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Message From Donna E. Shalala

Secretary of Health and Human Services

This nation is faced with many challenges in its efforts to improve the health status of all people living in the United States. One of the biggest challenges is to remedy the fact that approximately one-fourth of our adults continue to smoke and that tobacco use rates among our youth have increased since the early 1990s. Tobacco use, particularly cigarette smoking, remains the leading cause of preventable illness and death in this country. Our overall success in improving the health status of the U.S. population thus depends greatly on achieving dramatic reductions in the rate of tobacco use among both adults and young people.

Reducing tobacco use is a key component of *Healthy People 2010*, the national action plan for improving the health of all Americans for the first decade of the 21st century. No fewer than 21 specific national health objectives related to tobacco are listed, including a goal to more than halve the current rates of tobacco use among young people and adults. Attaining all of the *Healthy People 2010* tobacco use objectives will require significant commitment and progress in numerous areas.

This Surgeon General's report provides a major resource in our national efforts to achieve the *Healthy People 2010* tobacco use objectives. The research findings reviewed indicate that many strategies and approaches have been shown to be effective in preventing tobacco use among young people and in helping tobacco users end their addiction. The challenge to public health professionals, health care systems, and other partners in our national prevention effort is to implement these proven approaches.

Through the Secretary's Initiative to Prevent Tobacco Use Among Teens and Preteens, the Department works with federal and nonfederal efforts to reduce young people's demand for tobacco products. This Surgeon General's report highlights additional strategies and approaches that this initiative can expand upon. Only by a coordinated national effort will the tobacco use rates among our young people be reduced. Each day that we delay in developing a comprehensive national response to this problem, 3,000 additional teens and preteens become regular smokers. That statistic poses an urgent public health challenge and—given that we have at hand numerous strategies proven to be effective—a moral imperative.

Foreword

For more than three decades, the Surgeon General of the U.S. Public Health Service has released reports focused on tobacco use and the health of the American people. The tone and content of these reports have changed over the years. Early on, there was a need for critical review of the epidemiologic and biologic aspects of tobacco use. Today, the deleterious effects are well documented, and the reports have begun to investigate the social, economic, and cultural consequences of these effects and what can be done to address them. The present report assesses past and current efforts to reduce the use of tobacco in this country and thereby ameliorate its disastrous health effects.

Tobacco use is an extraordinary phenomenon. Although substantial progress has been made since the initial report of the Surgeon General's Ad Hoc Committee in 1964, approximately a quarter of the U.S. adult population smokes, and the percentage of high school youth who smoke has steadily increased throughout the 1990s.

Results from community-based interventions and statewide programs show that a comprehensive approach to tobacco control is needed to curtail the epidemic. This report summarizes several effective approaches to reducing tobacco use and presents the considerable evidence—as well as the attendant controversies—supporting their application. Multifaceted school-based education programs that are performed in conjunction with community-based campaigns have met with substantial success. The management of nicotine addiction in persons who already smoke has the benefit of clinical tools, that is, systems for weaning persons from nicotine, the efficacy of which is clearly demonstrated. Product regulation, enforcement of clean indoor air standards, and protecting young people from the supposed attractiveness of cigarettes all promise substantial impact. By analyzing the economics of tobacco and by examining models that assess the effect of economic policies, we find that various approaches can mitigate the adverse outcomes associated with tobacco use—and can do so without the dire economic consequences claimed by those who profit from tobacco use.

But if the evidence is clear that tobacco use is harmful and if the tools are available to reduce its use, why has the reduction in prevalence been less than would be expected? The answer is very complex. As described in Chapter 1 of this report, numerous forces influence a person's decision to smoke, or if that person is a smoker, the forces that drive continued use. The most important force for smoking is the totality of industry activity, including advertising, promotion, organizational activity, support for ancillary issues, and political action, which maintains marketability and profitability of the product. Efforts to reduce tobacco use face a more than \$5 billion annual budget that the tobacco industry dedicates

to advertising and promotion aimed at sustaining or increasing tobacco use. Nonetheless, there is cause for optimism based on considerable public support for efforts to prevent children from becoming addicted to tobacco. If the recent pattern of increases in youth tobacco use can be reversed, we can make progress toward tobacco-free generations in the future.

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Preface

*from the Surgeon General,
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Almost 50 years ago, evidence began to accumulate that cigarette smoking poses an enormous threat to human health. More than 30 years ago, an initial report from the Surgeon General's office made an unqualified announcement of tobacco's harm. Beginning in 1969, the series of Surgeon General's reports began meticulous documentation of the biologic, epidemiologic, behavioral, pharmacologic, and cultural aspects of tobacco use. The present report, an examination of the methods and tools available to reduce tobacco use, is being issued at a time of considerable foment. The past several years have witnessed major initiatives in the legislative, regulatory, and legal arenas, with a complex set of results still not entirely resolved.

This report shows that a variety of efforts aimed at reducing tobacco use, particularly by children, would have a heightened impact in the absence of countervailing pressures to smoke. Besides providing extensive background and detail on historical, social, economic, clinical, educational, and regulatory efforts to reduce tobacco use, the report indicates some clear avenues for future research and implementation. It is of special concern to derive a greater understanding of cultural differences in response to tobacco control measures. Since racial and ethnic groups are differentially affected by tobacco, elimination of disparities among these groups is a major priority.

Perhaps the most pressing need for future research is to evaluate multifocal, multichannel programs that bring a variety of modalities together. For example, as Chapter 3 demonstrates, school-based education programs are more effective when coupled with community-based initiatives that involve mass media and other techniques. As pointed out in Chapter 4, a combination of behavioral and pharmacologic methods improves the success rate when managing nicotine addiction. Synergy among economic, regulatory, and social approaches has not been fully explored, but may offer some of the most fruitful efforts for the future. Chapter 7 provides the preliminary data on new statewide, comprehensive tobacco control programs, which offer great promise as new models for tobacco control and combine multiple intervention modalities. Although all aspects—social, economic, educational, and regulatory—have not been combined into a fully comprehensive effort, it is exciting to contemplate the potential impact of such an undertaking to eventually ensure that children are protected from the social and cultural influences that lead to tobacco addiction, that all smokers are encouraged to quit as soon as possible, and that nonsmokers are protected from environmental tobacco smoke.

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