

April 1, 2024

The Honorable Robert Aderholt
Chairman
Subcommittee on Labor, Health and Human
Services, Education, and Related Agencies
Committee on Appropriations
United States House of Representatives
Washington, DC 20515

The Honorable Rosa DeLauro
Ranking Member
Subcommittee on Labor, Health and Human
Services, Education, and Related Agencies
Committee on Appropriations
United States House of Representatives
Washington, DC 20515

Dear Chairman Aderholt and Ranking Member DeLauro:

As your Subcommittee moves forward with the FY 2025 Labor, Health and Human Services, Education and Related Agencies Appropriations bill, we urge you to fund the Centers for Disease Control and Prevention's (CDC) Office on Smoking and Health (OSH) at \$310 million. While we recognize that your subcommittee's funding allocation will be tight for FY 2025, increased funding for OSH is needed to make substantial progress in reducing youth tobacco use, including e-cigarettes, and the devastating toll that tobacco¹ continues to take on our nation's health. This investment will save lives and money.

Tobacco use has long been the leading preventable cause of death in the United States. Tobacco is responsible for more than 480,000 deaths and approximately \$241 billion in health care costs in the United States each year. Nearly one in three heart disease deaths and cancer deaths and nearly eight in 10 chronic obstructive pulmonary disease (COPD) deaths are caused by tobacco use. Tobacco use almost always begins during adolescence, and most adults who smoke want to quit, but overcoming an addiction to nicotine is difficult and often requires multiple quit attempts.

Youth use of e-cigarettes is a serious public health concern. CDC and the Food and Drug Administration's (FDA) most recent National Youth Tobacco Survey showed that more than 2.1 million middle and high school students, including 10 percent of high schoolers, reported using e-cigarettes last year. Alarmingly, nearly 40 percent of high school e-cigarette users reported use on 20 days or more a month, including nearly 30 percent who reported daily use, a sign that youth are becoming addicted. According to the

¹ References to tobacco in this letter refer to commercial tobacco and not ceremonial tobacco which is used by some American Indian communities.

CDC, e-cigarettes expose users to nicotine and other potentially harmful substances and are not safe. A more robust public health response is needed to prevent e-cigarettes and other new tobacco products from placing a new generation at risk for nicotine addiction and tobacco use.

While smoking rates overall have declined, approximately 28 million people in the U.S. continue to smoke cigarettes. Smoking is higher among certain groups and in particular regions of the country, including people with lower incomes and lower levels of education, Native Americans, people living in rural communities, people with behavioral health conditions, and the LGBTQ community. Black individuals in the U.S. die from smoking-caused diseases at far higher rates than other individuals despite starting to smoke at a later age, smoking fewer cigarettes per day, and being more likely to make a quit attempt. Communities with higher rates of tobacco use are the targets of tobacco industry marketing and have fewer resources for tobacco cessation. Targeted action is needed to reduce tobacco use where it remains high.

OSH has a vital role to play in addressing tobacco use. OSH provides grants to states and territories to support tobacco prevention and cessation programs, runs a highly successful national media campaign called Tips from Former Smokers (Tips), conducts research on tobacco use, and develops best practices for reducing it. Additional resources will allow OSH to address the threat to public health posed by high rates of youth e-cigarette use while continuing to prevent and reduce other forms of tobacco use. With additional resources:

- CDC could strengthen efforts to assist groups who are disproportionately harmed by tobacco products, including by designing and implementing prevention and cessation programs that are tailored to address their specific needs.
- CDC could enhance efforts to end youth and young adult tobacco use, including e-cigarette
 use, by providing more resources to state and local health departments; educating youth,
 parents, health professionals, and others about tobacco products and the harms associated
 with their use; and identifying evidence-based strategies to protect youth and young adults
 from initiating tobacco use.
- CDC could expand a program that we know works to reduce tobacco use: the Tips media campaign. From 2012 through 2018, the Tips campaign helped approximately one million people who smoke quit, prevented an estimated 129,100 smoking-related deaths, and saved an estimated \$7.3 billion in health care costs.

Additional investments in tobacco prevention and cessation will save lives, reduce tobacco-related health disparities, and reduce the cost of treating tobacco-caused disease. We urge you to increase funding for CDC's OSH to \$310 million, which will enable CDC to address the challenges posed by ecigarettes, continue to make progress reducing the death and disease caused by other tobacco products, and strengthen efforts to assist people disproportionately harmed by tobacco products.

Sincerely,

Academy of General Dentistry Action on Smoking and Health

African American Tobacco Control Leadership
Council

Allergy & Asthma Network

Alpha-1 Foundation

American Academy of Family Physicians

American Academy of Nursing

American Academy of Otolaryngology–Head and Neck Surgery

American Academy of Pediatrics

American Association for Cancer Research American Association for Dental, Oral, and Craniofacial Research

American Cancer Society Cancer Action
Network

American College of Cardiology

American College of Chest Physicians (CHEST)

American College of Obstetricians and

Gynecologists

American College of Preventive Medicine
American Dental Education Association

American Heart Association American Lung Association American Medical Association

American Medical Women's Association American Public Health Association

American Thoracic Society

Americans for Nonsmokers' Rights

Asian Pacific Partners for Empowerment, Advocacy and Leadership (APPEAL) Association for Clinical Oncology (ASCO)

Association for the Treatment of Tobacco Use

and Dependence

Association of American Indian Physicians

Association of Black Cardiologists

Association of Maternal & Child Health

Programs

Association of State and Territorial Health Officials

Asthma and Allergy Foundation of America

Big Cities Health Coalition

BlackDoctor.org

Breathe Southern California

Campaign for Tobacco-Free Kids

CATCH Global Foundation

CenterLink: The Community of LGBTQ Centers

Community Wellness Alliance

COPD Foundation

Emphysema Foundation of America First Focus Campaign for Children

GLMA: Health Professionals Advancing LGBTQ+

Equality IntelliQuit

Leadership Council for Healthy Communities

NAACP

National Association of County and City Health

Officials

National Association of Pediatric Nurse

Practitioners

National Association of School Nurses National Association of Social Workers National Black Nurses Association

National Council of Negro Women (NCNW)

National Hispanic Medical Association

National LGBT Cancer Network National Medical Association

National Network of Public Health Institutes

North American Quitline Consortium Parents Against Vaping E-cigarettes

Prevent Cancer Foundation
Preventing Tobacco Addiction
Foundation/Tobacco 21

Preventive Cardiovascular Nurses Association

Respiratory Health Association

Save A Girl Save A World

Interventions

Society for Cardiovascular Angiography &

Society for Public Health Education
The African American Wellness Project
The Center for Black Health & Equity

The National Alliance to Advance Adolescent Health

The Society of Thoracic Surgeons

Trust for America's Health