

ASSESSING THE IMPACT OF THE TOBACCO SETTLEMENT ENDOWMENT TRUST ON OKLAHOMA'S ADULT SMOKING PREVALENCE

Executive Summary

September 9, 2016



The Tobacco Settlement Endowment Trust (TSET) requested an assessment of its impact on Oklahoma's adult smoking prevalence. To address this, two *a priori* criteria were used to identify a group of peer states to use as a comparison to Oklahoma. These criteria were total state cigarette tax (excise tax and sales tax) and the percent of the state population protected by comprehensive clean air legislation. These two criteria were selected because they are the most influential actions at the state level that can lead to a reduction in adult smoking prevalence. In essence, this analysis is designed to answer the question, "If other key influential factors are similar, does additional tobacco control funding at the state level result in greater reduction in adult smoking prevalence?"



Applying these two criteria resulted in the selection of six states (Alabama, Arkansas, Colorado, Idaho, Louisiana, and Tennessee) as a peer group for Oklahoma. From 2006 to 2014, the adult smoking prevalence in Oklahoma fell .50 percentage points per year (from 25.1% to 21.1%) while the adult smoking prevalence in the comparison states fell only .05 percentage points per year across this same time span (from 21.3% to 20.9%). This 10-fold greater rate of decrease suggests that TSET efforts have had a very favorable impact on the Oklahoma adult smoking prevalence.



Two additional analyses assessed the sensitivity of these findings to the criteria parameters. These additional analyses address whether results change significantly if different criteria parameters were selected. First, potential peer group states were required to be even more similar to Oklahoma regarding total state cigarette tax. This more restrictive threshold identified only four states for the peer group. Next, this more restrictive criteria threshold was left in place but state cigarette excise tax, rather than the combined state excise tax plus sales tax, was used as the tax criteria. This analysis identified a somewhat different set of four states to serve as the peer group. The results from these additional analyses were very similar to the original analysis and support the conclusion that TSET funding has had a very favorable impact on the adult smoking prevalence in Oklahoma.



We also explored whether the differences in rate of decline in adult smoking prevalence between Oklahoma and the comparison states could be due to differential use of e-cigarettes in Oklahoma vs. the comparison states and not due to TEST activities. While extensive e-cigarette use data is not yet available, the data that are available suggest that e-cigarette use among both youth and adults is very similar between Oklahoma and the comparison states. For example, in 2015, 23.8% of Oklahoma youth report using e-cigarettes at least once in the past 30 days vs. 24.3% of youth from the four of the six comparison states that had youth data and 24.2% in the nation as a whole. Thus, it is unlikely that differences in e-cigarette use explain the difference observed in adult smoking prevalence between Oklahoma and the comparison states.

The full report is available by contacting Julie Bisbee, TSET Director of Public Information and Outreach, at <u>JulieB@tset.ok.gov</u> or 405-521-3888.

Laura A. Beebe, PhD

Professor of Epidemiology
College of Public Health
University of Oklahoma Health
Sciences Center

Bruce A. Christiansen, PhD

Senior Scientist

Center for Tobacco Research
and Intervention

University of Wisconsin School of Medicine and Public Health

Michael C. Fiore, MD, MPH, MBA

Professor of Medicine Director, Center for Tobacco Research and Intervention

University of Wisconsin School of Medicine and Public Health

