

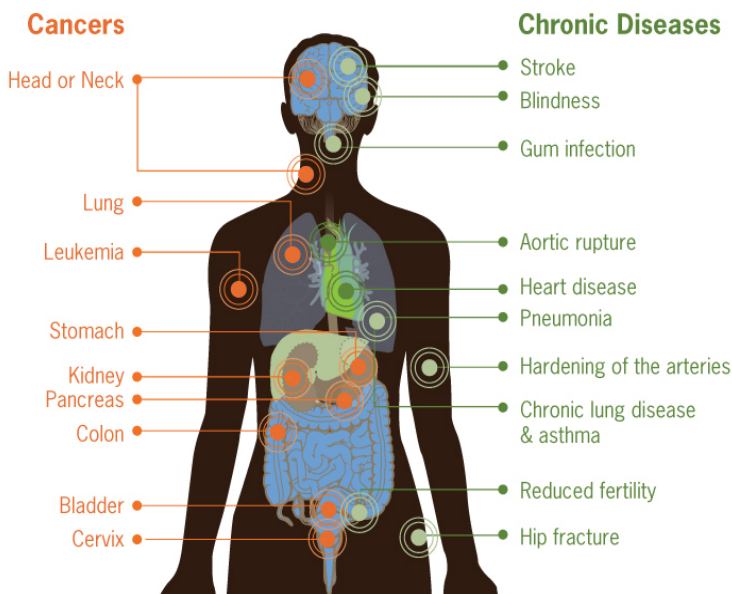
Arkansas Up in Smoke



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Center for the Study of Tobacco
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Tobacco use and exposure to tobacco smoke are the leading causes of preventable deaths in the United States¹ and Arkansas.²



Our surveys and health records help us keep track of how many people use tobacco or get a tobacco-caused disease.

⇒ **22.3%** of adult Arkansans smoke cigarettes, the 5th highest in the U.S.⁴

⇒ Cigarette smoking is higher in rural compared to urban Arkansas counties. Among adults:

- **17.9%** in Pulaski County smoke
- **14.6%** in Washington County
- **27.0%** in Desha County, and
- **27.8%** in Chicot County smoke cigarettes.⁵

Why is tobacco use so high in Arkansas?

⇒ Poverty, education, unemployment, occupation, community resources, geography, and weak evidence-based policies influence how many youth and adults smoke.⁶

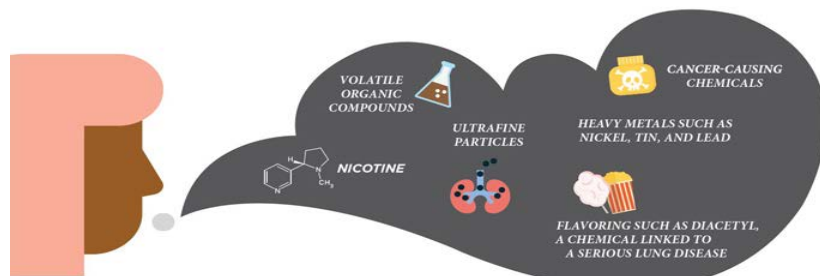
⇒ In addition, tobacco industry marketing and manipulative practices influence tobacco use initiation and continued use of cigarettes, cigars, smokeless tobacco, electronic cigarettes/vaping devices, hookah, and pipes.¹

Vaping and electronic cigarettes: what's the deal?

Electronic cigarettes and vaping devices, including JUUL use, is growing among young people.

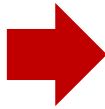
⇒ These battery-operated devices are heated to create an aerosol that the user inhales.⁷

⇒ The primary substances in electronic cigarettes or vaping devices are **nicotine**, flavoring, propylene glycol, vegetable glycerin, and other chemicals.⁷



CDC and Electronic Cigarettes Infographics⁸

Nicotine is naturally found in all tobacco including electronic cigarettes and vaping devices.



Know the facts: Nicotine....

- ⇒ Is harmful in ALL forms.⁹
- ⇒ Is as addictive as cocaine or heroin and keeps people using tobacco.⁹
- ⇒ Negatively impacts brain development.¹
- ⇒ Results in pre-term delivery, low birth weight, and still births.¹
- ⇒ Constricts arteries and increase blood pressure.¹

What can we do to reduce tobacco use and related diseases?

Comprehensive tobacco prevention and control include programs that:

- ⇒ Prevent initiation among youth and promote quitting among youth and adults.
- ⇒ Eliminate exposure to secondhand smoke.
- ⇒ Identify and eliminate tobacco-related disparities among groups (e.g. poor, low education, racial/ethnic groups).¹⁰

The Centers for Disease Control and Prevention recommend "best practices:"¹⁰

- ⇒ **Local and statewide policies** that include smokefree policies, increasing cigarette prices, restricting youth access to tobacco products, prevention of initiation, and promoting cessation.
- ⇒ **Mass media campaigns** that reduce initiation and promote quitting.
- ⇒ **Cessation interventions** that expand insurance coverage of proven treatments, state-supported quitlines, and health systems change that institutionalize cessation interventions.
- ⇒ **Monitoring attitudes, behaviors and health outcomes** at the state levels and evaluating the effects of programs.
- ⇒ **A functioning infrastructure** to implement effective programs, including skilled staff, technical assistance, and training.

References

1. U.S. Department of Health and Human Services. *The Health Consequences of Smoking—50 Years of Progress: A Report of the Surgeon General*. Atlanta, GA: U.S. Department of Health and Human Services, Centers for Disease Control and Prevention, National Center for Chronic Disease Prevention and Health Promotion, Office on Smoking and Health, 2014.
2. Tobacco Data Deck 2018. Arkansas Department of Health.
https://www.healthy.arkansas.gov/images/uploads/pdf/Tobacco_Data_Deck_June_2018.pdf
Accessed 4/9/19
3. Tobacco Use and Infographics. Risks from Smoking.
<https://www.cdc.gov/vitalsigns/tobaccouse/smoking/infographic.html>
4. Cigarette Use Among Adults (Behavior Risk Factor Surveillance System) 2017
<https://www.cdc.gov/statesystem/cigaretteuseadult.html> Accessed 4/9/19
5. Arkansas Behavioral Risk Factor Surveillance System, 2017 County Estimates
https://www.healthy.arkansas.gov/images/uploads/pdf/Current_Smoker_2017.pdf
Accessed 4/9/19
6. U.S. Department of Health and Human Services. Health Equity in Tobacco Prevention and Control. Centers for Disease Control and Prevention, National Center for Chronic Disease Prevention and Health Promotion, Office on Smoking and Health, 2014
<https://www.cdc.gov/tobacco/stateandcommunity/best-practices-health-equity/pdfs/bp-health-equity.pdf> Accessed 4/9/19
7. Vaporizers, E-Cigarettes, and other Electronic Nicotine Delivery Systems (ENDS)
<https://www.fda.gov/tobaccoproducts/labeling/productsingredientscomponents/ucm456610.htm>
Accessed 4/9/19
8. About Electronic Cigarettes. https://www.cdc.gov/tobacco/basic_information/e-cigarettes/about-e-cigarettes.html Accessed 4/9/19
9. U.S. Department of Health and Human Services. *How Tobacco Smoke Causes Disease: The Biology and Behavioral Basis for Smoking-Attributable Disease: A Report of the Surgeon General*. Atlanta, GA: U.S. Department of Health and Human Services, Centers for Disease Control and Prevention, National Center for Chronic Disease Prevention and Health Promotion, Office on Smoking and Health, 2010.
10. CDC. Best Practices for Comprehensive Tobacco Control Programs- 2014. Atlanta: U.S. Department of Health and Human Services, Centers for Disease Control and Prevention, National Center for Chronic Disease Prevention and Health Promotion, Office on Smoking and Health, 2014. https://www.cdc.gov/tobacco/stateandcommunity/best_practices/pdfs/2014/comprehensive.pdf Accessed 4/9/19

