

Commercial Tobacco and Nicotine Use Prevention Policy Statement

POSITION

The Association of State and Territorial Health Officials (ASTHO) supports direct, sustained, and comprehensive efforts to reduce and prevent the use of all commercial tobacco products. ASTHO further supports measures to reduce tobacco-related illness and death, reduce tobacco-attributable health disparities, and regulate all emerging tobacco products. In this context, "tobacco products" refers to those derived from tobacco leaf and those that include synthetically derived nicotine. It does not encompass FDA-approved nicotine replacement therapies or the use of tobacco by some American Indian and Alaska Native communities for ceremonial or medicinal purposes.

Summary of Recommendations

- Implement evidence-based strategies and innovative approaches.
- Increase funding for tobacco control and prevention work.
- Prevent underage consumers from using tobacco products.
- Restrict marketing of tobacco products and enact countermarketing.
- Promote tobacco cessation and access to services.
- Monitor and evaluate tobacco use.

BACKGROUND

Tobacco use causes approximately 480,000 deaths annually—nearly one of every five deathsⁱ—making it the leading cause of preventable death in the United States. Decades of dedicated efforts have significantly reduced smoking rates, saving millions of lives. However, the emergence of e-cigarettes and the persistent availability of menthol cigarettes pose challenges to curbing tobacco-related death and disease.ⁱⁱ Communities of color have borne the brunt of widening tobacco-related health disparities brought on by a legacy of targeted marketing and predatory practices toward African Americans, youth, women, LGBTQ+ individuals, and low-income populations.^{iii,iv}

ASTHO supports the following recommendations to promote comprehensive tobacco control and cessation to reduce the death and disease burden of nicotine-containing products while promoting health equity.

Implement evidence-based strategies and innovative approaches.

- Support FDA's full implementation of the Family Smoking Prevention and Tobacco Control Act, which
 includes restricting all non-tobacco flavors in all tobacco products, implementing nicotine concentration
 caps on all tobacco products, implementing graphic warning labels on all tobacco product packaging and
 advertising, and restricting advertising of all tobacco products.
- Support policies that eliminate exposure to secondhand smoke and e-cigarette aerosol in all workplaces and other public places, including restaurants, bars, casinos, multi-unit housing, education institutions, healthcare clinics, sporting venues, beaches, government buildings, parks, and cars. vi,vii,viii,ix
- Embrace state and local innovations (e.g., non-taxation approaches and policies that eliminate the sale of all tobacco products and address the environmental impact of tobacco product waste).^{x,xi}
- Apply price increases to all nicotine products—especially *ad valorem* taxation policies that automatically increase in line with inflation and underlying purchase price. XII, XIII
- Strongly oppose policies that seek to preempt local tobacco control efforts and support ending existing state preemption to establish and preserve local tobacco policymaking authority.xiv

Increase funding for tobacco control and prevention work.

 Support increased funding for comprehensive tobacco prevention and control programs at the state and jurisdictional level.xv



 Support using Master Settlement Agreement revenues, Juul settlement revenues, tobacco industry user fees, and other tobacco funding sources for comprehensive tobacco control programs.xvi,xvii

Prevent underage consumers from using tobacco products.

- Prohibit all non-tobacco flavors, aromas, and sensations in all tobacco products, especially those derived from mint, menthol, and other cooling additives. Oppose all carve-outs and exemptions that permit some flavored tobacco products on the market.xviii,xix
- Establish minimum "floor" prices for all tobacco products below which products cannot be sold, to maintain consistency across all product lines. xx, xxi
- Support state efforts to raise the legal age for tobacco sale to 21, consistent with federal laws.
- Eliminate purchase, use, and possession (PUP) laws that penalize individual consumers and instead focus policy enforcement on tobacco manufacturers, marketers, and retailers.**

Restrict marketing of tobacco products and enact counter-marketing.

- Limit advertising and promoting commercial tobacco products by reducing the time, place, and manner of such advertisements, including points of sale.xxiv
- Limit the density of tobacco retailers by supporting zoning and licensing efforts that cap the number of retailers within a geographic area while also improving retail policy enforcement.xxv,xxvi
- Educate the public about the risks of tobacco use, cessation benefits and resources, and industry marketing tactics, including through graphic warning labels on product packaging.xxvii,xxviii

Promote tobacco cessation and access to services.

- Support and promote coverage of evidence-based tobacco cessation interventions and all FDA-approved pharmacotherapies without cost-sharing. xxix,xxx
- Encourage healthcare providers in all settings to expand tobacco cessation and create systems change to establish a standard of care for cessation treatments. xxxi,xxxii
- Develop tailored cessation interventions for those who disproportionately shoulder the death and disease burdens of tobacco products, especially racial/ethnic minorities, LGBTQ+ individuals, persons who are pregnant, persons who are incarcerated, and those with mental illness, substance use disorders, and other comorbidities.xxxiii
- Promote modernization of tobacco cessation messaging to reflect emerging tobacco products and delivery modalities, especially app-based and mobile phone text-based interventions that appeal to youth consumers.

Monitor and evaluate tobacco use.

- Continue longstanding national and state tobacco product surveillance efforts and expand these efforts to identify emerging challenges within the tobacco prevention and control field.xxxvi
- Support further research on emerging tobacco and nicotine products. xxxvii, xxxviii

Read the Tobacco Control Network Policy Recommendations Guide for more information.

POLICY APPROVAL HISTORY

Commercial Tobacco and Nicotine Use Prevention Policy Statement (current policy)
Community Health and Prevention Policy Committee Approval: April 18, 2024

Board of Directors Approval: June 24, 2024

Policy Expires: June 30, 2027

Tobacco Use Prevention and Control Position Statement

Community Health and Prevention Policy Committee Approval: February 6, 2017

Board of Directors Approval: March 7, 2017



Policy Expires: September 8, 2020

Expiration Date Extension due to COVID-19: September 2022

ASTHO membership supported the development of this policy, which was subsequently approved by the ASTHO Board of Directors. Be advised that the statements are approved as a general framework on the issue at a point in time. Any given state or territorial health official must interpret the issue within the current context of his/her jurisdiction and therefore may not adhere to all aspects of this Policy Statement.

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