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## Help to Quit Smoking, But Health Experts Say It's Not Enough

Lawmakers mull tax on little cigars to help fund discourage use of tobacco

By **Beth Fitzgerald**, January 25, 2012 in **Healthcare**

New Jersey is spending \$1.2 million this year on anti-smoking programs through the state Department of Health. Public health experts say that's not enough, and discussions are underway in Trenton to find more money to discourage the use of tobacco, whose annual statewide toll is estimated at more than 10,000 deaths and several billion dollars in healthcare costs.

"Years ago we had smoking cessation programs that were properly funded within the (health) department, and they really aren't now, said Sen. Joseph F. Vitale (D-Middlesex), chairman of the Senate's health committee. "New Jersey has really fallen behind. I don't know the exact number (the state should spend) but it should be considerably more."

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The state has a hotline smokers can call to get help quitting smoking, but Vitale said the limited budget precludes media campaigns to keep the dangers of smoking in the public mind. "We are not reaching the people we should be reaching."

Bills introduced in the last legislative session but not acted upon, S1946 and A2875, would raise taxes on small cigars that experts said are often substituted for cigarettes. "I don't know if the governor would support increasing taxes on mini-cigars, but it's worth a look for sure," Vitale said.

About 14 percent of New Jersey adults smoke, which is lower than the 18 percent national rate, according to Dawn Thomas, spokeswoman for the state Department of Health. The number has been steadily declining over the past 15 years in New Jersey, from a high of 22.7 percent in 1996, according to the Centers for Disease Control.

The department "strongly recommends that people quit smoking to improve their health, and there are a number of ways to get help," Thomas said. Smoking cessation services are provided by commercial insurers, Medicare and Medicaid. The NJ Quitline (1-866-NJSTOPS/1-866-657-8677) offers help in English and Spanish, but it's not available to the general public -- individuals must either be uninsured or on Medicaid to use it.

Tobacco prevention "is now part of an overall chronic disease strategy" at the health department, Thomas said, and "\$1.2 million is allocated for this overall initiative. The merger (of chronic disease initiatives) was the result of a reorganization, similar to what is being done at the federal level, to

move away from categorical funding and toward a more comprehensive approach to chronic disease and prevention.”

According to the state Department of Human Services, which administers the Medicaid program, New Jersey spent a total of \$2.2 million last year on smoking cessation for Medicaid members, of which \$1.9 million was for smoking cessation drugs.

The Centers for Disease Control and Prevention has cited “smoke-free air policies and taxes on cigarettes as two of the most effective ways to reduce tobacco use, and New Jersey does both,” Thomas said. The state bans smoking in public places, with the exception of Atlantic City casinos. The state’s cigarette tax, \$2.70 per 20-cigarette pack, is the sixth highest in the nation, according to the Treasury department.

Horizon Blue Cross Blue Shield of New Jersey provides its members with an online, 10-session smoking cessation program. “It is a self-driven, private way that an individual can access support and services without going into the public arena,” said Lori Leotta, a clinical social worker and director of clinical initiatives at Horizon.

When Horizon offers in-person seminars on how to quit, “a lot of the time the people who come are the family members of the smokers, and not the smokers themselves,” she said. Horizon is considering supplementing its online program with telephone counseling, through a partnership with WebMD.

Dr. Fred Jacobs helped lead the movement to pass the New Jersey Smoke Free Air Act 2006 while he was state health commissioner. In December Jacobs was appointed chairman of the Tobacco Strike Force of the American Cancer Society of New York and New Jersey. New Jersey needs to spend more on anti-tobacco programs, “and I hope the legislature will take this on,” Jacobs said.

Assemblywoman Annette Quijano (D-Union) is the prime sponsor in the Assembly of a bill to raise the tax on little cigars to parity with cigarettes. The nonpartisan Office of Legislative Service estimates it would raise an additional \$5.95 million to \$8.70 million in taxes annually, even though OLS projects sales of little cigars will decline as the prices rise. OLS estimated that raising the taxes on little cigars would raise the price from between \$2.50 to \$3.40 a pack, to between \$4.70 and \$5.40 a pack.

“Little cigars are sold alongside cigarettes and they are the same in every aspect except the taxes,” Quijano said. “I think it is important that we treat similar tobacco products the same way.”

Quijano said she will re-introduce the bill in this session, and will seek to include language that “a percentage of the money raised would go to increase funds for smoking cessation.” It may be difficult to get that done, she conceded. Right now, tobacco taxes go into the general state fund “and there are a lot of things we need to fund.”

New Jersey collected \$769.2 million in tobacco taxes in the 2011 fiscal year, according to the treasury department. Of that revenue, \$145.5 million was dedicated to pay interest on bonds issued by the state several years ago that were securitized by future tobacco tax revenue. Another \$396.5 million went to the state’s Health Care Subsidy Fund, which compensates hospitals for a portion of the charity care, or uncompensated care they provide to the uninsured and indigent patients. That left \$227.2 million of tobacco taxes that went into the budget as general revenue to fund state government.

The Centers for Disease Control and Prevention recommends that New Jersey spend \$119.8 million this year on tobacco prevention. Several years ago, when the economy was strong, New Jersey was spending about \$30 million a year, Jacobs said. "Now the state is spending an extraordinarily small amount of money. If the legislature wants to do something about this, and I think they absolutely should, then they need to pass bills that target revenue from the tobacco products and direct it to tobacco control and prevention."

Jacobs estimated that raising the taxes on small cigars and chewing tobacco, and increasing the cost of a retail license to sell tobacco products, "would raise tens of millions of dollars, some of which could be used to support tobacco control, and some of which could be put back into the general (state budget) fund."

Jacobs chairs the board of NJ-GASP (Global Advisors on Smokefree Policy). The group's executive director, Karen Blumenfeld, said GASP is advocating for anti-smoking legislation, including ending the casinos' exemption from the state's indoor smoking law, prohibiting smoking in cars when children under 16 are present, and prohibiting smoking in most public parks and recreational areas. "People who do smoke and who want to quit say that a smoke free environment helps them quit," she said.

It is notoriously difficult for adults to quit smoking, so more resources must be focused on programs that discourage teenagers from starting, said Jacobs, a pulmonary physician who spent most of his medical career at Barnabas Health, retiring at the end of 2011 as director of the Barnabas Quality Institute. "If you don't start smoking by the age of 19 or 20, the odds are overwhelming that you will never start at all."

Unfortunately, Jacobs said, the state's tobacco control cutbacks have axed funding for what he considers one of the best programs to combat teenage smoking -- the extracurricular high school program REBEL, which stands for "Reaching Everybody by Exposing Lies."

The state used to fund stipends for the teacher advisers to high school REBEL clubs, and at one point there were 12,000 REBEL members across the state, Jacobs said. Some schools kept REBEL going despite the loss of state support, but many of the clubs have disbanded. REBEL is effective, Jacobs said "because the message kids mainly believe is the message they get from their peers. These kids were bringing information about smoking to their classmates, in school, all the time, every day."

Marge Elberson, a nurse and registered tobacco specialist at Horizon, said the state has not been able to continue with the REBEL program as it had in the past because of reduced funding but some schools "are continuing to provide the program on their own because it was so worthwhile."

One of those schools is Franklin High School in Somerset County. Stacy Hale, student assistance coordinator in the school's counseling department, has been the adviser to REBEL for six years. When state funding cuts eliminated her \$1,000 a year stipend two years ago, she continued to run the program on a volunteer basis. The school has since picked up the program and now funds her work.

"REBEL actually educates teens about the dangers of smoking: how big tobacco companies, in order to get new consumers, target teens because they are more vulnerable," Hale said.

Franklin's REBEL members run monthly programs for their classmates, and bring an anti-smoking

puppet show to elementary schools. “We are helping younger kids see the dangers in smoking so that they don’t even think about trying smoking, said 17-year-old Cierra Eason. “We tell them about the health risks and the media influence -- how the media shows them teenage kids who are popular and skinny and pretty. A lot of adults started smoking when they were teenagers, and now they can’t stop. If we can get to teenagers before they start, it won’t be a problem.”

Chelsea Clennon, 17, said she only had one friend who smoked, “and he actually quit after he and I had a conversation about smoking.”

Several of the students know first-hand the dangers. Kayla Williams, 17, said one of her uncles died last year at age 67 from lung cancer. He had started smoking at age 12. “I will never try smoking, I will never start,” she said. “Seeing him struggle and be in so much pain for four years that he had cancer, it was so sad.”

Porshia Boyd, 17, said REBEL focuses on the long-term health risks of smoking—something that young people find difficult to grasp. She has been able to influence children and teenagers, but has little success convincing her adult relatives to quit.

Eason believes she can help discourage her peers from smoking because “teenagers listen to their friends.”

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