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## Clearing the Smoke: Fighting Tobacco Use to Save Lives and Billions of Healthcare Dollars

*Part of a series exploring issues  
from The Community Foundation's  
Aspire Arkansas report.*





# Don't Start Smoking or Quit Now!



I was amazed to learn that, according to the Arkansas Department of Health, the number of people who die from tobacco-related illnesses in our state has increased from 4,900 when we published the last *Aspire Arkansas* report in 2013 to 5,800 people each year.

Using tobacco at a young age has been shown to increase the likelihood of lifetime smoking and the risk for tobacco-related illness and death. So it is as important to prevent starting the smoking habit as it is to help smokers quit.

Our *Aspire Arkansas* report points out some significant differences by region in the number of people who were smoking in 2010 — we find fewer smokers in the northwest, southeast and east central and a large number of smokers in much of the western half of the state.

Perhaps modeling tobacco cessation programs from areas with successful efforts can help combat the problem in other parts of our state. That's why Arkansas Community Foundation wants to share information on the health risks of smoking and the progress that is being made by nonprofits and healthcare programs in Arkansas.

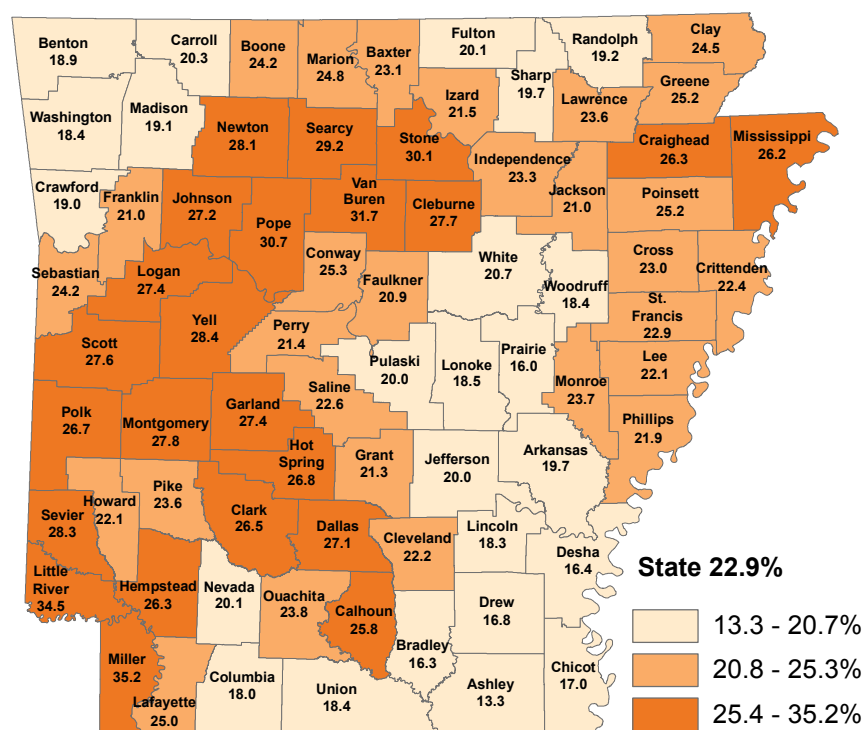
Heather Larkin  
President and CEO

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## smokers

*Percent of Adults Reporting Currently Being Cigarette Smokers; Arkansas by County, 2010*



Source: Arkansas Department of Health, Behavioral Risk Factor Surveillance System Survey





*Ron Burnett helps employees at Oaklawn Racing and Gaming cut their smoking habits. Burnett is certified through the American Lung Association's Freedom From Smoking cessation program.*

# Cessation Programs Support Those Who Want to Quit

**Benefits to breaking the habit are wide-ranging and far-reaching**

By Kimberly Dishongh

**A**t Oaklawn Racing and Gaming, timing is key. Smoking cessation, even there, has to be done at the right pace. When smokers are ready and willing to quit, EMS/Wellness Director Ron Burnett helps speed up the process.

Burnett, who has worked on an ambulance since 1981, has told employees for years about the healthcare havoc he has seen wrought by cigarettes, all in an attempt to get them to stop smoking.

Last year, he became certified through the American Lung Association to lead Freedom from Smoking classes. Oaklawn absorbs the costs — \$350 for Burnett's training and \$25 per participant for materials. It's in the company's best interest. Smoking, after all, increases health risks, which in turn raises insurance costs.

"Oaklawn strives to help the employees and to help keep our insurance rates down," Burnett said. "Our insurance premiums



have not increased in the last two years, and we're working on year number three and that has been part of the factor here."

Pam Mullenix, Oaklawn's facility manager, had smoked for 32 years when she started Freedom from Smoking and wrote her quit date — May 5, 2015 — on her calendar. The night before, she snuffed out her last cigarette.

"I woke up that morning, and I haven't had one since," said Mullenix. "My family supported me, but I don't think I would have been as successful if I didn't have the support system at work. They really held me accountable."

Freedom from Smoking has a 57 percent quit rate, according to Amy Ellis, regional director of health promotions for the Lung Association. At Oaklawn, six participants quit last year and three have quit so far this year.

"He definitely checked up on me," Mullenix said. "You have those moments that something will trigger and it's different for everybody. For me, it would be when I was cleaning my house and I would want to take a break and sit on my front porch and smoke a cigarette. That's when I would send Ron a text and say, 'Man, I'm really wanting one right now.' He would say, 'Don't even think about it.'"

Stephen Del Rio, director of Lifeway International in Little Rock, uses the possibility of financial savings, like those touted by Oaklawn, in his approach when he visits companies, pointing out the inherent costs of less-healthy employees who also take frequent smoke breaks.

"We want to be preventive and the way to do that is to create policies because that changes the social norms," Del Rio said.

Employees of companies large enough to offer smoking cessation services are, of course, not the only folks who need help quitting. Del Rio points to Ed Rhodes of Jacksonville as someone who targets another group.

Rhodes, a long-time volunteer for the American Lung Association, leads support groups in churches, community centers and other public places, for veterans who have often smoked for many years.

"I had a heart attack at 57 years old and during that ER visit I was told by my doctor that smoking caused my problem so I quit smoking right then and I went through six weeks of rehab after that during which time I noticed that several people had been through the same surgeries and treatments that I had were getting in their cars after rehab and smoking on their way home," said Rhodes. "It's such a strong addiction and people don't realize it because it's so accepted in our culture."

He offers classes free of charge, using materials he's paid for on his own. "People who want to quit, who really want to quit, they're desperate – they're trying hypnosis, acupuncture, pills, gum ... and you know, so did I," said Rhodes.

He quit cold turkey, but doesn't recommend that for others. "If something like that happens to you, if you're scared for your life, that's kind of enough. But if you're just trying to quit because you want to, it's really tough because the addiction is so strong. I

*Oaklawn Racing and Gaming EMS/Wellness Director Ron Burnett champions tobacco-free lifestyles for employees as part of a company-wide overall health and wellness campaign.*



Approximately three in 10 people who utilize the telephone quitlines will have successfully quit when we follow them up at about seven months after they start the program.

– Arkansas Department of Health





recommend crutches. It's something that takes a lot of encouragement and planning on your part, and a change of lifestyle, really."

Tristan Traylor, diversity outreach coordinator with the Center for Healing Hearts and Spirits funded by the Minority Initiative Sub-Recipient Grant Office housed at the University of Arkansas at Pine Bluff, reaches out to a different group. He uses 40 Days to Freedom, a scripture-based smoking cessation program geared toward African-American church congregations across the state.

Traylor insists that all participants in the program also enroll in the Arkansas Tobacco Quitline, currently administered by the National Jewish Hospital in Denver. The Quitline offers both phone and online support, including nicotine replacement products at no charge.

The Arkansas Legislative Council voted in June not to renew the \$1.8 million Quitline contract, but agreed to extend the contract by one month and will reconsider the matter at its August meeting.

Traylor offers smokers a \$25 gift card for signing up and going through an initial evaluation with 40 Days to Freedom, and another \$25 gift card for completing the program. The groups are small — at one church only three people came forward — but his success rates thus far have been good. All three gave up cigarettes, Traylor said.

Oaklawn, too, offers financial incentives for quitting.

Mullenix was eligible for a non-smoker bonus this year at Oaklawn, as was Austen Radimer, who works in Oaklawn's maintenance department. Radimer was advised not to smoke for a week after dental work, and after suffering through the night sweats and nightmares of nicotine withdrawal, he wasn't turning back.

The \$100 he received last year for quitting — and that he will get every year for the foreseeable future unless he resumes his habit — was nice. But he sees even more financial benefit from not buying a pack of Marlboro Lights every day.

"They were \$6 or \$7," Radimer said. "I guess I've saved more than \$2,000." He can walk further, faster than when he was a smoker without getting winded.

"I can smell the shampoo when I put it in my hair now," he said. "I could not smell the shampoo before."

*The Arkansas Legislative Council voted in June not to renew the \$1.8 million Quitline contract, but agreed to extend the contract by one month and will reconsider the matter at its August meeting.*



# How to Help Young Arkansans Speak Out Against Tobacco Use



“Today’s teen-ager is tomorrow’s potential regular customer”: an alarming statement that was included in a 1981 report from researcher Myron E. Johnston for Philip Morris International, an American global cigarette and tobacco company. The report emphasized that tobacco sales rely heavily on young smokers because they are an essential source for replacement smokers.

This statement, despite its declaration over 30 years ago, is still relevant today as “Big Tobacco” companies target younger populations with their powerful advertising strategies. In an effort to refute these messages, organizations like Campaign for Tobacco-Free Kids and The Truth campaign have popped up on a national scale in an attempt to inform and encourage youth to stay away from tobacco.

But what’s happening in Arkansas? Over the past 13 years, there has been a movement to inform and motivate our state’s young people to speak out against tobacco use. Genine Perez and her student leaders of the Arkansas Youth Leadership Initiative, now a 501c3 that was once a program of Arkansans for Drug-Free Youth, are working diligently to bring awareness to our state’s teens.

One of the Arkansas Youth Leadership programs is The YES (Youth Extinguishing Smoking) Team, a statewide “pledge” program that any student can join by promising to stop smoking in addition to speaking out against the dangers of tobacco. They’ve seen a growth in membership and have at least one YES member in 70 of Arkansas’ 75 counties. With a meaningful message, one that

counters the alarming statement above, these youth leaders have been rallying teens around their “I Am Not a Replacement” campaign that works alongside their Arkansas Tobacco-Free Kids “Kick Butts” Day.

Getting young people to have buy-in, especially on a topic like quitting tobacco use, can be tough. Genine and her student leaders have valuable input on how to successfully inform and engage students on such a topic:

- 1 Meet youth where they are.** The Arkansas Youth Leadership Initiative owes much of its success to its youth-led mission. While Genine provides the administrative support and lends an experienced hand, she stresses the importance of deferring to the youth leaders when considering new programs and initiatives. The importance of a truly youth-led organization provides, as Genine would say, an “unapologetically transparent” program to which youth can relate. They also use mediums like social media and texting to keep participants up-to-date on current happenings.
- 2 Inform without shame or judgement.** Students face enough pressure from peers as it is. Rather than criticizing their unhealthy choices, AYLI focuses more on educating youth about the dangers of tobacco and drug use and shines light on steps they can take to empower themselves to stop.
- 3 Keep it real.** Kharli, one of AYLI’s long-time student leaders, believes that keeping the message genuine and relevant has been a key to their success. She insists that what young people really need is the ability to relate and connect. Face-to-face interaction that includes real-life stories without big intimidating words have been vital as she travels from school to school to make presentations. Kharli says that because she can “speak the language” she can help students realistically relate to AYLI’s core message.
- 4 Empower youth to so they can find their voice.** Genine, Kharli and the rest of the AYLI team believe that their mission has become much larger than just smoking cessation among youth. As the program has developed, the team has realized that student members thrive when they’re given an opportunity to find their voice on important topics like tobacco, drug and alcohol abuse. As they’ve deepened their





*This past March, more than 1,000 youth members of the Arkansas Youth Leadership Initiative marched silently to the Capitol donning signs that read “I am not a replacement” to raise awareness of the dangers of tobacco.*

involvement, new opportunities like YES On the Hill have arisen. This summer program immerses students in the legislative process so they can learn how to influence policy change regarding tobacco use in Arkansas.

**5** **Connect youth with other youth so they stay engaged.** Kharli and Genine both know that to be successful in spreading the word about the dangers of tobacco, they have to keep connecting AYLI’s young

leaders with other students. This connection and relationship building will successfully grow their network to further their cause: growing a youth-led, grassroots counter-marketing group that educates about Big Tobacco propaganda and the dangers of tobacco use.

Students can learn more about AYLI’s YES Team and make a pledge to “join” the stand against tobacco use by visiting [yesteam.org/joinnow](http://yesteam.org/joinnow).





*“Smoking is the single most preventable cause of death in the US, yet it causes more deaths than cocaine, AIDS, alcohol, heroin, fire, suicide and homicide combined.”*

*— Dr. Valandra L. German*

# Social and Economic Costs of Smoking

## Billions Spent for Tobacco-Related Healthcare

**S**moking and other forms of tobacco use kill more Arkansans than the other top five killers combined, according to the Arkansas Department of Health. The latest data shows 5,800 people die each year from tobacco related illnesses, up from 4,900 in 2010.

While 22.9 percent of Arkansans smoked in 2010, ranked fourth highest in the nation, the percentage of smokers has significantly declined in the past 30 years, according to the Arkansas Department of Health.

“If you go back to the late ‘90s — ‘97 or ‘98 – the rate of youth using tobacco in the last 30 days was 43 percent,” said J. Gary Wheeler, MD, MPS, Chief Medical Officer of Arkansas. “In our most recent survey the percentage of youth using tobacco is 15.7 percent. That’s a huge drop.” He said the percentage of adults smoking is going down slower, but he is seeing drops every year.

The economic impact of tobacco use on Arkansans remains steep. Tobacco use is responsible for an estimated \$1.2 billion each year





in direct medical costs in our state. The cost to each household in federal and state taxes comes to about \$1,060 per household, according to ADH.

“Let’s say you’re sick with a tobacco-related illness, the thing is you don’t go to work for a few days so when you factor in the productivity loss — and also you go on smoke breaks — that’s another \$1.7 billion just for Arkansas. So if you add that up, that’s \$2.9 billion of wasted value attributable to tobacco,” said Dr. Wheeler. “And if you remember, our state budget is only about \$5 billion, so we’re talking about an incredible amount of money that we lose every year to tobacco use.”

Research here in Arkansas is battling this huge public health menace. Valandra L. German, DrPH, MPH, Director and Associate Professor for the Minority Research Center on Tobacco & Addictions at University of Arkansas at Pine Bluff, said MRC offers funding that supports emerging scholars and researchers engaged in evidence-linked research that directly contributes to the elimination of smoking and tobacco use among minority populations. MRC is funded by the ADH Tobacco Prevention and Cessation Program.

“Through research and work with community partners, we are making progress in our state,” German said. “Arkansas was the first state to have a law for smoke-free cars when children are passengers and the first to prohibit smoking on medical and psychiatric facility grounds.” Data on healthcare risks was a fundamental component to creating those laws.

A current MRC study, Minority Arkansans Secondhand Smoke Exposure Study (MASSES), measures the attitudes and beliefs about the current laws related to tobacco use and whether or not portions of the current law have support to be revised. Secondhand smoke exposure, especially bars, restaurants, all workplaces, within hotels or motels, apartments, and inside motor vehicles with children present are all areas of concern. The results of the survey will provide information about minority Arkansans support and attitudes toward new and stronger laws protecting citizens from secondhand smoke.

Approximately 490 non-smokers die from secondhand smoke each year, according to the ADH. The Coalition for a Tobacco Free Arkansas, a network of statewide organizations with a shared mission to prevent the use of tobacco in our state, says there is no safe amount of exposure to secondhand smoke; secondhand smoke is chemically similar to mainstream smoke.



A considerable number of people are exposed to secondhand smoke on a daily basis, resulting in cancer, respiratory disease and infectious diseases in people of all ages and from all walks of life. Between \$15 million and \$45 million is spent each year to combat children’s health problems caused by secondhand smoke in Arkansas.

“We know that the younger you are when you start using nicotine, the harder it is to quit on down the line,” Dr. Wheeler said. “If you can make it to age 24 without using tobacco products, you’re probably never going to use tobacco. Most people start well before that.” Current data shows 60 percent of smokers begin by age 14 and only one in 10 smokers become addicted after age 19.

“Smoking is the single most preventable cause of death in the US; yet it causes more deaths than cocaine, AIDS, alcohol, heroin, fire, suicide and homicide combined,” German said. “What should Arkansas leaders do? I believe we need funding to continue to provide research, prevention and education.”

**“Arkansas was the first state to have a law for smoke-free cars when children are passengers and the first to prohibit smoking on medical and psychiatric facility grounds.”**

—Dr. Valandra L. German

# ARKANSAS **VIEWPOINTS**

## “Given the Health Risk to Arkansans, Are We Taking the Right Actions in Our State to Stop Young People from Smoking and Help Smokers Quit?”



By Katherine Donald  
Executive Director  
Coalition for a Tobacco Free Arkansas

**S**moking, the leading cause of preventable death in the U.S., kills more than 400,000 smokers annually, including 5,800 Arkansans. In Arkansas, 24.7% of the adult population and 15.7% of high school students smoke. The national average is 15.1% and 10.8% respectively. Over 80% of all smokers start before the age of eighteen, the majority are hooked before they reach adulthood.

Smoking costs Arkansas \$1.21 billion annually in health care dollars; \$293.1 million comes from Medicaid. Considering the mentioned and other facts, our elected and appointed officials should invest more, not less, in tobacco control in Arkansas to protect our kids from tobacco use. They should support higher taxes on tobacco products, pass comprehensive clean indoor air laws, fund a hard-hitting statewide tobacco prevention media campaign, and support a well-funded cessation program, including a quit-line, staffed by experts in the field, to help smokers quit. For every one-dollar Arkansas invests in its quit-line, the people of Arkansas save \$28.00 in future healthcare costs.

We cannot let up in our fight against an industry that views our kids as “replacement smokers”. We must continue to aggressively work to save lives and the state dollars. We must end the tobacco epidemic.



By Talaya Jones  
Student Body President  
McClellan High School, Little Rock

**I**would have never guessed that tobacco use was identified as one of Arkansas’ major health risks — because I never hear about it. I can distinctly recall one time that I was encouraged to Stamp Out Smoking: at a middle school community presentation.

Every now and then I may see an S.O.S. commercial around midnight but that’s only because I sleep with my TV on. We are not spreading the word because we are sending the wrong messages. The government is saying “we don’t want you to smoke but as long as you aren’t within 25-feet of an entrance, then carry on.”

When I do hear S.O.S. messages, second-hand smoke fails to be stressed. Perhaps we should be saying, “If and when you smoke you aren’t just killing your lungs — you are also damaging the people around you who walk through your path of smoke.”

If we really want to get our citizens on board with stopping smoking, we need to have a more hands-on approach. A few commercials late at night and a red ribbon week isn’t getting it done.



**Between \$15 million and \$45 million is spent each year to combat children’s health problems caused by secondhand smoke in Arkansas.**

— Coalition for a Tobacco Free Arkansas





# E-cigarettes May Lead to Use of Other Tobacco Products

## New USDA Regulations Limit Access Among Teens

E-cigarettes vaporize a fluid usually containing nicotine and a flavor component. Touted initially as a method to stop smoking, vaping has become a gateway to use of combustible cigarettes and a hobby for a growing number of people in Arkansas and the nation, with older teens and young adults as a significant demographic.

A February article in the *Arkansas Traveler*, the University of Arkansas student newspaper, described competitions held at northwest Arkansas hangouts among hobbyists to see who can blow smoke rings the most distance and density.

The first kiosks selling e-cigarettes in Arkansas began operation in 2009, according to Katherine Donald, Executive Director of the Coalition for a Tobacco Free Arkansas. About a year after that, the operations moved from kiosks to store fronts.

“Then the major tobacco companies stopped speaking against e-cigarettes and bought up the companies,” she said. “Since then, the tobacco companies have used the same model to market e-cigarettes as combustible cigarettes, a marketing model that has been proven to attract kids.”

A joint study by the FDA and the National Institutes of Health showed that in 2013-2014, nearly 80 percent of current youth tobacco users reported using a flavored tobacco product in the past 30 days – with the availability of appealing flavors consistently cited as a reason for use.

Another concern with e-cigarettes is adults who quit combustibles are taking up e-cigarettes because they see it as a safe habit. This can lead to the re-addiction to nicotine, according to Donald.

The journal *Pediatrics* this June published a study concluding that older teens who try electronic cigarettes have six times the odds of trying regular cigarettes within two years than those who never puffed on the devices.

The lead author, University of Southern California researcher Jessica Barrington-Trimis, said she is concerned that kids who experiment with e-cigarettes may be moving to other types of tobacco products that are potentially more harmful. The research findings are based on surveys conducted by USC involving about 300 11th and 12th students 18 plus in southern California. In 2014, about half of the students said they had at least tried an



e-cigarette. About 40 percent of those who had tried an e-cigarette by the previous year had tried regular cigarettes by the time of a 2015 follow-up. That compared to about 11 percent of those who said they had not tried an e-cigarette in the prior year's survey. Barrington-Trimis said the high risk among teens committed to not smoking “suggests this is not just occurring among kids who intended to smoke anyway.”

“E-cigarettes are definitely a gateway drug to combustible cigarettes,” Donald said. “Kids who were set to be tobacco free are starting to use nicotine with e-cigarettes and moving to combustibles.”

A new U.S. Food and Drug Administration regulation, which went into effect Aug. 8, restricts youth access to e-cigarettes and more traditional tobacco products, including cigars, pipe tobacco and hookah tobacco:

- Not allowing products to be sold to persons under the age of 18 years (both in person and online).
- Requiring age verification by photo ID.
- Not allowing the distribution of free samples.

“We have more to do to help protect Americans from the dangers of tobacco and nicotine, especially our youth. As cigarette smoking among those under 18 has fallen, the use of other nicotine products, including e-cigarettes, has taken a drastic leap. All of this is creating a new generation of Americans who are at risk of addiction,” said U.S. Health and Human Services Secretary Sylvia Burwell when the new regulations were announced.



ARKANSAS  
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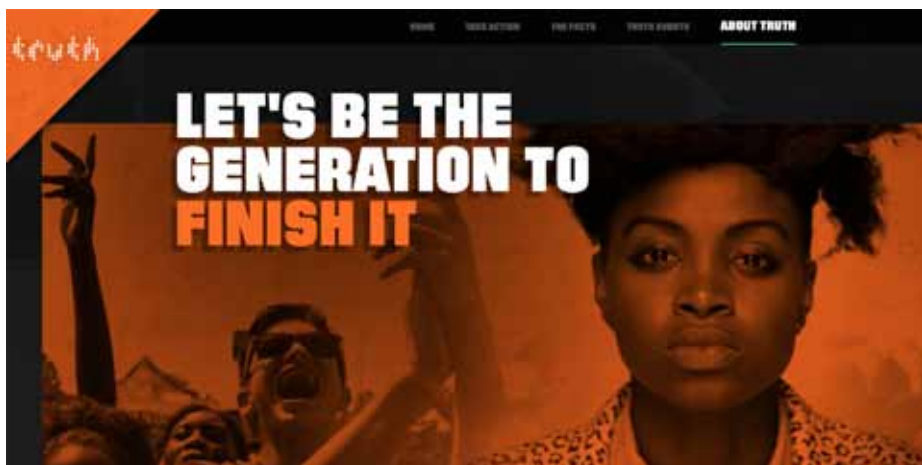
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# Share Your Ideas on Fighting Tobacco Use



Throughout this issue of ENGAGE, you will see how Arkansans are battling the state's single biggest healthcare menace — tobacco use. The cover story on smoking cessation beginning on Page 2 follows an employee-based program at Oaklawn Park in Hot Springs. Engaging youth in stop-smoking behaviors is the subject of a how-to story on Page 5.

Find out more about the social and economic cost of smoking on Page 7 and read Viewpoints on whether the state is on the right course on Page 9. Information on new e-cigarette regulations and the problem of e-cigarettes as a gateway to combustibles is found on Page 10.

You can join the fight. Go to [thetruth.com/take-action](http://thetruth.com/take-action) to submit your own ideas on how we can end smoking. It's free, and your idea could end up on the website or be just the thing that helps others quit or never start smoking.

