



State of Wisconsin
Department of Health Services

Tony Evers, Governor
Karen E. Timberlake, Secretary

August 20, 2021

Michael J. Queensland
Senate Chief Clerk
Room B20 Southeast
Madison, Wisconsin 53702

Edward A. Blazel
Assembly Chief Clerk
12 West Main Street, Room 401
Madison, Wisconsin 53703

Dear Mr. Queensland and Mr. Blazel:

The Department of Health Services is pleased to submit the 2020 Annual Tobacco Use Cessation Report to the Governor and the Legislature. The report is required by Wis. Stat. § 255.15 (4).

Everyone in Wisconsin deserves to live their best and healthiest life. The Wisconsin Tobacco Prevention and Control Program (TPCP) protects and promotes the well-being and safety of Wisconsinites by ensuring that the best practices in tobacco prevention and control are applied equitably throughout the state. This has been particularly important this past year, because people with smoking-related chronic health conditions like heart disease, diabetes, and lung disease are at greater risk for getting seriously ill from COVID-19. Smoking and secondhand smoke exposure suppress immune system function and people who smoke have a harder time recovering from COVID-19.

Tobacco contributes to the deaths of nearly 7,000 Wisconsinites annually, and costs an estimated \$3 billion in annual health care costs and \$1.6 billion in lost worker productivity.¹ TPCP continues to invest in comprehensive, evidence-based strategies to eliminate tobacco-related morbidity and mortality. TPCP provides leadership, facilitates diverse partnerships, and administers funding and program activities with a focus on health equity.

Tobacco companies continue to target youth with their products, causing a youth e-cigarette epidemic. The tobacco industry has also employed predatory marketing practices, targeting certain groups of people more than others (examples include: communities of color, low income communities, LGBTQ+, those with behavioral health conditions, and low educational attainment). Raising the age to purchase tobacco products is just one piece of the puzzle. By implementing best practice policies that help us drastically reduce smoking in the first place, including establishing clean indoor air policies, restricting flavors, and making tobacco products

less affordable, we prevent youth use and improve the health of communities who have been disproportionately impacted by the adverse outcomes caused by tobacco.

This report outlines 2020 highlights and challenges related to Wisconsin's efforts to prevent youth and young adult tobacco use, promote tobacco addiction treatment, eliminate exposure to secondhand smoke, and eliminate tobacco-related disparities.

External Funding and Donations for Tobacco Prevention

Funder	Contract Totals
Centers for Disease Control and Prevention Cooperative agreement	\$1,323,901.00
Food and Drug Administration (FDA) Contract	\$1,543,761.00
Department of Care and Treatment Services (DCTS) SAMSHA MOU	\$164,344.00

Tobacco Program Budget Breakdown

Fundee	Contract Totals
Cessation Services	
Center for Tobacco Research and Intervention (CTRI) (Quitline)	\$672,792
CTRI	\$194,000
CTRI (WiNTiP)	\$42,680
WI Womens Health Foundation - First Breath	\$300,000
WI Wins	
Chippewa County Health Department	\$4,350
Clark County Health Department	\$2,400
Eau Claire City/County Health Department	\$4,350
Fond du Lac County Health Department	\$9,375
Juneau County Health Department	\$ 8,625
La Crosse Couty Health Department.	\$16,650
Lodi School District - Columbia County	\$3,525
Marathon County Health Department	\$15,225
Oneida County Health Department	\$15,038
Ozaukee Health Department	\$2,625
Public Health Madison & Dane County	\$19,050
Winnebago County Health Department	\$7,200
City of Franklin Health Department	\$900
American Lung Association (Dodge, Jefferson, Waukesha Counties)	\$20,850
American Lung Association (NW)	\$12,825
Arbor Place (Dunn County)	\$2,250
Community Action Healthy Living	\$32,700

Family Services of Rock County	\$15,450
Hope Council	\$23,475
Jump At the Sun (Suburban Milwaukee County)	\$12,000
Medical College of Wisconsin - City of Milwaukee	\$35,625
Northeastern WI Area Health Ed Center (NEWAHEC)	\$10,275
Elevate - Washington County Agency	\$5,025
Youth Programs	
American Lung Association (N-O-T)	\$38,800
American Lung Association (FACT)	\$189,344
American Lung Association - (SPARK) 18-24 (OTP)	\$96,000
Department of Public Instruction	\$60,000
Media & Counter Marketing	
Knupp & Watson & Waldman	\$325,800
Community Interventions	
Eau Claire City/County Health Department	\$50,000
Fond du Lac County Health Department	\$121,000
Juneau County Health Department	\$121,000
LaCrosse 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
American Lung Association - FACT Menomonee Falls	\$ 3,500
Building a Safer Evansville - FACT	\$3,500
City of Franklin Health Department - FACT	\$3,500
Community Action Healthy Living	\$121,000
Family Services of Rock County	\$121,000
Focus on Community-FACT	\$3,500
Great Lakes Inter Tribal Council	\$250,000
Hope Council	\$121,000
Jump At the Sun (Suburban Milwaukee County) - FACT	\$3,500
Lodi School District (PARCC)	\$50,000
Medical College of Wisconsin	\$500,000
Northeastern WI Area Health Ed Center (NEWAHEC)	\$50,000
Training & Technical Assistance	
American Lung Association	\$90,000
UW Population Health	\$300,000
Surveillance Evaluation & Research	
UW Milwaukee - S & E	\$432,000

UW-Madison Survey Center (Youth Tobacco Survey) every other year contract	\$129,900
Total Tobacco Program GPR Budget	\$5,402,229

Youth and Young Adults

With the emergence of new tobacco products, including disposable e-cigarettes, nicotine pouches, heated tobacco, and other devices, Wisconsin faces the possibility of losing decades' worth of progress in youth tobacco prevention.

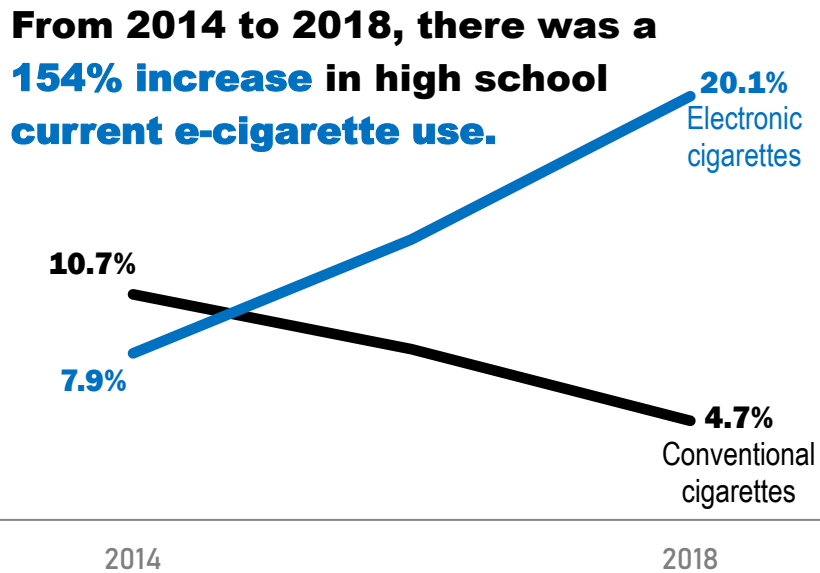
The COVID-19 pandemic spotlights the importance of tobacco prevention and cessation services due to the emerging evidence that links diagnosis of COVID-19 and e-cigarette use. Inhaling any kind of smoke or vapor into the lungs damages lung function and decreases immune responses. As more research is completed, it is likely that e-cigarette use, like conventional cigarette use, will be associated with more negative outcomes for users diagnosed with COVID-19.

Between 2014 and 2018, current high school youth conventional cigarette use hit an all-time low of 4.7%, but current e-cigarette use skyrocketed from 7.9% to 20.1%.³ This is alarming, and it is compounded by menthol and other flavored tobacco products that are still enticing young Wisconsinites. In 2018, more than half of current high school smokers used menthol-flavored products, and 89% of high school youth reported that they would not use tobacco products that are not flavored.

Though the biennial Youth Tobacco Survey (YTS) scheduled for 2020 was cancelled due to the pandemic and school closures across the state, the Department of Public Instruction also collects a small amount of data regarding youth and tobacco use in the Wisconsin Youth Risk Behavior Survey (YRBS). According to the most recent YRBS data from 2019, conventional cigarette use among Wisconsin high school students was at 5.6%, e-cigarette use was at 20.6%, and 29.7% of e-cigarette users report *also* smoking conventional cigarettes.⁴ Further, nearly half (45.5%) of all Wisconsin high school students report having tried an e-cigarette at least once.

Schools play an important role in these prevention efforts. As of 2020, 268 school districts (about 64%) throughout Wisconsin have comprehensive tobacco-free school policies, which also include e-cigarettes.

Wisconsin's purchasing age for cigarettes, other tobacco products, and products containing nicotine (including e-cigarette products containing nicotine) is still 18, despite the federal age limit being raised to 21 over a year ago. This creates confusion around enforcement statewide, while at the same time state statute prevents local municipalities from increasing the age to 21. Approximately 1 in 4 high school students who have used e-cigarettes first tried them before the age of 16. Ninety-six percent (96%) of middle school students who have used e-cigarettes first tried them before the age of 13. It is fairly common for 18-year-old high school students to provide their younger friends with tobacco products, an occurrence that becomes less common with a purchasing age of 21. The confusion surrounding legal purchasing age in Wisconsin, and confusion over who *enforces* the legal purchase age of 21, allows youth continued access to tobacco products.



In order to further educate parents and those who teach, mentor, or work with youth, TPCP recently completed the planning and creative development to expand the Tobacco is Changing media campaign in 2021. The campaign will be in its fourth year of educating parents on the increasing popularity of flavored tobacco products amongst teens. The focus-group-tested campaign’s messaging has concentrated on the candy and fruit flavors of tobacco products, as well as their deceptive appearance. The campaign promotes its message through a variety of media, including billboards, cinema ads, mobile ads, and social networks like YouTube, Facebook, Instagram, Twitter, and Pinterest. The campaign’s newest materials focus on e-cigarettes that take the form of other items, like smart watches and makeup compacts, as well as hoodies and backpacks that hide a vaping apparatus.

Finally, the campaign will also be shining a light on youth use of disposable e-cigarettes, or vapes. The campaign’s focus on disposable e-cigarettes is timely, as the CDC and FDA recently reported a 400% and 1,000% increase in disposable e-cigarette use, respectively, among U.S. middle and high school students from 2019 and 2020.

The campaign’s results from its first two years show it has connected with Wisconsin parents in a meaningful way:

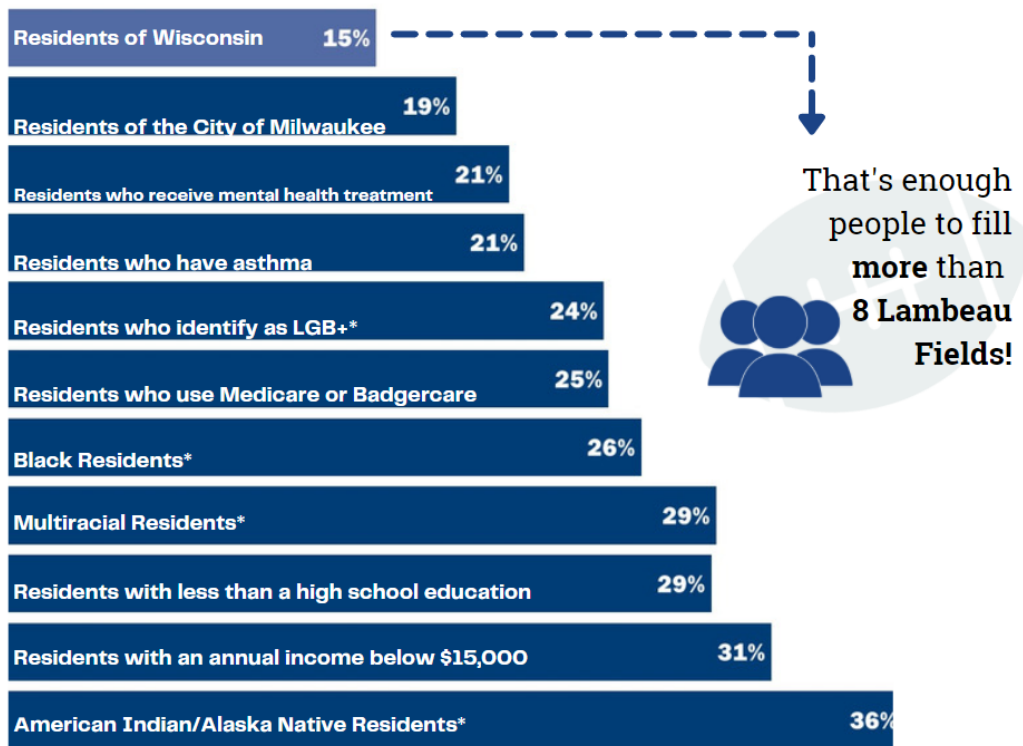
- 38 million+ campaign impressions
- 68,000+ unique web visits
- 40% increase in website page views between phase one and phase two of the campaign
- 114% increase in views for campaign video “The Talk” between phase one and phase two of the campaign
- One in three users who saw Tobacco is Changing mobile ads interacted with them
- Pre and post-campaign surveys found the number of parents who said they’d talk to their kids about e-cigarette increased by 29% over the course of the campaign

Among young adults aged 18-24, current e-cigarette use rose from 17% in 2019 to 24.5% in 2020.⁵ This age group remains having the highest percentage of e-cigarette use among any other age group of adults in the state.⁵ Another TPCP-funded program, SPARK, offers young adults, faculty, and staff on college and university campuses a platform and an opportunity to have a

voice in tobacco-free campus policy change. Since SPARK’s inception in 2011, the program has worked with 27 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, eight Wisconsin campuses have gone tobacco-free, protecting over 78,000 students from exposure to secondhand smoke. In addition, many other campuses are working toward or implementing similar tobacco-free policies.¹⁰

Adults

- In 2019, the average adult conventional cigarette smoking rate dropped to 15%, after several years of remaining at 16%.⁵



* denotes that data is aggregated from 2015-2019;

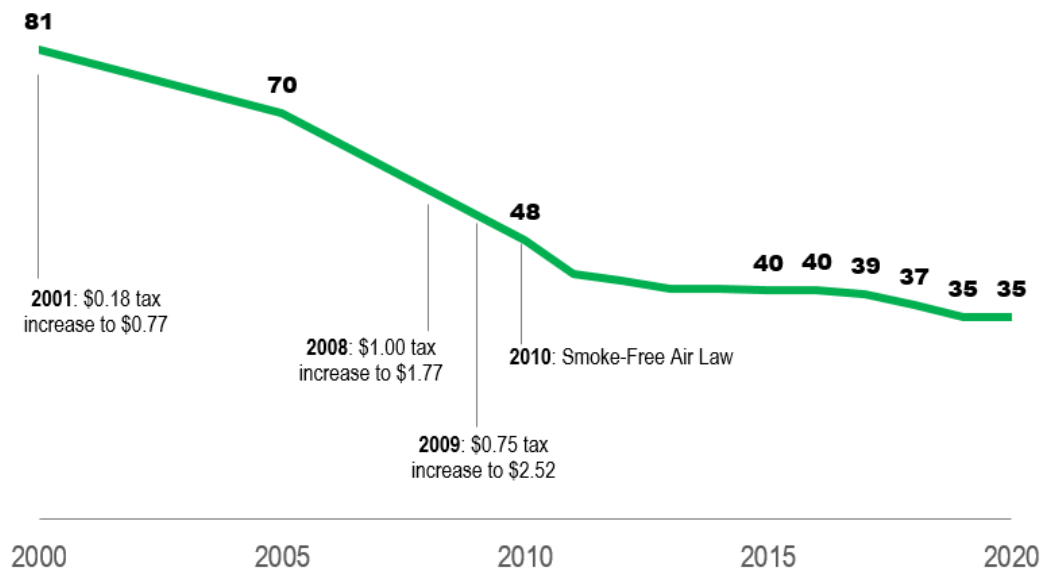
- Due to industry targeting, a lack of comprehensive tobacco-free policies, societal pressures, retail density, and other factors, specific populations have a higher smoking prevalence than the average Wisconsinite, including those who identify as American Indian or Alaska Native (36%), having a total annual household income of < \$15,000 (31%), having less than a high school education (29%), Multiracial (29%), Black (26%), Medicaid or BadgerCare recipients (25%), LGB+ (24%), receiving mental health treatment (21%), having asthma (21%), or City of Milwaukee residents (19%).⁵
- Wisconsin’s smoke-free air law does not apply to sovereign tribal land. Wisconsin is home to 11 federally recognized American Indian tribes, one non federally recognized tribe, and approximately 70,000 people who identify as American Indian or Alaska Native. At 36%, Wisconsin non-Hispanic American Indian or Alaska Native people have the highest prevalence of commercial cigarette use, and thus are at elevated risks of experiencing tobacco-related morbidity and mortality.⁵ As of 2018, 33.6% of non-Hispanic American Indian or Alaska Native birthing parents reported smoking during their pregnancy, which

contributes to Wisconsin's American Indian or Alaska Native infant mortality rate being 13.8 per 1,000 live births—more than double the state average.¹⁰ Smoke-free casinos were once rare but are becoming the new normal. There are 24 casinos owned and operated by Tribal Nations in Wisconsin. Nine casinos currently have permanent smoke-free policies. Because of the COVID-19 pandemic, 17 casinos are 100% smoke free temporarily, which equates to a little less than 75% of all casinos in Wisconsin. The Wisconsin Native American Tobacco Network coordinated by Great Lakes Intertribal Council and funded by TPCP will be educating and supporting the casinos to remain smoke free after the COVID-19 pandemic.

Consumption

- Per capita cigarette consumption has declined from 80 packs in 2000 to 35 packs in 2020.

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



- Despite this, the amount of cigarettes sold in SFY2020 (209 million packs) could wrap around the Earth more than seven times. Cigarettes are the most littered item in the U.S. and disproportionately impact low income neighborhoods.
- No Menthol Sunday, a national event, is an important opportunity to engage faith leaders and their communities in a discussion about how to improve health outcomes for African Americans. Led by the Wisconsin African American Tobacco Prevention Network, Wisconsin's No Menthol Sunday 2020 efforts were a major success and helped increase awareness about the impact of menthol and other tobacco products on the African American community. The campaign expanded beyond Milwaukee to Racine, Kenosha, Madison, Beloit and Walworth County. In addition, proclamations declaring May 17, 2020, No Menthol Sunday were issued in the City of Beloit, City of Milwaukee, and State of Wisconsin. Thirty-two churches participated, reaching over 5,000 congregants through online sermons, Sunday school classes, church announcements, newsletters, and other activities. Senators Lena Taylor, LaTonya Johnson, and Representative David Bowen recorded personal videos encouraging their constituents to support No Menthol Sunday. Congregants

and others also joined the COVID-19 Big Quit by setting May 17 as their quit date. In total, including media and other activities, No Menthol Sunday had a reach of more than 50,000 Wisconsinites and was featured on radio interviews, newspaper and online stories, and through television news coverage.

Treating Tobacco Dependence

- The Wisconsin Tobacco Quit Line (1-800-Quit-Now) received 9,971 inbound calls in 2019. Total registered callers were 5,182. 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.⁷
- Since 2001, First Breath, a program of the Wisconsin Women's Health Foundation, has helped over 23,000 pregnant and postpartum people who want to become tobacco-free. In 2020, First Breath reached 1,114 pregnant, postpartum, and caregiving individuals. Of the 1,033 pregnant and postpartum people referred to First Breath, 891 enrolled in text message support and 448 enrolled in intensive First Breath Quit Coaching. Of the participants who completed services at six months postpartum, 44% quit (self-reported), 84% reported zero infant exposure to tobacco smoke, and 77% reported their home was smoke free. Of the 81 family members who were referred to First Breath, 65 enrolled in texting support and 16 received education from a First Breath Quit Coach. As of December 31, 2020, there are a total of 1,117 First Breath providers and 268 First Breath sites, with sites in all 72 Wisconsin counties.⁸
- Individuals with behavioral health conditions, including mental illness and substance use disorders, are at a higher risk for tobacco use and its associated morbidity and mortality. In Wisconsin, 34% of current smokers have been told, at some time during their life, that they had/have a depressive disorder, and 22.8% are currently taking medication or receiving treatment for some type of mental health condition or emotional problem.⁵ Of those having been told they had or have a depressive disorder, 80% have ever tried a cigarette, and 76.4% of persons that are currently taking medication or receiving treatment for some type of mental health condition or emotional problem have ever tried a cigarette.⁵ Unfortunately, Wisconsin also has the highest prevalence of binge drinking in the nation at 25%, and it has been shown that drinking alcohol and smoking work in tandem to harm health more than the use of either one substance alone, leaving these Wisconsinites at an even higher risk for cancers.
- The Wisconsin Integration Nicotine Tobacco Initiative Program (WiNTiP) is a program coordinated by UW-CTRI that is funded by and receives support from TPCP. WiNTiP works with behavioral health systems and providers to adopt restrictive tobacco prevention and control policies to help patients and staff quit tobacco. WiNTiP has had great success in educating mental health and/or the Alcohol Other Drug Abuse clinicians on the importance of addressing tobacco dependence and training them to provide evidence-based tobacco dependence treatment. Notable examples include the residential substance abuse treatment programs under contract with Milwaukee County, ProHealth, and Bell therapies. WiNTiP was instrumental in the development of a second on-line training that was launched in the fall of 2019. This training provides the skills behavioral health clinicians need to effectively address tobacco use by their patients. Through February 2021, 439 Wisconsin behavioral health staff have enrolled in this training, as have 450 additional providers outside Wisconsin.

Secondhand Smoke Exposure

- Exposure to secondhand smoke continues to be high in homes for middle school (19.4%) and high school (19.3%) students.^{2,3} Exposure to secondhand smoke in vehicles is even higher for middle school (20.4%) and high school (24.2%) students.^{2,3}
- As of 2020, 60 municipalities in Wisconsin have passed local smoke-free air ordinances to include e-cigarettes. Additionally, in 2020, Wisconsin won a national award from American for Nonsmokers' Rights for the second-most local ordinances passed in 2020.
- The number of complaints of noncompliance with the statewide smoke-free workplaces law decreased from 97 in 2019 to 73 in 2020.

Cigarette Smoking Among Medicaid Beneficiaries

- The smoking rate for Wisconsin Medicaid members is 25%.⁵
- TPCP worked with the Department of Health Services Division of Medicaid Services and the UW-Center for Tobacco Research and Intervention to promote the Medicaid cessation benefit. The Benefit was promoted on the online portal page for ForwardHealth and information about the Benefit was created into a hold message for providers and members who call the Medicaid service phone line. The Benefit is also promoted by Medicaid providers and TPCP state and local partners through advertising and promotional materials.

Looking Ahead

TPCP is proactively strategizing how best to address the unique needs of Wisconsin. This is continually done by partnering with local and state partners to reduce the significant impact the use of tobacco has on the people of Wisconsin and incorporating tobacco prevention (best practices, data, health equity experience, etc.) into intersecting spaces.

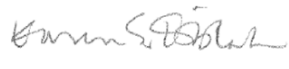
- Healthy Wisconsin, the State of Wisconsin Health Improvement Plan, highlights five priority areas for improving health, one of which is tobacco. TPCP has used this opportunity to collaborate and identify intersections with the other identified priority areas, including alcohol, suicide and depression, opioids, and nutrition and physical activity.
- A five-year tobacco prevention and control movement state plan was developed with statewide partners 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.
- TPCP announced a competitive Request for Applications (RFA) in January 2020 for General Purpose Revenue (GPR) Community Interventions Funding. The aim of the funding opportunity is to reduce tobacco-related disparities by supporting collaboration among the organizations and agencies that work with these populations. The framework for achieving this overarching goal focuses on changing the social norms surrounding tobacco use, creating a climate in which tobacco becomes less desirable, less acceptable, and less accessible. Priority areas that support social norm change and address tobacco-related disparities are to prevent initiation, reduce exposure to secondhand smoke and aerosol, and promote the treatment of tobacco and nicotine dependence. Notification of awards were announced in April and contracts started in July of 2020.

In addition to the above strategies, TPCP is committed to promoting best practice policy options that reduce tobacco and e-cigarette use, initiation, and dependence. These recommended policy options include:

- Restricting flavors, including menthol
- Licensing e-cigarette retailers
- Including e-cigarette in the smoke-free air law
- Moving all tobacco products behind the counter (or in a locked case)
- Making all Wisconsin schools tobacco-free, including e-cigarette use
- Making all Wisconsin state-funded college campuses (two-year, four-year, and tech colleges) tobacco-free, including e-cigarette use
- Restricting sales to those under 21
- Increasing the tax on e-cigarette
- Closing the tax loophole on little cigars
- Increasing Wisconsin's overall tax on all tobacco products

TPCP is committed to continuing all efforts mentioned 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,



Karen E. Timberlake
Secretary-designee

Data Sources

1. Burden of Tobacco in Wisconsin: 2015 Edition
2. Wisconsin 2018 Youth Tobacco Survey – Middle School
3. Wisconsin 2018 Youth Tobacco Survey – High School
4. Wisconsin Youth Risk Behavior Survey
5. 2019 Wisconsin Behavioral Risk Factor Surveillance Survey (BRFSS)
6. Wisconsin Department of Revenue Cigarette Tobacco Tax Report
7. Wisconsin Tobacco Quitline Demographic Report, 1/1/2018 – 12/31/2018. Due to the small one-year sample size in 2018, rates were averaged from 2014-2018 BRFSS for these individuals.
8. Wisconsin Women's Health Foundation First Breath 2018 Annual Report
9. Annual Wisconsin Birth and Infant Mortality Report, 2017
10. The New England Journal of Medicine, 2021, [Disposable E-Cigarette Use among U.S. Youth - An Emerging Public Health Challenge](#)