

# 2019-2023 Strategic

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*Last updated by Commission on June 4, 2021*

**The Commission on Tobacco Use Prevention and Control (TUPC) works to reduce tobacco and nicotine use and exposure within Iowa. The TUPC Commission supports a comprehensive Iowa tobacco and nicotine control program. This is a statewide coordinated effort to establish tobacco/nicotine-free policies and social norms, to promote and assist tobacco/nicotine users to quit, and to prevent initiation of tobacco/nicotine use. This comprehensive approach combines educational, clinical, regulatory, economic, and social strategies.**

Tobacco use is the leading preventable cause of death for Iowans, taking the lives of more than 5,100 adults each year. Estimated annual health care costs in Iowa directly caused by smoking total \$1.285 billion ([Campaign for Tobacco Free Kids: Iowa](#)).

The Commission recognizes that “Tobacco” means cigarettes, tobacco products, alternative nicotine products, and vapor products (vapor products as defined in Iowa Code section 453A.1).

To achieve the initiatives listed above, the Commission will support the following:

1. Quitline Iowa cessation services.
2. Youth tobacco-use prevention programming – Iowa Students for Tobacco Education and Prevention (ISTEP).
3. Enforcement and expansion of the Iowa Smoke-free Air Act to include casinos and all nicotine products.
4. Enforcement of laws prohibiting tobacco and e-cigarette sales to youth under age 21.
5. Local tobacco control programs, called Community Partnerships, which support tobacco prevention and cessation initiatives at the community level.
6. Ongoing surveillance of youth and adult tobacco use in Iowa.
7. Voluntary policy and systems change initiatives both statewide and locally through Community Partnerships.
8. Comprehensively addressing tobacco-related health disparities in all tobacco control programming including special initiatives to reach high risk populations including pregnant women and the LGBTQ+ community.
9. Ensure evaluation of comprehensive tobacco control programming.
10. Increase the tobacco tax to a minimum of \$1.50.
11. Increase tobacco retailer licensing fees that were first established in 1921 and have remained the same.
12. Passage of legislation to authorize Iowa Department of Revenue to collect data on the sale of other tobacco products

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## Intent

**It is also the intent of the general assembly that the comprehensive tobacco use prevention and control initiative will foster a social and legal climate in which tobacco use becomes undesirable and unacceptable, in which role models and those who influence youth promote healthy social norms and demonstrate behavior that counteracts the glamorization of tobacco use, and in which tobacco becomes less accessible to youth ([Iowa Code 142A](#)).**

## 2019 – 2023 Strategic Initiatives

Over the next five years, factors such as the introduction of new tobacco-related products (for example electronic smoking devices [ESD] and heat-not-burn products), potential reduction in funding, or ongoing changes with regulatory and legal climate will create new challenges.

To prepare for these changes and continue to provide ongoing services, the Tobacco Commission has outlined the following strategic priorities for the next five years:

- Use existing surveillance data to create a more comprehensive tobacco and nicotine focused program and how best to direct our resources.
- Educate and gain the support of policymakers to restore and increase funding. Promote tobacco/nicotine control policies, and support staff in order to implement strategies effectively.
- Restore and expand funding for tobacco/nicotine control programming to a minimum of \$12 million.

## Strategic Initiative 1

Use existing surveillance data to create a more comprehensive tobacco and nicotine focused program and how best to direct our resources.

## Critical Initiatives over next 5 years

- 1 Determine five-year data that needs to be collected and how to gather it, with additional focus on reviewing data needs to track trends with disparate population use (e.g. youth, veterans, LGBTQ, people with mental illness, etc.).
- 2 Obtain approval and funding to gather needed data.
- 3 Create process/system to collect data.
- 4 Develop a plan to analyze, report, and disseminate information to stakeholders on a regular basis
- 5 Continue existing surveys (e.g. BRFSS, IYS, Point-of-Sale).
- 6 Provide support to IDPH, advocates, and Community Partnerships to implement educational programming for improved health and reduced deaths caused by tobacco and nicotine use.

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7	Work toward prohibiting Iowa sales of flavored nicotine products that appeal to youth and teens
8	Work toward increasing the tobacco retailer licensing fees
9	Work toward prohibiting Iowa sales of menthol flavored nicotine products that are targeted to minority populations

Lead/Key Resources	
Lead	Commission members
Key Resource	University of Northern Iowa

Measures of Success	
1	Increased knowledge of trends 2019-2023
2	Available comparative data (CDC Key Outcome Indicators)
3	Knowledge of new products through surveys and other surveillance
4	Consistent and complete program evaluation
5	Reduction in the use of tobacco and nicotine products.

Risks We Will Manage	
1	Strategic initiative for additional data collection is not approved and/or funded
2	Data is not complete (example: small sample size, diverse population data, etc...)

Strategic Initiative 2	
Educate and gain the support of policymakers to restore and increase funding. Promote tobacco/nicotine control public policies, and support Division staff in order to implement strategies effectively.	

Critical Initiatives Over Next 5 Years	
1	Create consistency in policy, practice, education, and messaging to all policymakers and stakeholders.
2	Create a plan to inform and educate candidates and new law makers of key tobacco issues in Iowa
3	Strengthen the cohesiveness of the tobacco advocates.
4	Improve partnership between Community Partners and advocates through role clarity, greater communication and information sharing, and ongoing education.
5	Increase the tobacco and cigarette excise tax to a minimum of \$1.50 and include alternative nicotine and vaping products.
6	Include e-cigarettes into the Smoke-free Air Act.

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<p>7 Educate and inform policymakers on issues, actions, and progress in tobacco-related health:</p> <ul style="list-style-type: none"> <li>a. When invited, present an update on current activities of the Commission to the Health and Human Services Budget Sub-committee.</li> <li>b. Tobacco advocates continue to build relationships with Community Partnerships by attending the TUPC Annual Conference.</li> <li>c. Ensure inclusion of actions and progress related to tobacco-related health disparities (e.g. youth, veterans, minorities, LGBTQ and Medicaid clients).</li> <li>d. Educate policy makers on the benefits of T21.</li> </ul>
<p>8 Eliminate Casino gaming floor exemption from the Smoke-free Air Act.</p>

## Lead/Key Resources

Lead – Commission members, Tobacco sustainability group
Key Resources –Tobacco control coalition and Commission members, Tobacco Control Advocates

## Measures of Success

1 Policy makers award funding.
2 Key Policymakers have appropriate information and education – 2019 through 2023.
3 Improved relationships between Community Partnerships, advocates, policy makers, and Division.
4 Policymakers and advocates use consistent messaging.

## Risks We Will Manage

1 Elections over plan period could bring changes in policymakers, supporters, and their views.
2 Focused time with legislators to discuss tobacco related issues.
3 Quickly and easily gathering “local” data from Community Partnerships to provide to policymakers for their specific area.
4 Consistent messaging across all groups.
5 Most appropriate person bringing the right messages to key policymakers.

Restore and expand funding for tobacco/nicotine control programming to a minimum of \$12 million.

## Critical Initiatives over next 5 years

1 Educate community partnerships on key tobacco/nicotine best practices, data and trends <ul style="list-style-type: none"> <li>a. Trainings attended (webinars, conferences, trainings for staff area of expertise)</li> <li>b. Materials used, websites reviewed, media messaging and data materials used.</li> </ul>
2 Increase dollars appropriated to contractors.
3 Encourage the CDC to explore best practices related to educating and preventing electronic cigarette device usage by youth.

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| 4 Focus more resource utilization on youth tobacco and nicotine product and device usage prevention. |
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## Lead/Key Resources

Lead – Advocacy Group, Commission members, Legislature
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Key Resources – Other members of the tobacco control coalition and Commission members, Tobacco Control Advocates
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## Measures of Success

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| 1 Iowa Department of Public Health is awarded state funding for tobacco control. |
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## Risks We Will Manage

1 State Politics
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2 State Policies
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3 Policymakers
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4 Department Policies
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5 Funding
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