

TOBACCO CESSATION

Tobacco use is harmful to the body; consequently, stopping use has many health benefits. According to the National Cancer Institute, people who stop smoking and never start again lower their risk of developing lung cancer or of having lung cancer recur. Within five years of quitting, the risk of death from lung cancer decreases by 21 percent. Nearly two-thirds of deaths among current smokers were caused by cigarette smoking, compared with only 28 percent among former smokers. It is never too late to quit using tobacco. The sooner smokers quit, the more likely they can reduce their chances of getting cancer and other diseases. Within minutes of smoking the last cigarette, the body begins to restore itself.

Objective 1: By 2014, increase the percentage of Indiana residents who work in a smokefree workplace from 9 percent to 100 percent through the passage of a comprehensive smokefree air law as measured by Indiana Tobacco Prevention and Cessation Policy Tracking.

- Coordinate a group of statewide partners to mobilize for smokefree air workplace policies
- Educate local and statewide partners on effective smokefree air policy
- Implement a statewide, comprehensive smokefree air law that covers all workplaces
- Implement an appropriate evaluation plan for smokefree workplace laws (public opinion, air monitoring, compliance)

Objective 2: By 2014, increase the percentage of current smokers who attempt to quit from 50 percent to 65 percent as measured by the Adult Tobacco Survey.

- Increase the unit price of tobacco
- Institute health care systems changes recommended by the Clinical Practice Guideline for Tobacco Treatment specific to health care providers
- Increase the number of health professional programs providing comprehensive training for tobacco cessation treatment
- Promote the Indiana Tobacco Quitline (1-800-QUIT-NOW)
- Conduct mass media education campaign promoting quitting and how to get help

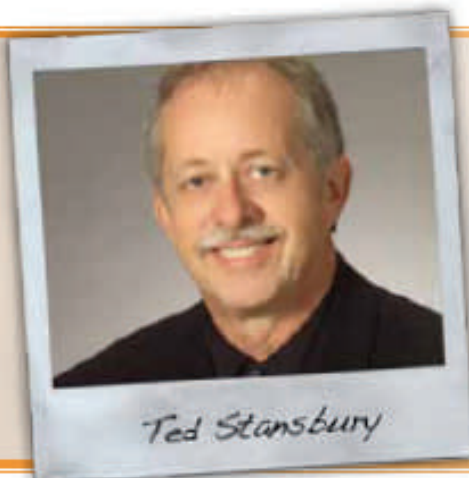


Objective 3: By 2014, decrease the prevalence of adults (18 and older) who smoke from 26 percent to 18 percent as measured by Behavioral Risk Factor Surveillance System.

- Increase the unit price of tobacco
- Make environments smokefree (school, work, home, public)
- Promote the services available through the Indiana Tobacco Quitline (1-800-QUIT-NOW)
- Ensure that employers provide recommended tobacco treatment as a covered health benefit
- Support health data surveillance systems

Objective 4: By 2014, increase the percentage of adults with health care insurance who report coverage of tobacco treatment services from 51 percent to 65 percent as measured by the Adult Tobacco Survey.

- Ensure that employers provide recommended tobacco treatment as a covered health benefit
- Promote and enhance tobacco cessation benefits for State of Indiana employees
- Promote tobacco cessation services through small employers
- Advocate that state of the art, recommended tobacco treatment benefits are provided by the Indiana Medicaid program
- Disseminate return on investment messages to influence business, legislature, and public on investing in cessation



SURVIVOR

Ted Stansbury

Thymoma

Age 60

Columbus, IN

IU Simon Cancer Center

Read Ted's story at www.indianacancer.org

TOBACCO CESSATION (CONT)

Objective 5: By 2014, increase Indiana cigarette tax from 99.5 cents to \$2 as reported by the Department of Revenue.

- Educate state policymakers on the effects of increased tobacco tax on cessation and prevention
- Improve data collection systems to better monitor tobacco product consumption

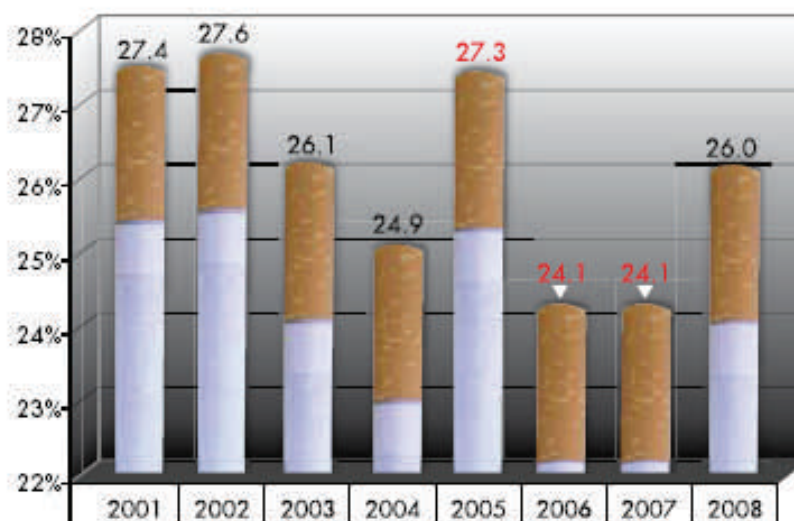
Objective 6: By 2014, increase state tax on other tobacco products from 24 percent of whole sale price to 45 percent as reported by the Department of Revenue.

- Educate state policymakers on the effects of increased tobacco tax on cessation and prevention

Objective 7: By 2014, increase the proportion of smokers who report a health care professional advised them to quit smoking from 70 percent to 90 percent as measured by the Adult Tobacco Survey.

- Increase the number of health professional programs providing comprehensive training for tobacco cessation treatment
- Institute health care systems changes recommended by the Clinical Practice Guideline for Tobacco Treatment specific to health care providers

Adult Smoking Prevalence Indiana 2001-2008



Note: Percents in red indicate a statistically significant difference between 2005 and 2006-2007
Source: 2001-2008 Indiana BRFSS