



2015-2020 Plan for a Tobacco-Free South Carolina

Final Evaluation Report

June 30, 2021



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Executive Summary

Since South Carolina's first tobacco control plan was released in 2008, important progress has been made toward reducing tobacco use, protecting people from secondhand smoke exposure, and building a more sustainable statewide tobacco control program. The 2015-2020 Plan for a Tobacco-Free South Carolina set highly aspirational goals, such as:

- Raise the tax on cigarettes by at least \$1.00
- Increase the proportion of colleges that have tobacco-free campus policies to 100%
- Reduce the rate of cigarette, smokeless tobacco, and cigar use for adults by significant margins
- Raise tobacco prevention and cessation funding to the CDC recommended level of \$51 million from \$5 million currently granted

Although SC did not achieve most of the aspirational goals, we did make notable progress toward improving the tobacco environment in our state. Some of the key improvements include:

- Cigarette smoking prevalence rates among high school and middle school children is at an all time low in South Carolina following national trends.
- Currently 73 of the 79 school districts have put policies in place prohibiting the use of tobacco and alternative nicotine products on school campuses and at school events.
- Colleges and universities that have tobacco-free campus policies increased 32%.
- Incoming calls to the South Carolina Tobacco Quitline increased by 36% during the 2019 Tips® campaign.
- SC Tobacco Quitline services are now available 24 hours a day, 7 days a week, and Nicotine Replacement Therapy (gum, patch, lozenge) is offered for free to those with no health insurance or a health plan that does not cover cessation medications.

Among the many challenges preventing target goals from being met, the most significant has been the frequently changing tobacco environment in recent years. The addition of electronic nicotine devices, such as e-cigarettes, has made it increasingly difficult for regulation to stay current and effective. Youth and young adults have been heavily impacted by electronic nicotine devices, which has increased overall use of tobacco products among youth.

Acknowledgements

This evaluation report was written to aid in the creation of the goals for the 2021-2026 Plan for a Tobacco-Free South Carolina. Thank you to the individuals who contributed to the development of this report:

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Acronym List

ATS: Adult Tobacco Survey

CDC: Centers for Disease Control and Prevention

ENDS: Electronic Nicotine Delivery Systems

POS: Point-of-Sale which refers to any location where tobacco products are advertised, displayed, or purchased

SC: South Carolina

SC DHEC: South Carolina Department of Health and Environmental Control

SC CAN Quit: Initiative that encourages the adoption of a tobacco cessation policy as a standard of care for all SC cancer centers

SFSC: Smokefree SC

SHS: Secondhand Smoke

SYNAR: Federal program that requires each state in U.S. jurisdiction to conduct annual, random, unannounced inspections of retail tobacco outlets to monitor tobacco sale to youth

YATS: Youth Access to Tobacco Study

YTS: Youth Tobacco Survey

All Goals: 2015-2020 Plan for a Tobacco-Free South Carolina

Goals and Objectives			2015 Baseline	2020 Target	Target Date
Goal 1: Prevent the initiation of tobacco use among youth and young adults					
Objectives	P1.1	Reduce the high school (HS) tobacco use rate ¹	29.5% (2015) ⁸	21%	June 2020
	P1.2	Reduce the middle school (MS) tobacco use rate ¹	13.8% (2015) ^{8,9}	5%	June 2020
	P2.1	Raise the tax on cigarettes by at least \$1.00 ²	\$0.57	\$1.57	June 2018
	P2.2	Raise the tax on other tobacco products ²	5%	39%+	June 2018
	P2.3	Impose tax on e-cigarettes ²	No tax	Excise tax	June 2018
	P3.1	Raise the minimum legal purchase age ²	18 yrs	21 yrs	June 2020
Goal 2: Eliminate exposure to secondhand smoke					
Objectives	S1.1	Increase the proportion of persons covered by smoke-free workplace policies ³	91%	100%	June 2020
	S1.2	Increase the proportion of colleges that have tobacco-free campus policies ⁴	48% (29)	100% (60)	June 2018
	S1.3	Increase the proportion of school districts that have tobacco-free policies ^{5, 10}	78% (62/81)	100% (81)	June 2018
	S1.4	Increase the proportion of smoke-free homes ³	84%	90%	June 2020
Goal 3: Promote quitting among all tobacco users					
Objectives	C1.1	Reduce the rate of cigarette, smokeless tobacco, and cigar use for adults ³	17.8%	12%	June 2020
			4.6%	0.3%	
			4.9%	0.2%	
	C1.2	Increase cessation attempts by adult smokers and adolescent smokers ^{1,3}	45%	80%	June 2020
			58%	64%	
C1.3	Decrease the rate of mothers who have a live birth and report smoking ⁶	12%	2%	June 2020	
C2.1	Increase the percentage of adults screened for tobacco use in health care settings ³	88%	98%	June 2020	
C2.2	Increase the percentage of adults advised to quit, referred to cessation interventions by a health care provider ³	53%	63%	June 2020	
		49%	59%		
Goal 4: Strengthen statewide infrastructure and sustainability					
Objectives	I1.1	Raise tobacco prevention and cessation funding to CDC recommended level ⁷	\$5m	\$51m	June 2020
	I2.1	Require a trackable/traceable, high tech tax stamp for all tobacco products sold in SC ²	No	Yes	June 2018
	I3.1	Increase membership in, and representation of, the SCTFC ⁴	50	250	June 2020

¹ YTS ² SC LAW ³ ATS ⁴ SFSC ⁵ SC DHEC ⁶ Vital Records ⁷ State Budget ⁸ The estimates for overall tobacco use from 2015 YTS for both middle and high school did not originally include emerging products such as e-cigarettes when first reported. The numbers above have been updated to include emerging products. Additionally, the estimates for overall tobacco use in 2017 and 2019 did include e-cigarettes in their respective report. ⁹ Middle School response rates from the 2019 SC YTS were below the CDC's statistical threshold for valid data. Results should be interpreted cautiously. ¹⁰ Several school districts consolidated in 2020 changing the total number in the state to 79. This altered the denominator to generate the percentage of districts protected by TF policies. The new denominator is indicated for the endpoint figure m=million

EVALUATION OUTCOME: GOAL 1- Prevent the Initiation of Tobacco Use Among Youth and Young Adults

Goal 1 Objectives	Target Met	Baseline	Target	2020 Data
P1.1 Reduce the high school tobacco use rate ^{1,8}	No	29.5%	21%	31.4%
P1.2 Reduce the middle school tobacco use rate ^{1,8,9}	No	13.8%	5%	14.8%
P2.1 Raise the tax on cigarettes by at least \$1.00 ²	No	\$0.57	\$1.57	\$0.57
P2.2 Raise the tax on other tobacco products (OTP) ²	No	5%	39%+	5%
P2.3 Impose tax on e-cigarettes ²	No	No Tax	Excise Tax	No Tax
P3.1 Raise the minimum legal purchase age ²	No	18 yrs	21 yrs	18 yrs

¹YTS ²SC LAW ⁸The estimates for overall tobacco use from 2015 YTS questions for both middle and high school did not originally include emerging products such as e-cigarettes when first reported. The numbers above have been updated to include emerging products including e-cigarettes. Additionally, the estimates for overall tobacco use in 2017 and 2019 did include e-cigarettes in their respective reports. ⁹Middle School response rates from the 2019 SC YTS were below the CDC's statistical threshold for valid data, thus results should be interpreted cautiously.

Additional Data Not Part of Original Goal 1 Objectives	Target Met	Baseline	Target	Current Data
P1.1.a Current HS combustible tobacco use rate	N/A	23.9% (2015)	N/A	17.8% (2019)
P1.1.b Current HS non-combustible tobacco use	N/A	15.3% (2015)	N/A	24.2% (2019)
P1.1.c Current HS e-cigarette use rate	N/A	10.7% (2015)	N/A	22.1% (2019)
P1.2.a Current MS combustible tobacco use rate	N/A	10.2% (2015)	N/A	10.1 (2019) ³
P1.2.b Current MS non-combustible tobacco use	N/A	7.0% (2015)	N/A	11.8% (2019) ³
P1.2.c Current MS e-cigarette use rate	N/A	4.3% (2015) ³	N/A	9.9% (2019) ³
Current e-cigarette use rate among young adults (18-24 y/o)	N/A	N/A (2012) ²	N/A	17.4% (2018)

¹These goals were not included in the 2015-2020 state plan, however they have been add to help inform the next 5-year state plan. ²The 2012 SC ATS did not include any e-cigarette-related questions. ³Middle School response rates for the 2019 SC YTS were below the CDC's statistical threshold for valid data, results should be interpreted cautiously.

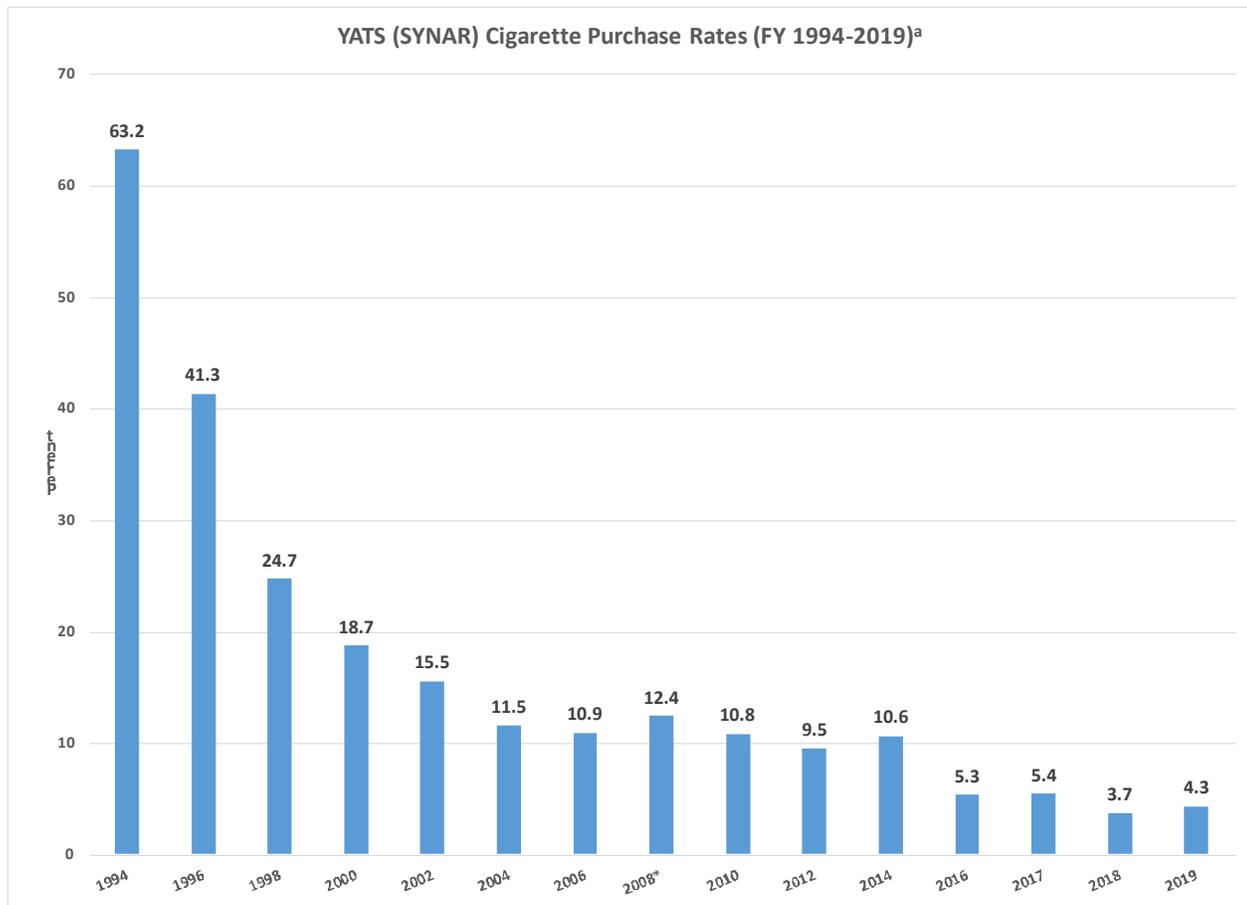
Notable Progress

- Cigarette smoking prevalence rates among high school and middle school students is at an all time low in South Carolina following national trends.
- Cigarette purchase rates by SC youth have dropped from 10.6% in 2014 to 4.3% in 2019 (Chart 1).
- Point-of-Sale assessments have been conducted in 45 of 46 SC counties (Chart 2).

Challenges

- Emerging products such as e-cigarettes have led to an increase of overall tobacco product use among youth.
- Aggressive marketing and promotion of e-cigarettes created a widespread misperception that e-cigarettes are safe.
- This misperception has led to increased use of e-cigarettes by youth and young adult never smokers and misunderstanding by parents of the risks and dangers of vaping.
- There is a lack of sufficient resources in SC to counter the tobacco industry’s aggressive marketing and deceptive messaging.

Chart 1 - Illegal Sale of Combustible Cigarettes to Minors (<18 years of age)



^a Synar—The Synar Amendment requires states to have laws prohibiting the sale and distribution of tobacco products to minors. Data are labeled based on when they were collected. Typically these data are collected in January and February, but reported to SAMHSA the following December, meaning they are collected in one fiscal year and reported to SAMHSA the next fiscal year. For example, the 2016 data match the FY 2017 submission to SAMHSA by DAODAS. *Beginning in 2008, the state did not allow 14-year-old inspectors, who consistently had lower purchase rates than 15- to 17- year-olds.

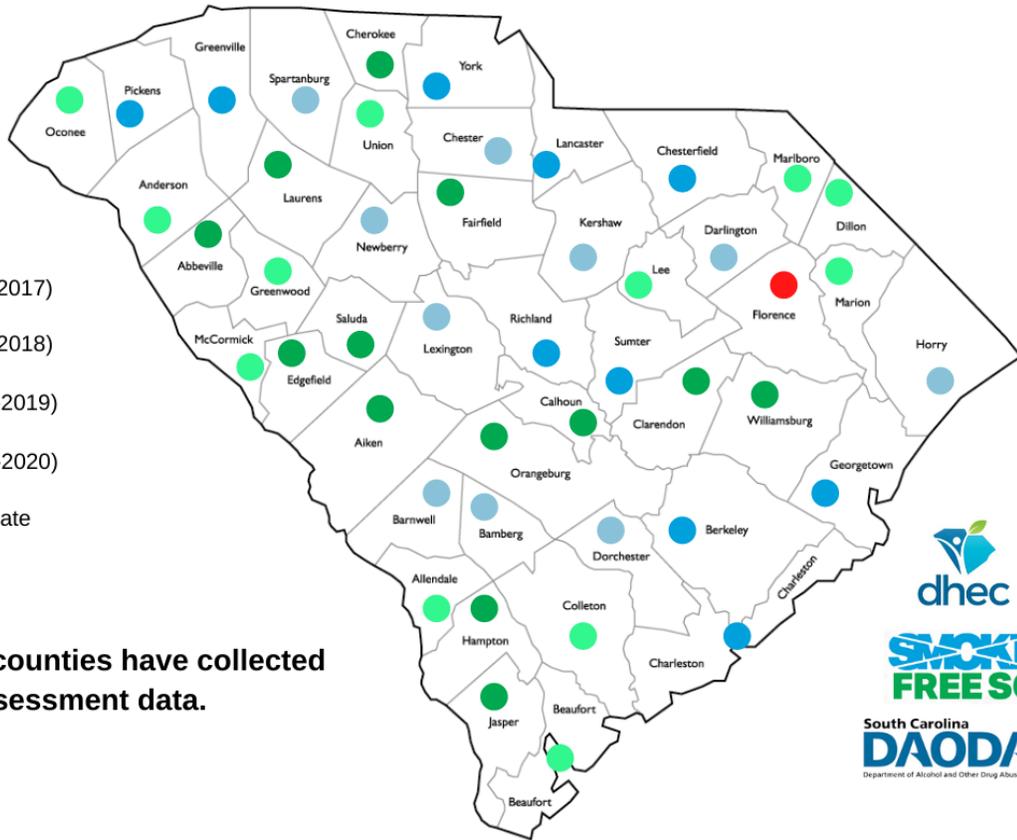
Chart 2 - Point-of-Sale County Assessments

SC Point-of-Sale County Assessment Work

Cohorts

-  Cohort 1 (2016-2017)
-  Cohort 2 (2017-2018)
-  Cohort 3 (2018-2019)
-  Cohort 4 (2019-2020)
-  Did Not Participate

45 out of 46 SC counties have collected Point-of-Sale assessment data.



EVALUATION OUTCOME: GOAL 2 - Eliminate Exposure to Secondhand Smoke

Goal 2 Objectives	Target Met	Baseline	Target	2020 Data
S1.1 Increase the proportion of persons covered by smokefree workplace policies ³	No	91%	100%	85.5%
S1.2 Increase the proportion of colleges that have tobacco-free campus policies ⁵	No	48%	100%	80%
S1.3 Increase the proportion of school districts that have tobacco-free policies ^{5,10}	No	78%	100%	93.67%
S1.4 Increase the proportion of smokefree homes ³	No	84%	90%	84.14%

³ ATS ⁵ SC DHEC ¹⁰Several school districts consolidated in 2020 changing the total number in the state to 79. This altered the denominator to generate the percentage of districts protected by TF policies. The new denominator is indicated for the endpoint figure

Notable Progress

- Overall, there has been gradual declines in nonsmokers' exposure to SHS by way of smokefree policies throughout the state.
- In May 2019, state law was updated under the South Carolina Code of Laws: Youth Access to Tobacco Prevention Act. This update mandates local school districts to adopt, implement and enforce a written policy prohibiting the use of tobacco and alternative nicotine products on school campuses and at school events. Currently 74 of the 79 school districts have put policies in place.
- Even though Objective S1.2 was not met, colleges and universities that have tobacco-free campus policies increased 32%, and the proportion of school districts that have tobacco-free policies increased 17%.
- Lancaster County became the first smokefree county in SC, meaning that all municipalities, the public school district, and all colleges and universities have broad tobacco-free policies.
- Atlantic and Surfside beaches are the first smokefree beaches in SC.

Challenges

- Local and state policies have not been able to stay up to date with the pace of emerging products.
- Proposed preemption bills in the state legislature threaten local government's power to set smokefree policies.
- Only a small number of SC communities have active and engaged coalitions focused on developing local smokefree policies.

Notable Progress

- While the Objective C1.2 target goal was not met, the number of adult smokers making a quit attempt increased by 25%, from 45% to 55.9%.
- Incoming calls to the South Carolina Tobacco Quitline increased by 36% during the 2019 Tips® campaign.
- While the Objective C2.2 target goal was not met, health care provider referrals to the Quitline increased by 60% over the past 5 years (SC DHEC, 2020).
- Five SC cancer centers contracted to participate in adopting an e-referral cessation treatment program through SC CAN Quit.

Challenges

- The South Carolina Tobacco Quitline is used by less than 2% of smokers in any given year (SC DHEC, 2019).
- Patient screening for smoking is not widely integrated in practice guidelines and subsequent cessation service referrals are utilized by less than half of SC healthcare providers.
- Funding available for innovative pilot studies to test strategies to improve the delivery of smoking cessation treatments to high-risk populations is under \$3 million and unlikely to have any measurable impact on smoking prevalence.

EVALUATION OUTCOME: GOAL 4 - Strengthen Statewide Infrastructure and Sustainability

Objectives	Target Met	Baseline	Target	2020 Data
I1.1 Raise tobacco prevention and cessation funding to CDC recommended level ⁷	No	\$5m	\$51m	\$6.12m
I2.1 Require a trackable/traceable, high tech tax stamp for all tobacco products sold in SC ²	No	No	Yes	No
I3.1 Increase membership in, and representation of, the SCTFC ⁴	No	50	250	0

²SC LAW ⁴SFSC ⁷State Budget

Notable Progress

- SC Tobacco Quitline services are now available 24 hours a day, 7 days a week, and Nicotine Replacement Therapy (gum, patch, lozenge) is offered for free to those with no health insurance or health plan covering quit medications.
- Financial sustainability was achieved for the SC Tobacco Quitline by obtaining 50% of the administrative match provided by Centers for Medicare & Medicaid Services for Quitline services provided to Medicaid members.
- SC now has enhanced tobacco cessation coverage with no co-pay or prior authorization for full-benefit Medicaid beneficiaries.
- State Law (SC Code of Laws Title 12 Section 12-21-735) requiring a tobacco tax stamp, a form of tobacco sale regulation, was implemented in January 2019. The initial stamp is old technology, but the law was written to allow for an update to high-tech tax stamps to prevent counterfeiting.

Challenges

- SC Legislature has historically opposed tax increases of any kind, making it difficult to advocate and get support for increased or new taxes on tobacco products.
- Not all counties are represented in the SC Youth Tobacco Survey (YTS) as schools are not mandated to participate and/or they are already over-burdened with student surveys.
- SC's Tobacco and Prevention Control program is funded at \$6.124 million, significantly less than the CDC recommended level of \$51 million.

Priority Goal Recommendations for the 2021-2026 Plan for a Tobacco-Free South Carolina

Youth Initiation and Cessation

- Advocate for local and statewide Tobacco Retailer Licensing to persuade retailers from violating state or local laws against selling tobacco products to minors
- Increase education for parents and other youth influencers about the danger and risks of ENDS
- Promote evidence-based tobacco education programs to schools
- Advocate for efforts to ban all flavored nicotine products with national, state, and local efforts
- Promote e-cigarette cessation to young adults via college campus campaigns and programs

Secondhand Smoke Exposure

- Expand smokefree workplace policies across South Carolina, particularly in rural areas where there are fewer protections
- Develop and strengthen campus policies to reflect the evolving market, especially ENDS
- Increase community education on the benefits of smokefree policies

Adult Cessation

- Focus cessation efforts on disparate and high-use populations
- Increase publicity and promotion of the South Carolina Tobacco Quitline with an emphasis on disparate and high-use populations
- Advocate for healthcare system and practice management changes that will significantly enhance cessation efforts (such as expanded insurance reimbursements, extensive provider training, and new system change programs)
- Support national, state, and local advocacy efforts to ban the sale of menthol cigarettes, small cigars, and cigarillos

Infrastructure

Funding:

- Advocate for increased tobacco product taxes and that all tobacco products are taxed
- Advocate for increased tobacco control and prevention funding based on CDC recommended funding levels

Surveillance:

- Establish a system for stakeholders to regularly report achievement of goals
- Work with SC Department of Education to develop an effective method to increase school participation in the Youth Tobacco Survey
- Expand SC DHEC's surveillance capacity to update models and assumptions, track data to determine health and economic burdens caused by SHS, and develop new survey techniques, and update measures for tracking population level data through increased funding for the tobacco control and prevention program
- Expand current monitoring of illegal sale of cigarettes to minors to include other tobacco products including ENDS

Format and Implementation Recommendations for 2021-2026 Plan for a Tobacco-Free South Carolina

Format

- Consider emphasizing a small number (less than 5) of high impact goals among all goals outlined especially as related to health disparities among high use populations
- Include only data points that are essential, regularly updated, and readily available
- Set smaller, more achievable goals rather than setting highly aspirational goals found in 2015-2020 State Plan
- Identify method to update plan to respond to emerging products or tobacco environment
- Expand youth initiation goal area to include cessation

Implementation

- Establish and maintain an ongoing evaluation team for the next State Tobacco Plan to review and evaluate outcomes
- Educate state and community-level partners on the new State Plan
- Present new Plan to stakeholders along with reporting system

APPENDIX 1 - Additional South Carolina Tobacco Related Data

The blue text below indicates 2020 target goals that were achieved.

	South Carolina Tobacco Use Data	Target Met	Target	2005 - 2007	2012 - 2015	2020
Deaths	Adults who die each year from their own smoking ¹	N	lower	5,900	7,200	7,200
	Children now under 18, who will ultimately die prematurely from smoking-related illnesses	N	lower	103,000	103000*	103,000
Costs	Annual health care costs directly caused by smoking ¹	N	lower	\$1.09b	\$1.9b	\$1.9b
	Annual Medicaid costs directly caused by smoking ¹	N	lower	\$393b	\$476m	\$476m
	Annual smoking-caused productivity losses ¹	N	lower	\$1.83b	\$2.35b	\$2.35b
	Residents' state and federal tax burden from smoking-caused government expenditures (per household) ¹	Y	lower	\$543	\$975	\$833
Tobacco Use ²	Adults who smoke ²	N	12%	19%	18%	18%
	Adults who smoke and have household income less than \$30,000	N	12%	no data	26%	22%
	Young adults who smoke (18-24 years) ²	Y	12%	32%	21%	11.10%
	High school students who smoke (15-17 years) ³	Y	8%	19%	15%	4.90%
	High school students who use any form of tobacco ³	N	18%	28%	27%	27.50%
	Middle school students who smoke (12-14 years) ³	Y	3%	9%	5%	1.80%
	Children who become new daily smokers each year ¹	Y	2,600	7,300	3,900	1,800
SHS Exposure	Mothers who smoke during pregnancy ⁴	N	2%	12%	12%	8.20%
	High school students exposed to secondhand smoke (SHS) at home ³	N	16%	35%	32%	26.30%
	Middle school students exposed to secondhand smoke at home ³	N	13%	37%	26%	26.20%
	Adults who have a voluntary smoke-free policy at home ²	N	90%	80%	83%	84.14%
	Adults who have a smoke-free policy at work ²	N	100%	74%	91%	92%
	SC population protected by smoke-free indoor workplace laws ⁵	N	100%	9%	40%	41%
	Colleges with tobacco-free campuses ⁵	N	100%	8%	48%	80%
Quitting	School districts with comprehensive tobacco-free policies ⁵	N	100%	21%	78%	95%
	Adult smokers who made a quit attempt in the past year ⁶	N	65%	45%	45%	55.90%
	Total SC Tobacco Quitline (1-800-QUIT-NOW) calls per year ⁶	N	31,608	4,051	15,575	19,945
	Percentage of all adult smokers who call the SC Tobacco Quitline ⁶	N	5%	>1%	2%	1.60%
Tax, Sales, Revenue, Funding	Adult smokers advised by healthcare professional to stop smoking in the past year ⁶	N	63%	51%	53%	53.80%
	State tax rate on each pack of cigarettes ¹	N	\$1.57+	\$0.07	\$0.57	\$0.57
	State tax rate on other tobacco products ¹ (OTP)	N	39%+	5%	5%	5%
	High-tech tax stamp on each pack of cigarettes ⁸	N	Yes	No	No	No
	Average price for a pack of cigarettes ⁷	N	\$6.00+	\$3.15	\$4.88	\$5.32
	Cigarette pack sales ⁷	Y	lower	394m	281m	273.4m
	Cigarette tax revenue ⁷	N	\$331m [^]	\$27m	\$156.4m	\$147.6m
	OTP tax revenue ⁷	N	\$44.7 [^]	\$5.3m	\$7.7m	\$10.1m
	Tobacco Master Settlement Agreement payments to SC ⁷	N	~\$75m	\$71.4m	\$90.5m	\$78.7m
	TOTAL state revenue from tobacco ⁷	N	~\$450m	~104m	~\$254m	\$236m
	Estimated tobacco industry marketing expenditures in SC ¹	N	lower	\$282.6m	\$194.9m	\$201.2m
	State funding for SC Tobacco Prevention and Control program ¹	N	\$51m	\$2m	\$5m	\$6.124m
	State funding as a % of CDC recommended funding level (\$51m) ¹	N	100%	3%	10%	12%

¹Percentages are rounded ^{*}No new data found ^{**}Baseline changed from BRFSS to ATS ¹Campaign for Tobacco-Free Kids
²Adult Tobacco Survey ³Youth Tobacco Survey ⁴Pregnancy Risk Assessment Monitoring System ⁵American Nonsmokers' Rights Foundation
⁶SCDHEC/Quitline ⁷Tax Burden on Tobacco ⁸Centers for Disease Control [^]Campaign for Tobacco-Free Kids tax increase revenue projections
 m=million b=billion Other Tobacco Products=flavored cigars, hookah, smokeless tobacco, etc.

APPENDIX 2 - Data References

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