percent by 2010. The state and its local partners must examine a mix of strategies, including implementation of evidence-based programs, and funding across program components to further reduce the adult smoking rate and continue to lower the youth smoking rate.

Comprehensive Program Elements

Tobacco-free Communities

In communities across the state, Vermonters are working together to reduce tobacco use. Currently 20 community coalitions, funded and coordinated by the Department of Health, serve as the mechanism for bringing statewide tobacco control efforts to the local level. They are also the driving force in keeping tobacco control partners engaged and actively working toward creating tobacco-free communities.

Community coalitions collaborate with schools, hospitals, non-profit organizations, businesses and the local media. These various sectors of the community are committed to reducing tobacco use, especially among populations disparately affected by tobacco use.

Tobacco-free Schools

Perception and attitudes about tobacco, even the decision to smoke, can be formed as early as elementary school. Nearly all first use occurs before high school graduation. Among Vermont students who smoke, 18 percent started before they were 13 years old. The Department of Education funds and coordinates the comprehensive school-based

tobacco prevention program. Schools play a major role in the statewide effort to prevent and reduce the initiation and use of tobacco by youth and to help create community and school environments where "no tobacco" is the norm. The program focuses on four areas: coordination of prevention efforts, model tobacco policy, evidence-based prevention curricula, and the involvement of family and community in attaining these goals.

Help for Smokers to Quit

The average smoker will attempt to quit five to seven times before succeeding. The goal of Vermont's quit smoking program – called the **Vermont Quit Network** – is to make services easily accessible to anyone who is ready to quit. Vermont smokers can access a menu of free options from the **Vermont Quit Network** to increase their chances of quitting smoking for good. The network offers phone or in-person counseling, including face-to-face sessions at local hospitals and group classes in business and community settings. Vermont smokers who prefer a web-based program to quit smoking can get a lifetime membership to VermontQuitnet.com for free. In addition, as

of January 2007, all Vermont smokers using the network's services (phone, in-person or online) can receive free nicotine replacement therapy (NRT) shipped directly to their home, to double the chances of quitting success. As of July 1, 2007, teens can use phone counseling to quit smoking. In July 2007, the Department of Health began a pilot project at healthcare provider practices to increase referrals to these free services and distribute NRT to smokers that do not want counseling.

Media and Public Education

The impact of Vermont's media and public education campaigns is increasingly apparent. In addition, experience has proven that health communication is more effective when the message is delivered from multiple sources. As a result, the Department of Health conducts three statewide campaigns per year in concert with community-level activities. Each campaign is designed to focus attention on a particular theme during a designated period. These "common theme" campaigns mirror the three statewide tobacco control goals and exemplify the synergy of Vermont's comprehensive Tobacco Control Program.



Policy

The three most effective policies that states can pursue to reduce tobacco use are:

- Sustained funding for a comprehensive tobacco control program
- Tobacco excise tax increases
- Clean indoor air laws

Although Vermont has successfully reduced the youth smoking rate to 16 percent, progress in lowering the adult smoking rate has been comparatively slow. Research shows that increased spending on a comprehensive tobacco control program leads to a greater reduction in smoking. For the fiscal year 2008, lawmakers allocated \$5.2 million to the tobacco control program. However, it will take additional funding to reach the 2010 goal of 11 percent for adult smoking and continue to lower the youth smoking rate.



Vermont has been a leader nationwide in legislation to restrict smoking in the workplace and eliminate smoking in public places. Lawmakers increased the excise tax on cigarettes in 2002. They increased it again in 2006 and added roll-your-own tobacco, little cigars and snuff. In 2008, mail order and internet sales of all tobacco products were banned.

Enforcement

Federal law requires that states conduct retailer compliance checks to determine the rate of illegal tobacco sales to minors and set an annual goal to reach 80 percent compliance. In 1997, Vermont set a higher standard of 90 percent. The Department of Liquor Control enforces the laws against sales of tobacco to minors. Since 2001, compliance rates have exceeded 80 percent but have not reached the 90 percent standard. In FY2007, Vermont's compliance rate was 88 percent. As enforcement becomes more successful, some minors will shift from commercial to non-commercial or "social sources." In 2006, nearly 91 percent of Vermont minors that smoke reported getting their cigarettes from social sources such as family and older friends. According to state law, anyone who furnishes a tobacco product to a minor is subject to a fine from \$100 to \$500, but many people are unaware of this penalty.

Evaluation

One of the CDC's recommended elements is a surveillance and evaluation system to monitor program accountability. Surveillance analyzes tobacco-related behaviors, attitudes and health outcomes at regular intervals. Program evaluation builds upon surveillance systems by linking statewide and local program efforts to progress in achieving intermediate and long-term goals. Evaluation findings are used to make decisions about program implementation and to improve program effectiveness. An independent contractor evaluates Vermont's comprehensive program with the cooperation of the three key departments and stakeholders statewide.

Vermont Tobacco Laws

1987–Smoking in the Workplace Law
Restricts smoking in the workplace.

1991–Youth Access Act
Prohibits sale to people under 18, establishes a tobacco license for retailers, and sets penalties for selling and furnishing tobacco products to minors.

1993–Clean Indoor Air Act
Prohibits smoking in the common areas of all enclosed indoor places of public access, including restaurants.

1995–Tobacco Use on School Grounds
Prohibits use of tobacco on public school grounds and prohibits students from using tobacco at public school-sponsored events.

1997–Youth Access Act
Prohibits cigarette vending machines, puts cigarettes behind the counter in retail stores, makes it illegal for minors to possess tobacco products and increases penalty for repeat offenses of selling and furnishing tobacco products to minors.

2002–Tobacco Tax
Increases excise tax on cigarettes from 44 cents to \$1.19 per pack over two years.

2002–Singles & Mini-packs
Bans sale of single cigarettes or packs that contain fewer than 20 cigarettes.

2002–Mandatory Training for Tobacco Retailers
Requires tobacco licensee to be trained by Department of Liquor Control every 36 months and clerks to be trained before they can sell tobacco and every 24 months thereafter.

2005–Clean Indoor Air Act
Expands 1993 law to include bars and facilities owned and operated by a social, fraternal, or religious club.

2005–Fire-safe cigarettes
Requires that only fire-safe cigarettes may be sold in Vermont after May 1, 2006.

2006–Tobacco Tax
Increases excise tax on cigarettes from \$1.19 to \$1.99 over two years. Defines roll-your-own tobacco and little cigars as cigarettes and taxed as such. Changes moist snuff tax to weight-based and increases from \$1.49 to \$1.66 per ounce over two years.

2007–Teen Access to the Quit Line
Allows minors under the age of 18 access to free smoking cessation counseling without parental consent, through the Vermont Quit Line (phone counseling).

2008–Internet Sales of Tobacco Products
Bans the sale of mail order and internet sales of all tobacco products to Vermont consumers.

2008–2009 Tobacco Control Program Objectives

Preventing Youth Smoking

- Decrease the proportion of middle school youth who think that most high school students smoke, from 27% in 2006 to 20 percent in 2008.
- By the fiscal year (FY) 2009, the Department of Education will develop a plan to evaluate the fidelity of tobacco prevention curricula implementation in schools.
- The Department of Education will increase the number of funded schools implementing evidence-based tobacco prevention curricula from 232 in FY06 to 244 in FY09.
- By FY2009, the Department of Education will have provided 100 percent of funded supervisory unions with the tools and training to communicate and enforce model tobacco-free policies.
- Increase the membership in high school-based peer leadership prevention programs, including Our Voices Exposed (OVX) and Vermont Teen Leadership (VTLSP)/Students Against Destructive Decisions (SADD), by converting 20 percent of Vermont Kids Against Tobacco (VKAT) members per year.
- The Department of Education will provide a tobacco prevention track in annual Governor's Youth Leadership Conference and increase participation by 3 percent annually to 160 students in FY2009.
- The Department of Health will provide annual media literacy training for Department of Education, community partners and youth groups.
- By end of FY2008, the Department of Health will develop an educational message to increase awareness among adults, including parents, that providing cigarettes to minors is illegal.
- The Department of Liquor Control will increase the retailer compliance rate from 89 percent in 2006 with a goal to maintain a rate of 90 percent or above.

Helping Smokers Quit

- Increase the percentage of adult smokers and recent quitters that have made a quit attempt in the last 12 months from 53 percent in 2006 to 60 percent in 2009.
- Increase the percentage of adult smokers and recent quitters that have used the Vermont Quit Line or Ready, Set...STOP as part of their quit attempt in the past 12 months from 14 percent in 2006 to 18 percent in 2009.
- Increase the percentage of smokers that saw a doctor in the previous year that recommended phone or local counseling from 4.4 percent in 2006 to 9 percent in 2009.
- Increase the percentage of smokers that use nicotine replacement therapy to quit from 45 percent in 2006 to 55 percent in 2009.
- Increase the awareness of at least one Vermont smoking cessation service ad among lower-education-level adults from 74 percent in 2006 to 80 percent by 2008.
- Community coalitions will increase the number of activities they carry out to reduce the adult smoking rate by 20 percent from FY2007 to FY2009.
- Increase the number of students that complete N-O-T, Not On Tobacco, teen smoking cessation program from 76 percent in FY2006 to 82 percent in FY2008.

Reducing Secondhand Smoke Exposure

- Increase the percentage of smokers with children who prohibit smoking in their home from 63 percent in 2006 to 66 percent in 2008.
- Increase the percentage of smokers with children who prohibit smoking in their car when children are present from 70 percent in 2006 to 74 percent in 2008.
- Increase the proportion of smokers who believe that breathing smoke from other people's cigarettes is very harmful from 49 percent in 2006 to 55 percent in 2008.

- During FY2009, coalitions will increase, by no less than two, the number of local policies in their communities that prohibit smoking at workplaces, around building entrances, in parks and in other outdoor public spaces.

Comprehensive Elements

- By the end of FY2008, 75 percent of the community coalitions will implement sustained common theme campaign activities of at least three weeks each.
- By the end of FY2008, 100 percent of Supervisory Union (SU) grantees will implement at least one common theme campaign.
- By FY2009, all coalitions will incorporate activities into their local plans addressing youth prevention, cessation and secondhand smoke to target the lower socio-economic and mental health service populations.

Tobacco Control Statewide Partners

Department of Health
healthvermont.gov

Department of Education
education.vermont.gov

Department of Liquor Control
state.vt.us/dlc

Office of the Attorney General
atg.state.vt.us

Tobacco Evaluation & Review Board
humanservices.gov/tobacco