

Tobacco Prevention and Education Program:

Empowering Communities to Drive Tobacco Prevention Efforts

Program Report 2023–2025



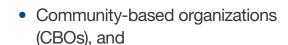
Executive summary

Oregon's Tobacco Prevention and Education Program (TPEP)

The Oregon TPEP supports statewide commercial tobacco prevention and quit programs.

Commercial tobacco products include cigarettes, cigars, chewing tobacco and electronic cigarettes (e-cigarettes). TPEP funds and collaborates with:

- Local public health authorities (LPHAs)
- Tribal partners



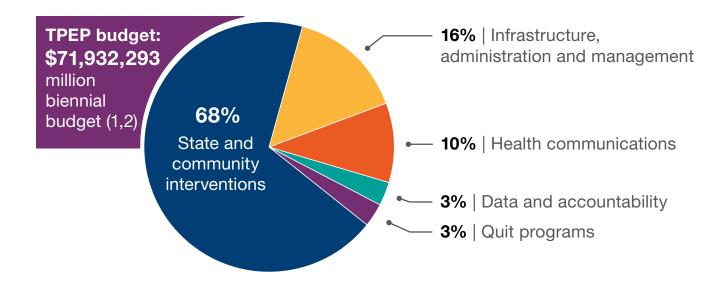
Regional health equity coalitions (RHECs)

TPEP integrates community expertise, Tribal practices and evidence-based approaches into the following areas:

- State and community-led interventions
- Health communications
- Support to help people quit

- Data and accountability, and
- Infrastructure, administration and management

TPEP allocates funds based on best and promising practices to decrease tobacco harm. Each program area is crucial to meeting this goal.



Tobacco use is the leading cause of preventable disease and death in Oregon.

Tobacco use in Oregon

Tobacco use and its resulting health problems are not evenly split across Oregon's communities. For decades, the tobacco industry has directed higher amounts of advertising, discounts and displays of their addictive products toward:

- People facing systemic racism and discrimination
- People who are stressed or struggling
- People with lower incomes
- · People living with mental illness or addiction, and
- Youth.

A combination of challenging daily experiences and high-pressure marketing tactics can push people to use tobacco to cope. Together, these perpetuate unjust differences in tobacco use rates (3) and higher rates of tobacco related death and disease. (4) TPEP will continue to work with partners to end these disparities.

Tribal Tobacco Prevention Programs (TTPP)

TTPP engage communities to promote Traditional Tobacco and discourage Commercial Tobacco use. Recent accomplishments include:

- Implementing the Seed2Ceremony Program
- Taking part in the Sacred Tobacco & Traditional Medicines Gathering Conference
- Providing quitting support
- Updating policies to address vaping, and
- Requiring program coordinators to have credentials as Certified Prevention Specialists.

Oregon's Tobacco Prevention Education Program (TPEP) empowers communities to drive tobacco prevention at the local and state levels.

TPEP Report 2023–2025

Tobacco use in Oregon

The Oregon TPEP supports statewide efforts to prevent and reduce tobacco use. In this report, tobacco refers to commercial products made and sold by tobacco companies. Tobacco products include cigarettes, cigars, electronic cigarettes and other products. Electronic cigarettes are also known as e-cigarettes, e-cigs, vapes, and vape pens. Commercial tobacco does not include traditional tobacco used by American Indian and Alaska Native persons for sacred or ceremonial purposes.

In 1996, Oregon voters raised tobacco prices and dedicated funding to a comprehensive TPEP. In 2020, Oregon voters increased tobacco taxes again to fund Medicaid and center health equity in tobacco prevention.

Oregon's Tobacco Prevention and Education Program:

- Fosters smoke-free workplaces and outdoor spaces
- Changes how health systems manage tobacco use
- Supports community efforts to reduce tobacco use, and
- Addresses the drivers of unfair tobacco-related health differences.

Since TPEP began in 1996, community solutions have contributed to a 46 percent decline in the number of adults who smoke in Oregon. (3) TPEP strategies also helped reduce per capita cigarette sales by more than 70 percent. (5)

Despite progress, tobacco use is still the number one cause of preventable death and disease in Oregon. Tobacco is a major contributor to chronic diseases; these include asthma, heart disease, stroke, many cancers and diabetes. (6)

Health problems from tobacco use are not evenly distributed across Oregon communities. For decades, the tobacco industry has channeled higher levels of advertising, discounts and displays of their dangerous products toward:

- People facing systemic racism and discrimination
- People who are stressed or struggling
- People with lower incomes
- People living with mental illness or addictions, and
- Youth.

A combination of challenging daily experiences and high-pressure marketing tactics can push people to use tobacco to cope. The communities the tobacco companies' market to may face challenges accessing culturally relevant services. Their homes and workplaces may not be protected by policies that promote healthier environments. These strains and repeated exposure to aggressive marketing contribute to more health problems. This includes higher rates of tobacco-related death and disease (4).

Empowering communities – TPEP Council

Two groups guide how TPEP uses tobacco tax revenues for tobacco prevention and quit programs in Oregon. These groups are:

- The Tobacco Reduction Advisory Committee (TRAC), and
- The former Ballot Measure 108 Community-Based Organization (CBO) Advisory Group.

The Oregon Health Authority (OHA), local public health authorities (LPHAs), community-based organizations (CBOs), regional health equity coalitions (RHECs), and advocacy organizations recently made recommendations for combining these groups to OHA leadership. The integrated group will elevate local expertise and experiences to shape tobacco policy, program and budget strategies.

Locally led media campaign drives action

OHA partnered with CBOs, LPHAs and RHECs to form the Addressing Commercial Tobacco (ACT) Advisory Committee. Together, they developed a mass media campaign to address tobacco use in Oregon. The Smokefree Oregon campaign, "Imagine Oregon without Big Tobacco," launched in the spring of 2024. It highlighted tobacco as a community issue. It also promoted collective action for community-based solutions. The campaign is a great example of collaboration between OHA and tobacco prevention partners.



Tribal Tobacco Prevention Programs (TTPP)

TTPP actively engage with their local communities. Carrying out Oregon's Tribal Based Practices is a big part of this work.

TTPP educates the public about Traditional Tobacco and discourage Commercial Tobacco use at the same time. This biennium, they have accomplished this by:

- Implementing the Seed2Ceremony Program with community members (Traditional Tobacco)
- Taking part in the Sacred Tobacco & Traditional Medicines Gathering Conference
- Supplying quit kits to various population groups within the community
- Providing referrals for tobacco quit programs
- Updating existing tobacco prevention policies to include vaping, and
- Forming and keeping community partnerships at the local level.

Tribal programs continue to expand their quit programs and prevention work through staff hiring and credentialing. For the first time in Oregon's Tribal tobacco prevention history, program coordinators must become Certified Prevention Specialists.

How TPEP works

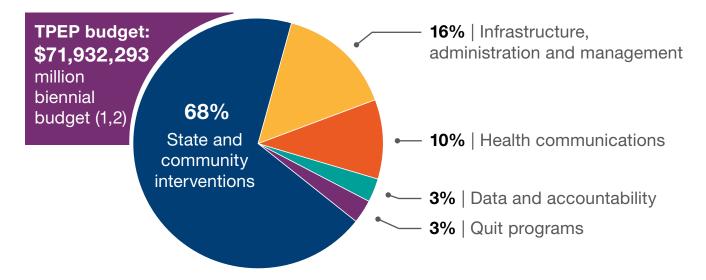
TPEP works closely with LPHAs, Tribal partners, CBOs and RHECs to prevent tobacco-related deaths across Oregon. Over 65 percent of Oregon's TPEP funding goes directly to communities. Expanded tobacco taxes and a new TPEP funding model increased support for Tribes, LPHAs and CBOs.

TPEP integrates community knowledge, Tribal practices and evidence-based approaches into five key areas:

- State and community-led interventions: Creating spaces where everyone can live tobacco-free and youth are less likely to start using tobacco.
- **Health communications:** Developing media campaigns and tools that prevent tobacco use and help people quit.
- **Support to help people quit:** Ensuring access to culturally appropriate support. This includes medicines, quit lines, local partners and health care systems.
- Data and accountability: Learning about local needs and guiding future plans by tracking tobacco use and program effects.
- Infrastructure, administration and management: Ensuring leadership, accountability and oversight for all program goals and spending.

TPEP budget

TPEP allocates funds based on the Centers for Disease Control and Prevention (CDC) comprehensive tobacco control program model. With new tobacco tax funding, TPEP has raised local investments and built on their assets to lower nicotine addiction. Oregon's innovative approach maintains comprehensive, sustainable and effective support for partners while elevating local expertise. The program areas work together to achieve the overall goals.



State and community-led interventions

TPEP funds LPHAs, all nine federally recognized Tribes, RHECs and CBOs across Oregon. These partners focus on prevention, education and culturally relevant quit services. They also address why tobacco harms Oregon communities unequally. TPEP provides tailored technical support to all local partners.

Public awareness and education (health communications)

TPEP works with community partners to develop effective statewide media campaigns. They use data and best practices to highlight tobacco harms and quit services. TPEP also helps communities amplify local prevention successes and stories about the impact of tobacco.

Support to help people quit

TPEP provides resources for partners to offer culturally relevant quit services. TPEP has grown and shaped services for youth and menthol uses to counter heavy marketing from the tobacco industry. Also, the Oregon Tobacco Quit Line provides free counseling and medication to help people quit. TPEP's approach ensures all people in Oregon can access quit services.

Data and accountability

TPEP's surveillance and evaluation activities ensure that programs are timely, well-informed and effective.

Infrastructure, administration and management

Management and administration oversee the use of public funds to support TPEP activities. They ensure TPEP initiatives are efficient and effective.

Tobacco prevention highlights 2023–2025

Partners throughout Oregon are working together to:

- Better understand the effect of tobacco on their communities
- Advance policies to prevent tobacco use among youth, and
- Support their community members' quit journeys.

"Mutts and Butts"

In summer 2024, Klamath County Public Health partnered with local organizations to host a "Mutts and Butts" event focusing on tobacco prevention. The event aimed to inspire people to quit smoking by highlighting the impact of secondhand smoke on pets. It featured a knowledge walk, photo booth, story circle, resource tables and quit kits. Their success sparked interest from other counties to host similar activities. The event shows how local programs help people find motivation to quit for good.

The "Mutts and Butts" logo highlights smoking's dangers to pets.

Keeping youth in class

Momentum is growing in Oregon to keep students caught with nicotine products in class instead of suspending them. Nicotine addiction can harm mental health, increase stress and affect school performance. Keeping students in class could reduce nicotine use and keep students from dropping out.

The Umatilla County Health Department (UCo) consulted with Marion, Hood River and Linn Counties to learn about their approaches. After exploring alternatives, UCo decided to use the Intervention for Nicotine Dependence: Education, Prevention, Tobacco and Health (INDEPTH) program. Developed by the American Lung Association, the program is already being used in other counties. The non-punitive, evidence-based program educates youth about the risks of nicotine use

and teaches healthier coping skills. To ease the burden on schools, TPEP staff will help with educational costs and program implementation.

Suspension disconnects students, while this mentorship-based approach builds trust and community. Positive adult relationships are an effective way to encourage healthy behaviors and prevent future substance use. After INDEPTH, participants are encouraged to join a program to help them quit using nicotine.

Anti-vaping poster contest

The Baker County Health Department hosted a youth poster contest to promote the Oregon Tobacco Quit Line. The contest, open to 5th and 6th graders, offered gift cards and a pizza party for the winners. Educators used it to discuss vaping and the impact of life choices on stress. Despite low cigarette use, youth nicotine addiction remains a major concern. Youth nicotine use can affect brain development. It can also put them at risk for addiction and lifelong health problems. The contest winners were chosen in February 2024. Their posters were

displayed in local businesses, sparking community discussions about nicotine use.

Contest winners show off their anti-vaping artwork at South Baker Intermediate School.

AntFarm youth mentorship

AntFarm, a community-based organization in rural Clackamas County, addresses youth nicotine use through mentorship. They do this by creating spaces and projects that give youth a sense of belonging.

AntFarm's Youth Hubs in Sandy, Molalla and Estacada provide safe spaces for youth to gather. These hubs offer activities allowing mentors to build trust and discuss health issues, including the dangers of vaping. The hubs aim to support youth wellness in rural areas often cut off from urban services.

In 2023, youth participated in a storytelling video project. These videos highlighted their experiences with tobacco and efforts to quit. The videos are currently being used for student and teacher trainings promoting discussions about safer ways to cope with stress.

Youth who have a trusted adult to confide in are less likely to engage in risky behaviors. By focusing on youth-led initiatives and mentorship, AntFarm empowers youth to make healthier choices and avoid nicotine use.

Oregon tobacco facts in brief

Tobacco use is the leading cause of preventable disease and death in Oregon.

Oregon's tobacco impact in one year



415,200

Adults who regularly smoke cigarettes (3)

153,267

People with a serious illness caused by tobacco (3)



8,500

Tobacco-related deaths (4)



\$239 million

Spent on tobacco-related medical care (7)

Youth

3% of youth smoke cigarettes (8)

of youth use e-cigarettes or vape (8)

75% of youth who use nicotine, use a flavored product (8)

\$5.5 billion

In productivity losses due to premature tobacco-related deaths (7)

Cigarette use in Oregon — measured by per-capita cigarette sales — has been declining for years. (Figure 1) This shows that TPEP's evidence-based approach

Figure 1: Per capita cigarette pack sales, Oregon and the United States



Source: Orzechowski W and Walker RC. "The Tax Burden on Tobacco: Historical Compilation," Volume 58, 2023. Fairfax and Richmond, Virginia.

has helped improve health outcomes in Oregon. When Oregon voters increased TPEP funding in 2021, tobacco use continued to decline despite a national increase. (Figure 1)

Tobacco use and related health outcomes are not spread equally among Oregon's communities. The tobacco industry focuses its ads, offers, and store displays towards specific groups. Aggressive marketing and stressful lives can push people to use tobacco to cope. This unfairly increases health risks.

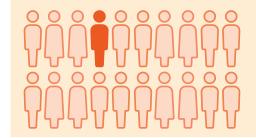
Tobacco use is unfairly impacted by tobacco industry marketing



About 1 in 5 people who have a household income of less than \$20,000 yearly smoke. (3)



About 1 in 5 people who report experiencing poor mental health smoke. (3)



About 1 in 20 people who have a household income of more than \$150,000 yearly smoke. (3)



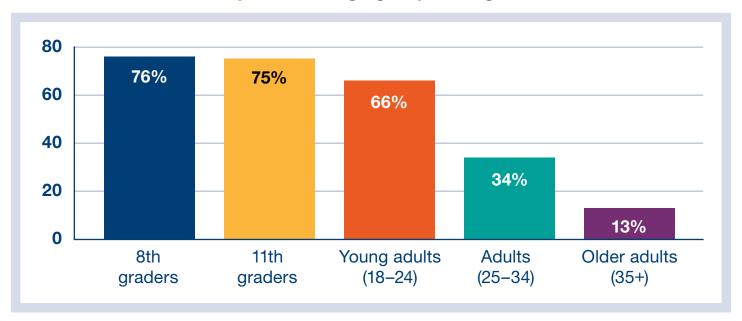
About 1 in 10 people who report not experiencing poor mental health smoke. (3)

Menthol is the only cigarette flavor allowed by federal rules. Adding flavoring, including menthol, is a manufacturing practice to make tobacco seem less harsh. For decades, the tobacco industry has tried to create a preference for menthol cigarettes among communities of color and youth. The cooling sensation of menthol means it is easier to start smoking and harder to quit. (9)

61 percent of African Americans who smoke use menthol cigarettes. (3)

Despite steady declines in cigarette use, youth nicotine addiction is still a concern. The popularity of flavored tobacco products such as e-cigarettes mainly drives it. About 75 percent of Oregon youth who use e-cigarettes report using flavored products. (8) (Figure 2) These include flavors such as cherry, banana split, and mint. (8) Youth and young adults use flavored tobacco products at higher rates than adults aged 35 and older. (8,3) (Figure 2)

Figure 2. Flavored tobacco or vaping product use among current tobacco users by selected age groups, Oregon, 2022



Sources: Student Health Survey (2022). Behavioral Risk Factors Surveillance System (2022).

In 2021, the Oregon Legislature created the Tobacco Retail Licensing Program to ensure businesses follow tobacco sales laws. Since the program began, illegal sales to underage people have consistently gone down, from 26% in 2022 to 14% in 2024.

Looking forward

TPEP plans to build on past successes and lessons learned. OHA is committed to empowering the community to improve systems and strengthen connections. TPEP will continue to support community innovations to prevent and reduce tobacco-related harms across Oregon.



End notes

- 1. The total 2023–2025 biennium budget includes \$14.3 million from the 2021–2023 biennium. These funds were carried over to allow time for community engagement. The approved budget of \$71,932,293 includes forecasted estimates for the 2023–2025 biennium of \$57.6 million and the \$14.3 million additional funds from the 2021–2023 biennium.
- 2. The 2023–2025 forecasted budget of \$57.6 million is currently lower than previous quarterly revenue projections and may impact actual revenue for the biennium.
- Oregon Behavioral Risk Factor Surveillance System (BRFSS), 2019–2022. https://www.oregon.gov/oha/PH/DiseasesConditions/ChronicDisease/
 DataReports/Pages/index.aspx
- 4. Oregon Health Authority. "Oregon Vital Statistics Annual Reports," 2022. https://www.oregon.gov/oha/PH/DISEASESCONDITIONS/CHRONICDIS-EASE/DATAREPORTS/Pages/CDD_Mortality.aspx
- 5. Orzechowski W and Walker RC. "The Tax Burden on Tobacco: Historical Compilation," Volume 58, 2023. Fairfax and Richmond, Virginia.
- 6. Center for Disease Control and Prevention (CDC). "About Health Effects of Cigarette Smoking." Smoking and Tobacco Use, June 11, 2024. https://www.cdc.gov/tobacco/about/index.html
- Oregon Health Authority. Economic Costs of Tobacco Use in Oregon. Calculations Based on Oregon Population Data 2015–2019 and the Department of Health and Human Services (US) Smoking-Attributable Mortality, Morbidity, and Economic Costs (SAMMEC) data, 2021. Unpublished data.
- 8. Oregon Health Authority. Oregon Student Health Survey (SHS). 2022. https://www.oregon.gov/oha/PH/BIRTHDEATHCERTIFICATES/SURVEYS/Pages/student-health-survey.aspx
- 9. Centers for Disease Control and Prevention (CDC). "Menthol Tobacco Products." Smoking and Tobacco Use. May 15, 2024. https://www.cdc.gov/tobacco/menthol-tobacco/index.html

You can get this document in other languages, large print, braille or a format you prefer free of charge. Contact the Tobacco Prevention and Education Program (TPEP) at More.FreshAir@odhsoha.oregon.gov or 971-673-0372. We accept all relay calls.

Oregon Health Authority

Public Health Division
Tobacco Prevention and Education Program (TPEP)

Phone: 971-673-0984

www.oregon.gov/oha/PH/PREVENTIONWELLNESS/
TOBACCOPREVENTION/Pages/index.aspx



200-97150 OHA 8296a_24 (03/2025)