Goal 4: Healthy and Safe Communities

Goal Council Meeting

June 15, 2015
Updates

Results Washington

Wendy Korthuis-Smith, Director
Pam Pannkuk, Senior Performance Advisor
1.2 - YOUTH AND ADULT SMOKING

Department of Health

John Wiesman
Secretary of Health

June 15, 2015
1.2. Y.d: Decrease percentage of 10th graders who report smoking cigarettes in the past 30 days from 10% in 2012 to 9% by 2017

All 10th Graders
YOUTH

- Among 10th grade students cigarette smoking has declined to 8%.
- Yet, 18% of 10th graders report using an e-cigarette or vapor product.
- Some groups are smoking at much higher rates such as American Indian/Alaska Native youth and those harassed because of perceived sexual orientation.
Cigarette smoking by race/ethnicity among 10th graders
Healthy Youth Survey 2014

- Hispanic or Latino: 9%
- Multiracial*: 7%
- Native Hawaiian or Pacific Islander*: 9%
- Asian*: 3%
- American Indian or Alaska Native: 14%
- Black or African American*: 9%
- White*: 8%

* Non-Hispanic

Past 30 day use (%)

0 5 10 15 20 25
Problem/Opportunity:

Prevalence of past 30 days tobacco use by product and grade 2014 Healthy Youth Survey

Source: Healthy Youth Survey, Form B (smoking prevalence from Form B will not match overall smoking prevalence)
E-cigarette, cigarette and use of both among youth by grade

2014 Healthy Youth Survey

Past 30 day use (%)

Grade level

<table>
<thead>
<tr>
<th>Grade level</th>
<th>Dual use</th>
<th>E-cig only</th>
<th>Cigarette only</th>
</tr>
</thead>
<tbody>
<tr>
<td>8th</td>
<td>2.7</td>
<td>5.7</td>
<td>1.2</td>
</tr>
<tr>
<td>10th</td>
<td>5.7</td>
<td>12.2</td>
<td>1.8</td>
</tr>
<tr>
<td>12th</td>
<td>9.0</td>
<td>14.1</td>
<td>3.6</td>
</tr>
</tbody>
</table>

Source: Healthy Youth Survey, Form B (smoking prevalence from Form B will not match overall smoking prevalence)
E-Cigarette or vape pen use by grade

Healthy Youth Survey, 2014

<table>
<thead>
<tr>
<th>Grade</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>8th grade</td>
<td>8%</td>
</tr>
<tr>
<td>10th grade</td>
<td>18%</td>
</tr>
<tr>
<td>12th grade</td>
<td>23%</td>
</tr>
</tbody>
</table>
What are we doing to improve?

Youth smoking:

• Making sure stores don’t sell to minors.

• Policy:
  • Raising age to 21.
  • Increase licensing fees and fines for retailers.
  • Creating smoke-free policies in schools, apartments, workplaces.
1.2.A.e: Decrease percentage of adults who smoke cigarettes from 17% in 2011 to 15% by 2017
All Adults
1.2. A.e.1: Decrease percentage of persons who smoke cigarettes among low education (high school or less) from 26% in 2011 to 23% by 2016, and pregnant women from 9% in 2011 to 8% in 2016.

Adults With High School Education or Less

Pregnant Women
How are we doing?

ADULTS

• About 16% of adults smoke (BRFSS 2013).

• About 24% of adults with a high school education or less smoke (BRFSS 2013).

• About 8% of women smoked during their 3rd trimester (PRAMS 2012).

• People with less education/income and some other groups are smoking at much higher rates.
Cigarette smoking among Washington adults by education level (among age 25+) and household income

BRFSS, 2011-2013

<table>
<thead>
<tr>
<th>Educational Level (among age 25+)</th>
<th>Smoking prevalence (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>High school or less</td>
<td>25.8</td>
</tr>
<tr>
<td>Some College</td>
<td>18.1</td>
</tr>
<tr>
<td>College graduate or more</td>
<td>6.4</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Annual household income</th>
<th>Smoking prevalence (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>&lt;$35,000</td>
<td>26.3</td>
</tr>
<tr>
<td>$35,000-$74,999</td>
<td>14.9</td>
</tr>
<tr>
<td>$75,000 or more</td>
<td>8.5</td>
</tr>
</tbody>
</table>
Cigarette smoking before, during and after pregnancy

PRAMS Phase 7, 2012 data

BEFORE (3 mos): 18%
DURING (last 3 mos): 8%
AFTER (time of survey): 12%
What are we doing to improve?

Adult smoking:

- Researched-based smart phone quit app.
- Encourage private insurance plans to offer and promote coverage for services and medication.
- Reduce the number and density of tobacco retailers in low-income neighborhoods.
New, Free, Evidence-Based App!

www.doh.wa.gov/SmartQuit
# Action Plan: (1 of 2)

<table>
<thead>
<tr>
<th>Task</th>
<th>Task Lead</th>
<th>Partners</th>
<th>Expected Outcome</th>
<th>Status</th>
<th>Due Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.2.A.e Support Governor request legislation.</td>
<td>Paul Davis, Tobacco Prevention and Control Manager, Department of Health</td>
<td>ACS, ALS, Campaign for Tobacco Free Kids, AHA, Prevention Alliance, LHJs, WSAVP coalition</td>
<td>Decreased access to e-cigarettes and vaping devices by youth.</td>
<td>On Track</td>
<td>6/30/2015</td>
</tr>
<tr>
<td>1.2.A.e Support Governor request legislation.</td>
<td>Paul Davis, Tobacco Prevention and Control Manager, Department of Health</td>
<td>Governor’s Office</td>
<td>Reduction in youth smoking and reduction in low birth weight babies.</td>
<td>On Track</td>
<td>6/30/2015</td>
</tr>
<tr>
<td>1.2.A.e Utilize all 1900 free downloads available for SmartQuit, our new, free research-based Smartphone app to help people stop smoking. This program was created by the Fred Hutchinson Cancer Research Center is three times more effective than trying to quit on your own.</td>
<td>Paul Davis, Tobacco Prevention and Control Manager, Department of Health</td>
<td></td>
<td>Reduction in adult smoking.</td>
<td>On Track</td>
<td>12/21/2015</td>
</tr>
<tr>
<td>1.2.A.e Promote results of statewide survey on the number of rental units that have no-smoking policies.</td>
<td>Paul Davis, Tobacco Prevention and Control Manager, Department of Health</td>
<td>Foundation for Healthy Generations, HHS Region X, Nat’l Assoc. of Housing and Redevelopment</td>
<td>Ability to understand gaps in no smoking policies and allow renters to make informed choices.</td>
<td>On Track</td>
<td>12/1/2015</td>
</tr>
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## Action Plan: (2 of 2)

<table>
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<tr>
<th>Task</th>
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<th>Partners</th>
<th>Expected Outcome</th>
<th>Status</th>
<th>Due Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.2.A.e Assess current coverage of all health plans.</td>
<td>Paul Davis, Tobacco Prevention and Control Program Manager, Department of Health</td>
<td>Health Care Authority, Office of the Insurance Commissioner</td>
<td>Everyone in Washington will have access to evidence based cessation services including counseling and medications approved by the Food and Drug Administration</td>
<td>On Track</td>
<td>6/30/2016</td>
</tr>
<tr>
<td>1.2.A.e.1 Partner on the Safe Deliveries Roadmap Project to develop standards of optimal preconception care and disseminate to tribal health centers through the American Indian Health Commission.</td>
<td>Polly Taylor</td>
<td>American Indian Health Commission, Washington State Hospital Association</td>
<td>Tribal Health Centers adopt standards of care for optimal preconception health.</td>
<td>On Track</td>
<td>8/1/2015</td>
</tr>
<tr>
<td>1.2.A.e.1 Support the American Indian Health Commission on the implementation of the <em>Pulling Together for Wellness (PTW) Framework</em> with at least 2 tribal communities focusing on commercial tobacco prevention and control.</td>
<td>Frances Limtiaco, Washington State Department of Health</td>
<td>American Indian Health Commission</td>
<td>At least 2 tribal communities will have implemented the PTW Framework focusing on commercial tobacco prevention.</td>
<td>On Track</td>
<td>3/29/2016</td>
</tr>
<tr>
<td>1.2.A.e.1 Support implementation of the Tribal Maternal-Infant Health (MIH) Strategic Plan to address health disparities among pregnant American Indian and Alaska Native (AI/AN) women and their children in Washington.</td>
<td>Stephanie Dunkel, Washington State Department of Health</td>
<td>Health Care Authority, Tacoma-Pierce County Health Department</td>
<td>At least 5 tribes will receive Technical Assistance site visits from AIHC's Maternal Infant Health consultant to assist in implementing strategies from the Tribal MIH plan.</td>
<td>On Track</td>
<td>9/30/2015</td>
</tr>
</tbody>
</table>
Assistance Needed:

- Promote the SmartQuit App
- Support legislation raising the age to buy tobacco to 21.
- Support legislation to limit sale of vaping devices in Washington State
- Sustainable funding for tobacco prevention programs
### Moving the Needle

<table>
<thead>
<tr>
<th>Lead Agency</th>
<th>Measure</th>
<th>Improvement</th>
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<tbody>
<tr>
<td>DSHS</td>
<td>3.2.b Increase the percentage of Developmental Disabilities clients served in Home and Community Based Settings from 96.2% to 96.7% by 6/30/15.</td>
<td>96.6% of DDA(^*) clients are being served in the community as of June 11, 2015. Since July 2013, DDA has added over 4,600 individuals to 4 major programs.</td>
</tr>
</tbody>
</table>

\(^*\text{DDA} – \text{Developmental Disability Administration}\)
Next Steps

Pam Pannkuk, Senior Performance Advisor
Results Washington