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Kindred Healthcare, Inc.
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Nevada Division of Public and Behavioral

Nevada Division of Public and Behavioral Health – Behavioral Health Wellness and Prevention

Nevada Division of Public and Behavioral Health- Perinatal

Health - Perinatar Nevada Primary Care Association Nevada Public Health Association Nevada Public Health Institute Substance Abuse Prevention Program Nevada State Medical Association

Nevada State Medical Association Nevada Statewide Coalition Partnership Nevada Tobacco Users' Helpline Nye Communities Coalition P.A.C.E. Coalition Partnership of Community Resources

Partnership to Fight Chronic Disease Renown Health Statewide Native American Coalition Southern Nevada Health District

United Healthcare
UNLV Department of Counselor Education
UNLV, School of Dental Medicine
Crackdown on Cancer
UNLV School of Nursing

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Washoe County Health District Washoe County School District Safe and Drug free Schools Washoe County Chronic Disease Coalition DATE: June 4, 2018

TO: Grants Management Advisory Committee

FROM: Michael Hackett, President

Nevada Tobacco Prevention Coalition

RE: Funding for Tobacco Prevention and Control

The Nevada Tobacco Prevention Coalition would like to express its support to continue funding tobacco prevention and control programs by means of Tobacco Master Settlement Agreement funds and the Fund for a Healthy Nevada, but also at a greater level than they are now.

Over the past 15 years, state funding for tobacco control programs through the FHN has steadily declined, to the point where it wasn't funded at all from 2010-13. How FHN dollars are allocated has also changed. Up until 2007, per statute, tobacco control programs received 20% of FHN dollars, but legislation first reduced it to 15% then later, to allow the Director of the Department of Health and Human Services greater flexibility, all fixed funding percentages were removed from statute. However, NRS 439.630(f) specifically identifies tobacco prevention and control as a priority need.

In 2013, the Legislature restored state funding for tobacco control programs, but to the tune of just \$1 million per year. In 2015, the Legislature approved that same amount. The 2017 Legislature, however, reduced the level of funding by \$50,000 per year, to \$950,000 for each year of the current biennium. This reduction came about despite the GMAC establishing tobacco prevention and control as a stand-alone priority as it concluded the 2016 Community Needs Assessment process. Separating it from the health/mental health category underscores the need we have long been aware of.

Presently, four NTPC partners receive FHN funds for tobacco control programs, but as you can see from this letterhead, there are many more partners that comprise NTPC that aren't directly funded but whose work depends on how well those four partners are funded. This letter is on behalf of those NTPC partners as well.

Smoking rates have declined over the past 15 years, thanks in large part to the efforts of our member organizations, the Nevada Clean Indoor Air Act, and excise tax increases on a pack of cigarettes. However, there is still much work to be done. Adult use of traditional tobacco products has remained constant the past few years and will continue to drive efforts. The proliferation of electronic smoking devices (electronic cigarettes and other vapor products) has complicated and exacerbated challenges for tobacco control efforts. At the least, the challenge is to prevent a renormalization of smoking. At the worst, it's to prevent history from repeating itself with regard to electronic smoking devices and lessons learned from smoking.

Around the country there is a rapidly growing problem with the use of electronic smoking devices by minors, one that has already caused some school districts to implement drastic measures. Nevada is no exception, where the use rate among minors approaches 30%. Research from several organizations, including the Desert Research Institute, clearly shows these products are not without risk and in fact present serious health risks to youth in particular. In addition, research has shown that minors whose first introduction to smoking is through electronic smoking devices are four times more likely to smoke traditional tobacco products.

The NTPC understands there are other steps the state can take to address electronic smoking device use among our youth. However, providing adequate funding more in line with the Centers for Disease Control and Prevention guidelines is essential. Our members constantly navigate an ever-changing marketplace for tobacco and nicotine consumption, which has also changed how to prevent and stop use. It's of the utmost importance that our member organizations have the resources to keep pace.

The past is truly prolog when it comes to tobacco, and the industry continues to use the same strategies when marketing its products, often targeting vulnerable populations including those with mental health challenges. Those same strategies are applied today with electronic smoking devices.

In closing, on behalf of the NTPC and all of its member organizations, I want to again point out the source of FHN dollars – the Tobacco Master Settlement Agreement. It's an agreement that was reached by states with tobacco manufacturers, the proceeds of which were intended to help mitigate the harm caused by their products.

Thank you for your time and consideration of our concerns.

The mission of the Nevada Tobacco Prevention Coalition is to improve the health of all Nevadans by reducing the burden of tobacco use and nicotine addiction. NTPC's priorities and objectives are both short- and long-term. Some require a constant and consistent effort to sustain them year-to-year. Others are more specific in nature, with an end result in sight. Still others arise when market conditions change. What doesn't change is NTPC's commitment to its mission.