

**National Tobacco Control Program Fact Sheets**  
**Data Sources and Methodologies**  
**CDC Office on Smoking and Health**

The National Tobacco Control Program (NTCP) state fact sheets highlight national data. States often conduct state-level surveys that may be helpful to understand the full scope of tobacco use in a particular state. For more detailed information, please contact the state health department at <https://www.cdc.gov/tobacco/stateandcommunity/tobacco-control/index.htm> which provides a map with links to all the NCTP programs.

**Percent of Adults Currently Smoking Cigarettes**

- Definition: Adult current cigarette smokers were defined as respondents who had smoked  $\geq 100$  cigarettes during their lifetime and responded "every day" or "some days" to the question, "Do you now smoke cigarettes every day, some days, or not at all?"
- Methods: Data are rounded to the nearest tenth. For more information about methods, please visit [https://www.cdc.gov/brfss/data\\_documentation/index.htm](https://www.cdc.gov/brfss/data_documentation/index.htm).
- Source of Data: Centers for Disease Control and Prevention. Behavioral Risk Factor Surveillance System (BRFSS). Available at <http://www.cdc.gov/brfss/>. Dataset available at: <https://chronicdata.cdc.gov/Survey-Data/Behavioral-Risk-Factor-Data-Tobacco-Use-2011-to-pr/wsas-xwh5>.

**Percent of Youth Currently Using Any Tobacco Product**

- Definition: Percent of high school students who reported using cigarettes, smokeless tobacco, cigars, or electronic vapor products on at last 1 day during the 30 days before the survey.
- Indicator Label: Currently used tobacco
- Methods: Data are rounded to the nearest tenth. If state data were not available, national estimates were used instead (labeled U.S. data). For more information about methodology, please visit <https://www.cdc.gov/healthyyouth/data/yrbs/methods.htm>.
- Source of Data: Centers for Disease Control and Prevention. Youth Risk Behavior Surveillance System (YRBSS). Available at <http://www.cdc.gov/yrbs/>.

**Percent of Youth Currently Smoking Cigarettes**

- Definition: Percent of high school students who reported smoking cigarettes on at least 1 day during the 30 days before the survey.
- Indicator Label: Currently smoked cigarettes
- Methods: Data are rounded to the nearest tenth. If state data were not available, national estimates were used instead (labeled U.S. data). For more information about methodology, please visit <https://www.cdc.gov/healthyyouth/data/yrbs/methods.htm>.
- Source of Data: Centers for Disease Control and Prevention. Youth Risk Behavior Surveillance System (YRBSS). Available at <http://www.cdc.gov/yrbs/>.

## Smoking Attributable Deaths

- Definition: Average annual number of deaths over a specified time period based on diseases for which the U.S. Surgeon General has determined that cigarette smoking is a causal factor.
- Methods: Average annual estimates are presented for 2005-2009 and are based deaths in adults aged 35 years and older from 23 diseases for which the U.S. Surgeon General has determined that cigarette smoking is a causal factor (SGR 2014). Smoking attributable deaths are estimated based on methods described by Levin (1953). Deaths attributable to use of other tobacco products (e.g., cigars, pipes, smokeless tobacco) are not included. Deaths from fires and deaths attributable to exposure to secondhand smoke also are not included. Total deaths are unrounded. For more information about methodology, please visit <https://chronicdata.cdc.gov/Health-Consequences-and-Costs/Smoking-Attributable-Mortality-Morbidity-and-Econo/w47j-r23n>.
- Source of Data: Centers for Disease Control and Prevention. Best Practices for Comprehensive Tobacco Control Programs — 2014. Atlanta: U.S. Department of Health and Human Services, Centers for Disease Control and Prevention, National Center for Chronic Disease Prevention and Health Promotion, Office on Smoking and Health, 2014. Available at [https://www.cdc.gov/tobacco/stateandcommunity/best\\_practices/](https://www.cdc.gov/tobacco/stateandcommunity/best_practices/).

## Productivity Losses Due to Smoking

- Definition: Cigarette smoking status (currently smoke, formerly smoked, or never smoked) was defined using self-reported responses to these NHIS questions: (1) Have you smoked at least 100 cigarettes in your entire life? (2) Do you now smoke cigarettes every day, some days or not at all? and (3) How long has it been since you quit smoking cigarettes? Adults who currently smoke cigarettes were those who smoked  $\geq 100$  cigarettes in their lifetime and smoked some days or every day at the time of the interview. Adults who formerly smoked were defined as having smoked at least 100 cigarettes in their lifetime but had quit smoking at the time of the interview. Adults who never smoked were identified as those who reported smoking fewer than 100 cigarettes in their lifetime.
- Methods: The cost of morbidity-related productivity losses attributable to cigarette smoking was computed as the sum of the cigarette smoking-attributable costs from absenteeism and presenteeism among those employed and inability to work and household productivity losses regardless of person's employment status.
- Source of Data: Sundar S. Shrestha, Ramesh Ghimire, Xu Wang, Katrina F. Trivers, David M. Homa, Brian S. Armour, Cost of Cigarette Smoking-Attributable Productivity Losses, U.S., 2018, American Journal of Preventive Medicine, Volume 63, Issue 4, 2022, Pages 478-485, ISSN 0749-3797, <https://doi.org/10.1016/j.amepre.2022.04.032>.

## National Tobacco Control Program Funding

- Definition: Total fiscal year state funding received from CDC

- Methods: CDC supported comprehensive tobacco control programs in all 50 states, the District of Columbia, 8 US territories or jurisdictions, and 12 tribal organizations. In addition, CDC provided funding to states and territories to ensure and expand state quitline capacity. Data were calculated by combining the funding year state Prevention and Public Health Fund (PPHF) dollars with funding year National Tobacco Control Program funding from the annual Budget Authority for total state funding in the current funding year. For the purposes of this report, data in thousands are rounded to the nearest thousands. Data in millions are rounded to the nearest hundred thousand.
- Source of Data: Office on Smoking and Health, Centers for Disease Control and Prevention. For more information, visit <https://www.cdc.gov/tobacco/stateandcommunity/tobacco-control/program-funding/index.htm>

### ***Tips from Former Smokers (Tips®) Campaign Call Volume***

- Definition: Changes in call volume to 1-800-QUIT NOW during the *Tip*® campaign expressed as total calls during the campaign and percent increase in call volume during the campaign compared to an estimated baseline call volume.
- To assess the immediate impact of the *Tips*® campaign, CDC constructed multivariable linear regression models based on National Cancer Institute call volume data. We utilized these models to estimate an average weekly baseline call volume for the weeks that the campaign was on air for each state. The model predicted baseline can be interpreted as what weekly call volume would have been on average had the *Tips*® campaign not aired. The number of additional calls generated by the campaign was calculated by subtracting the average weekly baseline call volume from the model's predicted call volume based on the actual campaign implementation. We then divided the estimated call volume generated by the *Tips*® campaign by our predicted baseline call volume to calculate the percent increase in call volume. Please note that 1-800-QUIT-NOW call volume estimates represent call attempts, not completed calls. In addition, some state quitlines maintain and promote other numbers besides 1-800-QUIT-NOW.
- Source of Data: Data provided by the National Cancer Institute to the Office on Smoking and Health, Centers for Disease Control and Prevention. Calculations performed by CDC. Unpublished data.
- Notes: Preliminary data.