

Best Practices

for Comprehensive Tobacco Control Programs

Defines the specific annual investment needed for state comprehensive tobacco control programs to implement what we know works to reduce tobacco-related disease and death.

Tobacco Control Investments Work

Investing in Comprehensive Tobacco Control Programs:

- Prevents initiation among youth and young adults
- Promotes quitting among adults and youth
- Eliminates exposure to secondhand smoke
- Identifies and eliminates tobacco-related disparities

State Funding For Tobacco Prevention and Control

Although tobacco control is a “best buy,” many states have experienced severe cuts to state and local tobacco control funding. In 2010, states appropriated only 2.4% of their tobacco revenue for tobacco control.



Comprehensive tobacco control programs work and are a public health “best buy.” For example, California’s tobacco control program yielded a \$55:\$1 return on investment during 1989–2008, and its lung cancer incidence is declining four times faster than the rest of the country.

CDC's Best Practices for Comprehensive Tobacco Control Programs—2014

Recommended National Investment	Total	State and Community Interventions	Mass-Reach Health Communication Interventions	Cessation Interventions	Surveillance & Evaluation	Infrastructure, Administration, & Management
Total Level (dollars in millions)	Minimum: \$2,325.3 Recommended: \$3,306.3	Minimum: \$856.7 Recommended: \$1,071	Minimum: \$370.1 Recommended: \$532	Minimum: \$795.1 Recommended: \$1,271.9	Minimum: \$202.6 Recommended: \$287.7	Minimum: \$100.8 Recommended: \$143.7
Per Person (based on total state population)	Minimum: \$7.41 Recommended: \$10.53	Minimum: \$2.73 Recommended: \$3.41	Minimum: \$1.18 Recommended: \$1.69	Minimum: \$2.53 Recommended: \$4.05	Minimum: \$0.65 Recommended: \$0.92	Minimum: \$0.32 Recommended: \$0.46

National Center for Chronic Disease Prevention and Health Promotion
Office on Smoking and Health



Considerations For Funding Levels

The funding levels in *Best Practices–2014* are reflective of several developments since *Best Practices–2007*:

- Additional state experiences in implementing comprehensive tobacco control programs.
- Enhanced scientific evidence base for effective tobacco prevention and control interventions.
- A changing tobacco control landscape, including new federal activities such as the Affordable Care Act and the U.S. Food and Drug Administration's authority to regulate tobacco products.
- Greater efficiency in certain component areas (e.g., lower costs for media buys).
- Greater efficiency in integrating activities into a larger framework of state and community interventions (e.g., incorporating youth access law enforcement and school prevention activities as part of broader community mobilization efforts).

These changes enable tobacco control programs to work more efficiently and see even greater return on investments.

CDC's *Best Practices–2014* includes two funding levels:

- *Minimum*: The lowest amount of funding needed to implement a comprehensive tobacco control program.
- *Recommended*: The ideal investment for comprehensive tobacco control programs. Programs funded at the recommended level see the greatest return on investment.



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