

Realizing the Vision for Tobacco Control

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Ending the tobacco epidemic represents an aspirational, yet achievable, public health vision for our nation. Fulfilling that vision requires national commitment and collaboration. To date, the nation has certainly witnessed much progress, with adult cigarette use prevalence dropping by more than 50% from the peak levels of the 1960s.^{1,2} But tobacco dependence remains the leading preventable cause of mortality in our country, causing more than 400,000 deaths annually. To accelerate progress, we need a greater commitment to action and science than ever before.

In 2010, the DHHS demonstrated further federal commitment by releasing its first-ever strategic plan to confront tobacco dependence. *Ending the Tobacco Epidemic: A Tobacco Control Strategic Action Plan*³ features four pillars:

1. Lead by example: leverage DHHS systems and resources;
2. Improve the nation's public health: strengthen the implementation of evidence-based tobacco control interventions and policies in the nation, states, and communities;
3. Engage the public: change social norms around tobacco use; and
4. Advance knowledge: accelerate research to expand the science base and monitor progress.

Since 2010, we can document substantial progress toward these goals, including:

Implementation of Food and Drug Administration regulation of tobacco (Family Smoking Prevention and Control Act enacted by Congress and signed by President Obama in 2009);

Improved coverage of tobacco cessation services by health plans, made possible by the 2010 Affordable Care Act;

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The first-ever national media campaign by the CDC, *Tips from Former Smokers*, designed to highlight the real human costs of smoking;

Expanded Medicare coverage for older smokers and expanded Medicaid coverage for pregnant smokers; and
The release of two Surgeon General's reports.^{4,5}

Many states have also demonstrated strong commitment to tobacco control over past decades. Among them, Minnesota stands out for several reasons. In 1975, Minnesota passed a clean indoor air law that was, at that time, the most advanced law in the country. This action prompted other states, and indeed other nations, to follow suit and create momentum for a smokefree future. Further, in 1998, Minnesota demonstrated vision and purpose by protecting some \$200 million dollars from its tobacco settlement funds to advance statewide tobacco control. From this commitment, ClearWay MinnesotaSM was born. In the ensuing 14 years, ClearWay has built a legacy that has not only improved the health of Minnesota but has also inspired action far beyond its own state borders. The decision to support state-based research with dedicated funding has spawned great dividends for both Minnesota and the nation at large. The Minnesota settlement with the tobacco industry also yielded the release of approximately 33 million pages of tobacco industry documents that have been instrumental in advancing tobacco control broadly.⁶

As the United States Assistant Secretary for Health, I have the privilege of promoting health in collaboration with a wide array of inspiring partners. We now have the opportunity to join the promise of the HHS Action Plan with the proven experience and dedication of public health colleagues around the country. Key state partners such as ClearWay Minnesota show us what is possible in realizing the vision for tobacco control. We hope the information shared in the papers in this supplement to the *American Journal of Preventive Medicine* can accelerate and inspire even more progress for the future.⁷⁻²⁰

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