

# Tobacco Prevention and Control Advisory Board Meeting

July 11, 2018 2:00 p.m. to 3:30 p.m.

Leiopapa a Kamehameha – State Office Tower, Honolulu, HI 96813

DHRD Conference Room – 14<sup>th</sup> Floor

**Members Present:** George Centeio, Sharlene Chun-Lum, Dr. Christian Gloria, Robert Hirokawa, Dr. Hye-Ryeon Lee, Dr. Elizabeth Tam (Chair), Dr. Anthea Wang (Vice Chair)

**Members Absent:** Danielle Bass, Danette Wong Tomiyasu

**DOH Staff:** Lola Irvin, Administrator- CDPHPD; Lila Johnson, TPEP; Blair Goto, AG Representative; Danelle Cheng, TSF Administration

**Guests (Public):** Tom Matsuda, HCF; Amy Luersen, HCF; Jessica Yamauchi, HPHI; Trish La Chica, HPHI; Kevin Ramirez, HPHI; Kahala Howser, ALA; Don Weisman, AHA; Julie Yang

Agenda	Discussion	Decision	Outcome
<b>Call to Order</b>	<p>Meeting was called to order at 2:08 p.m. by Chair Tam</p> <ul style="list-style-type: none"> <li>New Board Members, Dr. Christian Gloria (Demonstrated Interest in Tobacco Control &amp; Prevention) and George Centeio (DOE Superintendent Designee) welcomed.</li> <li>Introductions by board members</li> <li>Minutes of 2.26.18 meeting reviewed</li> <li>Follow-up to question raised regarding Status of Tobacco Use Prevention and Control Strategic Plan Implementation Presentation at 2.26.17 meeting, provided by Irvin. See Attachment A.</li> <li>Agenda reviewed</li> </ul>	Hirokawa moved to approve minutes. Chun-Lum seconded.	Minutes approved unanimously
<b>2018 Legislative Session Recap</b>	<p>Yamauchi and La Chica presented – 2018 Legislative Recap</p> <ul style="list-style-type: none"> <li>2018 Hawaii Public Health Institute Legislative Recap publication distributed.</li> <li>Shared update on FDA Potential Tobacco Product Regulations</li> <li>Outcome of Tobacco Legislation for 2018 in policy priority areas               <ol style="list-style-type: none"> <li>1) Regulate Electronic Smoking Devices (ESDs)</li> <li>2) Create Tobacco-Free School Buffer Zones</li> <li>3) Tobacco-Free University of Hawaii</li> </ol> </li> </ul>		<p>Questions taken and discussion held regarding Legislative Recap:</p> <p>Concerns voiced regarding lack of public hearing on final conference committee draft of HB 1895 and the insertion of preemption.</p> <p>Preemption renders regulations regarding tobacco sales passed at the County level null and void regarding tobacco sales.</p> <p>Chair posed question to AG as to legality of passage of bill, if legislative rules were broken. AG responded that Constitutional</p>

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	<p>Campuses</p> <p>4) Other tobacco legislation</p> <p>Irvin gave an update on legislation impacting the 2018 Tobacco Settlement Special Funds Distribution and the Tobacco Prevention and Control Trust Fund.</p>		<p>requirements were met. Do not know if House or Senate rules were violated but that is not in the Constitution.</p>
<p><b>Sharing of Youth Electronic Smoking Device Prevention Program</b></p>	<p>Ramirez presented on Youth Electronic Smoking Device Prevention Program (YEPP)</p> <ul style="list-style-type: none"> <li>Overview of YEPP                             <ul style="list-style-type: none"> <li>a comprehensive project that has developed and implemented a multi-media ESD counter-marketing curriculum in public schools</li> <li>taking a “by youth, for youth” approach to develop messages to combat pro-vaping influences and promote pro-health messages</li> <li>to reduce the number of middle and high school student use of ESDs in Hawaii</li> </ul> </li> </ul>		<p>Questions taken and discussion held regarding YEPP</p> <p>Lee inquired if there are any plans for evaluation regarding the impact of messages, and what the youth who participated got out of it? Ramirez responded that an evaluation of participants has been conducted. Should receive results soon as the first project year comes to an end. An evaluation component regarding impact could be added to year 2 of project.</p> <p>Lee suggested building evaluation components into website.</p>
<p><b>DOH Tobacco Prevention &amp; Education Program Updates</b></p>	<p>Johnson gave DOH Tobacco Prevention &amp; Education Program Update.</p> <ul style="list-style-type: none"> <li>Developed Tobacco Tri-fold Publication “The Faces Behind the Figures”</li> <li>Addressing ESD use in schools                             <ul style="list-style-type: none"> <li>Coordination with DOE</li> <li>Adult (parents, educators, clinicians) Awareness Campaign</li> <li>Tobacco ESD Enforcement</li> </ul> </li> <li>Smoke-Free Ride with Keiki Inside Campaign</li> <li>Upcoming activities</li> </ul>		<p>Questions taken and discussion held</p>

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<b>Publishing Trust Fund Program Results Update</b>	<p>Irvin presented on the publication of the Tobacco Tri-fold – “Faces Behind the Figures” being used as an educational piece to share 20 years of cessation efforts.</p> <p>Includes programmatic activities along with policy change.</p> <p>Stories from the tri-fold were highlighted.</p>		
<b>Public Comment</b>	Question asked of DOH regarding how HB1895 will affect enforcement.		Johnson stated that youth used in sting operations are under the age of 21. Law says retailers need to ask for identification if they look younger than 27. Hopefully it will act as a deterrent.
<b>Adjournment</b>	Meeting was adjourned by Chair Tam at 3:38 p.m.		

Respectfully submitted,

*Danelle Cheng*

\_\_\_\_\_  
Danelle Cheng  
Department of Health\Tobacco Settlement Funds Administration

Approved:

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\_\_\_\_\_  
Dr. Elizabeth Tam, Chair

## Attachment A

Response to question raised at Tobacco Prevention & Control Advisory Board

Meeting held on 2/26/18.

### Question:

Can you verify whether or not second hand smoke exposure data regarding adults, middle school and high school students also included e-cigarette vapor?

### Answer:

A good place to look for all data related to secondhand smoke may be found on the Hawaii Health Data Warehouse.

There are a variety of indicators and some of these are combined to create new indicators:

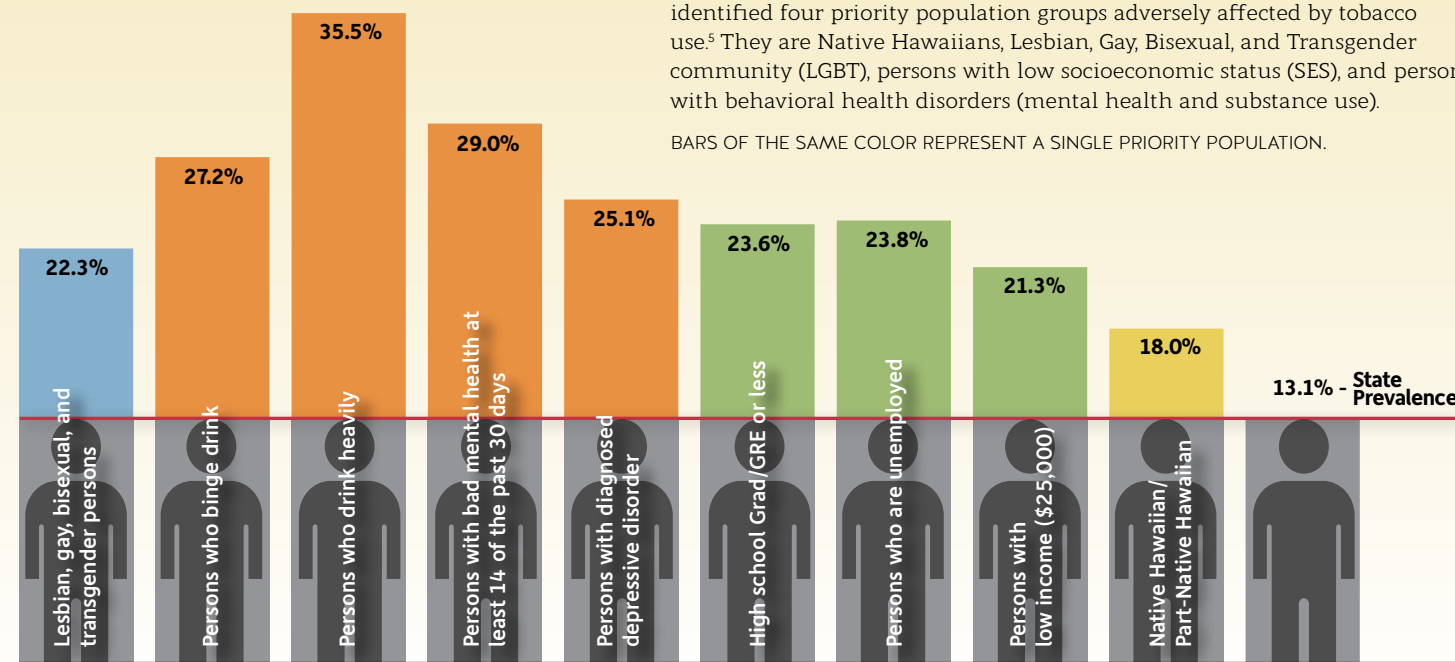
- SHS exposed in home in past week
- SHS exposed in car in past week
- Smoking rules inside vehicle
- SHS at school
- SHS in public spaces
- Smoking at work
- Employer rules about smoking indoors
- SHS knowledge of health effects
- Lives with a smoker

Whether or not E-cigarettes is included in the question language depends on the survey year and the specific question. In general, inclusion of e-cigarettes in the definition of tobacco products did not really appear until the 2017 Youth Tobacco Survey (YTS). For example, in 2015, one question was worded like this: “During the past 7 days, on how many days did someone smoke tobacco products in your home while you were there?” – no mention of e-cigarettes. In 2017, the same question was worded differently: “During the past 7 days, on how many days did someone smoke tobacco products including e-cigarettes in your home while you were there?”

Link to HIPHI Legislative recap: <https://www.hiphi.org/wp-content/uploads/2018/06/HIPHI-Leg-Recap-2018-5.5-Web.pdf>



## Everyone Has the Right to Be Smoke-free



### PREVALENCE OF CIGARETTE SMOKING AMONG HAWAII'S PRIORITY POPULATION GROUPS COMPARED TO STATE AVERAGE IN 2016<sup>1</sup>

The State Tobacco Use Prevention and Control Strategic Plan 2016-2020 identified four priority population groups adversely affected by tobacco use.<sup>5</sup> They are Native Hawaiians, Lesbian, Gay, Bisexual, and Transgender community (LGBT), persons with low socioeconomic status (SES), and persons with behavioral health disorders (mental health and substance use).

BARS OF THE SAME COLOR REPRESENT A SINGLE PRIORITY POPULATION.

## OUR WORK IS FAR FROM OVER

Although Hawai'i has been a leader in tobacco control and prevention efforts nationwide, there is still much work that needs to be done, particularly to increase equity and combat new trends in tobacco usage.

Priority populations in Hawai'i are smoking at almost double the statewide smoking prevalence of 13.1%, so the Department of Health is targeting efforts to close the gap.<sup>15</sup> Cessation grants administered by HCF and funded by the Trust Fund are awarded to community organizations across all islands for services tailored for these specific populations. **Since 2009, the Cessation Grants Program has helped approximately 12,000 persons quit using tobacco products.<sup>6</sup>**

The tobacco landscape is rapidly changing. Modified novel products pose challenges to research, surveillance, health policy, and regulation because they vary widely in form, mode of use, apparent contents, design, emissions, potential health effects (including addictiveness), and marketing claims.<sup>7</sup> New tobacco products which provide alternatives to combustible smoking, such as heat-not-burn products which heat tobacco without igniting it and vaporizers that heat nicotine salts have begun to complicate public perception of tobacco products.

**The Department of Health along with key partners are committed to a tobacco-free Hawai'i.**



KEALOHA ALAPAI

Started Smoking: **AGE 9**

**5** number of quit attempts | **60** YEARS OLD

**15 cigarettes smoked per day**



**6 MONTHS SMOKE FREE**

In 2017,

**1 in 4 (25.5%)**

**Public high school students and**

**>1 in 6 (15.7%)**

**Public middle school students**

**reported currently using Electronic Smoking Devices (ESD)<sup>2</sup>**

## The Impact of Investing in Tobacco Prevention & Control: Every quit counts

Hawai'i invested \$1514 million in tobacco prevention and control from 2000-2017.<sup>8</sup>

During this period there have been significant reductions in smoking among youth, adults, and pregnant women.

- Smoking declined from 27.9% to 8.1% among high school youth, and from 9.1% to 5.0% among middle school youth.<sup>2</sup> That translates to about 9400 fewer youth smokers and an estimated \$1974 million savings in future health costs.<sup>9-11</sup>
- Hawai'i also significantly reduced adult smoking rates, from 19.9% to 13.1%,<sup>1</sup> which translates to about 73,300 fewer adult smokers and an estimated savings of \$806.3 million.<sup>9-11</sup>
- Smoking among pregnant women declined from 8.4% to 4.5%.<sup>12</sup> That translates to about 700 fewer pregnant smokers and about \$840,000 in healthcare savings.<sup>9-11, 13</sup>



estimated youth savings  
**\$197.4 MILLION**

estimated pregnancy savings

**\$840,000**



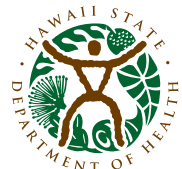
estimated adult savings  
**\$806.3 MILLION**



**\$1.0 BILLION**  
TOTAL HAWAII HEALTHCARE SAVINGS (2000-2017)



Calculated based on average lifetime healthcare savings for every case of smoking prevented among youth (\$21,000), adults (\$11,000), and pregnant women (\$1,200).



**FOR MORE INFORMATION, CONTACT:**  
Hawai'i State Department of Health  
Chronic Disease Prevention and Health Promotion Division  
Tobacco Prevention and Education Program  
1250 Punchbowl Street  
Honolulu, HI 96813

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For references, visit: <http://health.hawaii.gov/tobacco>



COLLECTED  
**128 cans**  
daily to buy 1 pack of cigarettes

months homeless = **6**

**1** Tobacco Treatment Specialist who made a difference

**50**  
YEARS OF SMOKING

**602+** DAYS SMOKE-FREE AND COUNTING



DONITA GARCIA



SANDY TSUJIMURA

**26** years being exposed to tobacco smoke in the workplace

**12 YEARS**  
WORKING IN A SMOKE-FREE ENVIRONMENT THANKS TO THE 2006 CLEAN INDOOR AIR LAW

**0** number of times having to leave a restaurant because of an asthma attack triggered by cigarette smoke since 2006

**1** singing career revitalized by performing in an environment free of tobacco smoke



For every \$1.00 spent on tobacco prevention, Hawai'i saved about \$6.64 in direct healthcare costs!



IN 2009, **\$526 MILLION** was spent in healthcare costs due to smoking.<sup>3</sup>

### HAWAII'S TOBACCO LANDSCAPE:

## The Faces Behind the Figures

The state of Hawai'i has made tremendous strides towards reducing smoking: it ranks third lowest in the nation for smoking prevalence among adults (13.1%), and has reduced smoking prevalence among high school students by 71%, from 27.9% in 1999 to 8.1% in 2017.<sup>12</sup> **In spite of these gains—the work is far from over.**

WITHOUT INTERVENTION, **54,000 KEIKI** WILL BECOME SMOKERS<sup>4</sup>

MORE THAN **1,400**

ADULTS DIE EACH YEAR IN HAWAII FROM SMOKING-RELATED CAUSES.<sup>3</sup>



Every Number Tells a Story–  
Two Decades of Tobacco  
Use Reduction

The commitment of legislative champions and the tobacco prevention community, with broad support from residents led to significant policy achievements. The Clean Indoor Air Law was passed in 2006 and restaurants, worksites, shopping malls, multi-unit housing common areas, health care facilities, public areas and airports statewide became smoke-free. Electronic smoking devices (ESDs) was later added to the definition of tobacco products, to expand clean air protections, and to reduce youth initiation. In 2015, Hawai‘i became the first state in the nation to raise the legal age of sale and possession of tobacco products to 21 years of age.

In spite of these gains the work is far from over. The reduction in smoking prevalence has not been felt equally across Hawai‘i. Native Hawaiians, people with lower income, people who identify as lesbian, gay, bisexual and transgender (LGBT), and people with behavioral health conditions, disproportionately experience greater tobacco use, and consequently lower health outcomes.<sup>5</sup> Socially and culturally tailored tobacco

prevention programs, innovative policies, and systems changes are needed to create equity.

The Hawai‘i Tobacco Settlement Special Fund (TSSF) was established in 2000, (HRS §328L-2(a)). The TSSF receives the annual payments from the Master Settlement Agreement with the participating tobacco companies. The Hawai‘i Tobacco Prevention and Control Trust Fund (Trust Fund) was established to receive a portion of this annual payment, to be invested and used to prevent the initiation of tobacco use by youth and help people quit using tobacco.

The Hawai‘i Community Foundation (HCF) was selected by the Director of Health with concurrence from the Governor in 2000, as the non-profit entity to administer and manage the Trust Fund. HCF administers the youth prevention and the community-based cessation grants programs, and the Hawai‘i Tobacco Quitline services. **Thousands of people have been helped to live tobacco-free through these programs.**

Adults who currently smoke<sup>1</sup>

YEAR 2000 214,500 → YEAR 2016 141,200

High school students who currently smoke<sup>2</sup>

YEAR 1999 11,600 → YEAR 2017 3,400



Started Smoking: AGE 15

\$3,800 MONEY SPENT ON CIGARETTES A YEAR

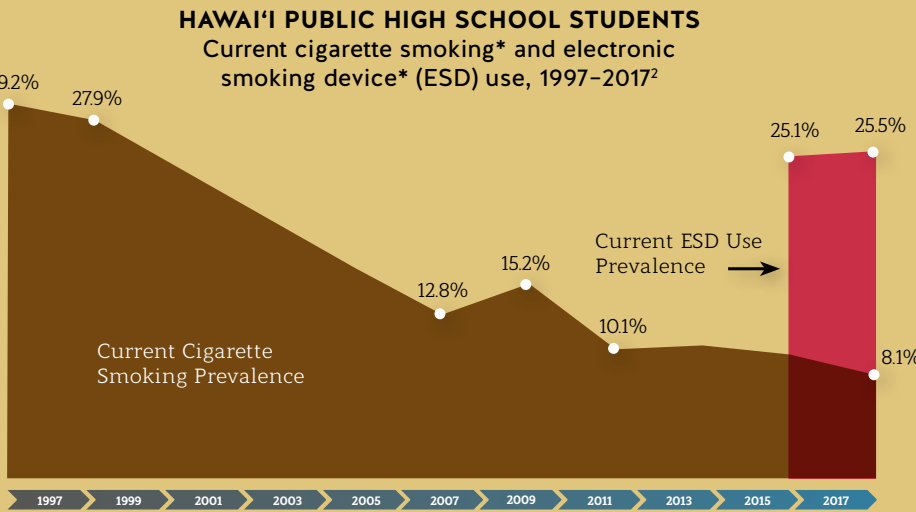


3 HAPPY CHILDREN knowing mommy is smoke-free

20 MONTHS FREE OF TOBACCO

THE RAPID RISE OF YOUTH ELECTRONIC SMOKING DEVICE USE

While cigarette and other tobacco usage among Hawai‘i youth has been steadily decreasing over the years, the use of electronic smoking devices (ESDs), such as e-cigarettes and vaping devices, have been exponentially increasing.<sup>2</sup> In recent years, progress has been made to amend policies to restrict the sale and prohibit the use of ESDs, but comprehensive strategies are needed to deter the rapid adoption by youth. A counter-marketing youth ESD prevention grant was awarded by HCF to the Hawai‘i Public Health Institute in 2017 to develop a youth ESD prevention curriculum and counter-marketing campaign.



SOURCE: Hawai‘i State Department of Health, Youth Risk Behavior Survey, 1997–2017

\* on at least one day in the 30 days before the survey

20 Years of Smoking Policy in Hawai‘i

CURRENT CIGARETTE SMOKING BY ADULTS (%) IN HAWAI‘I<sup>1</sup>

Hawai‘i Tobacco Settlement Special Fund (TSSF) is established to receive payments from the Master Settlement Agreement. A portion of the TSSF is allocated to the Hawai‘i Tobacco Prevention and Control Trust Fund  
HRS §328L-2(A)

Maui, Kaua‘i, and Honolulu Counties prohibit smoking in restaurants and some bars  
MCC8.20(P), KCC22-8.20(P), ROH41-21.2(F)(7,8)



LAW BANNING SMOKING AT ALL PUBLIC SCHOOLS IS PASSED  
Smoking is banned on all public school properties and at all public school functions  
HRS §302A-102



ALL COUNTIES PASS RESTAURANT SMOKING BAN  
Hawai‘i County prohibits smoking in any restaurant  
HCC14-21(2)



CLEAN AIR LAW IS PASSED  
Expands smoke free restrictions to worksites, multi-unit housing, public areas, restaurants, retail stores, shopping malls, health care facilities, and airports statewide  
HRS §328J-2,3,4,5

Hawai‘i County bans smoking at all County beaches, parks and recreational facilities  
HCC14-21(B)

Honolulu County bans smoking at City and County parks and beaches, and bus stops  
ROH41-21.2(M,N)

Sale and purchase of electronic smoking devices by minors <18 years of age is prohibited  
HRS §709-908, §328J-1

TOBACCO 21 LAW IS PASSED STATEWIDE  
Prohibiting the sale, purchase, and use of tobacco products, including ESDs, by anyone under 21 years of age with no exemptions for youth who have already turned 18 years  
HRS §712.1258, §321.212



The use of tobacco products, including ESDs, is prohibited within the state park system  
HRS §184-4.5

The term “tobacco products” is expanded to include ESDs, affecting all prior and future legislation where “tobacco products” is stated  
HRS §328J-1

Maui County bans smoking at bus stops  
MCC8.20.030(Q)



Honolulu County prohibits smoking in vehicles with children under 18 years of age and expands the definition of tobacco products to include ESDs, prohibiting use in all sites where smoking is prohibited  
ROH41.21.1(1)(1,2)

Kaua‘i County prohibits smoking in vehicles with children under 13 years of age  
KCC22-8.2(O)

SOURCE: Hawai‘i State Department of Health, Behavioral Risk Factor Surveillance System, 1997–2016