

*T*HE SOUTH CAROLINA
TOBACCO COLLABORATIVE (SCTC) IS A STATEWIDE
ASSEMBLY OF THE LEADING HEALTH ORGANIZATIONS,
COMMUNITY COALITIONS, AND BUSINESSES COMMITTED TO
REDUCING THE TOLL OF TOBACCO USE IN SOUTH CAROLINA
BY PROVIDING RESOURCES AND INFORMATION ON TOBACCO
RELATED ISSUES TO ADVOCATES, LAWMAKERS AND
CONCERNED CITIZENS.



*H*ISTORY AND *P*HILOSOPHY

SOUTH CAROLINA TOBACCO COLLABORATIVE

SCTC was formed in 2001 to serve as a forum and voice for reducing the toll of tobacco use in South Carolina. SCTC promotes a coordinated effort among its member organizations to prevent tobacco use and its consequences while maintaining economic viability of all our communities. Our advocacy and education efforts reach across the state through our staff's work and the work of community-based coalitions and partnerships who receive SCTC grant funds.

The purposes of the Collaborative are:

To provide leadership in the development of state, county and local tobacco policies and actions which promote an environment that is safer for youth and adults.

To provide and facilitate meetings of interested organizations and communities.

To promote opportunities for current and future organizations to examine research, trends, legislative issues, concerns and ideas, and to generate solutions that will promote tobacco-safe communities.

To promote and support advocacy for tobacco-safe communities among the membership, at regional, state and national levels.

SCTC's partnerships with coalitions are utilized to address local tobacco issues and promote positive public health policies at the community level. With an **adult smoking rate of 22%**, a **youth smoking rate of 19%** and **18% of pregnant women smoking**, tobacco is taking a terrible toll in our state. But by taking measures such as increasing the state cigarette tax, eliminating secondhand smoke from workplaces, preventing tobacco use initiation among youth and promoting cessation, the toll can be significantly lowered.



THE TOLL OF TOBACCO USE IN SOUTH CAROLINA

SOUTH CAROLINA TOBACCO COLLABORATIVE

Statistics courtesy of the Campaign for Tobacco Free Kids and the South Carolina Department of Health and Environmental Control

Tobacco Use in South Carolina

| 18.8% of male high school students use smokeless or spit tobacco



19.1% of high school students smoke | | 22.3% of adults in South Carolina smoke

7,300 kids under 18 become new daily smokers each year

240,000 kids are exposed to secondhand smoke at home

9.7 million packs of cigarettes are bought or smoked by kids in South Carolina each year

Deaths in South Carolina from Smoking

5,900 adults die each year from their own smoking

103,000 kids now under 18 and alive in South Carolina will ultimately die prematurely from smoking

400 to 1,120 adults die each year from exposure to secondhand smoke

Smoking kills more people than alcohol, AIDS, car crashes, illegal drugs, murders, and suicides combined – and thousands more die from other tobacco-related causes – such as fires caused by smoking (more than 1,000 deaths/year nationwide) and smokeless tobacco use. No good estimates are currently available, however, for the number of South Carolina citizens who die from these other tobacco-related causes, or for the much larger numbers who suffer from tobacco-related health problems each year without actually dying.

Smoking-Caused Monetary Costs in South Carolina

Annual health care costs in South Carolina directly caused by smoking = **\$1.09 billion**

The portion of those costs covered by the state Medicaid program = **\$393 million**

South Carolina residents' state and federal tax burden from smoking-caused government expenditures = **\$578 per household**

Smoking-caused productivity losses in South Carolina = **\$1.83 billion**



Amounts do not include health costs caused by exposure to secondhand smoke, smoking-caused fires, spit tobacco use, or cigar and pipe smoking. Other non-health costs from tobacco use include residential and commercial property losses from smoking-caused fires (more than \$500 million per year nationwide); extra cleaning and maintenance costs made necessary by tobacco smoke and litter (about \$4+ billion nationwide for commercial establishments alone); and additional productivity losses from smoking-caused work absences, smoking breaks, and on-the-job performance declines and early termination of employment caused by smoking-caused disability or illness (dollar amount listed above is just from productive work lives shortened by smoking-caused death).





POLICY GOALS

SOUTH CAROLINA TOBACCO COLLABORATIVE

Reduce Exposure to Secondhand Smoke

Everyone has a right to breathe smoke-free air. Nationwide, more and more workplaces are going smoke free. However, South Carolina has few real smoke-free workplace laws. There have been significant gains in reducing exposure to secondhand smoke in the general population, but those in blue collar and service jobs – such as craft workers, laborers and hospitality workers – are still disproportionately exposed at the workplace.

Secondhand smoke is a health hazard. And a worker health issue.

Secondhand smoke contains over 4,000 chemicals and at least 60 carcinogens.

The toxins in secondhand smoke cause cancer, heart disease and respiratory problems, such as wheezing, asthma attacks, shortness of breath and excessive coughing – even long after exposure.

The Centers for Disease Control and Prevention, Environmental Protection Agency and other health groups all agree that secondhand smoke is dangerous and everyone should be protected from it in indoor workplaces and public places.

Smoke knows no bounds. Non-smoking sections and ventilation systems don't eliminate exposure.

On June 27, 2006, the United States Department of Health and Human Services released *The Health Consequences of Involuntary Exposure to Tobacco Smoke: A Report of the Surgeon General*. The six major conclusions of the Surgeon

General Report include:

Many millions of Americans, both children and adults, are still exposed to secondhand smoke in their homes and workplaces despite substantial programs in tobacco control.

Secondhand smoke exposure causes disease and premature death in children and adults who do not smoke.

Children exposed to secondhand smoke are at an increased risk for sudden infant death syndrome (SIDS), acute respiratory infections, ear problems, and more severe asthma. Smoking by parents causes respiratory symptoms and slows lung growth in their children.

Exposure of adults to secondhand smoke has immediate adverse effects on the cardiovascular system and causes coronary heart disease and lung cancer.

The scientific evidence indicates that there is no risk-free level of exposure to secondhand smoke.

Eliminating smoke in indoor spaces fully protects nonsmokers from exposure to secondhand smoke. Separating smokers from nonsmokers, cleaning the air, and ventilating buildings cannot eliminate exposures of nonsmokers to secondhand smoke.

Smoke-free policies will protect our most vulnerable citizens. Smoke-free policies enable children, the elderly, and people with certain health conditions to enjoy dining out, visiting public places and working without putting their health at risk.



for smoke-free workplaces has impacted cities from the mountains to the coast as municipalities are choosing to protect their workers from the many health hazards of secondhand smoke.

Support Local Control

One of the key threats to effectively preventing tobacco use and protecting workers from exposure to secondhand smoke is preemption, or the effort to prevent local governments from enacting laws stronger than state laws. The tobacco industry clearly recognizes preemption as their best tactic against tobacco control. With preemption in place, communities that want to further protect their own health would not be allowed to do so.

It is much simpler for the tobacco industry to undermine one state law than for them to rescind hundreds of local laws. Preemptive laws eliminate the process of passing local legislation, which is crucial to educating communities and changing social norms.

The success rate at the local level remains remarkably high because local legislation remains far easier to pass than state initiatives and local ordinances are generally much better enforced than state laws. Enforcement at the local level is often easier because the community, having been involved in its development, is more aware of and more supportive of the law. The process of community involvement that leads to the passing of a local ordinance creates the public understanding and support that is needed to achieve compliance. Many communities throughout South Carolina are interested in working on their own smoke-free workplace laws and must not have the right to do this taken away from them.

Preemption is difficult to remove after insertion into a state law. Many advocates are tempted by the opportunity to cover an entire state with a tobacco control law, rather than taking several years to pass strong local laws.

The South Carolina Tobacco Collaborative has set preemption as its smoke-free policy priority. By returning lawmaking power to the local level and removing state impositions, we will be able to ensure a healthier South Carolina.

For more information about our smoke-free efforts and local smoke-free campaigns, visit our website at www.smokefreesc.org.

Worker Health

From a business standpoint, comprehensive smoke-free workplace policies reduce tobacco-related illnesses and the costs of treating them. Smoke-free policies also reduce absenteeism (even among non-smoking employees), reduce housekeeping and maintenance costs, lower insurance rates and result in fewer smoking-related fires.

Musicians and hospitality workers breathe more secondhand smoke on the job than employees in any other occupational group. That's why the South Carolina Tobacco Collaborative, the Christopher Conner Foundation and the Musicians and Songwriters guild of South Carolina joined together in 2008 to generate awareness about the dangers of exposure to secondhand smoke, an often overlooked public health hazard that performers confront every day. The three organizations together released a calendar, "Rock 'N a Hard Place: Musicians for a Smoke-Free South Carolina," which featured a variety of South Carolina musicians who support smoke-free workplaces, and the groups also jointly support the annual Kick Butts 5K.

Across South Carolina

In recent years, more local governments have taken steps to protect their citizens from secondhand smoke exposure. Our coalition partners work to support those efforts, as well as building campaigns to promote cessation and prevention. SCTC continues to build and strengthen our grassroots network statewide, as well as providing education and information. Since the release of the 2006 Surgeon General's Report, SCTC has supported the efforts of ten municipalities and two counties that have passed smoke-free ordinances in our state. Our "Make It Happen!" campaign

Advocate for Increases in the State Cigarette Tax

Since 2000, the SCTC has led efforts to increase South Carolina's lowest in the nation cigarette tax. At just seven cents per pack, South Carolina's cigarette tax has not been increased since 1977.

SCTC and its partner organizations advocate for an increase to the national average, which is over one dollar per pack. More than one hundred independent studies have shown that raising the price of cigarettes is the most effective method to preventing youth smoking. A significant increase in the state cigarette tax will protect South Carolina's kids and taxpayers from the devastating toll of tobacco.

Cigarette tax increases are proven to save lives. They make cigarettes too expensive for many kids to buy and give smokers another incentive to quit. The higher the tax, the more lives saved, especially when some of the revenue is used to fund tobacco prevention programs.

Increasing the cigarette tax is a win-win-win solution for South Carolina.

It is a public health win that will reduce smoking and save lives.

It is a fiscal win that will raise needed revenue and reduce smoking-caused health care costs.

It is a political win because cigarette taxes have the strong support of the public.

The SCTC and its partner organizations advocate for an increase of 93 cents per pack, which would bring South Carolina's cigarette tax to \$1.00, just below the national average. The higher the cigarette tax, the more kids will be prevented

from smoking. Ninety percent of smokers started as teens. Studies show that every 10 percent increase in the price of cigarettes reduces youth smoking by about 7 percent and overall cigarette consumption by about 4 percent.

A 93-cent increase will prevent 59,700 kids alive today from becoming smokers; will help 31,200 adult smokers quit; and will prevent 27,300 adults and kids from premature, smoking-caused deaths. In addition the state would realize \$1.3 billion in long-term health care savings, and the tax would generate \$222.7 million in new revenue each year. A 2006 poll found that 71 percent of South Carolina voters support a 93-cent per pack increase if the revenue is used for healthcare, particularly smoking prevention and cessation programs.

South Carolina can achieve even greater reductions in smoking, especially among youth, and even greater health and financial benefits by dedicating a portion of the new cigarette tax revenue to tobacco prevention. It is only right that South Carolina spend a portion of its tobacco revenue on programs to prevent kids from starting to smoke and to help smokers quit. An increased investment in tobacco prevention is good for health and good for the economy. In addition to saving lives by reducing smoking-caused heart disease, lung cancer and other diseases, studies show that the best programs have saved as much as \$3 in smoking-caused health costs for every dollar spent on tobacco prevention.

For the latest information about the cigarette tax campaign, visit our website at www.smokefreesc.org.



93¢

Tax increase per pack



7,300

South Carolina kids become addicted smokers every year.



80% of smokers started as teens.

1 in 5 SC high school-aged youth is a current smoker.

21% of middle school students who have ever tried smoking did so before age 11.

Prevent Youth Initiation and Promote Cessation

While South Carolina's youth (ages 12-17) smoking rate has declined in recent years, our state is seeing a steady increase in the number of young adult (18-24) smokers. We still have a long way to go to keep our kids from suffering a lifetime of addiction and disease due to tobacco use.

The U.S. Centers for Disease Control and Prevention, in its Best Practices for Comprehensive Tobacco Control Programs, recommends that South Carolina spend \$62 million annually for youth smoking prevention and cessation efforts. In recent years, the state has only allocated \$2 million in non-recurring funds to this program. The South Carolina Tobacco Collaborative advocates for full funding of this key prevention strategy.

The Youth Access to Tobacco Prevention Act of 2006 was an important step in the right direction. The Act:

Makes it unlawful to sell, furnish, give, distribute, purchase for, or provide a tobacco product to a minor under the age of 18 years;

Makes it unlawful to sell a tobacco product to an individual who does not present proof of age upon demand;

Makes it unlawful to sell a tobacco product through a vending machine, unless it is either (a) located in an establishment which is only open to individuals who are 18 or older, or (b) where the vending machine is under continuous control by the owner/licensee of the premises; and

Makes it unlawful for a minor under the age of 18 to purchase, possess, or attempt to possess a tobacco

product or present false proof of age in order to purchase a tobacco product.

We also encourage South Carolina's school districts to adopt model tobacco-free policies. The key components of such policies include prohibiting the use and/or possession of all tobacco products or paraphernalia including, but not limited to, cigarettes, cigars, pipes, smokeless tobacco and snuff by all students, staff and visitors; ensuring that tobacco use prevention programs are an integral part of district substance abuse prevention efforts; and providing and/or referring to cessation services for students and staff. The goal of these policies is to provide a 100% tobacco-free, smoke-free environment for all students, staff and visitors within all district facilities, vehicles and grounds and at all district-sponsored events by doing the following:

Exhibiting healthy behavior for all students, staff, visitors and the entire community

Utilizing proven and effective science-based tobacco use prevention curricula

Providing access to cessation counseling or referral services for all students and staff.

Visit www.smokefreesc.org for a current map of school districts that have adopted model tobacco free policies.

While the law creates one layer in the youth prevention effort, our goal is not to criminalize young people. Rather, we would prefer to see prevention programs that help young people choose much earlier in life not to smoke in the first place.



5,900

South Carolinians die each year from tobacco use.

22% of SC adults smoke.

Promote Adult Cessation

The South Carolina Tobacco Collaborative supports a variety of community programs designed to help adult smokers quit. By serving as a referral source to these programs and participating as workshop providers, we support cessation efforts with the goal of reducing our state’s 22% adult smoking rate.

Physician Resources

With a recent grant from the March of Dimes, the South Carolina Tobacco Collaborative is taking an active role in working with prenatal care providers to help prevent smoking in pregnancy. The goals of the project are to determine priority geographical targets; integrate an evidence-based intervention into every prenatal practice; and encourage every clinician who interacts with women of child-bearing age to deliver effective smoking cessation advice and counseling.



Physicians can improve screening and increase cessation rates by asking patients about tobacco use at every office visit. The Best Practice Cessation Model is known as the 5 A’s: Ask, Advise, Assess, Assist and Arrange.

Call us at (803) 939-0088 or (800) 274-1893 for a free presentation of the Clinical Practices Guidelines.

phone and Internet counseling. The program offers a one-on-one approach to cessation counseling, where each caller is assigned to a personal “Quit Coach,” who will work with the participant throughout the quitting process. The program is science-based and has been clinically proven to help participants quit smoking and stay smoke-free.

Services are available 8:00 a.m. to midnight, seven days a week. After the initial call, participants will work with their Quit Coaches to schedule subsequent sessions. The Quit Coach will then call the participant at agreed-upon times and dates. Participants are free to call between scheduled sessions if they need extra support.

The S.C. Tobacco Quitline is open to any South Carolina resident. The program will prioritize services for those most in need of cessation help. It offers the most comprehensive services to the uninsured, Medicaid patients and people referred via a fax referral program by their physician.



The Quitline is a partnership between the South Carolina Department of Health and Environmental Control and Free & Clear, Inc., a Seattle-based tobacco treatment provider with experience running quitlines in 16 states.

To Quit for Keeps, call **1-800-QUIT-NOW** (1-800-784-8669).

Tobacco Quitline

The South Carolina Tobacco Quitline is a free, comprehensive tobacco treatment service featuring



COMMUNITY PARTNERSHIPS

SOUTH CAROLINA TOBACCO COLLABORATIVE

The South Carolina Tobacco Collaborative actively supports statewide coalition partners by awarding grant funds to carry out initiatives to develop healthy communities in their region. Highlights of coalition initiatives have included youth prevention strategies, development of coalition web sites, support for and recognition of local smoke-free workplaces and media campaigns to publicize smoke-free policies.

Each local coalition is engaged in area-specific projects and efforts to both reduce smoking throughout the population and to eliminate secondhand smoke exposure in public while participating in the advocacy activities of the SCTC. These organizations work directly at the local level to:

- Increase awareness of the effects of secondhand smoke exposure in businesses, schools and universities.
- Organize campaigns to reduce smoking among youth.
- Provide information on the health effects of smoking.
- Provide resources and referrals for quitting.
- Advocate for policies that reduce the toll of tobacco use in South Carolina.

Each organization welcomes volunteers and support. Please consider joining a local coalition to directly participate in making South Carolina smoke free. For a current list of coalitions, visit our website at www.smokefreesc.org.

Community Partnership Grants



Since 2003, the South Carolina Tobacco Collaborative has granted more than \$500,000 in Community Partnership Grants to help a variety of organizations across the state to develop programs and activities designed to reduce the toll of tobacco use in their communities. Grants in average amounts of \$10,000 each are awarded to community-based organizations that support the mission of SCTC and are designed to invest in projects that address the following policy goals:

Prevention of tobacco use

Cessation of tobacco use

Eliminating secondhand smoke exposure

Grant cycles run from July to June. Applications are offered and accepted during May and June with awards announced in early July at the SCTC Annual Meeting. To learn more about the Community Partnership Grants, please contact Renee Martin, SCTC Executive Director, at 1-800-274-1893 or reneemartin@smokefreesc.org.

SCTC's partner organizations include:

American Cancer Society
American Heart Association
American Lung Association
AmRAMP
Christopher Conner Foundation
Dum Spiro Spero
Family Connection of South Carolina
Living Water Foundation
Lovelace Family Medicine
March of Dimes
Musicians and Songwriters Guild of South Carolina
South Carolina Cancer Alliance
South Carolina African American Tobacco Control Network
South Carolina Asthma Alliance
South Carolina Department of Alcohol and Other Drug Abuse Services
South Carolina Department of Education
South Carolina Department of Health and Environmental Control
South Carolina Hospital Association

Partner Organizations

The South Carolina Tobacco Collaborative serves as an umbrella organization that speaks with a unified voice for tobacco prevention policy in South Carolina. The Board of Directors of the South Carolina Tobacco Collaborative is comprised of individuals representing some of our partner organizations as well as those with an interest in helping us achieve our goals. For a current list of board members, please visit www.smokefreesc.org.

We welcome additional members and partners at any time. By joining the South Carolina Tobacco Collaborative, you can add your voice and your vote to the need for effective tobacco control policy across our state and in your own community. By approaching tobacco use with a united front, we can make changes that will impact our state's health and economy.



SPONSORSHIP OPPORTUNITIES

SOUTH CAROLINA TOBACCO COLLABORATIVE

Your contribution to the South Carolina Tobacco Collaborative will help us make a difference in promoting effective tobacco control policy across our state. The South Carolina Tobacco Collaborative is a registered 501(c)3 organization. Your contribution may be tax-deductible. Please consult with your tax advisor. Click the “Donate” button at www.smokefreesc.org or mail to:

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