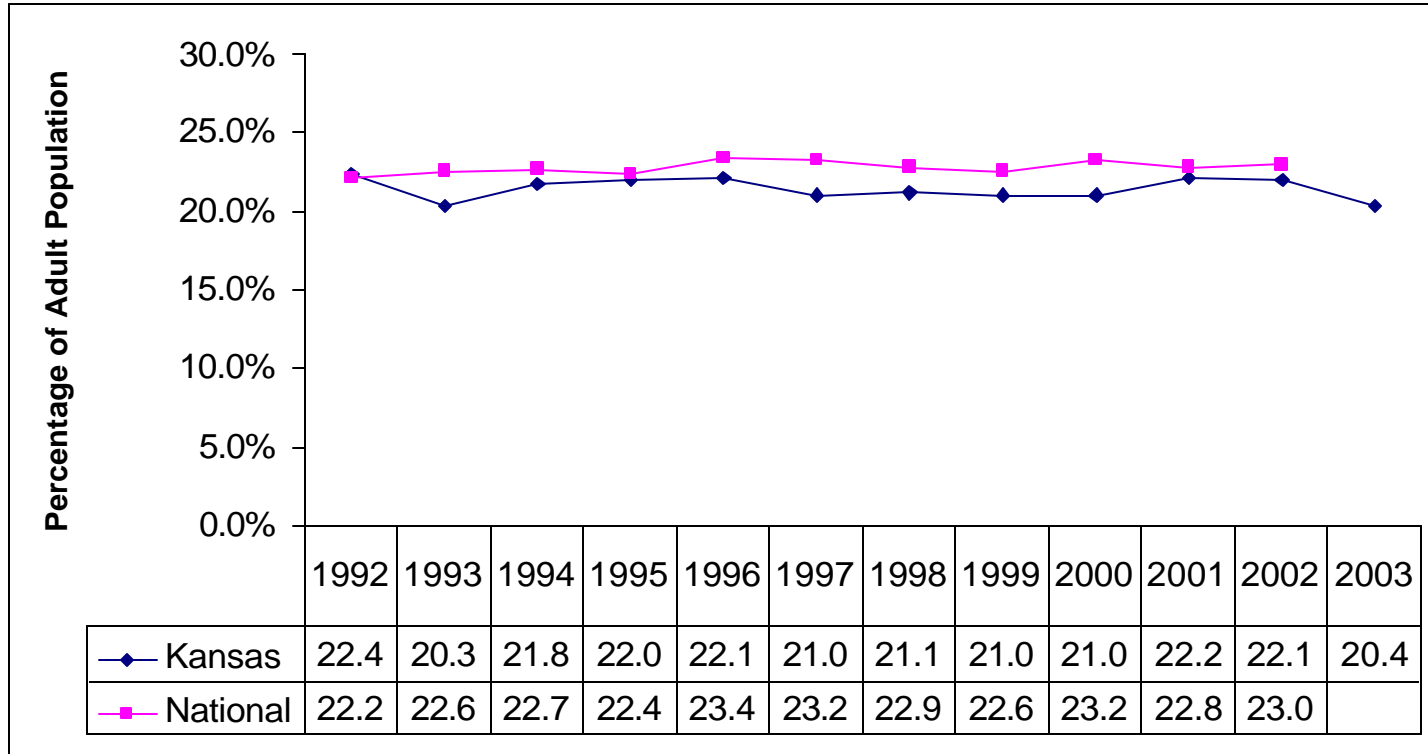

Tobacco Use In Kansas

**Healthy Kansans 2010
Steering Committee Meeting
May 12, 2005**

Current Cigarette Smokers in Kansas 1992 - 2003

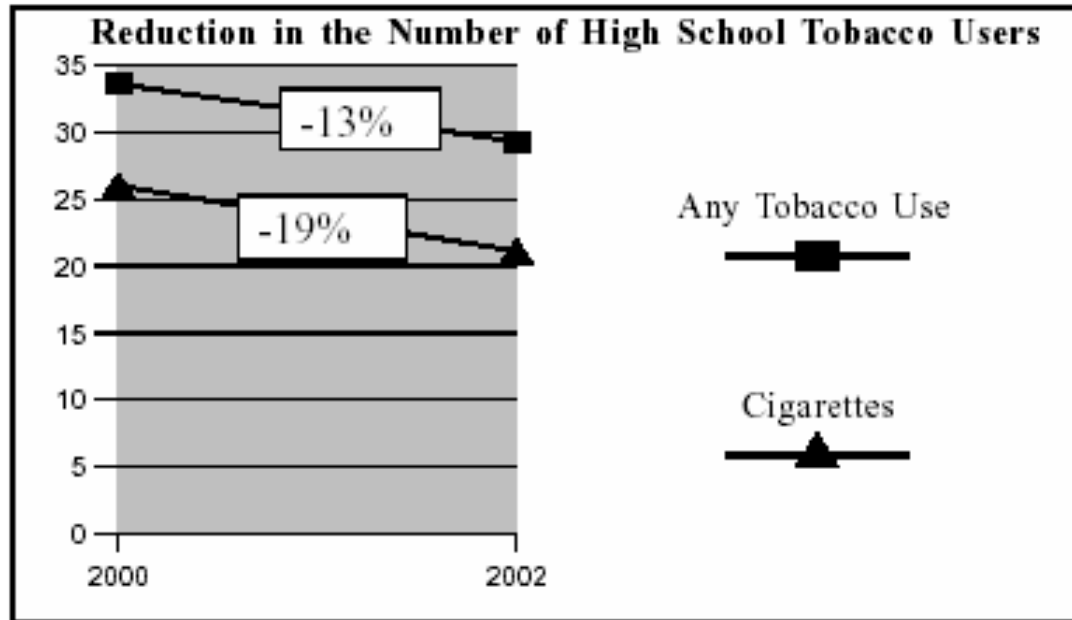


- **Prevalence of cigarette use among adults in Kansas has remained relatively unchanged. This trend is similar to the trend in the United States.**
- **Prevalence of cigarette use in Kansas is highest among individuals of low education (36.4% for less than high school) and low income (28.6% for < \$15,000 annual household income)**

Source: 1992-2003 Behavioral Risk Factor Surveillance System , Office of Health Promotion, Kansas Department of Health and Environment

National data : 1992-2003 Behavioral Risk Factor Surveillance System , Centers for Disease Control and Prevention.

Tobacco Use in Kansas – Key Indicators



- Youth rates have declined in the recent past, leveling out at approximately the adult prevalence rate. Youth rates are used to measure youth access and initiation.
- Adult quit attempts in the past 12 months by adult Kansas smokers have remained consistently in the 40-50% range since 2000. Cessation attempts are used to gauge community norm changes as well as short/intermediate term outcome objectives.

Trend Analysis

- The prevalence of adult smoking and tobacco use has remained relatively unchanged in Kansas in the past 10 years. However, in those states with comprehensive tobacco programs, rates have reached substantially lower prevalence (approximately 15%).
- Youth prevalence has followed the continued national trend of declining since the late 1990's.

How Are We Addressing Tobacco Use in Kansas?

Kansas' four major tobacco control goals based on Centers for Disease Control's Best Practices:

- Preventing the initiation of tobacco use among young people.
- Promoting quitting among young people and adults.
- Eliminating nonsmokers' exposure to environment tobacco smoke.
- Identifying and eliminating the disparities related to tobacco use and its effects among different population groups.

How Are We Addressing Tobacco Use in Kansas?

Overall strategies to achieve the four tobacco control goals:

- Conduct and coordinate ongoing public education awareness campaigns that enhance local and state efforts for prevention and cessation as well as protection from secondhand smoke.
- Strengthen, enact, and promote local community and workplace policies that protect all Kansans from the dangers of secondhand smoke.
- Increase excise taxes on cigarettes and tobacco products on a regular basis in order to reduce tobacco consumption and prevalence rates.
- Strengthen and enact state laws and local ordinances that protect youth from access to tobacco products and provide consistent enforcement of existing laws.
- Expand and continue the success of the toll-free Kansas tobacco Quitline **1-866-KAN-STOP**.

What Are Kansas' Assets for Decreasing Tobacco Use?

■ Partnerships

- Local/grassroots level – 50 local coalitions receive grant funding from KHDE for tobacco control at the local level
- ACS, ALA, AHA, TFKC, KAFP, KSNA, KSDE, SRS, Department of Revenue, RPCs and others at local, state, and national level

■ Resources

- Funding and Technical Assistance from Kansas Health Foundation, American Legacy Foundation, Sunflower Foundation, CDC, and others
- State funding made possible by the Master Settlement Agreement for community programs and smoking and pregnancy initiative

■ Growing Support and Momentum

- Public demand for tobacco-free workplaces, cessation services through tobacco Quitline **1-866-KAN-STOP**, and increase in tobacco taxes
- Integration of tobacco control into other health promotion programs such as asthma, cancer, diabetes, heart diseases, safety, etc.

What Are Barriers That Are Limiting Progress in Kansas?

- **Changing behaviors is difficult**
 - Addictive nature of tobacco requires a long timeline
 - Provider reimbursement needed for referrals to cessation and NRT
 - Personal rights vs. health arguments
- **Limited resources**
 - Best Practices level funding needed for Comprehensive Program in Kansas (\$18.1 Million per year)
 - Best Practices level funding for 10 years would reduce tobacco use by 50% in Kansas
- **Limited data on disparate populations in Kansas**
 - Low-wealth populations
 - Native Americans, African Americans, and Hispanics

Recommendations

- Implement Comprehensive Tobacco Control Program in Kansas based on Best Practices by CDC
- Allocate Best Practice Level Funding (\$18.1 Million per year) for tobacco control programs in Kansas
- Enact public policies at the state and local level that reduce the burden caused by tobacco use (CIA Ordinances, Youth Access Ordinances, increased tobacco taxes, etc.)
- Increase support for cessation services (reimbursement for health care providers, NRT, insurance coverage, tobacco Quitline **1-866-KAN-STOP** promotion and resources, etc.)

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