IT’S ABOUT A MILLION WASHINGTONIANS

Washington Wellness Training
Training agenda

- Welcome and introductions
- Panel discussion
  - Tobacco: Not an equal opportunity killer
  - Tobacco use disorder & dependence treatment
  - Protecting the next generation
- Tobacco cessation benefits and programs
- Break
- Promotional opportunities and resources; questions and comments
- Closing

<table>
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<tr>
<th>Agenda</th>
<th>Time</th>
<th>Presenter(s)</th>
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<tr>
<td>Welcome and Introductions</td>
<td>10:00 – 10:10</td>
<td>Pam Walker</td>
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<tr>
<td>Panel Discussion:</td>
<td>10:10 – 10:45</td>
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<tr>
<td>Tobacco: Not an Equal Opportunity Killer</td>
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<td>Jacob Debruge, Tobacco Prevention Equity &amp; Social Justice Consultant, WA State Department of Health</td>
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<td>Tobacco Use Disorder and Dependence Treatment</td>
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<td>Protecting the Next Generation</td>
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<td>Tobacco Cessation Benefits and Programs:</td>
<td>10:45 – 11:20</td>
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<td>Kaiser WA</td>
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<td>Panel of Speakers</td>
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<tr>
<td>Quit for Life Program Overview</td>
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<td>Kevin Klein, Senior Workforce Health Consultant, Kaiser WA</td>
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<td>Kaiser NW</td>
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<td>Jessica Richards, Client Manager, Optum</td>
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<td>UMP Regence &amp; Premiers</td>
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<td>Tammy Kappel, Project Coordinator Worksite Health and Wellness, Kaiser NW</td>
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<tr>
<td>Break</td>
<td>11:30 – 11:30</td>
<td>Pam Walker</td>
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<tr>
<td>Promotional Opportunities and Resources; Questions and Comments</td>
<td>11:30 – 11:48</td>
<td>Pam Walker</td>
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<td>Closing</td>
<td>11:55 – noon</td>
<td>Pam Walker</td>
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Tobacco and Vapor Product Prevention & Control Program

Jacob Delbridge, MPH
Tobacco Prevention Equity & Social Justice Consultant
jacob.delbridge@doh.wa.gov

Nick Fradkin, MPH, MPA
Tobacco Cessation Consultant
nick.fradkin@doh.wa.gov

Stacia Wasmundt, BA, CPP
Youth Tobacco & Vapor Product Prevention Consultant
stacia.wasmundt@doh.wa.gov
TOBACCO:
NOT AN EQUAL OPPORTUNITY KILLER
Nicotine addiction as a social justice issue

- Disproportionate tobacco use and nicotine addiction in certain communities are a result of targeted and predatory marketing by the industry
  - Cultural appropriation in imagery
    - Industry documents
  - Sponsorships
    - Athletes, musicians
  - Population-specific branding
    - American Spirits, KOOL

- **Tobacco use is still the leading preventable cause of death and disease**

- Responsible for exacerbating chronic disease conditions among disparately affected populations
  - High cancer, mortality rates
Industry marketing

- Activities linked to cultural traditions and events
  - Holidays (e.g., Chinese New Year)
  - Heritage months (e.g., Black History Month)
- RJ Reynolds’ Project SCUM
  - Gay men, homeless individuals
Swisher Sweets Artist Project (0:24)
Vapor product marketing

In 2013, blu eCigs® sponsored the Sasquatch! Music Festival in Washington, featuring a vapor lounge with appearances from top performers, an interactive social media photo booth and samples

https://youtu.be/u7H35jMEB0w
Adult smoking disparities

Adult smoking prevalence, by subpopulation
WA BRFSS, 2015-2017

Overall 2015-2017 Smoking Prevalence: 14.2%
Youth smoking disparities

10th grade smoking prevalence, by subpopulation
WA HYS, 2018
Youth vaping disparities

10th grade vapor product use prevalence, by subpopulation WA HYS, 2018

NH=non-Hispanic; LGBQ=Lesbian, gay, bisexual or questioning; * RSE is between 25% and 30% - use with caution; missing bars have an RSE >30%.
Second- and third-hand smoke exposure

- When you breathe in smoke from someone burning tobacco (like a cigarette), you are being exposed to **second-hand smoke**.
  - Second-hand smoke can worsen heart- and lung-related conditions and can cause asthma attacks in young children.

- When smoke particles settle on clothing, walls, and furniture, it becomes **third-hand smoke**.
  - Even when people don’t smoke inside, tobacco smoke particles remain on their clothes, which can even latch on to skin, and **can stay on walls and furniture for many years**, worsening chronic diseases and harming the health of children.
TOBACCO USE DISORDER & DEPENDENCE TREATMENT
(Not so) fun facts about quitting

It’s *really* hard; it could take as many as 8-10 tries.

Of adults who smoke...

- 68% want to quit
- 55% try to quit
- 7% quit

Source of statistics:
Centers for Disease Control and Prevention
Whose responsibility is tobacco cessation?

- **Primary care?**
  - Emphasis on physical health, disease treatment

- **Public health?**
  - 1-800-QUIT-NOW

- **Behavioral health?**
  - DSM-5 inclusion of tobacco use disorder
  - Focus on nicotine addiction, tobacco

- **The individual?**
  - What’s a “smoker”?
Smoking cessation reduces:
- risk of adverse health effects.
  - Cancers
  - CVD, stroke
  - COPD
  - Pregnancy complications
- risk of premature death and can add as much as a decade to life expectancy.
- financial burden, including healthcare expenditures.

Smoking cessation:
- is beneficial at any age.
- improves health status and enhances quality of life.
Cessation Treatment options (& quit rates)

- Self-help (9-12%)
- Behavioral health counseling (13-17%)
  - Face-to-face counseling
  - Telephone counseling
- Medication (19-36%)
  - Nicotine replacement therapy (NRT; 19-26%)
  - Non-nicotine Rx (24-33%)
  - Combination (26-36%)
- Counseling + medication (26-32%)
What about vapor products?

- **National Academies of Sciences (2018):**
  - Completely substituting e-cigarettes for combustible cigarettes reduces exposure to numerous toxicants & carcinogens present in cigarettes.

- **Surgeon General (2020):**
  - “E-cigarettes, a continually changing and heterogeneous group of products, are used in a variety of ways. Consequently, it is difficult to make generalizations about efficacy for cessation based on clinical trials involving a particular e-cigarette, and there is presently inadequate evidence to conclude that e-cigarettes, in general, increase smoking cessation.”
Tobacco treatment best practices

- Tobacco cessation benefit (per ACA)
  - Screening for tobacco use
  - Two quit attempts per year
    - Four counseling sessions, 10+ minutes each
    - 90-day supply of FDA-approved medication
  - No cost-sharing, no prior authorization

- Tobacco-free policy
  - No tobacco use permitted, indoors or outdoors
  - Focus on helping people quit
Department of Health resources

Washington State Tobacco Quitline
- Cognitive Behavioral Therapy
- Counseling + medication
- 1-800-QUIT-NOW / quitline.com
- Uninsured & underinsured benefit
- Medicaid/commercial benefits

Smartphone app
- Acceptance & Commitment Therapy
- doh.wa.gov/quit
- Free to all Washingtonians
- Vaping app for teens & young adults
Quitline vs. Quit For Life®

Washington State Tobacco Quitline 1-800-QUIT-NOW

Quit For Life® (e.g., 1-866-QUIT-4-LIFE)

Optum intake specialist

No insurance

No telephone counseling benefit

Premera

Kaiser NW

Kaiser WA

UMP/Regence

Transfer to KPNW coach

5 calls + NRT patch starter kit (DOH benefit)

5 calls + NRT/Rx NRT/bupropion/varenicline

Washington State Department of Health | 22
Opportunities for wellness coordinators

- Promote PEBB/SEBB cost-free treatment options
- Create supportive environments for quitting tobacco
- Promote cessation incentives
  - SmartHealth
  - Surcharge $\rightarrow$ “Rebate”
- Educate employees
  - Share information about emerging issues
  - World No Tobacco Day (May)
  - Great American Smokeout (November)
Workplace impact of tobacco use

- **Exposure to toxins**
  - Second- and third-hand smoke
  - Toxic cigarette butt litter

- **State’s costs**
  - ~$6,000 per year, per tobacco-using employee
    - $4k in lost productivity (e.g., smoking breaks, absenteeism)
    - $2k in excess healthcare costs

- **Nicotine normalization**
## Tobacco use attestations, by state agency

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<tr>
<th>Agency</th>
<th>% attested</th>
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<tr>
<td>Social &amp; Human Services</td>
<td>10.4%</td>
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<tr>
<td>Corrections</td>
<td>10.0%</td>
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<tr>
<td>Licensing</td>
<td>9.2%</td>
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<tr>
<td>Natural Resources</td>
<td>9.0%</td>
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<tr>
<td>Fish &amp; Wildlife</td>
<td>8.8%</td>
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### “Top” five agencies (with 1,000+ employees)

<table>
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<tr>
<th>Agency</th>
<th>% attested</th>
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<tbody>
<tr>
<td>Revenue</td>
<td>5.6%</td>
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<tr>
<td>Health</td>
<td>5.0%</td>
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<tr>
<td>Attorney General</td>
<td>4.7%</td>
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<tr>
<td>Ecology</td>
<td>4.4%</td>
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<tr>
<td>Washington State Patrol</td>
<td>4.1%</td>
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DOH is “walking the talk”

- Tobacco- and vapor-free campus policy
- Employee resource group (ERG)
PROTECTING THE NEXT GENERATION
Always evolving...

Ingredients in e-liquids

- 4 main ingredients
  - Nicotine
  - Vegetable glycerin
  - Propylene glycol
  - Flavors
- Other chemicals found: ultrafine particles, volatile organic chemicals, heavy metals (nickel, tin, and lead), formaldehyde
- Aerosol contains chemicals that weren’t originally added to the liquid (byproducts of heating up liquid)
Health Effects of Vape Aerosols

- Long-term health effects could take decades, though aerosol found to have health impacts

- Short term:
  - Vascular cell damage
  - Nicotine addiction (harms youth brain development)
  - Increased heart rate and blood pressure
  - Increased cough and wheeze
  - Flavoring agents and propylene glycol not tested for safety via inhalation

- Other health risks:
  - Explosions, burns
  - Nicotine poisonings
### 2018 Healthy Youth Survey Data

<table>
<thead>
<tr>
<th>Grade</th>
<th>Vapor Product Use 2016</th>
<th>Vapor Product Use 2018</th>
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<tbody>
<tr>
<td>8th</td>
<td>6%</td>
<td>10%</td>
</tr>
<tr>
<td>10th</td>
<td>13%</td>
<td>21%</td>
</tr>
<tr>
<td>12th:</td>
<td>20%</td>
<td>30%</td>
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- 56% of 10<sup>th</sup> graders reported vaping nicotine
- 21% of 10<sup>th</sup> graders reported vaping THC (marijuana)
- 55% of 10th grade youth who vaped also reported using marijuana in 2018 (compared to 7% of those who do not vape).
- 1/3 (35%) of 10<sup>th</sup> grade youth perceived great harm from using vapor products regularly
- Visit [www.askhys.net](http://www.askhys.net)
Nicotine use increasing among U.S. youth

Percentage of middle and high school students who currently use e-cigarettes and any tobacco product —
National Youth Tobacco Survey, United States, 2011–2018

- 78% increase
- 48% increase
State and Federal Changes

- State
  - Tobacco & Vapor 21 (January 1, 2020)

- Federal
  - Federal T21 legislation
  - Prioritized enforcement of specific products
    - Prohibit flavored, **cartridge-based** e-cigarettes that are popular with youth
    - Remain on market:
      - All flavored e-liquids (nicotine and non-nicotine)
      - All flavored non-nicotine pods (for closed systems/cartridges)
      - Menthol and tobacco flavored nicotine-containing pods (for closed systems/cartridges)

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Effective January 1, 2020

**21 IT’S THE LAW**

The sale of tobacco and vapor products to persons under age 21 is strictly prohibited by state law. Photo ID required upon request.

**GET FREE HELP TO QUIT**
Smartphone app: doh.wa.gov/quit  Quitline: 1-800-QUIT-NOW

Washington State Liquor and Cannabis Board

https://lcb.wa.gov/tobacco-vapor-21
World No Tobacco Day

- Global event, led by World Health Organization (WHO)
- Held each year on the last day of May
  - Sunday, May 31, 2020
  - 2020 theme: Protecting youth from industry manipulation and preventing them from using tobacco and nicotine
- SmartHealth activity/tile
- WNTD Toolkit
Washington State Department of Health is committed to providing customers with forms and publications in appropriate alternate formats. Requests can be made by calling 800-525-0127 or by email at civil.rights@doh.wa.gov. TTY users dial 711.