



# Data and Trends on Tobacco Use in Nebraska 2018

UNDERSTANDING  
THE BURDEN  
OF TOBACCO



for a great state of health

**NEBRASKA**

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DEPT. OF HEALTH AND HUMAN SERVICES

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# 2018 - DATA AND TRENDS ON TOBACCO USE IN NEBRASKA

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*Prepared by the*

**Nebraska Department of Health and Human Services**  
**Division of Public Health**  
TOBACCO FREE NEBRASKA PROGRAM

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# Statistical Summary

## Adult Tobacco Use

Adult cigarette smoking rate <sup>1</sup> . . . . .	15.4% (BRFSS 2017)
Adult smokeless tobacco use rate . . . . .	5.3% (BRFSS 2017)
Adult e-cigarette use rate <sup>2</sup> . . . . .	3.8% (BRFSS 2017)
Adult quit attempt rate among current smokers . . . . .	55.6% (BRFSS 2017)

## Youth Tobacco Use

Ever tried smoking cigarettes, even one or two puffs. . . . .	24.0% (YRBS 2017)
Ever used e-cigarette. . . . .	36.1% (YRBS 2017)
Youth cigarette smoking rate <sup>3</sup> . . . . .	7.4% (YRBS 2017)
Youth smokeless tobacco use rate . . . . .	5.3% (YRBS 2017)
Youth e-cigarette use rate . . . . .	9.4% (YRBS 2017)

## Exposure to Secondhand Smoke

Non-smokers' exposure to secondhand smoke at home . . . . .	2.7% (ATS 2017)
Homes with a smoke-free rule . . . . .	92.0% (BRFSS 2017)
Non-smokers' exposure to secondhand smoke in family car . . . . .	8.6% (ATS 2017)
Family vehicles with a smoke-free rule . . . . .	87.1% (BRFSS 2017)

## Morbidity and Mortality Associated with Tobacco in Nebraska

Annual smoking-related deaths in Nebraska <sup>4</sup> . . . . .	2,500 (CDC 2014)
Annual smoking-related healthcare cost <sup>5</sup> . . . . .	\$795 million (CDC 2014)
Annual smoking-related healthcare cost per household . . . . .	\$737 (CDC 2014)
Annual smoking-related years of productive life lost . . . . .	10 years (CDC 2014)

Sources: Adult Tobacco Survey (ATS); Behavioral Risk Factor Surveillance System (BRFSS); Youth Risk Behavior Surveillance System (YRBS)

<sup>1</sup> Adult smoking rate includes individuals who have smoked 100 cigarettes in their lifetime and who currently smoke every day or some days.

<sup>2</sup> E-cigarettes refer to all varieties of electronic products.

<sup>3</sup> Youth smoking rate includes individuals who have smoked cigarettes in the last 30 days.

<sup>4</sup> CDC, *Best Practices for Comprehensive Tobacco Control Programs, 2014*.

<sup>5</sup> *Annual Healthcare Spending Attributable to Cigarette Smoking: An Update, Am J Prev Med, 2014*.



## Nebraska Tobacco Facts

*Every year, Nebraska spends at least \$737 per household for smoking related medical expenses and lost productivity.*

- Adult smoking rate: 15.4% in 2017.
- Youth (grades 9-12) smoking rate: 7.4% in 2017 — down from 34% in 1993.
- Youth who use smokeless tobacco (chew): 5.3% in 2017 — down from 10.1% in 2003.
- Youth who use cigars, cigarillos, or little cigars: 6.7% in 2017 — down from 18.2% in 2003.
- Over 2,500 Nebraskans die each year from smoking-attributable causes.
- Number of kids now under 18 who will likely die early from smoking (if current trends continue): 38,000
- Nebraska kids (under 18) who will become new daily smokers each year: 700
- Annual smoking-related medical expenses: \$795 million
- Annual cost of lost productivity due to smoking: \$605 million
- 93% of Nebraskans agree that inhaling secondhand smoke is harmful to children and adults.
- The smoking rate among pregnant women in Nebraska is 9%.

Sources: Nebraska Behavioral Risk Factor Surveillance System (BRFSS), Nebraska Youth Risk Behavior Survey (YRBS), Nebraska Vital Statistics, Nebraska Adult Tobacco Survey, Nebraska Pregnancy Risk Assessment Monitoring System (PRAMS), Substance Abuse and Mental Health Services Administration (SAMHSA), U.S. Centers for Disease Control and Prevention, Campaign for Tobacco-Free Kids. Updated: October 2018.

## Introduction

**D**uring the development and subsequent revisions of the national tobacco control program, the Centers for Disease Control and Prevention (CDC) developed Key Outcome Indicators for use by state tobacco control programs. These indicators were summarized in the May 2005 publication, *Key Outcome Indicators for Evaluating Comprehensive Tobacco Control Programs*<sup>1</sup> and subsequent updates and revisions.

The State of Nebraska used the framework detailed in this document, in addition to future revisions, to develop and implement the tobacco control program for Nebraska, known as Tobacco Free Nebraska. There are four major themes identified by the CDC and focused on by Tobacco Free Nebraska. In addition to background information, this report presents information focused on these areas.

- **Goal 1: Preventing Initiation of Tobacco Use Among Young People**
- **Goal 2: Promoting Quitting Among Adults and Young People**
- **Goal 3: Eliminating Nonsmokers' Exposure to Secondhand Smoke**
- **Goal 4: Eliminating Tobacco-related Disparities**



# Tobacco Use is an International, National, State, County, Local, and Neighborhood Problem

Despite successful initiatives to reduce the number of individuals using tobacco products, tobacco use remains the leading cause of preventable death in the United States and worldwide. Progress has been made, as evidenced by the recently reported decline in cancer deaths in the U.S., primarily due to a reduction in smoking.

The efforts of Tobacco Free Nebraska, participating sub-grantees, and others are an important piece of the global public health fight against tobacco products. More than 7 million deaths worldwide will be attributable to direct tobacco use in 2019 and an additional 890,000 deaths a result of exposure to secondhand smoke.



**7 million deaths per year**



**480,000 deaths per year**



**2,500 deaths per year**

<sup>1</sup> Starr G, Rogers T, Schooley M, Porter S, Wiesen E, Jamison N. *Key Outcome Indicators for Evaluating Comprehensive Tobacco Control Programs*. Atlanta, GA: Centers for Disease Control and Prevention; 2005.

<sup>2</sup> [www.nbcnews.com/health/health-news/cancer-deaths-fall-thanks-mostly-drop-smoking-n834686](http://www.nbcnews.com/health/health-news/cancer-deaths-fall-thanks-mostly-drop-smoking-n834686)

<sup>3</sup> The World Health Organization, *Tobacco Fact Sheet*, [www.who.int/mediacentre/factsheets/fs339/en/](http://www.who.int/mediacentre/factsheets/fs339/en/)

Of the many risk factors leading to human mortality, smoking ranks as one of the largest contributors. In Nebraska, an estimated 2,500 Nebraskans will die prematurely as a result of tobacco use in 2019. In addition to the significant mortality, at least 75,000 Nebraskans are suffering from at least one serious smoking-attributable illness such as coronary heart disease, stroke, lung cancer, emphysema and chronic bronchitis.

This report summarizes data on the use, attitudes, policies and consequences of tobacco use in Nebraska. When available, trend data is provided to illustrate changes over time.

The Department of Health and Human Services Division of Public Health provides resources to the public and regional tobacco control coalitions via Tobacco Free Nebraska (TFN) to help reduce the burden of tobacco use in the state. Evidence-based tobacco control initiatives, such as providing the Nebraska Tobacco Quitline (1-800-QUIT-NOW) and other services are provided by Tobacco Free Nebraska.

This report presents the highlights of tobacco control initiatives and tobacco use in Nebraska; however, additional detail and information about tobacco use, prevention, and control in Nebraska are available. Please contact:



for a great state of health

Tobacco Free Nebraska  
at **(402) 471-2101**  
or [dhhs.tfn@nebraska.gov](mailto:dhhs.tfn@nebraska.gov)  
with requests for additional information.

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<sup>4</sup> The Centers for Disease Control and Prevention, *Extinguishing the Tobacco Epidemic in Nebraska*, [www.cdc.gov/tobacco/about/osh/program-funding/pdfs/nebraska-508.pdf](http://www.cdc.gov/tobacco/about/osh/program-funding/pdfs/nebraska-508.pdf), 2017.

<sup>5</sup> Centers for Disease Control and Prevention, *Health Effects of Cigarette Smoking*, [www.cdc.gov/tobacco/data\\_statistics/fact\\_sheets/health\\_effects/effects\\_cig\\_smoking/index.htm](http://www.cdc.gov/tobacco/data_statistics/fact_sheets/health_effects/effects_cig_smoking/index.htm), 2017.

# Tobacco Control Vaccine

Since 1964, when the first Surgeon General Report on the health consequences of smoking was released, state and local governments, the federal government, and other advocacy and special interest organizations organized to reduce the prevalence of tobacco use. Since the first report came out, organizations tried different methods and strategies to impact the use of tobacco products.

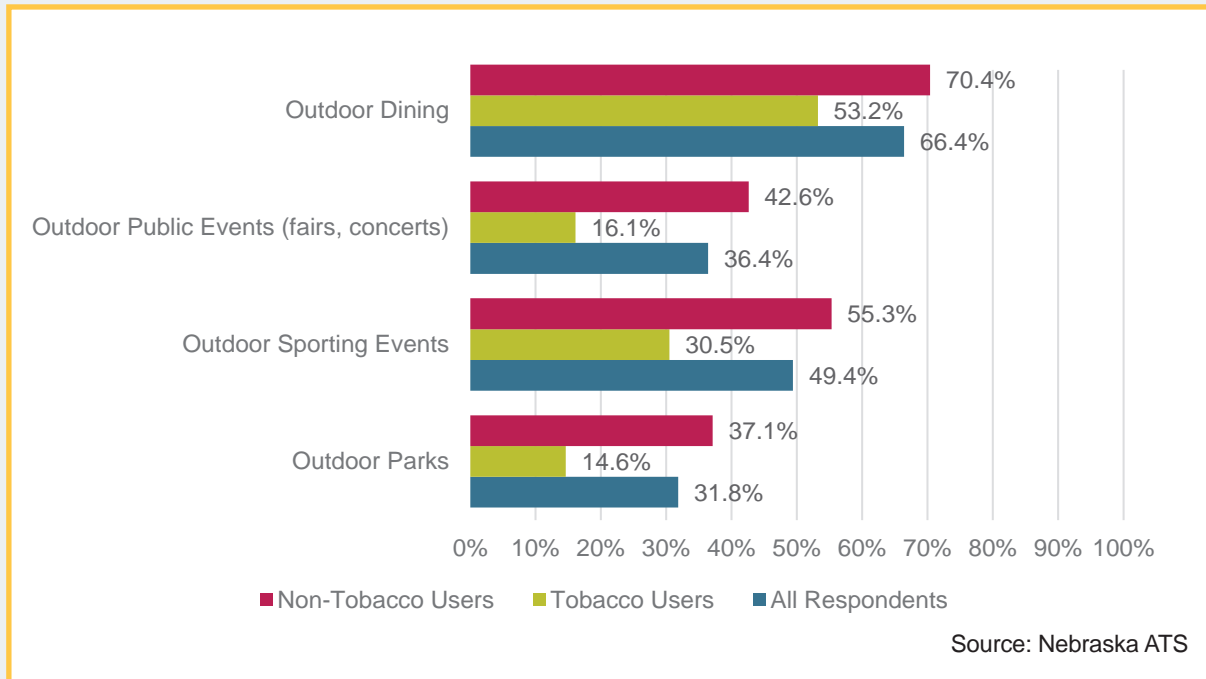
A vaccine is a combination of ingredients that, when given to a person, causes the immune system to develop immunity or resistance to a certain infection. Over the years, tobacco control has solidified the strategies (ingredients) that will help to reduce the burden of tobacco use. Four key strategies emerged as an evidence-based approach to tobacco control. If a tobacco control program, such as Tobacco Free Nebraska, successfully implements these four strategies, the tobacco use rate is expected to decline.

These four strategies when implemented correctly, in effect create an immunity to the influences of tobacco.



Adapted from: The Tobacco Control Vaccine: a population-based framework for preventing tobacco-related disease and death, Brian A King, Corinne Graffunder, Centers for Disease Control and Prevention, 2018.

## 2017: Opinion That Smoking Should be Prohibited at:

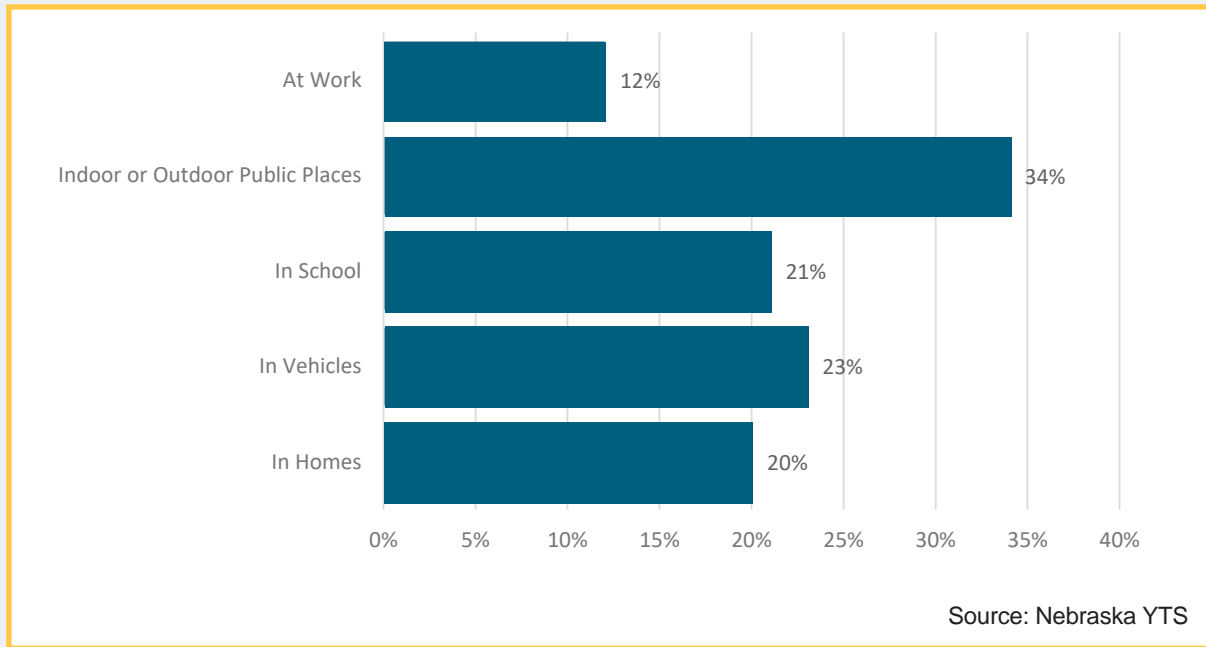


Strong support for additional smoking limitations are present in several settings, most notably outdoor dining. Two-thirds of all respondents believe that smoking should be prohibited completely in outdoor dining areas. Over half of tobacco users share this opinion as well.

In the figure above one can easily see the difference in opinion between tobacco users (green bar) and non-users (red bar). It is important to remember, however, that the population of non-tobacco users is much larger than the tobacco users.

Includes the percentage of responses answering “not at all” to the following question: “At {setting}, do you think smoking should be allowed in all areas, some areas, or not at all?”

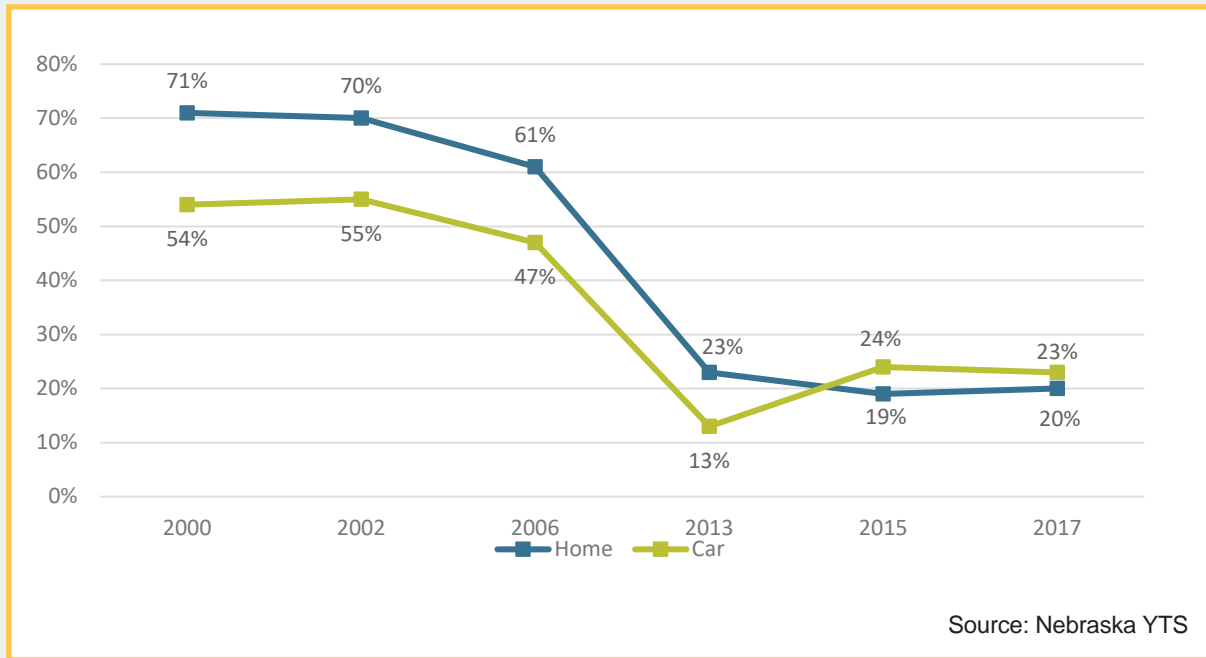
## 2017: Where are Nebraska Youth Exposed to Secondhand Smoke



Youth report continued exposure to secondhand smoke in a variety of settings. The highest rate of exposure was reported at indoor or outdoor public places. At school, vehicles, and home approximately 20% of the respondents indicate exposure to secondhand smoke. Finally, despite Nebraska’s comprehensive clean indoor air laws, 12% reported exposure in the workplace.



## 2000 - 2017: Youth Exposure to Secondhand Smoke in Homes and Cars in Nebraska

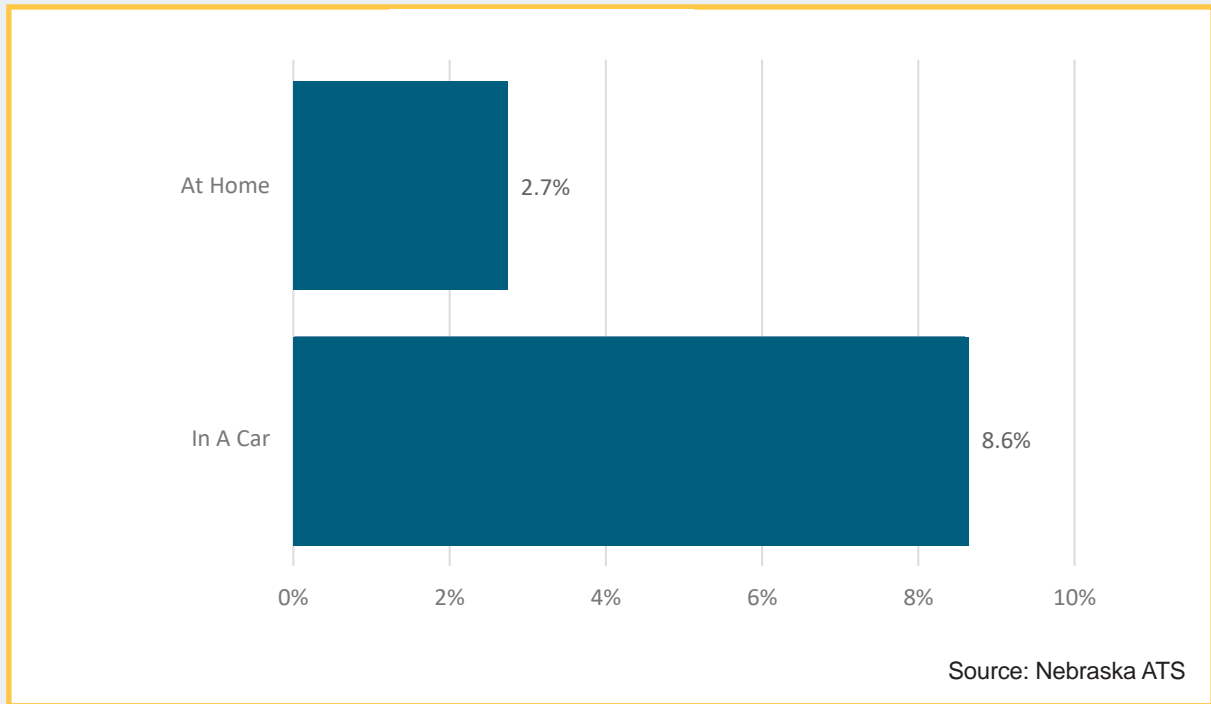


The exposure to secondhand smoke in homes and cars has decreased substantially in the last two decades. This reduced exposure to secondhand smoke will directly benefit the health of these residents. Despite this reduction, since 2013 the exposure in homes and cars has remained nearly unchanged or increased. Today, approximately 20% of youth are exposed to secondhand smoke.

This rate consists of the proportion of respondents who indicated exposure to secondhand smoke at their homes or car in the previous seven days.



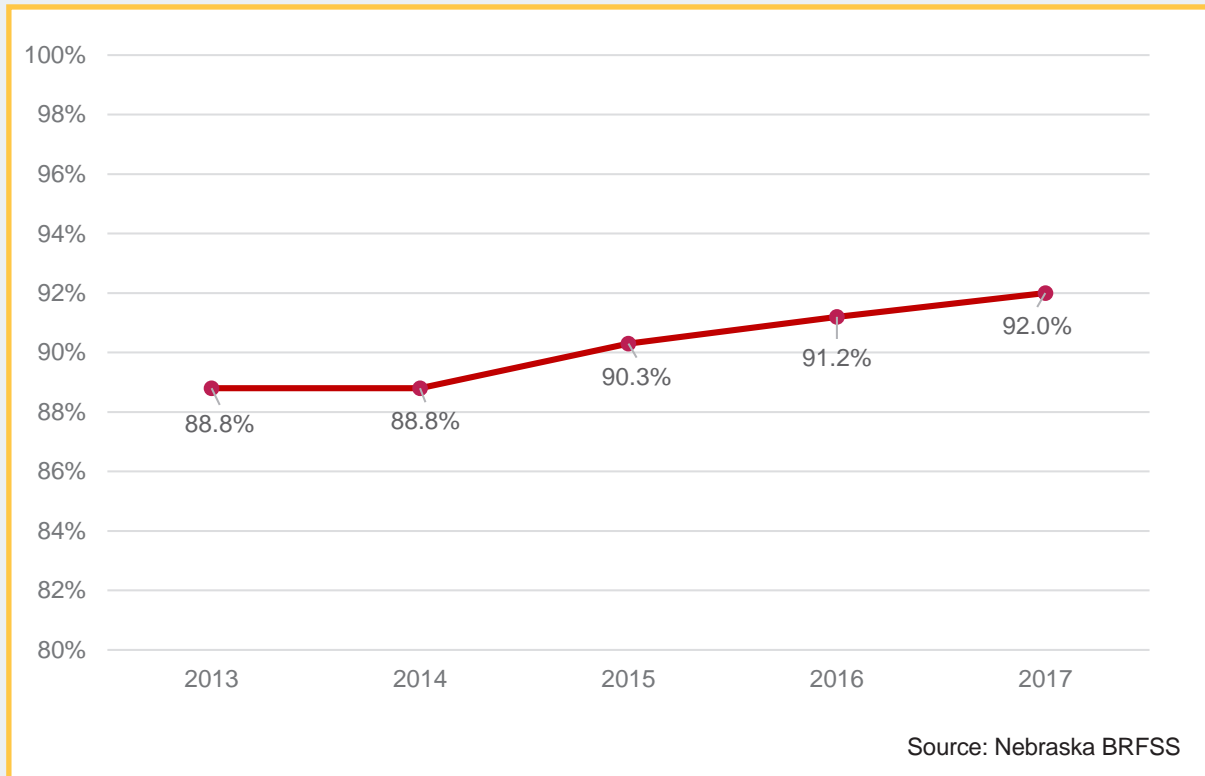
## 2017: Adult Non-Tobacco User Exposure to Secondhand Smoke in Nebraska



Adults who do not use any type of tobacco are still sometimes exposed to secondhand smoke. A small number are exposed at home (2.7%) while about nine percent (8.6%) reported exposure in a car.

Includes adults who reported no tobacco use but exposure at home or in a car at least one day in the last seven days.

## 2013 - 2017: Smoke-Free Home Rule in Nebraska Trend



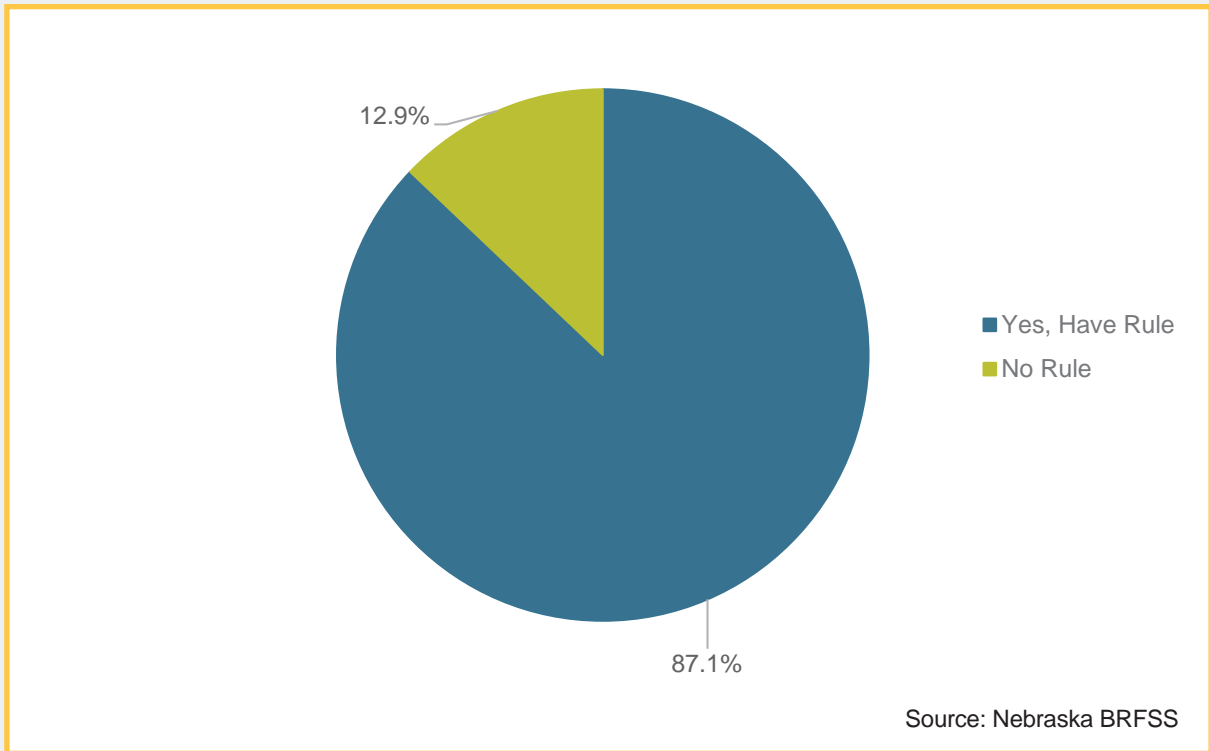
Numeric scale on vertical axis (%) has been expanded to highlight differences.

The number of homes with a smoke-free rule (no smoking anywhere inside the home at any time) continued to gradually increase and has maintained a rate of over 90% since 2015. The current rate of 92% is the highest rate observed since this question was added to the questionnaire in 2013.

Includes the percentage of responses answering “Smoking is not allowed anywhere inside the home” to the following question: *“Which statement best describes the rules about smoking inside your home? Do not include decks, garages, or porches.”*

- Smoking is not allowed anywhere inside your home.
- Smoking is allowed in some places or at some times.
- Smoking is allowed anywhere inside your home.

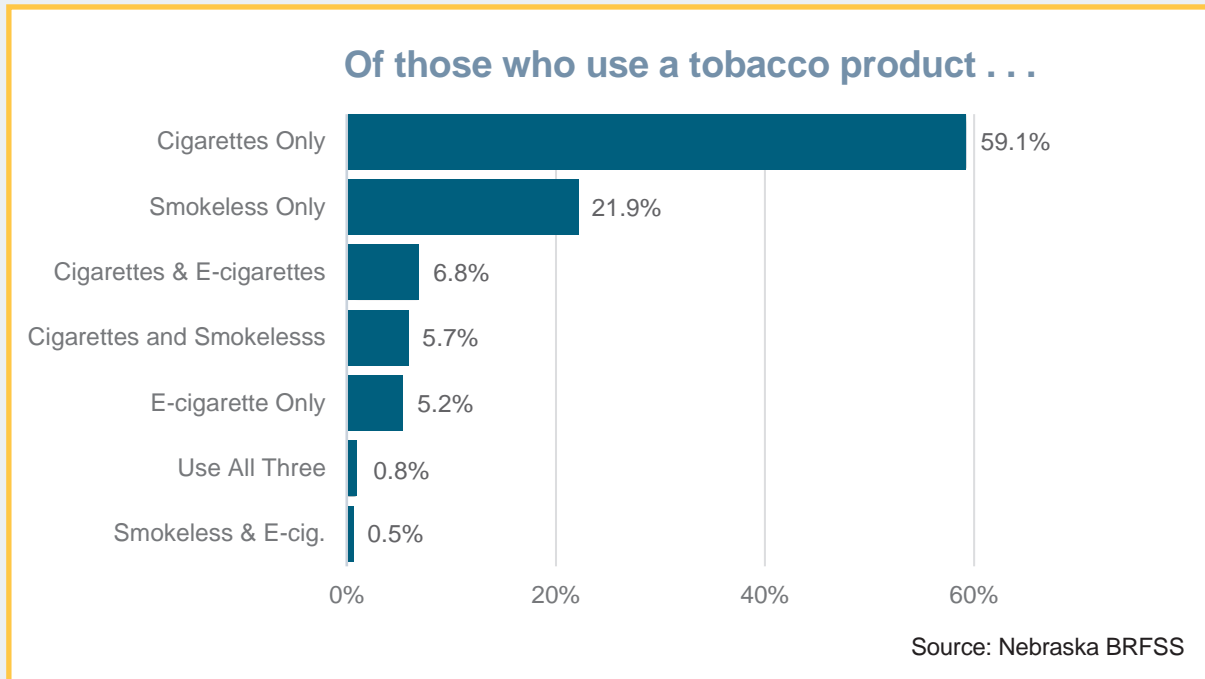
## 2017: Smoke-Free Family Car Rule



Nearly 9 out of 10 respondents indicated they have a rule prohibiting smoking in their family vehicle.

This question was added to the BRFSS questionnaire in 2017, therefore there is no trending data.

## 2017: Adult Tobacco Product Use Characteristics in Nebraska



The Nebraska Behavioral Risk Factor Surveillance System (BRFSS) questionnaire collects information about the use of different tobacco products. Using this information, analysis of product use patterns is possible. Cigarettes are by far the most commonly used without the use of other tobacco products. Nebraskans who use smokeless tobacco are often not using other tobacco products.

Among those who use at least one tobacco product, 59% report that they only use cigarettes while nearly 22% only use smokeless tobacco.

The introduction of e-cigarettes caused concern about tobacco users using both e-cigarettes and traditional cigarettes. While dual-use of both variations of cigarette is the most common dual-use type, it still remains relatively rare (6.8%). Dual use of smokeless and e-cigarettes is almost zero, as are individuals who report using all three products.

This item is calculated by analyzing the responses to each type of tobacco and whether the respondent has used the product in the last 30 days.

## Impact of Declining Smoking Rates Factoring in Population Changes

Year	2011	2012	2013	2014	2015	2016	2017
Estimated Population of Nebraska <sup>1</sup>	1,842,283	1,855,725	1,868,559	1,881,145	1,893,765	1,907,116	1,920,076
Benchmark Smoking Rate (2011) <sup>2</sup>	20.0%	20.0%	20.0%	20.0%	20.0%	20.0%	20.0%
Actual observed smoking rate <sup>3</sup>	20.0%	19.7%	18.5%	17.3%	17.1%	17.0%	15.4%
Proportion under 18 <sup>4</sup>	0.251	0.2495	0.2495	0.2495	0.2495	0.2495	0.248
Estimated Adult Population	1,379,870	1,392,722	1,402,354	1,411,799	1,421,271	1,431,291	1,443,897
Number of Cigarette Smokers at Benchmark Rate	275,974	278,544	280,471	282,360	284,254	286,258	288,779
Number of Smokers at Actual Rate	275,974	274,366	259,435	244,241	243,037	243,319	222,360
Number of Adults Not Smoking Due to Rate Decrease	0	4,178	21,035	38,119	41,217	42,939	66,419

Using the 2011 smoking rate as a benchmark, the slowly but steadily declining cigarette smoking rate and steadily increasing state population allows one to understand the significant impact the declining cigarette smoking rate and population change has on public health.



*If Nebraska's cigarette smoking rate had not declined since 2011, an additional*

**66,000**

*Nebraskans would be cigarette smokers today!*

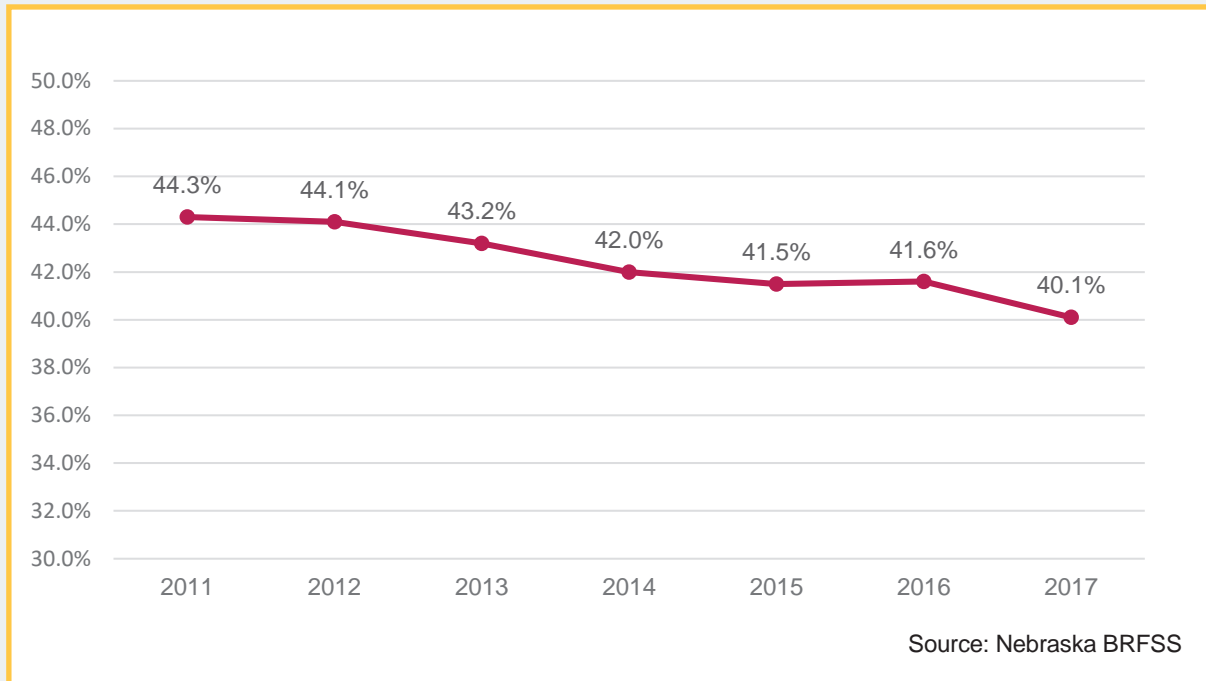
<sup>1</sup> United States Census Bureau

<sup>2</sup> Nebraska BRFSS 2011 (methodology was changed in 2011. Dates prior to 2011 are not comparable therefore 2011 is used as the benchmark.)

<sup>3</sup> Nebraska BRFSS 2011 - 2017

<sup>4</sup> United States Census Bureau

## 2011 - 2017: % Yes by Date - Lifetime Cigarette Use by Adults in Nebraska

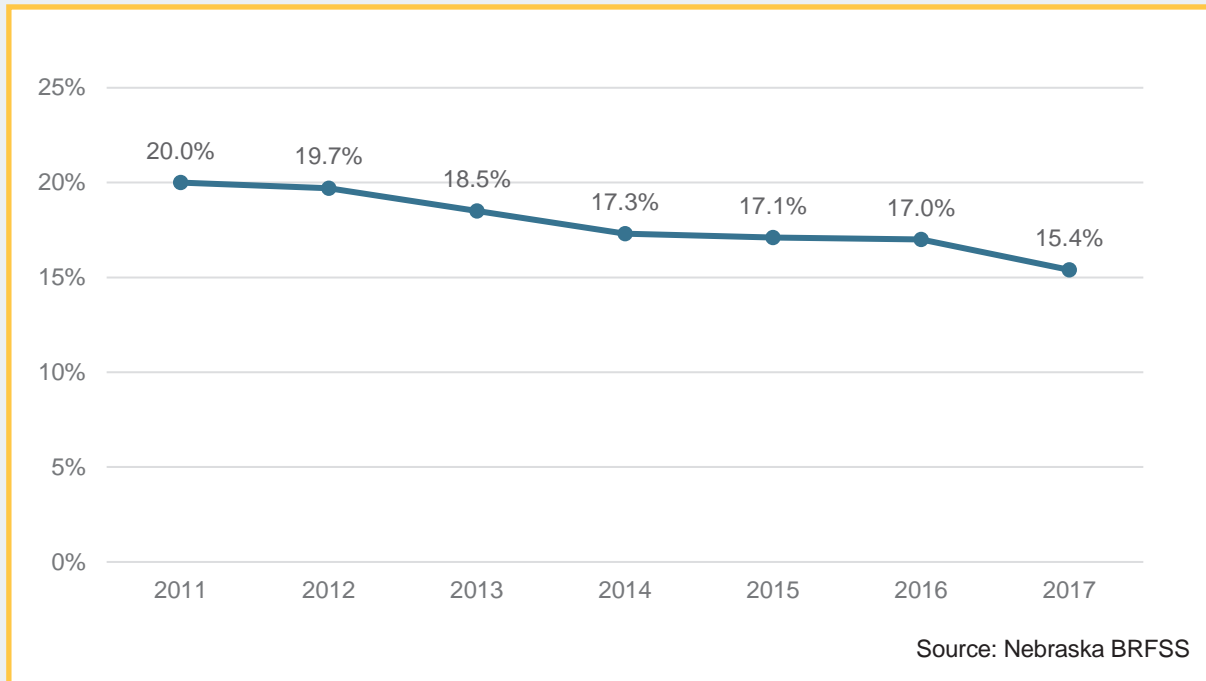


**Note:** Vertical scale axis has been expanded to emphasize the decreasing value.

Similar to the trend observed with youth, fewer adults are reporting use of cigarettes during their lifetime. In 2017, only 40% of adults in Nebraska report the regular use of a cigarette at some point during their lifetime. Regular use is determined by identifying respondents who have smoked at least 100 cigarettes during their life.

Responses of 'Yes' to the question: *"Have you smoked at least 100 cigarettes in your entire life?"* are included in the calculation.

## 2011 - 2017: Adult Cigarette Smoking Rate in Nebraska

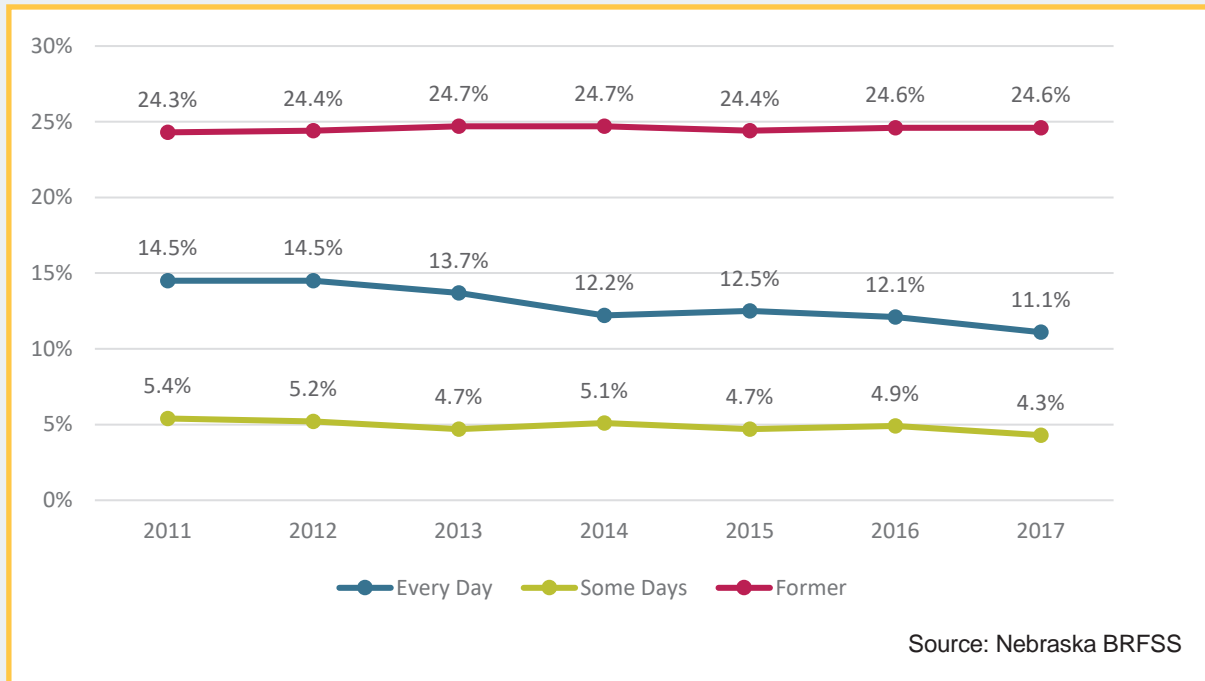


After remaining nearly unchanged near 17% since 2014, the Nebraska adult smoking rate decreased in 2017 to 15.4%. While this is the lowest rate since measurement began, there are still approximately 224,000 adults in Nebraska who smoke cigarettes.

Includes responses to the question: *“Do you now smoke cigarettes every day, some days, or not at all?”*

The rate for “every day” and “some days” are added together to calculate the current smoking rate.

## 2011 - 2017: Three-Category Cigarette Smoker Status in Nebraska



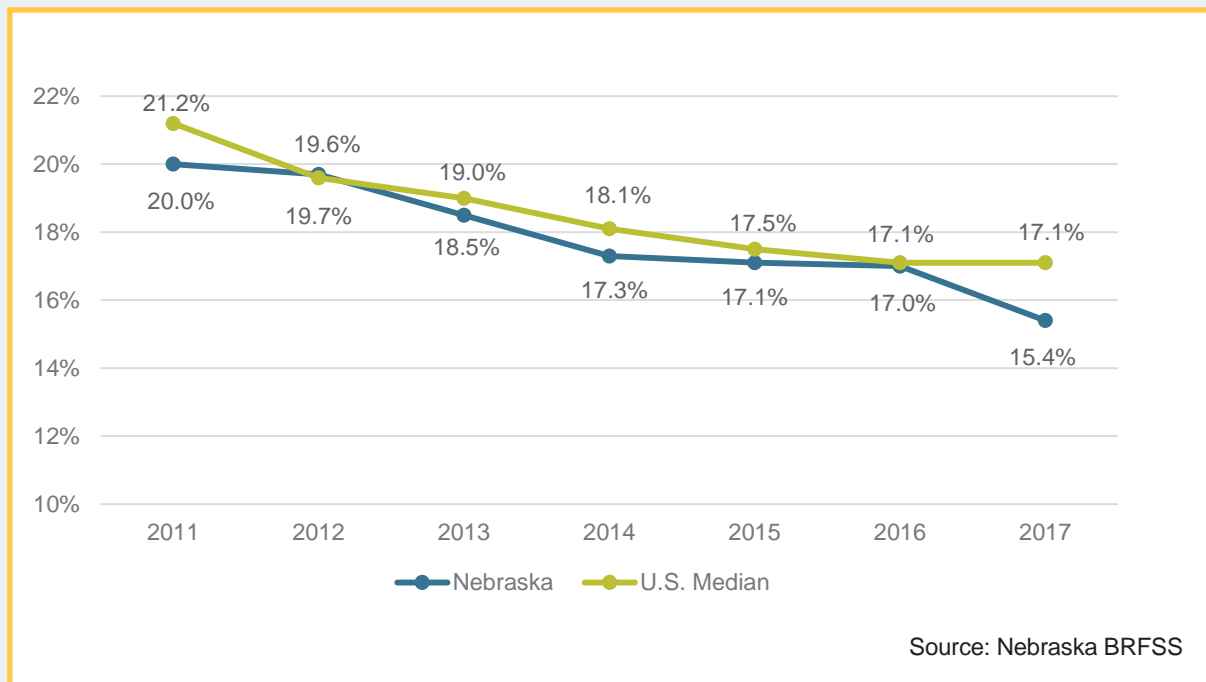
The percentage of Nebraska adults smoking every day has declined to 11.1%, the lowest rate since the Nebraska Behavioral Risk Factor Surveillance System (BRFSS), began collecting information. In addition, respondents who indicated that they do smoke cigarettes, but not every day decreased to 4.3%. The rate of former smokers remains nearly unchanged over this time period. The number of individuals who have never smoked (not shown) has increased over time.

Includes responses to the question: *“Do you now smoke cigarettes every day, some days, or not at all?”*

Former smokers are determined by respondents who indicate they have tried cigarettes, have smoked at least 100 cigarettes in their life, and respond that they now smoke “not at all.”



## 2011 - 2017: Adult Cigarette Smoking Rate in Nebraska - Compared to U.S. Median



The median value of the cigarette smoking rate in the U.S. was 21.2% in 2011 and has steadily declined in the past six years to 17.1%. While only a 4 point drop, each 1% change represents approximately 2.5 million people (1% of the U.S. adult population). There are millions of adults who don't smoke cigarettes that would have just a few years ago. During the past six years the Nebraska rate has remained similar to the U.S. median. However, in 2017, the smoking rate in Nebraska dropped to 15.4% while the U.S. median remain unchanged at 17.1%.

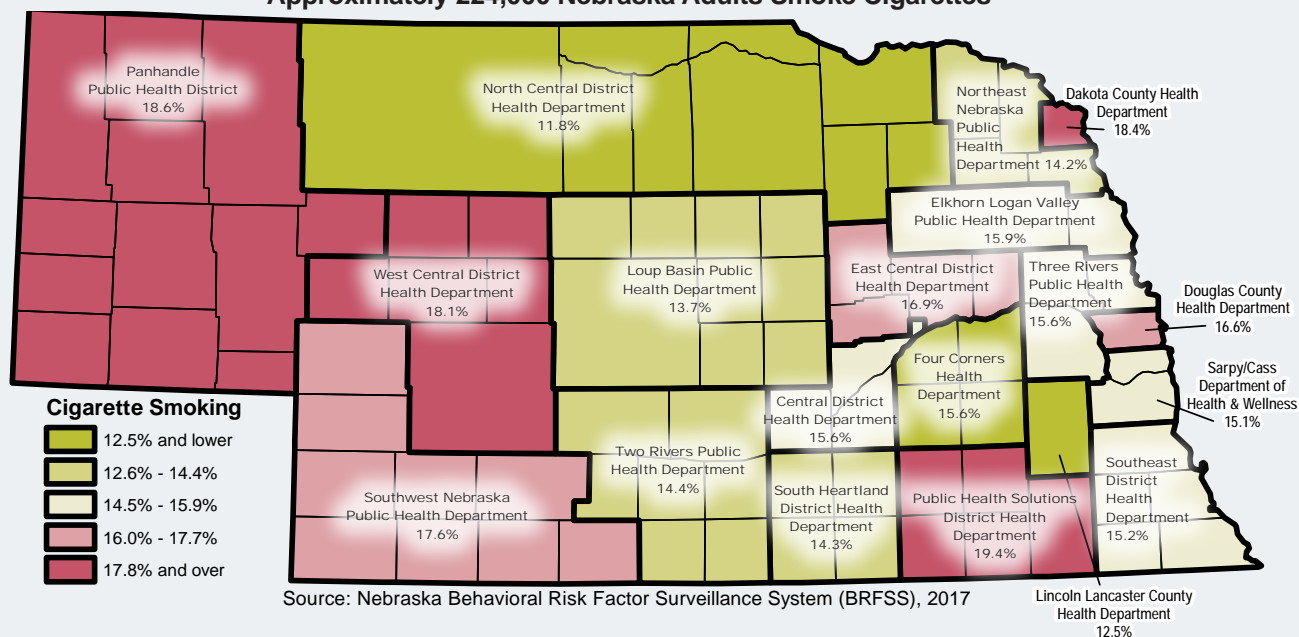
Includes responses to the question: *"Do you now smoke cigarettes every day, some days, or not at all?"*

The rate for "every day" and "some days" are added together to calculate the current smoking rate.

## 2017: ADULT CIGARETTE SMOKING PREVALENCE

2017 Statewide Adult Cigarette Prevalence = 15.4%

Approximately 224,000 Nebraska Adults Smoke Cigarettes



Tobacco use is the leading preventable cause of death and disease in the United States and Nebraska. Approximately 16 million Americans live with a disease caused by tobacco use. Tobacco-related disease will take the lives of 480,000 Americans (and 2,500 Nebraskans) this year. Of the many varieties of tobacco products, cigarettes remain the most commonly used form of tobacco nationally and in Nebraska.<sup>1</sup> Despite declines in recent decades, the adult smoking rate in Nebraska (2017) is 15.4% according to the Nebraska Behavioral Risk Factor Surveillance System (BRFSS).<sup>2</sup> Based on current population estimates, approximately 224,000 adults in Nebraska regularly smoke cigarettes.

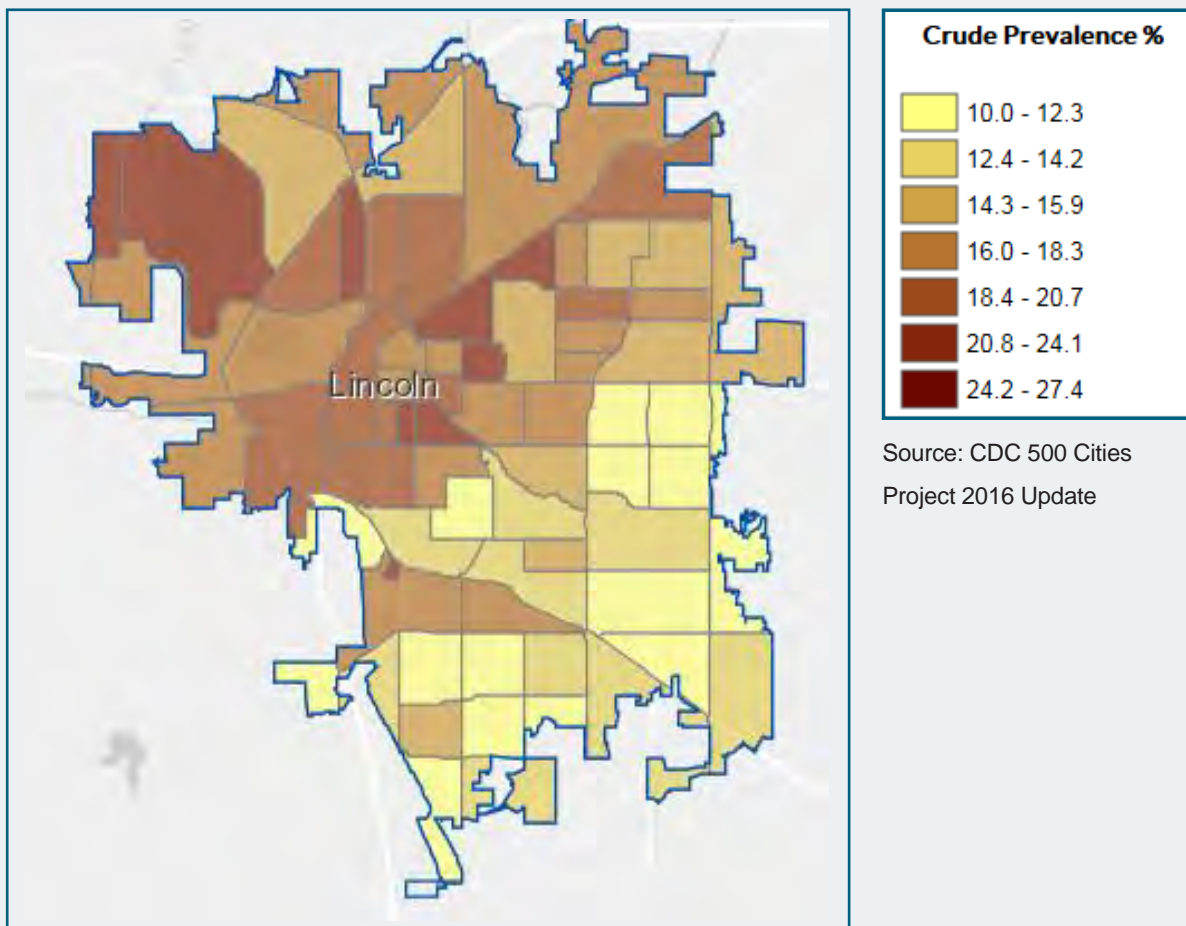
The map above shows the smoking prevalence for each of Nebraska's Health Districts. Cigarette smoking rates vary regionally from a low of 11.8% in the North Central District Health Department counties to a high of 19.4% in the Public Health Solutions District Health Department counties in Southeast Nebraska.

<sup>1</sup> U.S. Department of Health and Human Services. *The Health Consequences of Smoking—50 Years of Progress: A Report of the Surgeon General*. Atlanta, GA: 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.

<sup>2</sup> Nebraska BRFSS, 2017

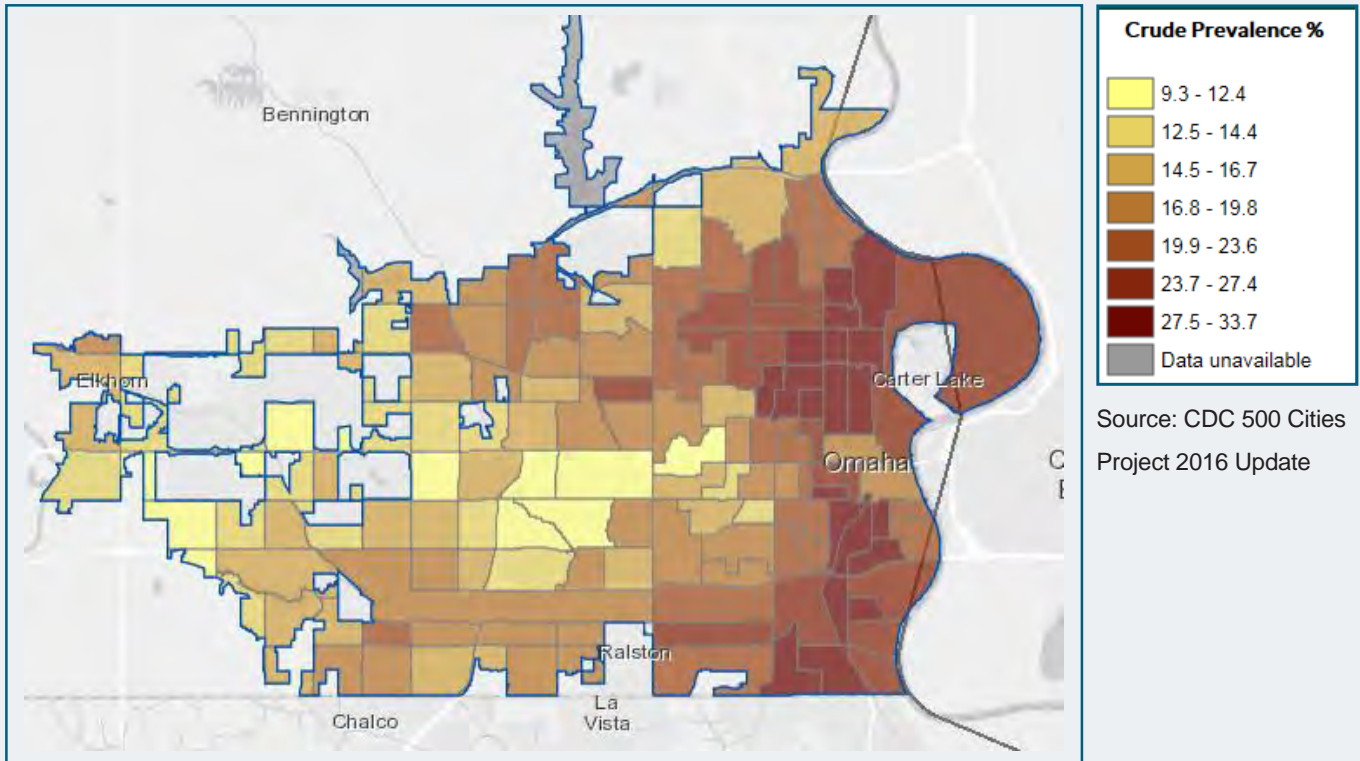
## CURRENT ADULT SMOKING RATE BY CENSUS TRACT - LINCOLN

The 500 Cities project is a collaboration between CDC, the Robert Wood Johnson Foundation, and the CDC Foundation. The purpose of the 500 Cities Project is to provide city- and census tract-level small area estimates for chronic disease risk factors, health outcomes and clinical preventive service use for the largest 500 cities in the United States. These small area estimates will allow cities and local health departments to better understand the burden and geographic distribution of health-related variables in their jurisdictions, and assist them in planning public health interventions.



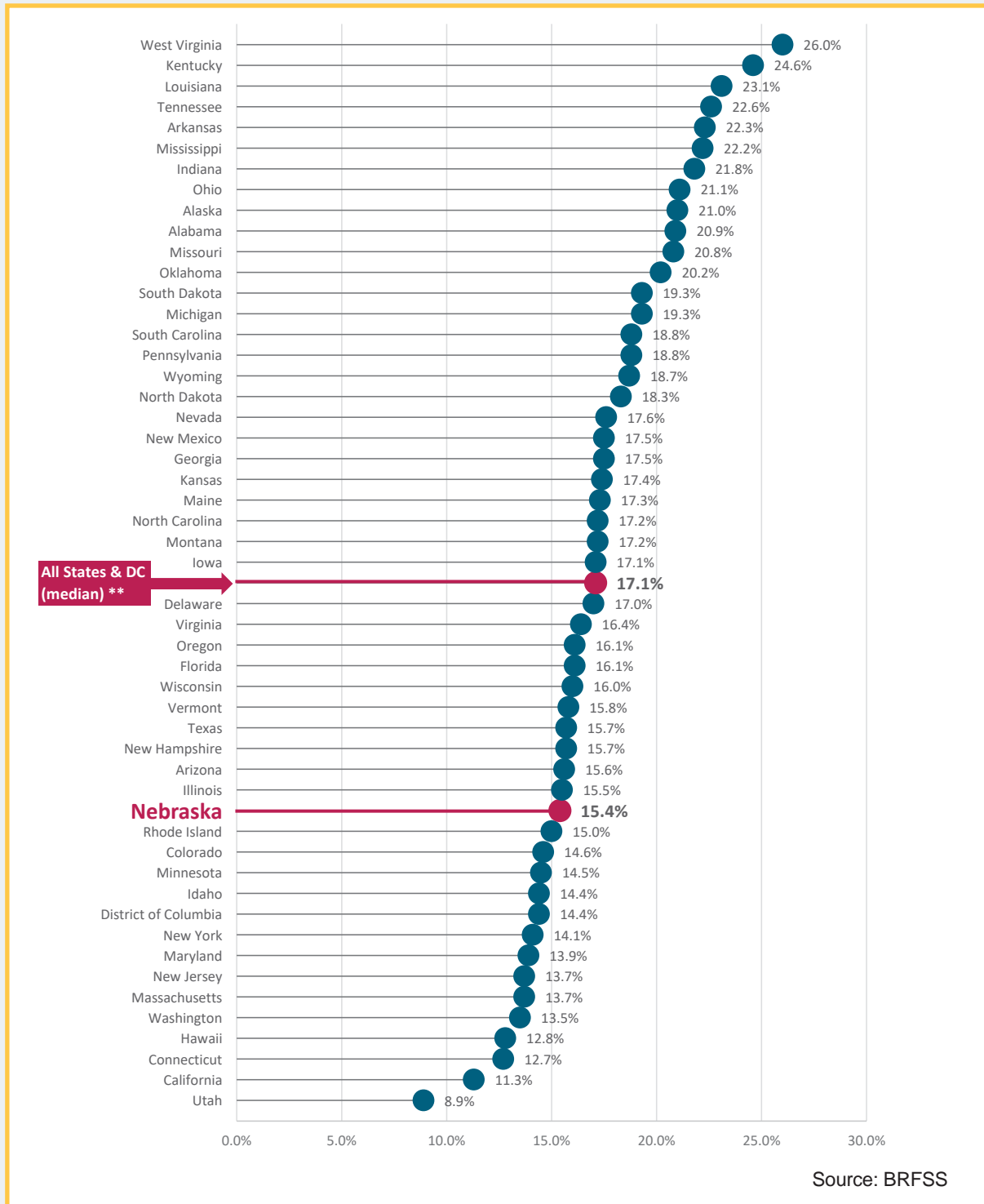
Smoking by residents of Lincoln shows a distinct pattern in the western part of the city and downtown having the highest rate of cigarette use. Residents in the southeast parts of Lincoln have the lowest smoking rates.

## CURRENT ADULT SMOKING RATE BY CENSUS TRACT - OMAHA

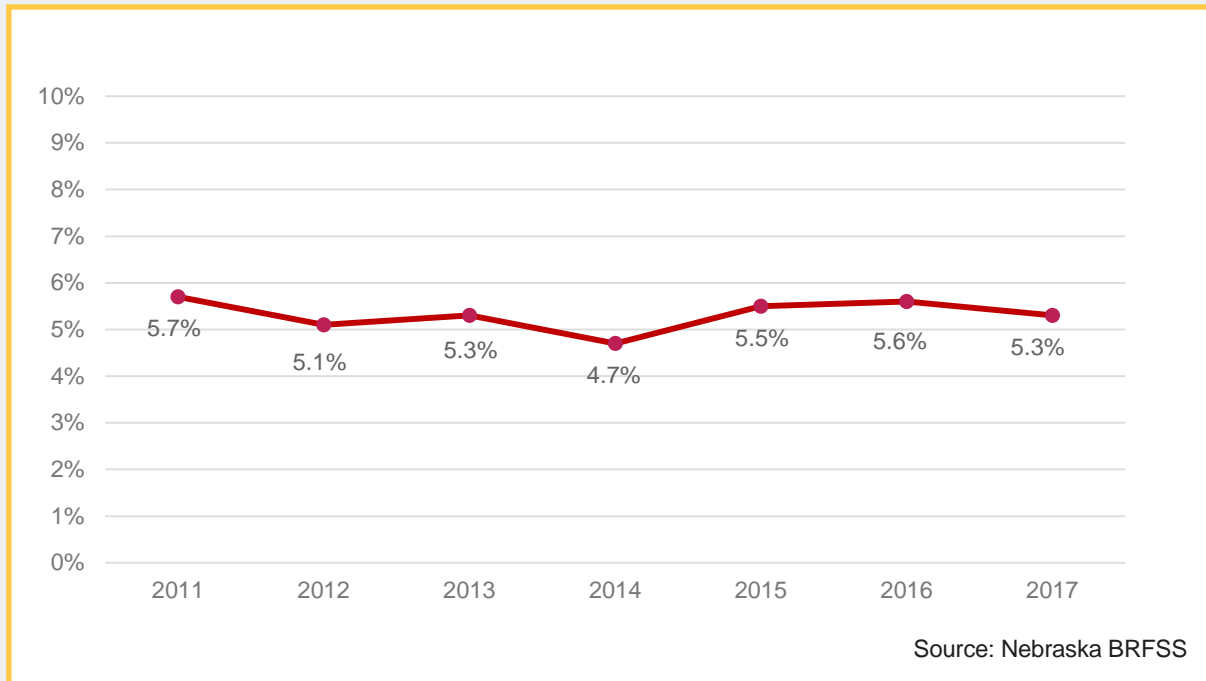


Cigarette smoking in Omaha follows a distinct pattern of increasing prevalence as one moves from west to east with the highest rates both north and south of downtown.

## 2017: Adult Cigarette Smoking Rate - All States in Rank Order (low rate is best)



## 2011 - 2017: Adult Smokeless Tobacco Use in Nebraska

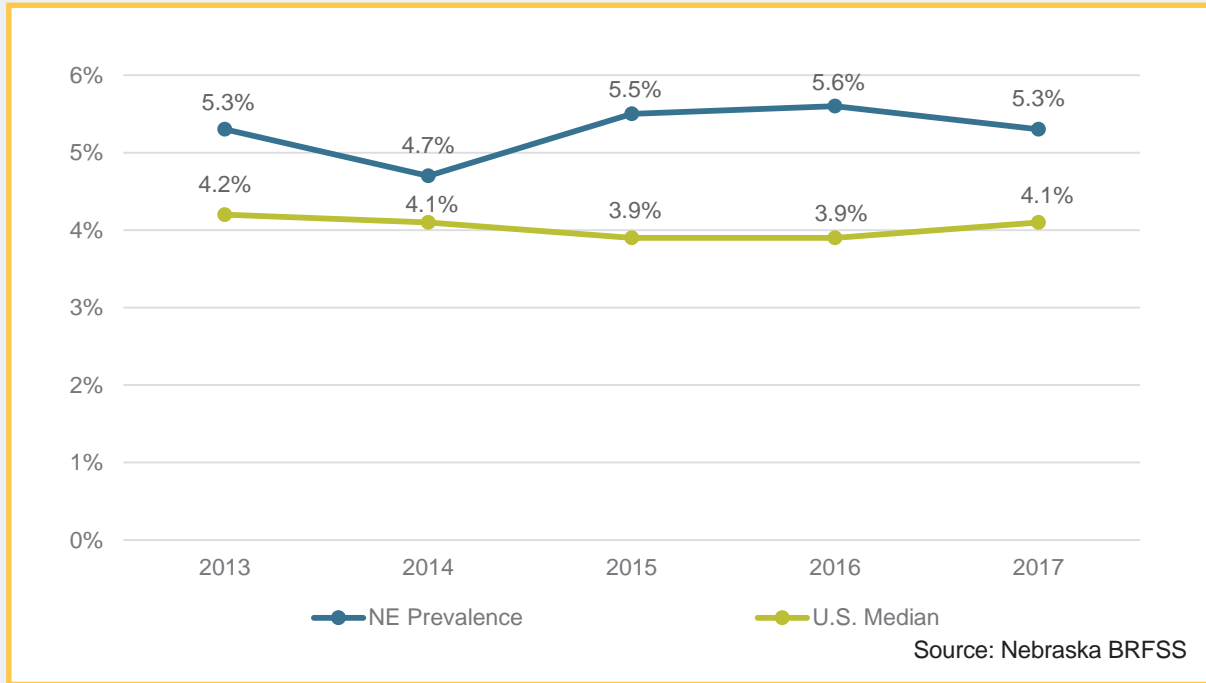


The incidence of smokeless tobacco (chewing tobacco, snuff, snus) use has remained essentially stable since 2011.

Includes responses to the question: *“Do you currently use chewing tobacco, snuff, or snus every day, some days, or not at all?”*

The rate for “every day” and “some days” are added together to calculate the current rate.

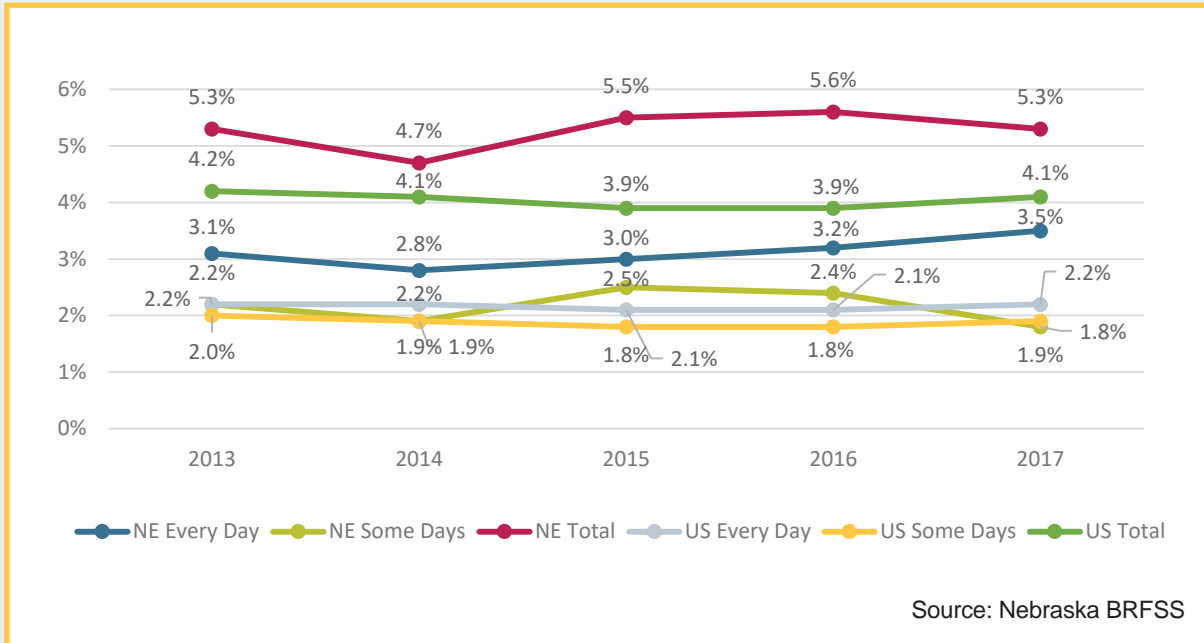
## 2013 - 2017: Adult Smokeless Tobacco Prevalence in Nebraska - Compared to U.S. Median



This chart figure displays the overall smokeless tobacco use prevalence for Nebraska compared to the United States median value since 2013. The U.S. Median is consistently close to 4% whereas the Nebraska rate is consistently about 1.5 percentage points higher, closer to 5.5%.



## 2013 - 2017: Adult Smokeless Tobacco Prevalence in Nebraska - All Categories Compared to U.S. Median

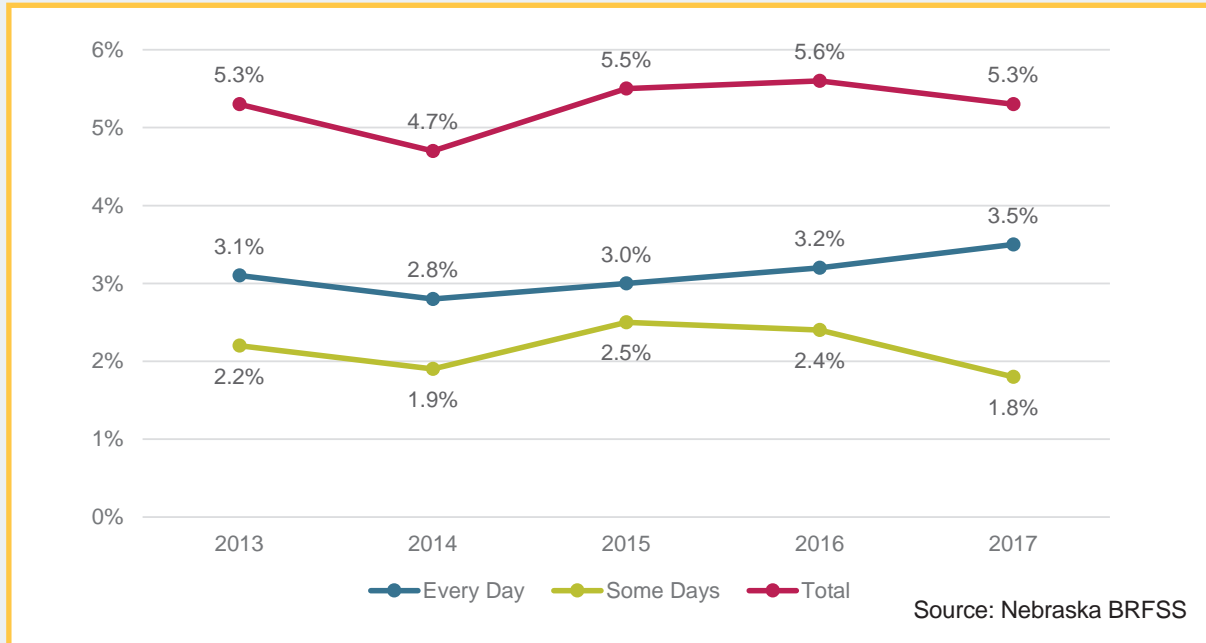


This chart breaks the overall numbers into categories. The smokeless tobacco rate, both for the United States overall and Nebraska are not showing an increasing or decreasing trend during the past five years.

Displays the percentage of respondents who reported their use of smokeless tobacco, cross-tabulated by frequency of use and measurement year.



## 2013 - 2017: Adult Smokeless Tobacco Prevalence in Nebraska by Frequency and Year

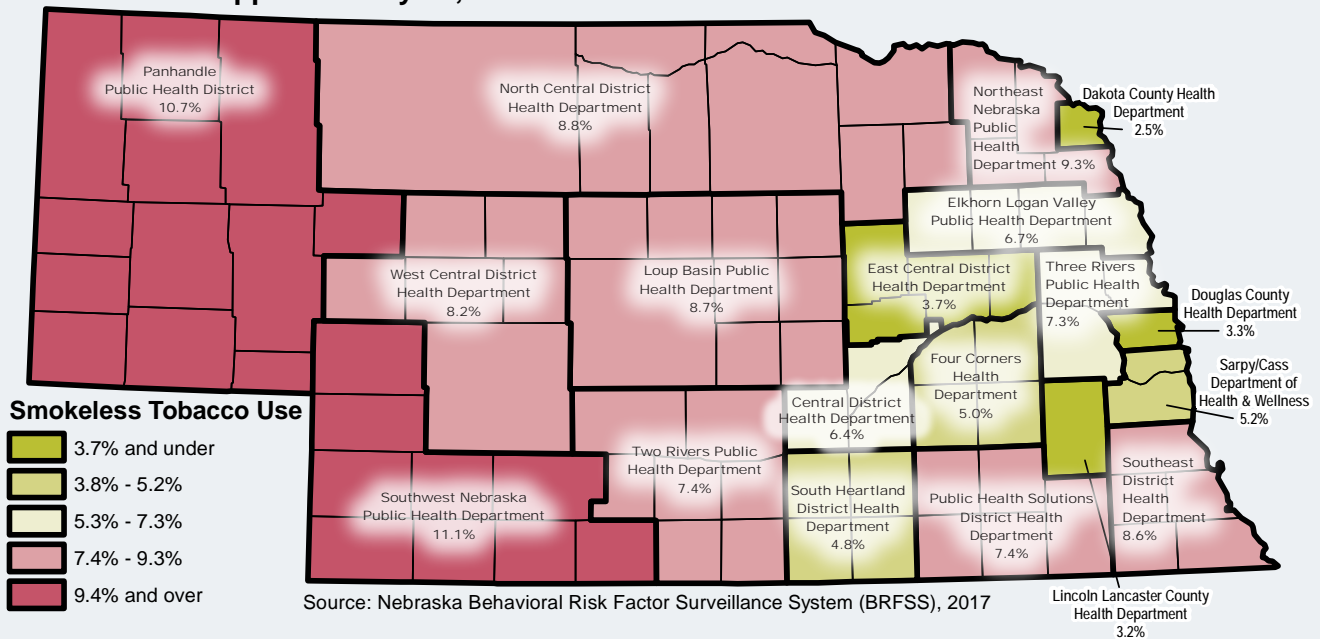


The prevalence of smokeless tobacco use has been fairly constant over the last several years with some minor fluctuation in the proportion of the population that uses smokeless products every day or on some days. The total percentage using smokeless tobacco remains close to 5%.

Includes the percentage of respondents who indicate how often they have used smokeless tobacco in the last 30 days.

## 2017: ADULT SMOKELESS TOBACCO PREVALENCE

**2017 Statewide Adult Smokeless Tobacco Prevalence = 5.3%**  
**Approximately 76,500 Nebraska Adults Use Smokeless Tobacco**



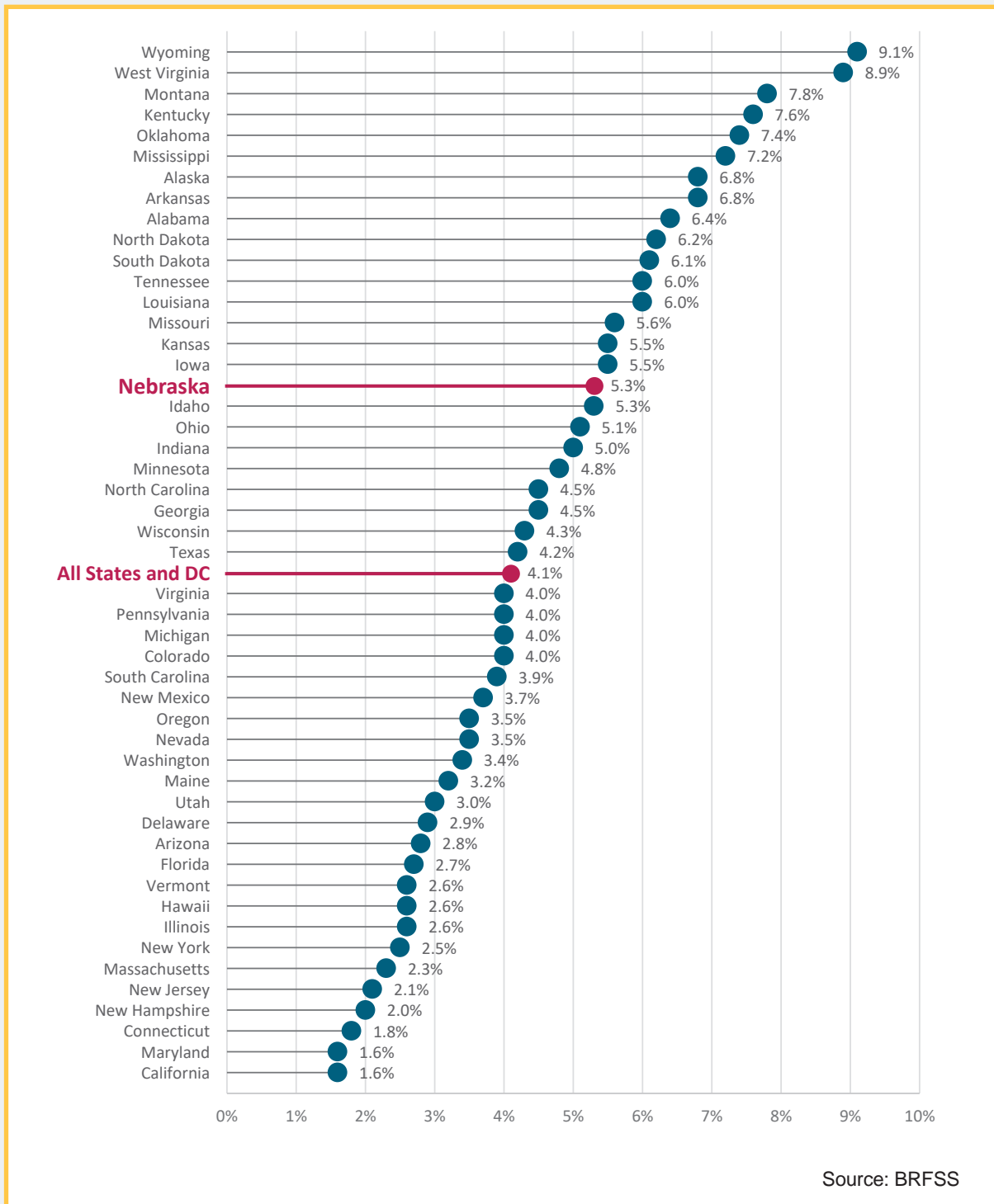
Smokeless tobacco is associated with many health conditions. Using smokeless tobacco can lead to nicotine addiction; cancers of the mouth, esophagus and pancreas; and is associated with diseases of the mouth.<sup>1</sup> According to the Nebraska Behavioral Risk Factor Surveillance System (BRFSS), 5.3% of adults — or nearly 77,000 people — use smokeless tobacco in Nebraska.

This map shows the prevalence of smokeless tobacco use in each of Nebraska’s Health Districts. In general, smokeless tobacco use is higher in Western districts. Nationally rural areas have a higher rate of smokeless tobacco use than populations in urban cities.

<sup>1</sup> U.S. Department of Health and Human Services. *The Health Consequences of Smoking—50 Years of Progress: A Report of the Surgeon General*. Atlanta, GA: 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.

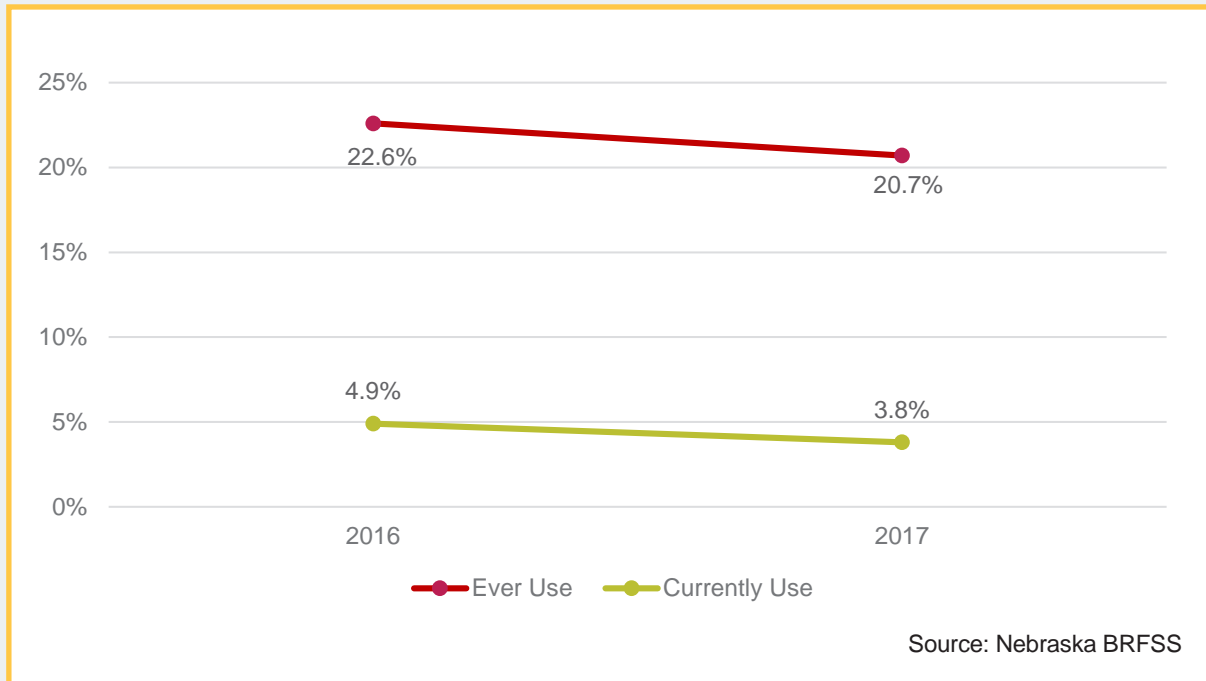
<sup>2</sup> Nebraska BRFSS, 2017

# 2017: Adult Smokeless Tobacco Prevalence by State



Source: BRFSS

## 2016 - 2017: Ever Use and Current Use of E-Cigarettes by Adults in Nebraska



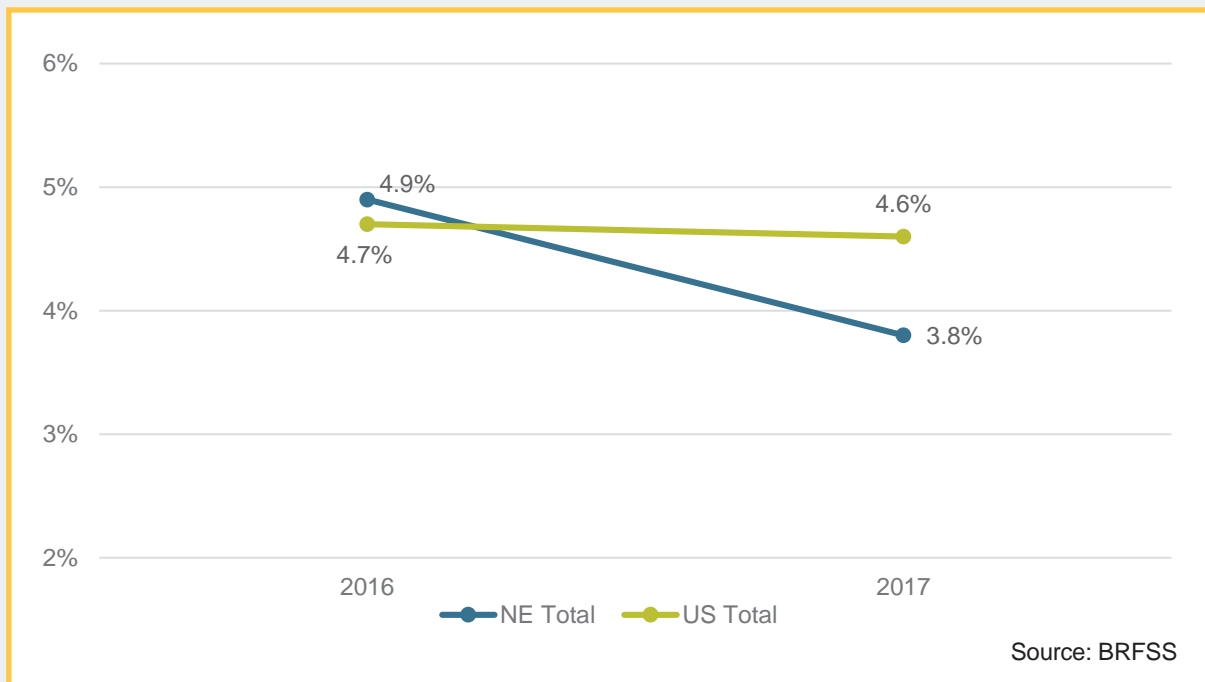
Electronic cigarettes are relatively new to the tobacco marketplace and thus surveillance of e-cigarette use began in 2016.

As can be seen in the chart (above), both the percentage of adults who report they have ever used an e-cigarette and the percentage currently using has declined. Today, less than 4% of Nebraska adults report current use of e-cigarettes.

Includes the percentage of responses answering 'yes' to the following question: *"Have you ever used an e-cigarette or other electronic 'vaping' product, even just one time, in your entire life."*

Includes the percentage of respondents who answered "every day" or "some days" to the question: *"Do you now use e-cigarettes or other electronic 'vaping' products every day, some days, or not at all?"*

## 2016 - 2017: Adult E-Cigarette Prevalence in Nebraska - Compared to U.S. Median



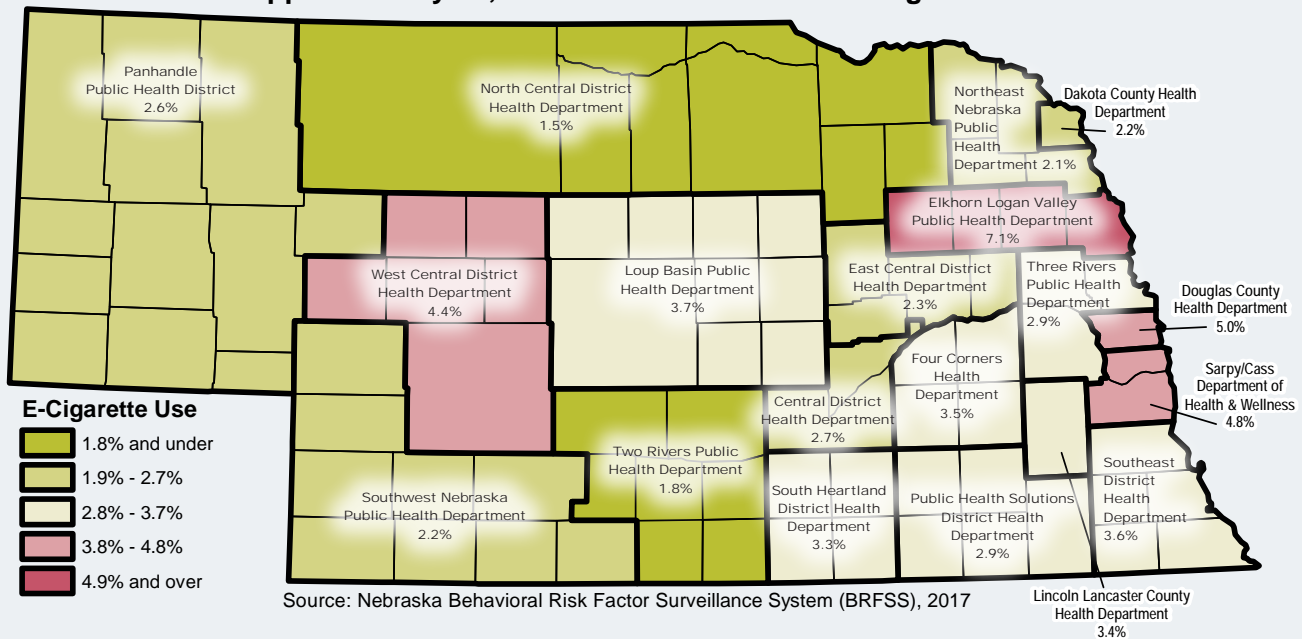
E-cigarettes are a relatively new tobacco product that has gained in popularity in recent years. The category of e-cigarettes includes many devices of different names such as e-cigs, e-hookahs, hookah pens, vapes, vape pens, and mods (customizable, more powerful vaporizers), ENDS (Electronic Nicotine Delivery System), and others. All contain a battery and a heating element that converts a liquid into an aerosol that is inhaled into the lungs, similar to cigarette smoking.

The prevalence of e-cigarette use among adults in Nebraska is low. In 2016 less than 5% of the adult population used e-cigarette products. This prevalence declined in 2017 to 3.8%. The median for adults in the United States remained essentially unchanged moving from 4.7% to 4.6%.

Calculated by analyzing the response to the question about the use of e-cigarettes in the previous month and cross-tabulated by measurement year.

## 2017: ADULT E-CIGARETTE PREVALENCE

**2017 Statewide Electronic Cigarette Prevalence = 3.8%**  
**Approximately 54,900 Nebraska Adults Use E-Cigarettes**



**E**lectronic cigarettes (E-cigarettes) come in many shapes and sizes but typically include a battery, a heating element, and a place to hold a liquid (often referred to as “juice”). E-cigarettes produce an aerosol (sometimes referred to as vapor). Users inhale the aerosol into their lungs and bystanders can also inhale this aerosol when the user exhales. Using an e-cigarette is sometimes called “vaping.”

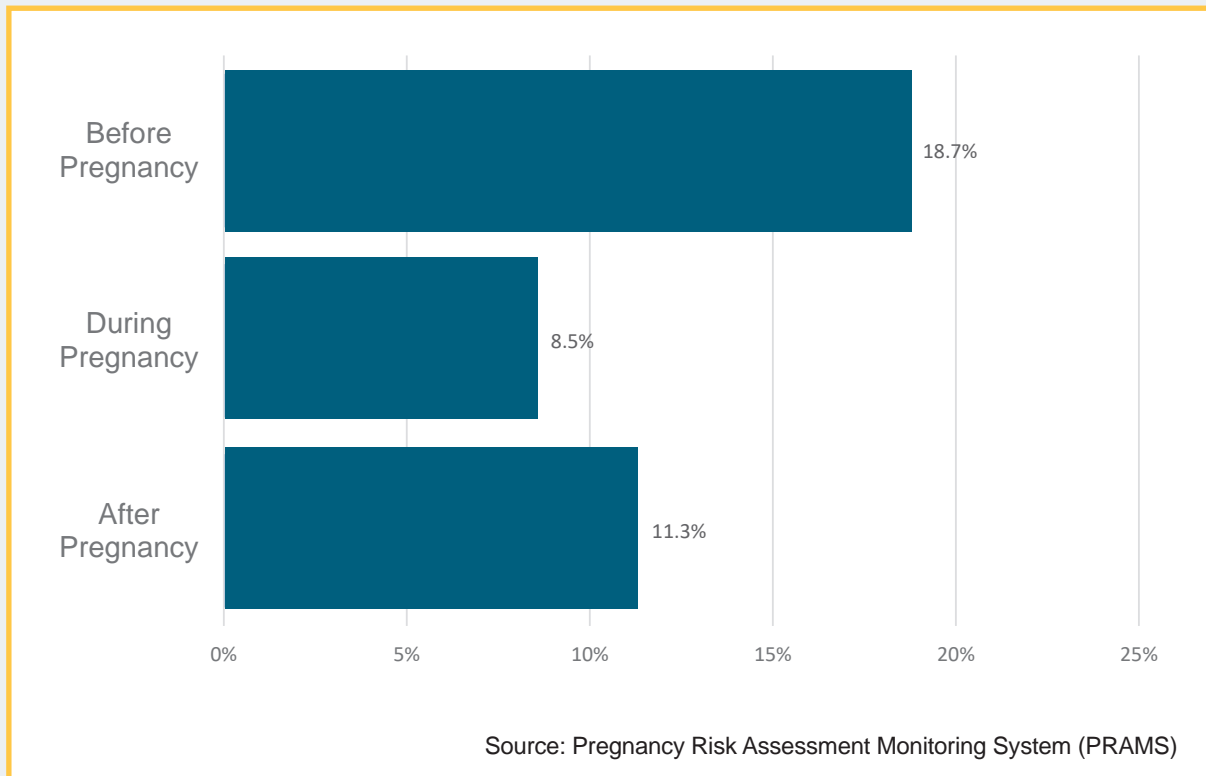
E-cigarettes have the potential to benefit adult smokers if the e-cigarette is used as a complete substitute for regular cigarettes and other smoked tobacco products. However, e-cigarettes are not safe for use by anyone, particularly youth and young adults and pregnant women. E-cigarettes are fairly new products, so scientists have a lot to learn about how e-cigarettes affect health or whether they are effective for quitting smoking.

E-cigarette use rates are well below conventional cigarette use in Nebraska, with the statewide average approximately 4% of the adult population (3.8%). This is a decrease of approximately one point since 2016. However, there is variation in use with a prevalence of 7.1% in Elkhorn Logan Valley Public Health Department counties and a low of 1.5% in the North Central District Health Department counties.<sup>2</sup>

<sup>1</sup> Centers for Disease Control and Prevention. Electronic Cigarette webpage: [https://www.cdc.gov/tobacco/basic\\_information/e-cigarettes/index.htm](https://www.cdc.gov/tobacco/basic_information/e-cigarettes/index.htm) Accessed 10/17/2018.

<sup>2</sup> Nebraska BRFSS, 2017

## 2016: Cigarette Use During Pregnancy in Nebraska

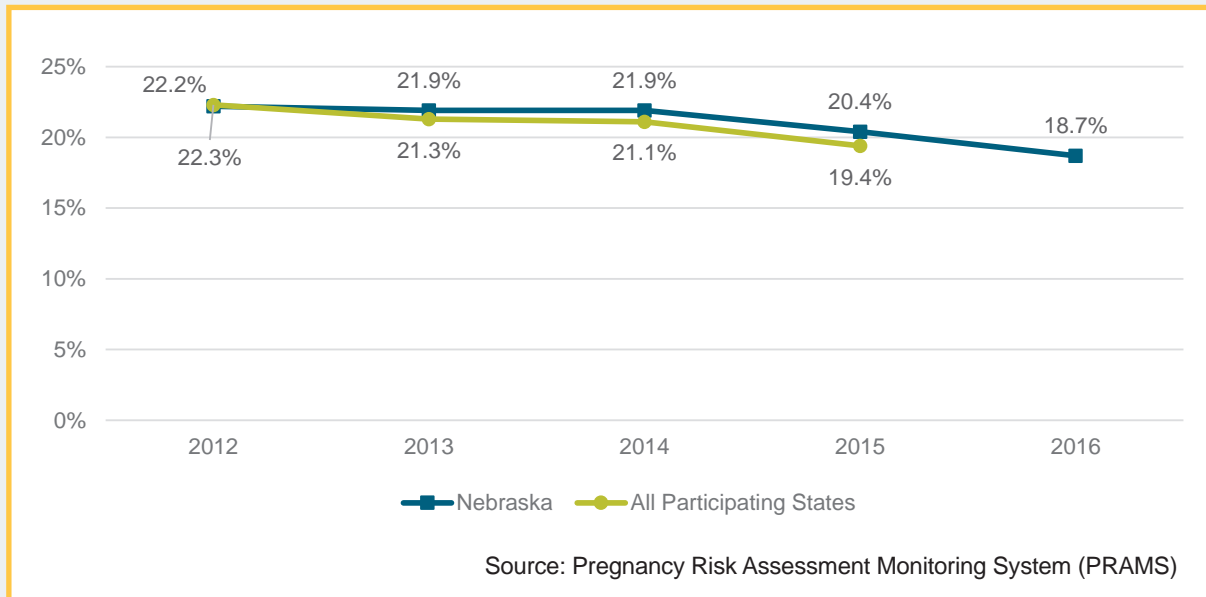


The use of tobacco, and smoking in particular, increases the risk of many health conditions for both the newborn and the mother. Specifically:

- Smoking makes getting pregnant more difficult.
- Smoking increases the risk of miscarriage.
- Smoking can cause women to deliver their baby earlier than a full-term infant.
- Smoking increases the risk of sudden infant death syndrome (SIDS).
- Smoking increases the risk of some birth defects.

Source: Centers for Disease Control and prevention, Reproductive Health: <https://www.cdc.gov/reproductivehealth/maternalinfanthealth/tobaccousepregnancy/index.htm>

## 2012 - 2016: Trend of Cigarette Smoking Before Pregnancy in Nebraska

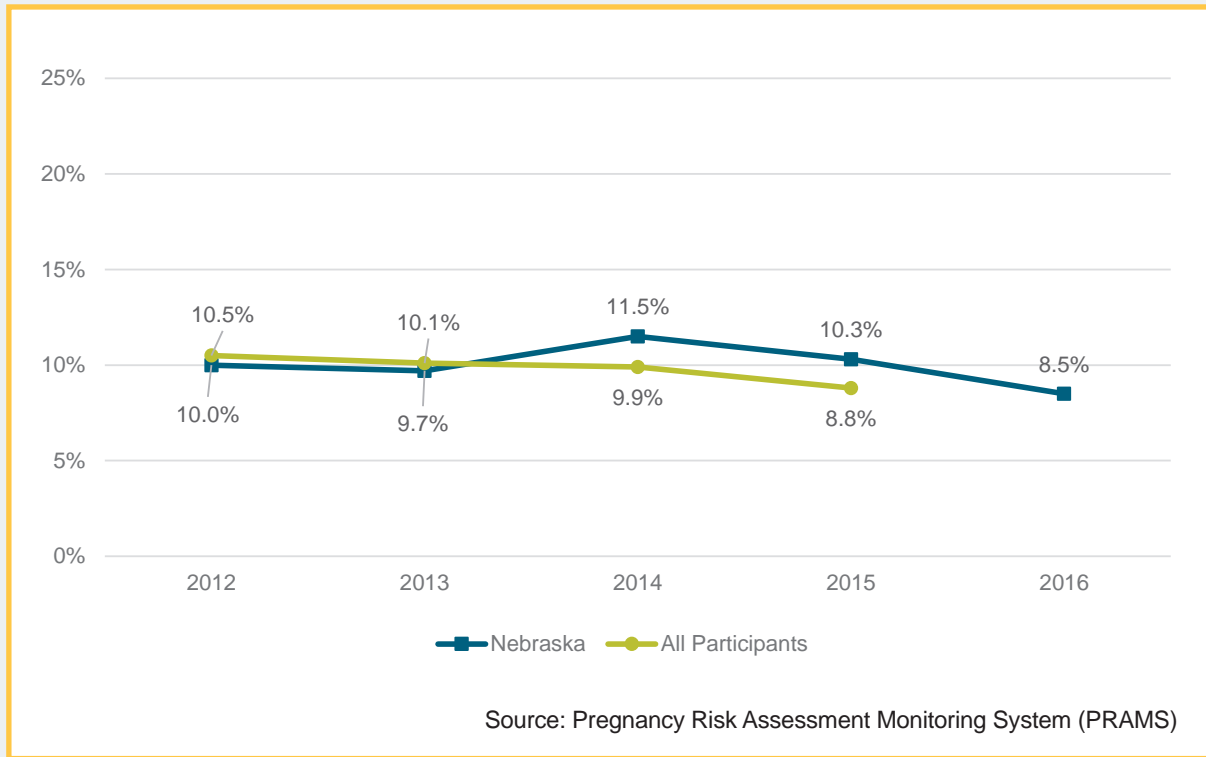


In 2016 (the most recent data available), the rate of smoking for women who became pregnant was almost 19% (18.7%) in the months prior to pregnancy. Many of these individuals may not have been aware of the pregnancy. This is similar to but higher than the overall smoking rate among all adults (15.4%).

The rate of smoking prior to pregnancy has declined over time. Nebraska has performed very similarly to the average for all participating states. The decline is likely due to the decreasing overall rate of smoking among adults in Nebraska.

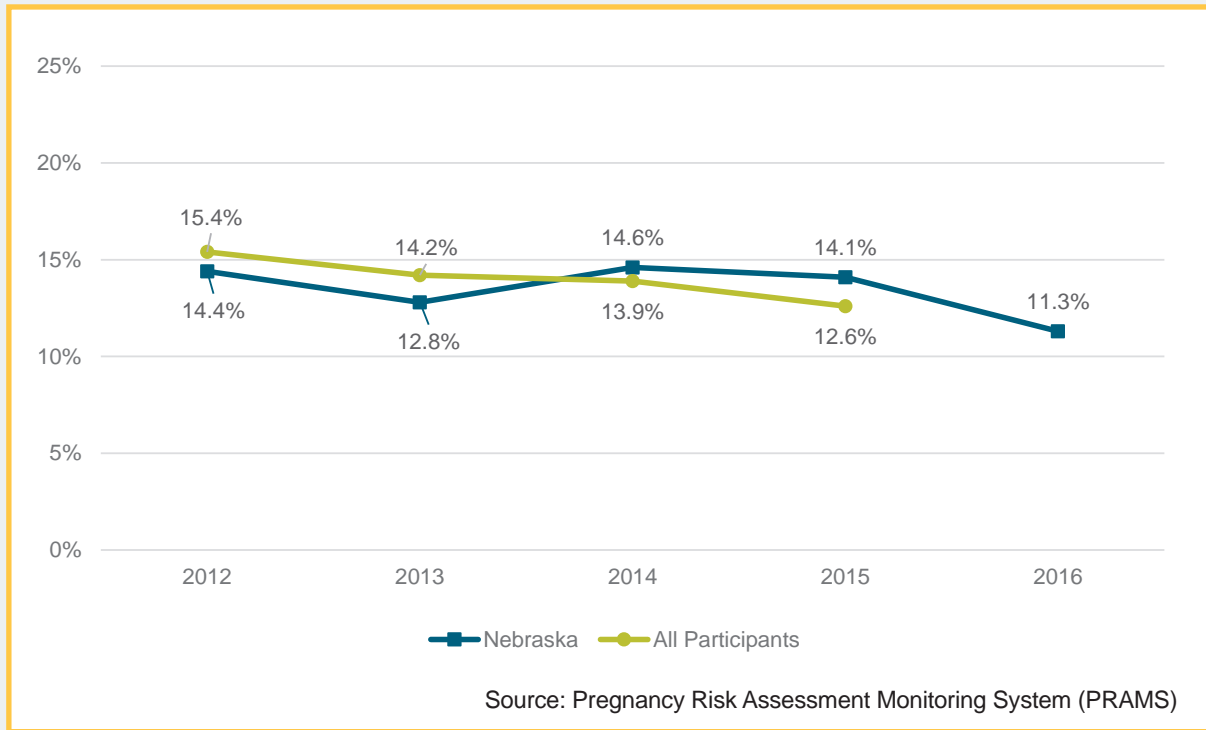


## 2012 - 2016: Trend of Cigarette Smoking During Pregnancy in Nebraska



Fewer than 10% of women reported they smoked cigarettes during their pregnancy. The last few years saw a slight decrease over earlier rates. The most recent value of 8.5% is the lowest in Nebraska since measurement began. In general, the prevalence of tobacco use in Nebraska closely mirrored and was slightly higher than the average for other participating states.

## 2012 - 2016: Trend of Cigarette Smoking After Pregnancy in Nebraska

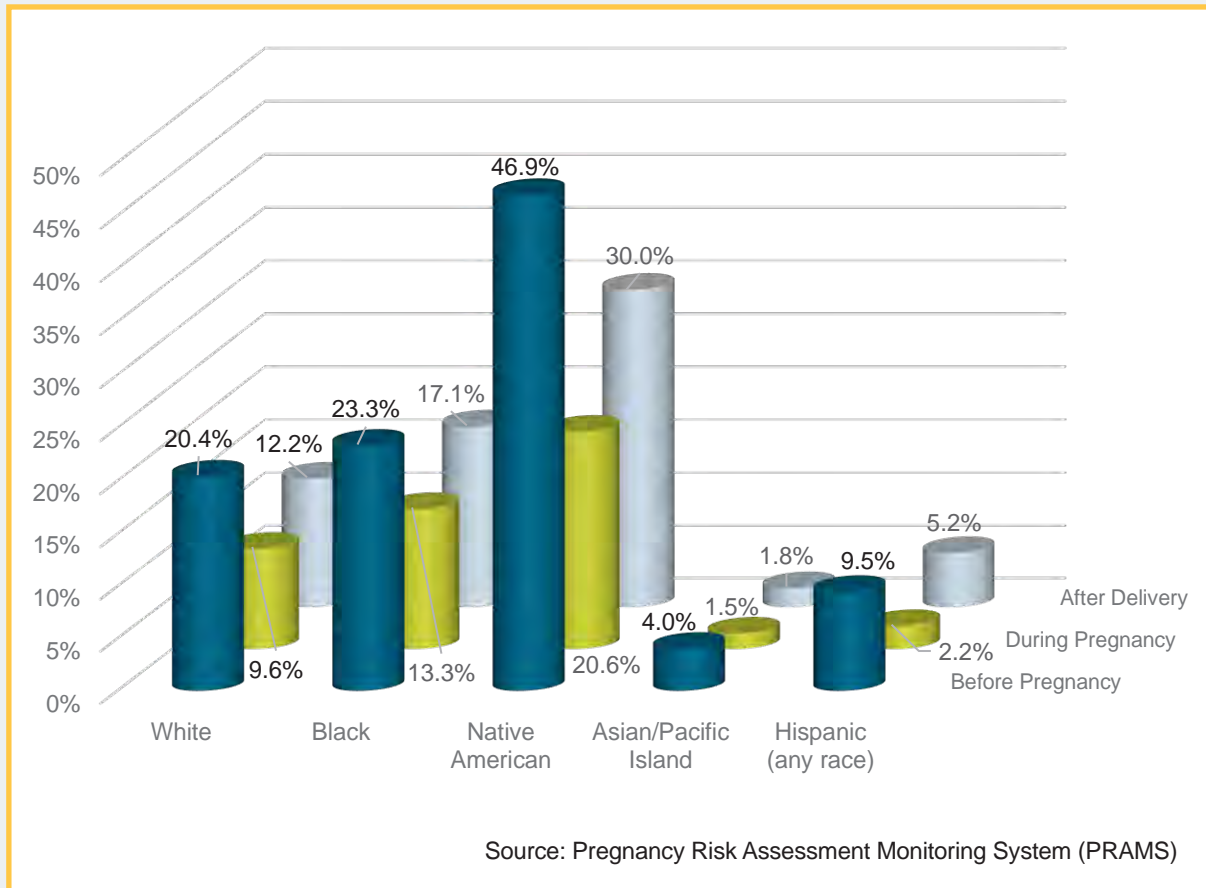


Many women who smoked prior to pregnancy resumed smoking after delivery. The post-partum smoking rate is 11.3%.

**Note:** The rate for all participating sites is not available for 2016.



## 2016: Cigarette Smoking Before/During/After Pregnancy by Race/Ethnicity in Nebraska

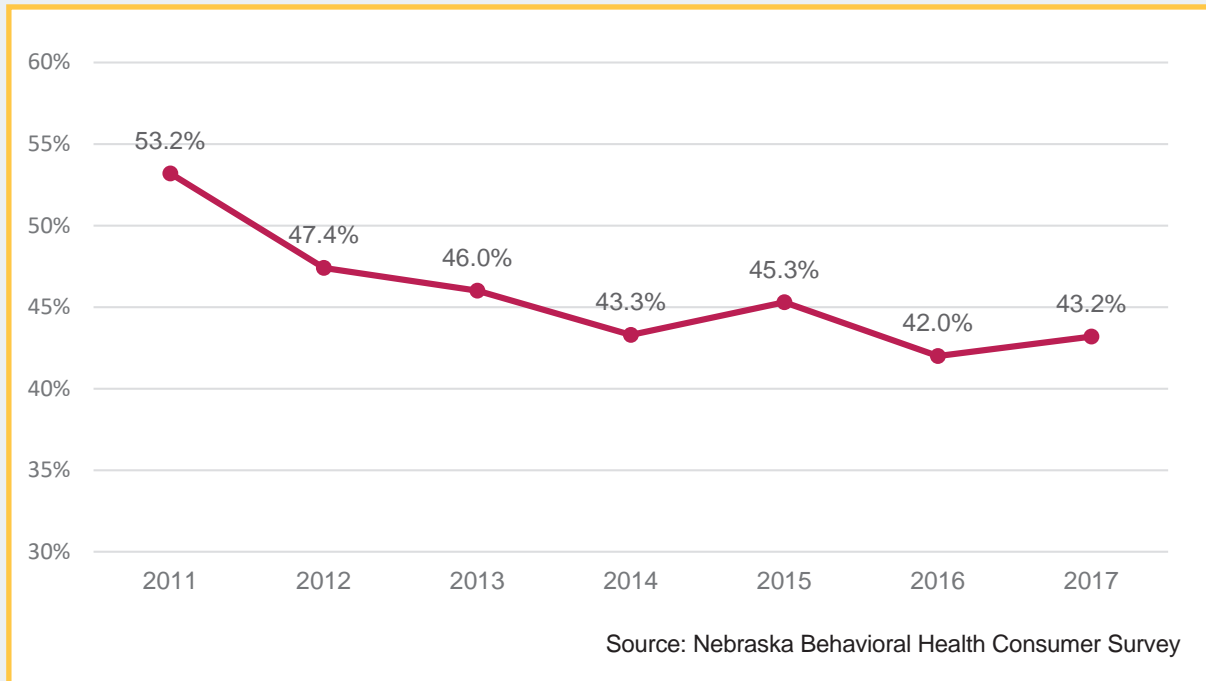


The PRAMS questionnaire also collects the respondent's race and ethnicity. This information can be used to analyze race-based disparities.

When analyzing the PRAMS data by race and ethnicity, several patterns emerge in the data, including:

- Black and Native American respondents smoke at the highest rate.
- Asian/Pacific and Hispanic respondents each have low cigarette use rates.

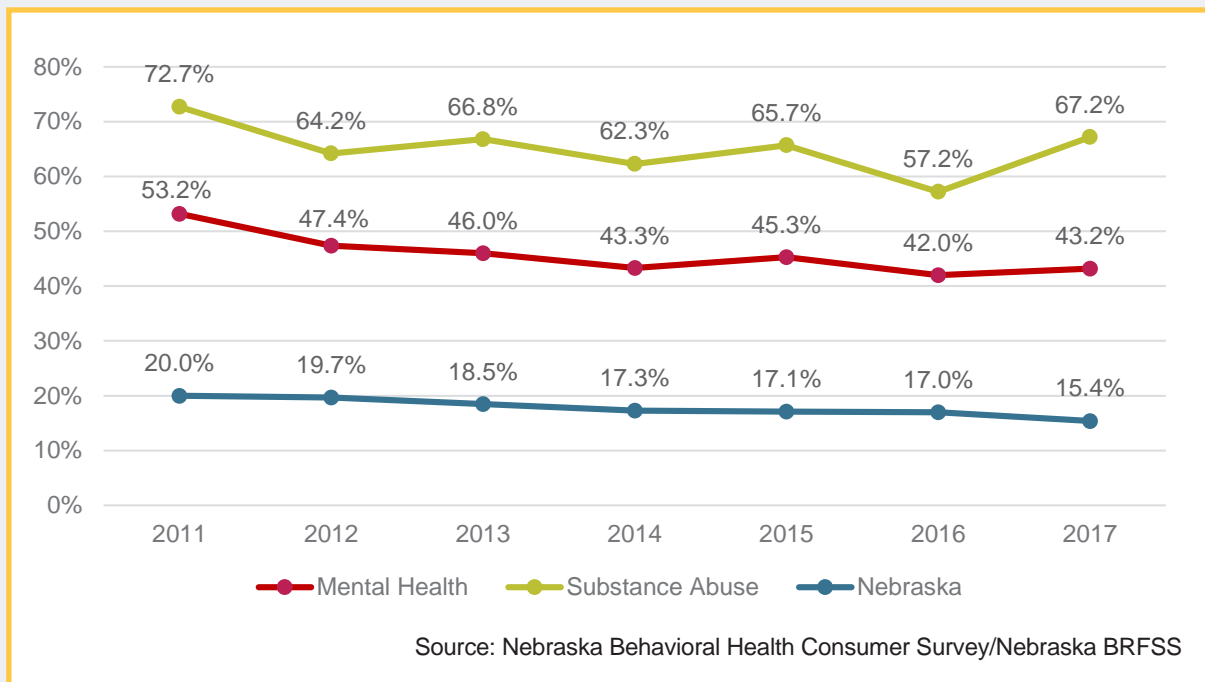
## 2011 - 2017: Cigarette Smoking Among Behavioral Health Consumers in Nebraska



Individuals in treatment for behavioral health conditions smoke cigarettes at a much higher rate than the general population. While the rate has dropped over time from over 50% of patients to values in the low 40s, there is significant progress to be made among this population.

Includes patients who are or have received mental health services (not substance abuse treatment). Includes the percent of respondents answering “every day” or “some days” to the question asking if the respondent smokes cigarettes.

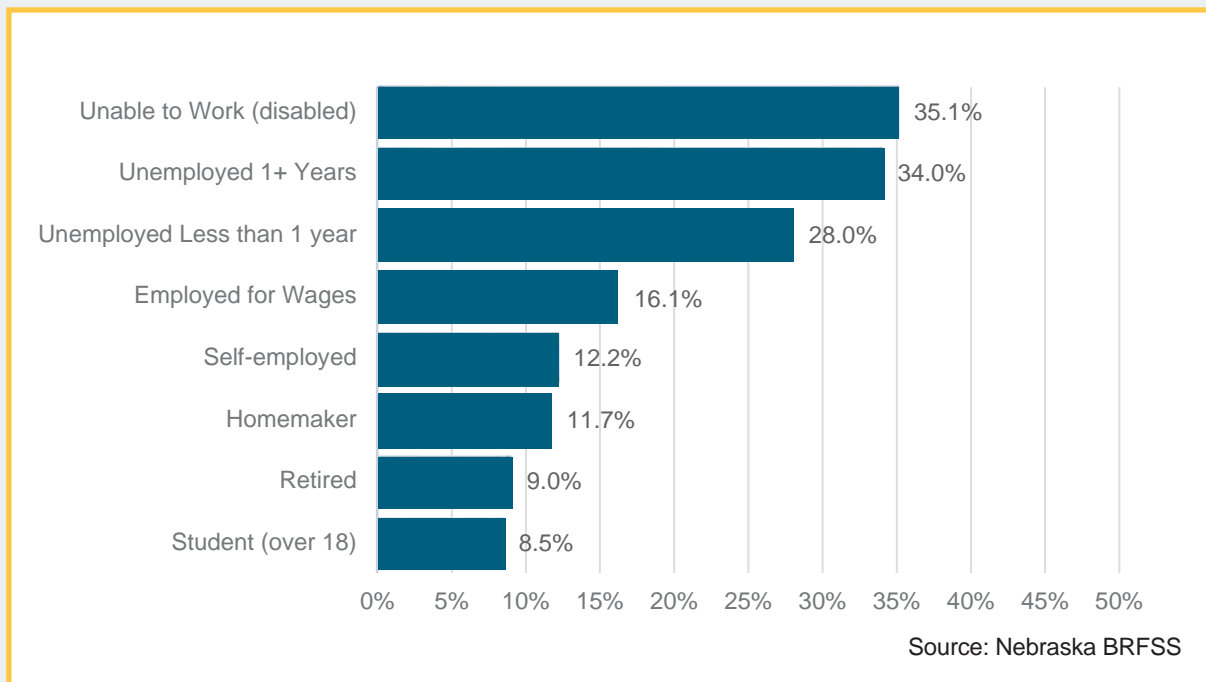
## 2011 - 2017: Smoking Rate - Adult Behavioral Health vs. State Average



Behavioral health patients use cigarettes at a much higher rate than the total Nebraska population. As seen in the chart (above), the cigarette-use rate of the mental health population is more than 20 points higher than the average of the state while patients who receive substance abuse services are approximately 40 points higher.

Includes the percentage of respondents who answered “every day” or “some days” to the question: *“Do you now use cigarettes every day, some days, or not at all?”*

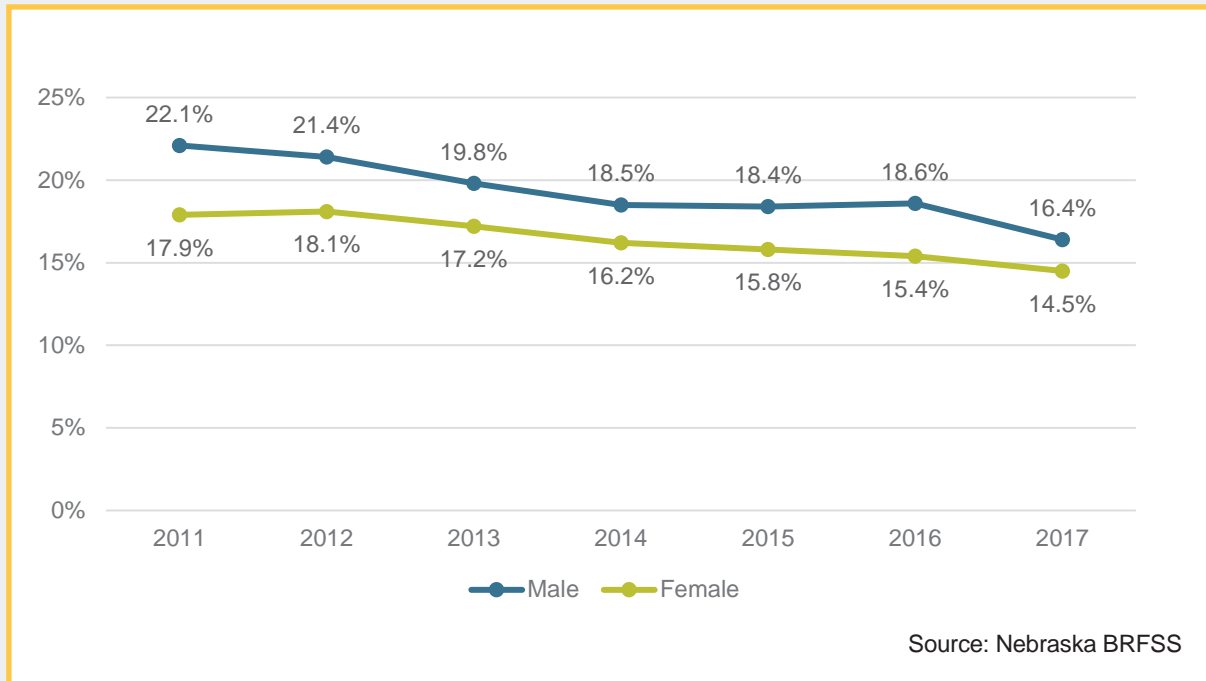
## 2017: Adult Cigarette Smoking Prevalence by Employment Status in Nebraska



Most categories fall into the 8-16% range. The disabled (unable to work), short-term unemployed and long-term unemployed have dramatically higher rates of cigarette use when compared to the employed population.

This item is calculated by analyzing the responses to cigarette use and cross-tabulating with the self-reported employment status.

## 2011 - 2017: Adult Cigarette Smoking Rate in Nebraska by Gender

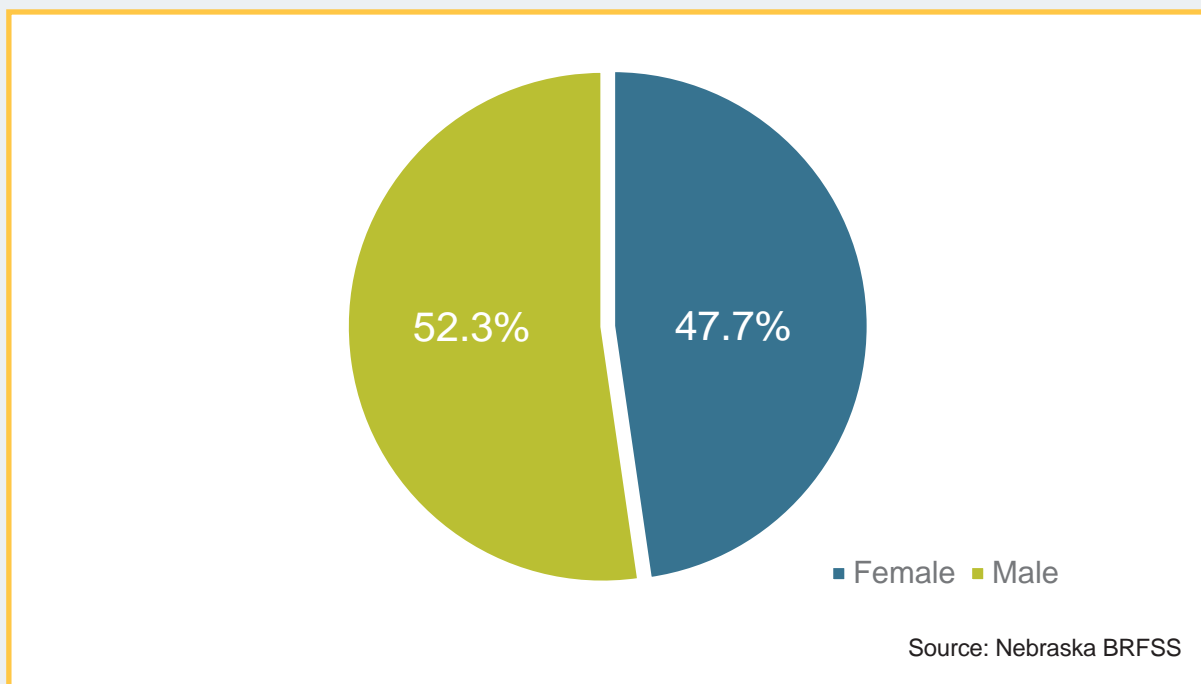


Calculating the smoking rate by respondent gender tells a different story than just studying the overall results. For example, we know that the **overall** smoking rate is 15.4% but this is an aggregate of the male smoking rate of 16.4% and the female smoking rate of 14.5%.

The graph (above) provides several pieces of information, such as:

- Males have consistently had a higher smoking rate than females.
- Both sexes have experienced declining smoking rates.
- The difference between the genders is declining. The lines are getting closer together, thus indicating the difference between the genders is going down.
- In the last year, the largest change was among males (note the steeper decline in the last year).

## 2017: Proportion of Each Gender Among Cigarette Smokers in Nebraska

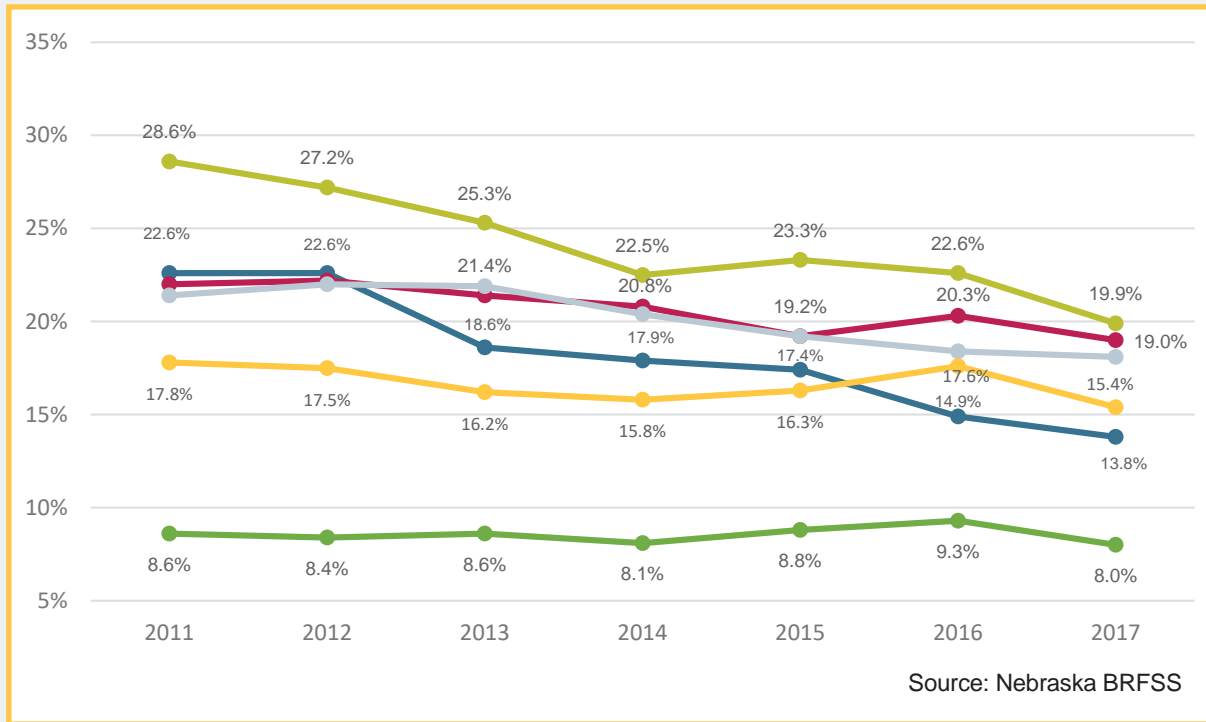


The pie graph above details the proportion of each gender represented among cigarette smokers. The population is nearly evenly divided between men and women.



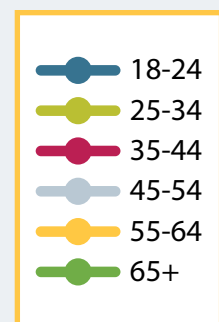


## 2011 - 2017: Cigarette Smoking by Age Category

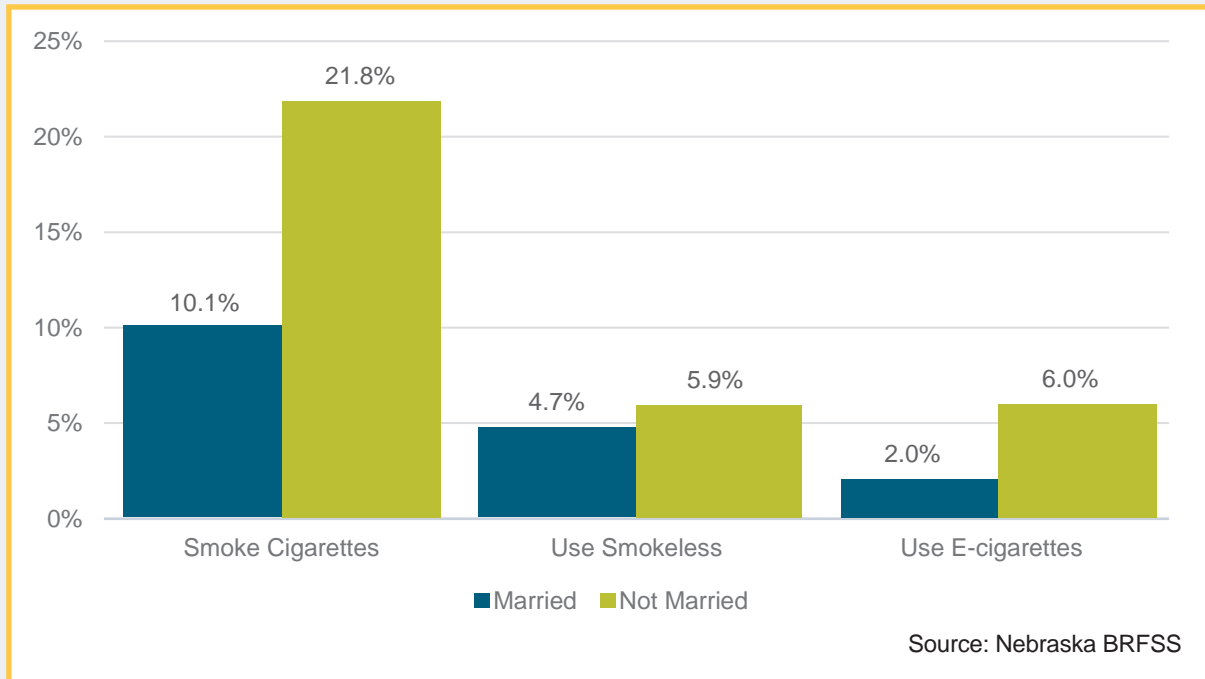


When analyzing smokers by age category, several patterns emerge, such as:

- In every age group, the cigarette use rate is lower today than it was in 2011.
- The young adult group (18-24) had a meaningful decrease from scores in the low 20s to scores in the low teens.
- The retired group (over 65) consistently has a smoking prevalence between 8 and 9 percent.
- The group with the highest cigarette smoking rate are the mid-adults (25-34).



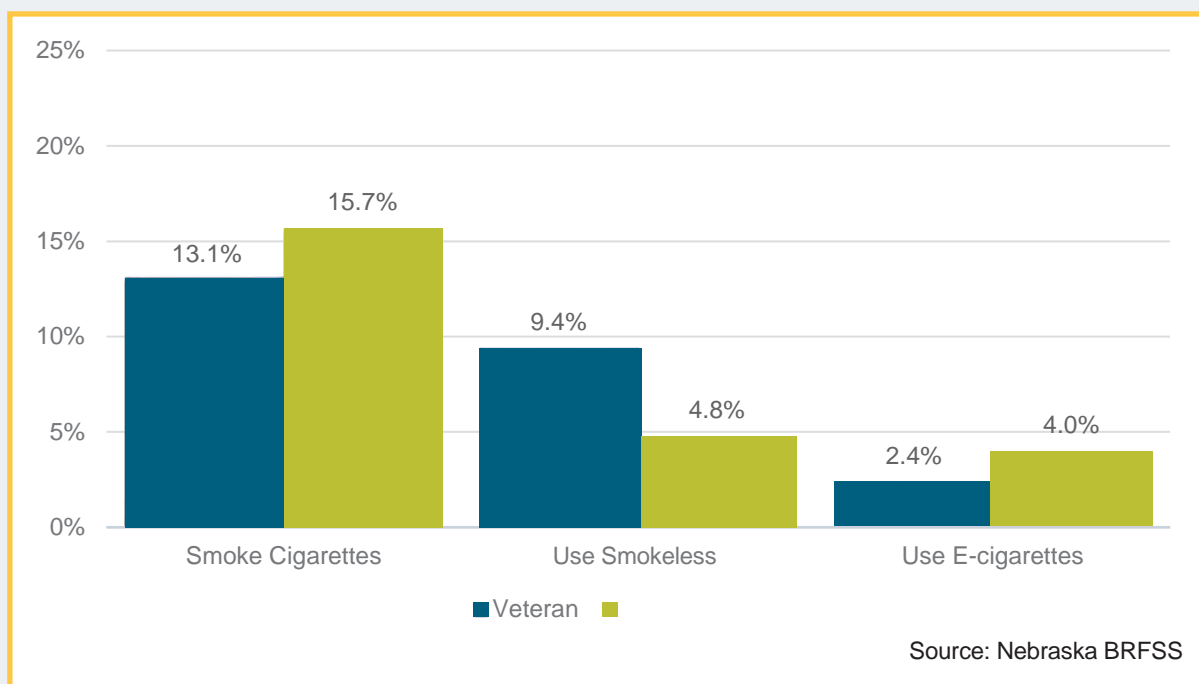
## 2017: Tobacco Product Use by Marital Status in Nebraska



Married respondents reported a much lower rate of tobacco product use than unmarried individuals (includes all categories of unmarried respondents). For example, married respondents smoke cigarettes at less than half the rate of unmarried respondents (10.1% vs. 21.8%). The rate of smokeless tobacco use was similar between married and unmarried respondents (4.7% vs. 5.9%). E-cigarette use, however highlights the disparity once again with unmarried individuals reporting a prevalence rate three times that of married individuals (2.0% vs. 6.0%).

This item is calculated by analyzing the responses to each type of tobacco used and cross-tabulating with the reported marital status.

## 2017: Tobacco Product Use by Veteran Status in Nebraska



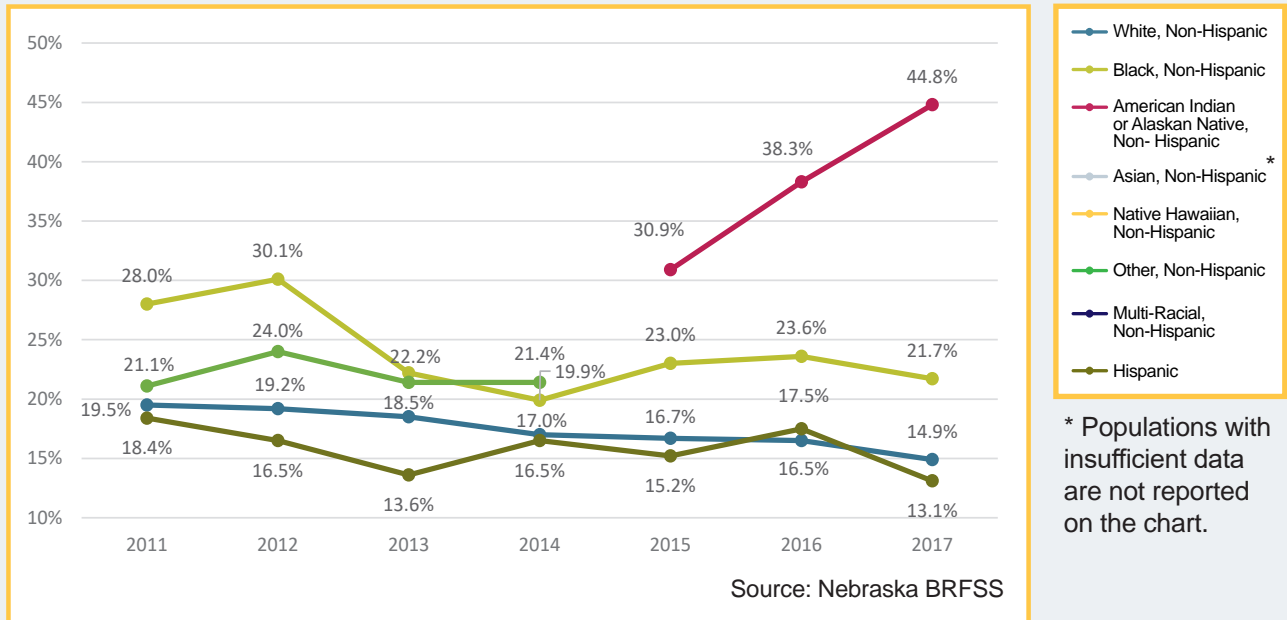
Many national studies have found higher smoking and tobacco-use rates among veterans when compared to the total population.

Nebraska data reveals a different pattern with cigarette smoking (13.1% vs. 15.7%) and e-cigarette use (2.4% vs. 4.0%) where the non-veteran population uses products at a higher rate than veterans.

Interestingly, the smokeless tobacco use rate among veterans is nearly twice the rate of non-veterans. Smokeless tobacco is most prevalent among males and is more prevalent in younger populations. The veteran population is primarily male and younger, on average, than the total population. These characteristics may at least partially explain the higher rate.

This item is calculated by analyzing the responses to each type of tobacco used and cross-tabulating with the self-reported veteran status.

## 2011 - 2017: Cigarette Smoking by Race/Ethnicity in Nebraska



Racial and ethnic differences or disparities have been present since health surveillance began. Healthy People 2020 provides this explanation: *“Powerful, complex relationships exist between health and biology, genetics, and individual behavior, and between health and health services, socioeconomic status, the physical environment, discrimination, racism, literacy levels, and legislative policies. These factors, which influence an individual’s or population’s health, are known as determinants of health.”*<sup>1</sup>

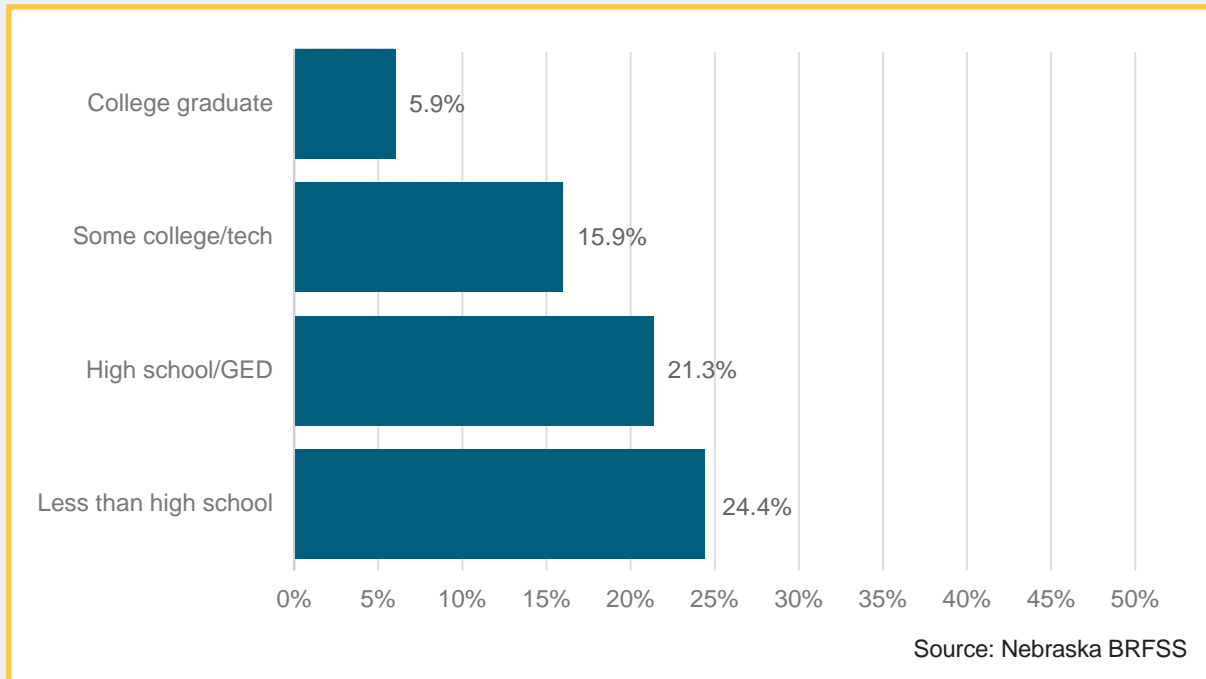
In Nebraska, the black, non-Hispanic population consistently has a higher prevalence of cigarette smoking when compared to white, non-Hispanic and the population identifying as Hispanic.

The American Indian population has the highest rate of cigarette use at nearly 45%, however, correctly measuring tobacco product use in this population is difficult due to the ceremonial use of tobacco.

In some cases, there are insufficient data to report information. For example, there were insufficient data to report results for the Asian population for the entire time period.

<sup>1</sup> HealthyPeople.gov, Disparities section, <https://www.healthypeople.gov/2020/about/foundation-health-measures/Disparities>, accessed 2/7/2019.

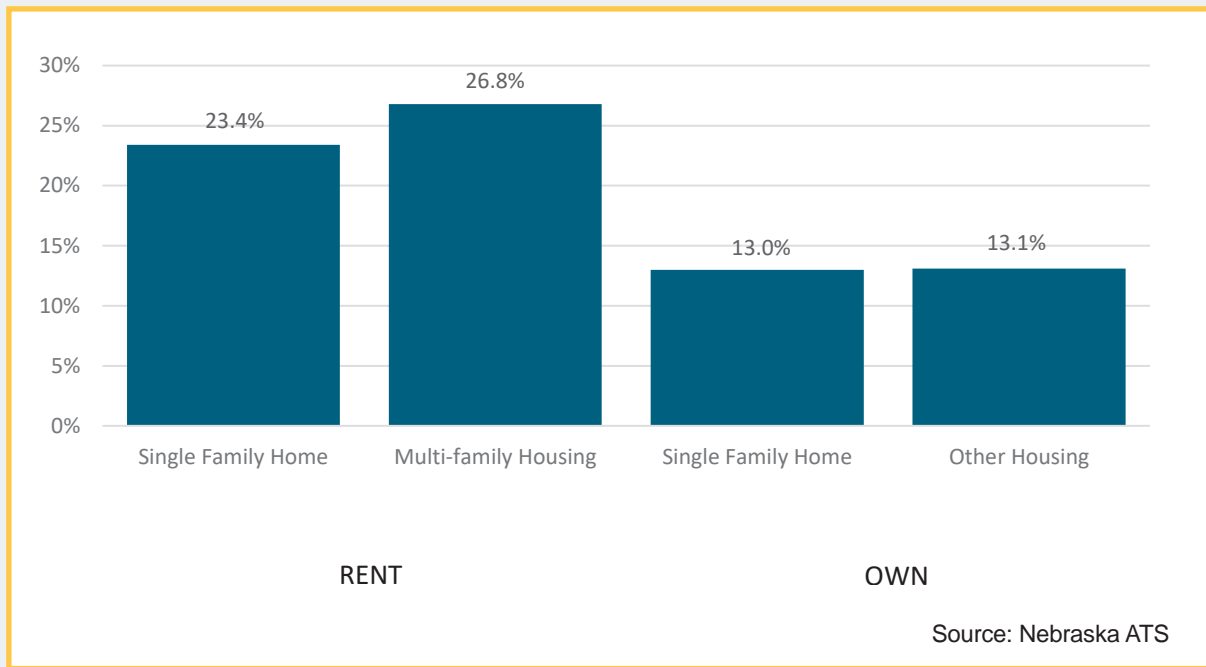
## 2017: Adult Cigarette Smoking Prevalence by Education in Nebraska



There is a strong negative correlation between educational attainment and likelihood to smoke cigarettes. As the level of education increases, the prevalence of cigarette smoking decreases.

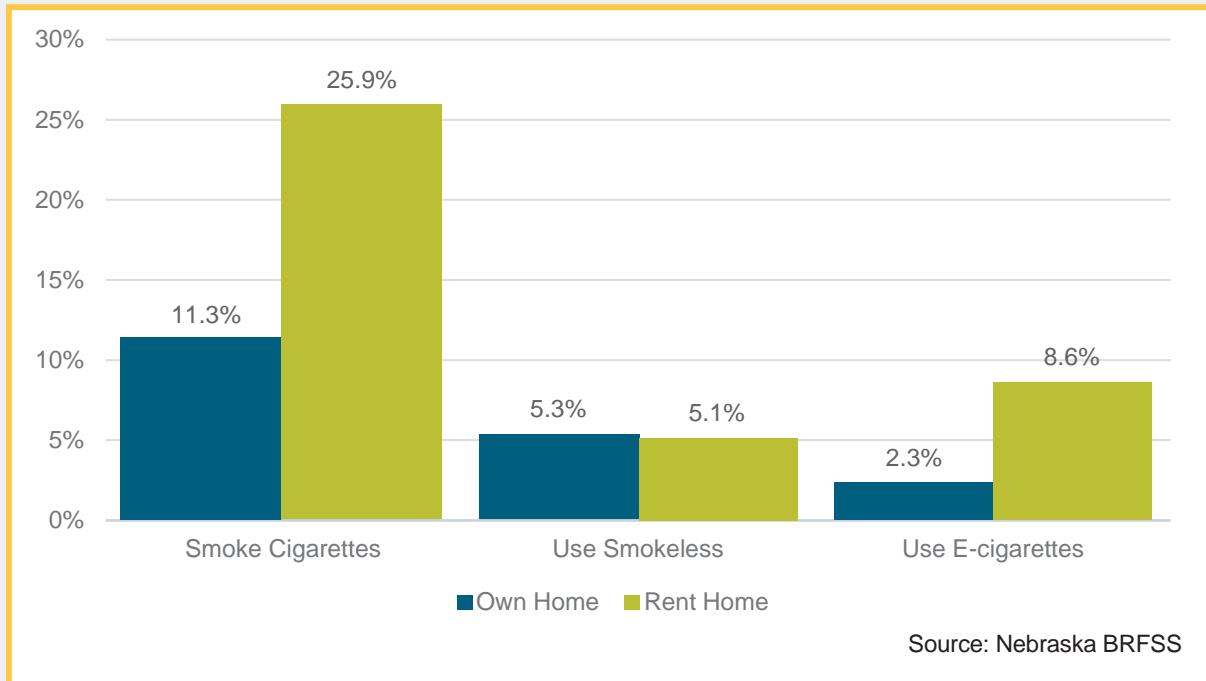
This item is calculated by analyzing the responses to cigarette use and cross-tabulating with the self-reported education attainment.

## 2017: Adult Cigarette Smoking Rate by Housing Type and Ownership Status



Home ownership has a relationship with smoking and tobacco use. Individuals who own their home have a much lower rate of tobacco use when compared to renters. There is also a correlation between multi-unit housing and cigarette smoking where individuals who live in multi-unit homes that are renters have the highest rate of smoking at nearly 27% (26.8).

## 2017: Tobacco Product Use by Home Ownership Status in Nebraska



Individuals who own their home are much less likely to smoke cigarettes or use e-cigarettes than renters. Interestingly, the rate of smokeless tobacco use is almost identical between owners and renters.

This item is calculated by analyzing the responses to each type of tobacco used and cross-tabulating with the home ownership status.

## 2012 - 2015: Adult Cigarette Smoking by Occupation in Nebraska

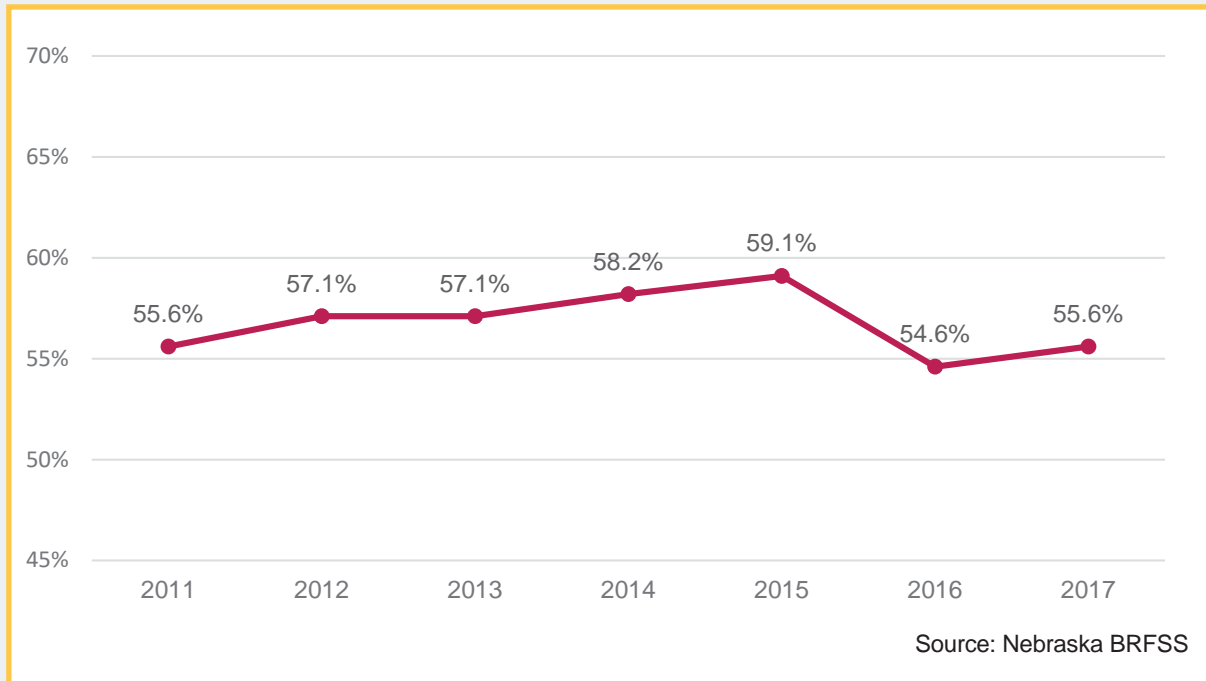
Food Preparation & Serving .....	38.2%
Construction & Extraction .....	32.7%
Transportation & Material Moving .....	28.8%
Production .....	27.0%
Building & Grounds Cleaning & Maintenance .....	25.9%
Installation, Repair, & Maintenance .....	23.8%
Healthcare Support .....	22.4%
Personal Care & Services .....	21.9%
Sales & Related .....	21.7%
Arts, Design, Entertainment, Sports, & Media .....	19.2%
Community & Social Services .....	16.5%
Farming, Forestry, & Fishing .....	16.5%
Office & Administrative Support .....	15.9%
Business & Financial Operations .....	15.3%
Management .....	14.5%
Architecture & Engineering .....	12.3%
Healthcare Practitioners & Technical .....	10.7%
Computer & Mathematical .....	10.5%
Protective Service .....	8.6%
Life, Physical, & Social Services .....	8.0%
Legal .....	6.6%
Education, Training, & Library .....	5.2%

Source: Nebraska BRFSS

There is significant variation in smoking rates when interpreting the results by occupation. As observed in past studies, employees working in the food industry have the highest rate of smoking, at nearly 40 percent (38.2%). Education and cessation efforts should focus on these employment groups that carry a greater burden of tobacco use.



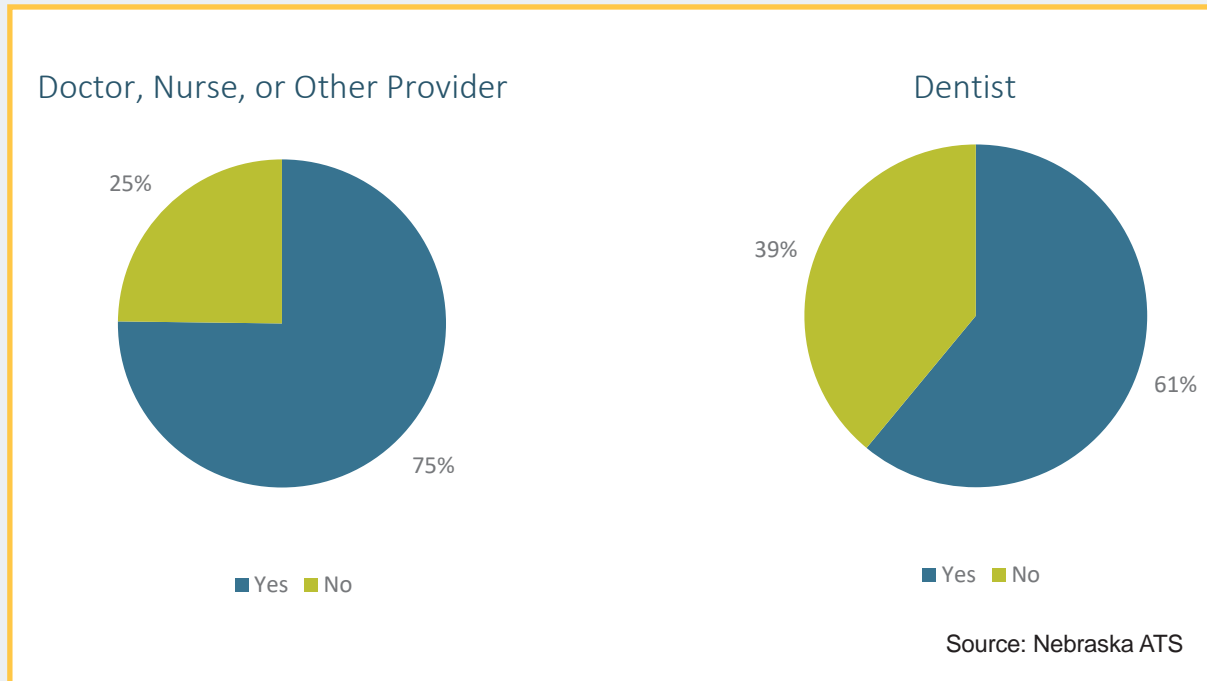
## 2011 - 2017: Cigarette Quit Attempt in Previous Year by Adult Smokers in Nebraska



Most cigarette smokers have a desire to quit, as demonstrated by the nearly 60% who indicate at least one quit attempt in the previous year.

Includes responses of 'yes' to the question: *"During the past 12 months, have you stopped smoking for one day or longer because you were trying to quit smoking?"*

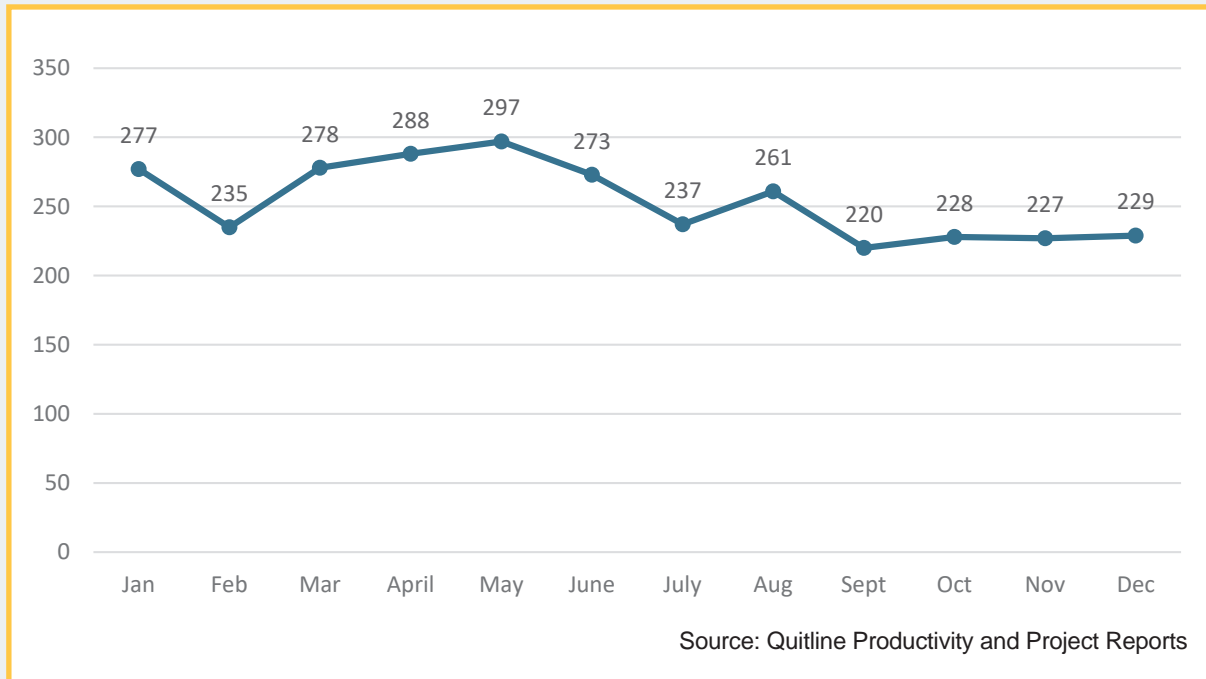
## 2017: Received Advice from Providers to Quit Smoking



A medical provider can often influence health care decisions of patients. For this reason, respondents are asked a series of questions about whether there was an office visit and whether the provider advised them to stop using tobacco products.



## Average Number of Calls to the Nebraska Quitline by Month - All Call Types

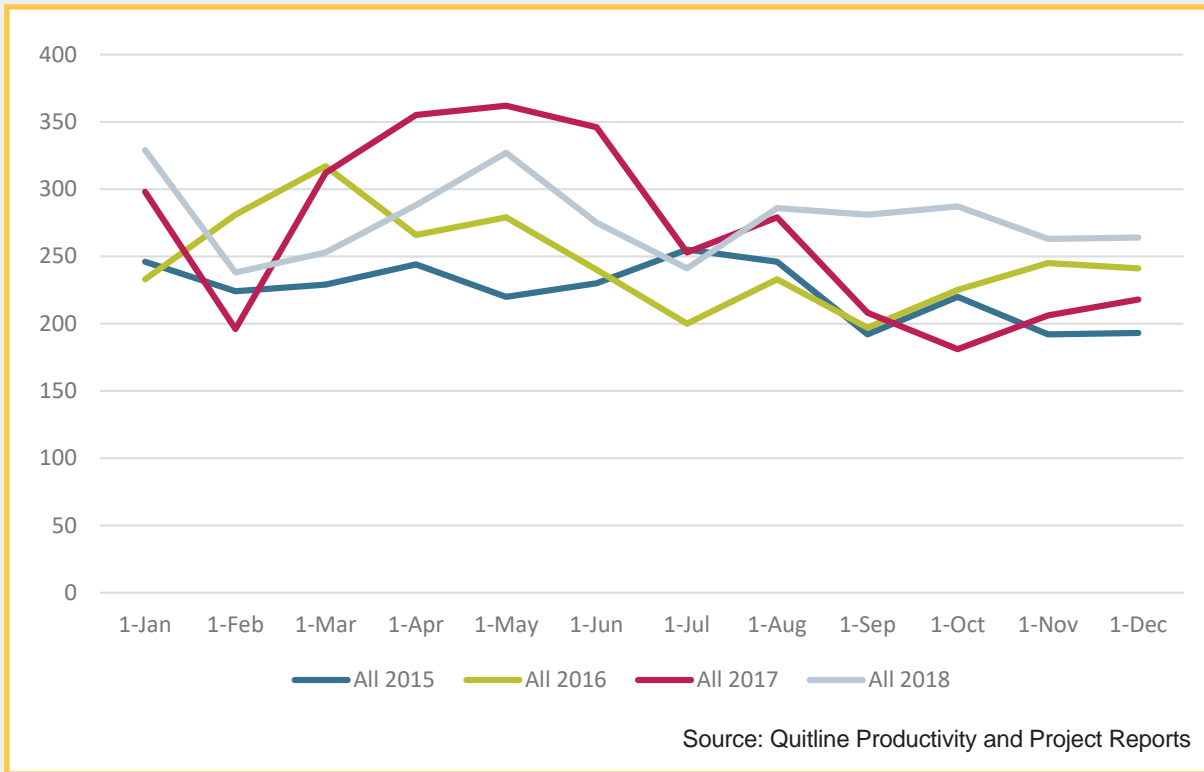


### Average number of calls to the Nebraska Tobacco Quitline from 2016 to 2018:

	Jan	Feb	Mar	April	May	June	July	Aug	Sept	Oct	Nov	Dec	Total
<b>2015</b>	246	224	229	224	220	230	255	246	192	220	192	193	2671
<b>2016</b>	233	281	317	266	279	240	200	233	197	225	245	241	2957
<b>2017</b>	298	196	312	355	362	346	253	279	208	181	206	218	3214
<b>2018</b>	329	238	253	288	327	275	241	286	281	287	263	264	3332
<b>Avg.</b>	277	235	278	283	297	273	237	261	220	228	227	229	12174

This graph and table display the average (mean) number of calls to the Nebraska Tobacco Quitline regardless of the reason for the call. Individuals call to get information for family members, ask a question for themselves, have a short coaching session, or for many other reasons. During the last four years, over 11,000 calls were placed to the Quitline (number of unique individuals is lower because some people will call multiple times).

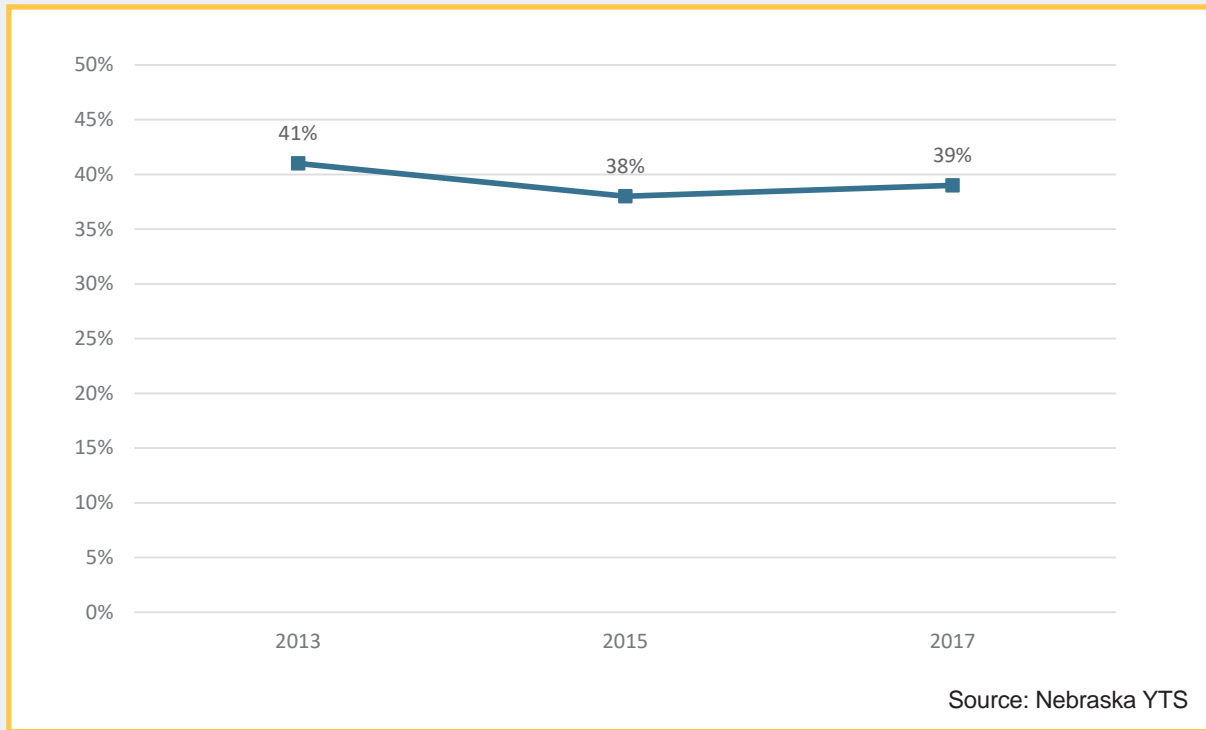
## Calls to the Nebraska Quitline by Month and Year 2015 - 2018 / Actual Count - All Call Types



This table above is similar to the previous table, except actual call count is included and each year is displayed.



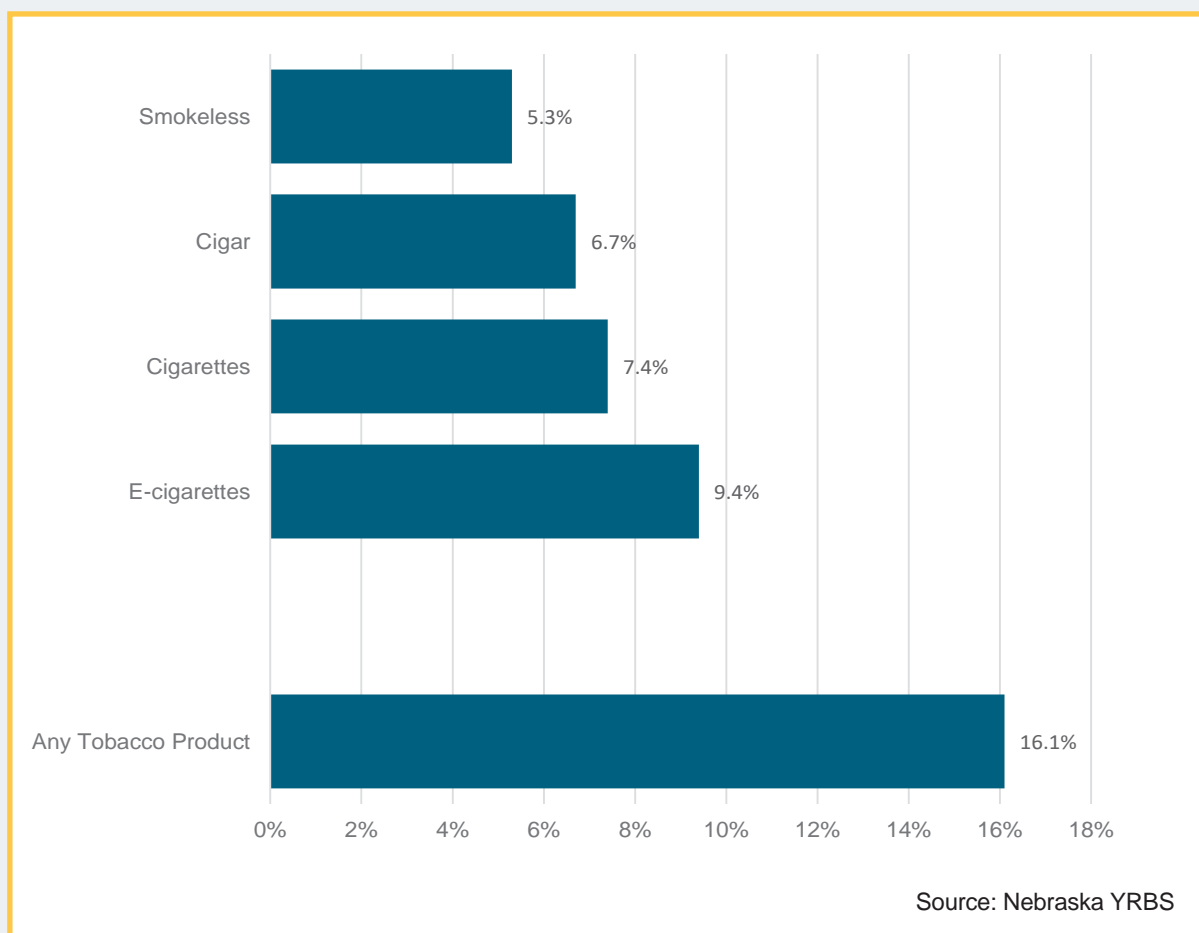
## 2017: Percentage of Nebraska Youth That Ever Tried Tobacco



Despite new products and changing regulation, the proportion of students who have tried any tobacco product has remained consistent at about 40 percent.

The term “any tobacco product” includes multiple tobacco product use. This category includes cigarettes, cigars, smokeless tobacco, pipe, hookah or water pipe, bidis, kreteks, and e-cigarettes in the form of flavored or regular tobacco products.

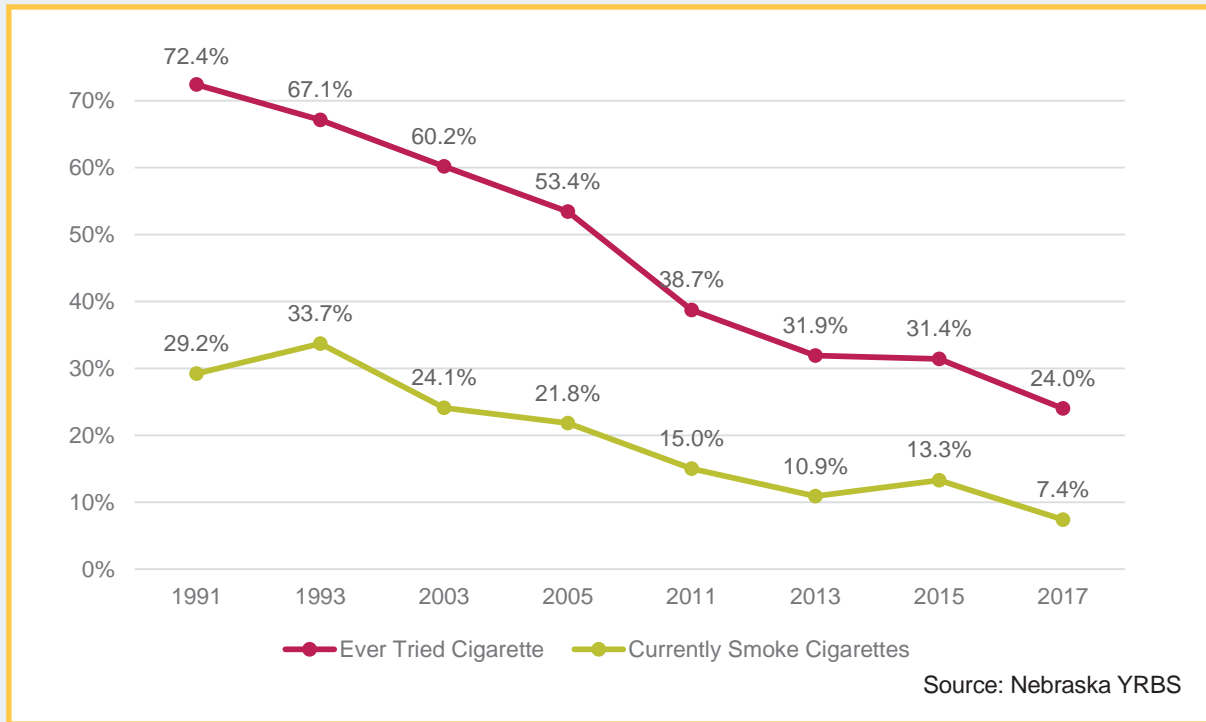
## 2017: Youth Current Use of Tobacco Products by Type in Nebraska



Just over three of every 20 high-school students in Nebraska report using a tobacco product in the last 30 days. When reviewed by type, e-cigarettes are the most prevalent at 9.4%. After being the most prevalent for many years, the use of cigarettes has declined to 7.4%, making it the second most prevalent. Cigars, which are readily available in low-cost packages and a myriad of flavors, are used by nearly seven percent (6.7%) of youth. The least prevalent product used by high school youth was smokeless tobacco, at 5.3%, however historically smokeless tobacco use has varied significantly by geographic region and other factors.

**Note:** The individual product prevalence rates amount to more than the overall of 16.1% because some youth use more than one tobacco product.

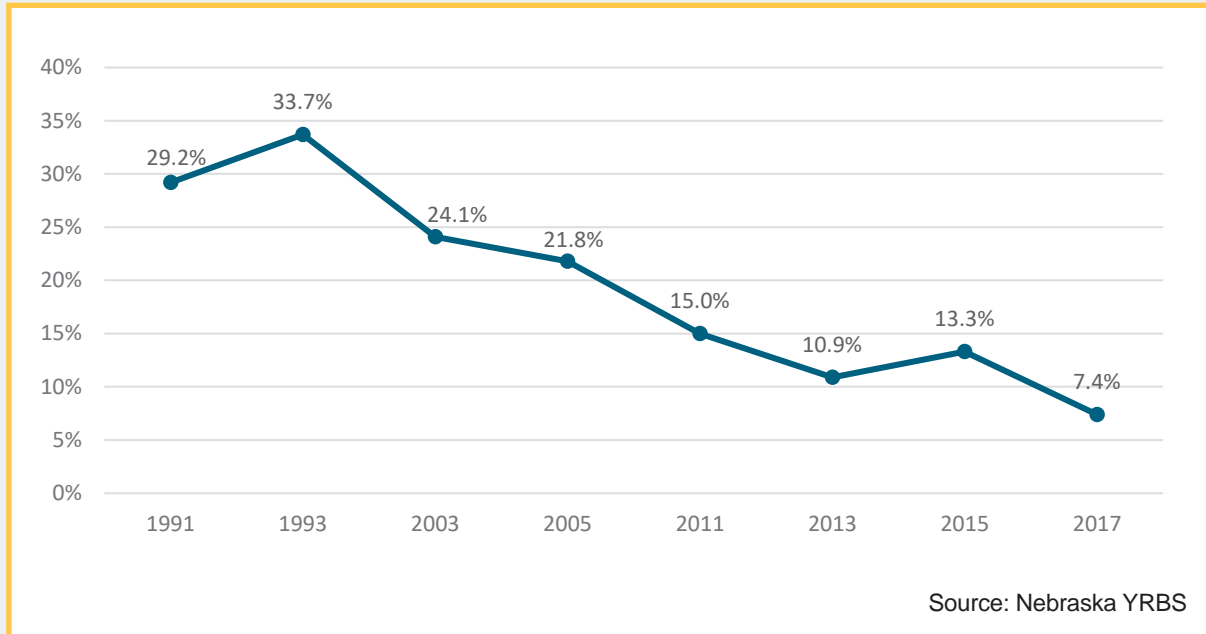
## 1991 - 2017: Youth Cigarette Use in Nebraska



Both experimentation (ever tried) with cigarettes and current smoking rates have decreased dramatically since the 1990s. In the early nineties, over 70% of youth tried cigarette smoking and nearly 30% of those converted to become regular smokers. By 2017, the youth cigarette experimentation and use had decreased dramatically. Today, less than a quarter of youth have tried cigarettes and the current smoking rate is just over 7%.

Includes responses of 'yes' to the question about ever trying cigarettes, even once and includes youth who answered "every day" or "some days" to the question: *"Do you smoke cigarettes currently."*

## 1991 - 2017: Prevalence of Youth in Nebraska Who Have Smoked Cigarettes in the Last 30 Days

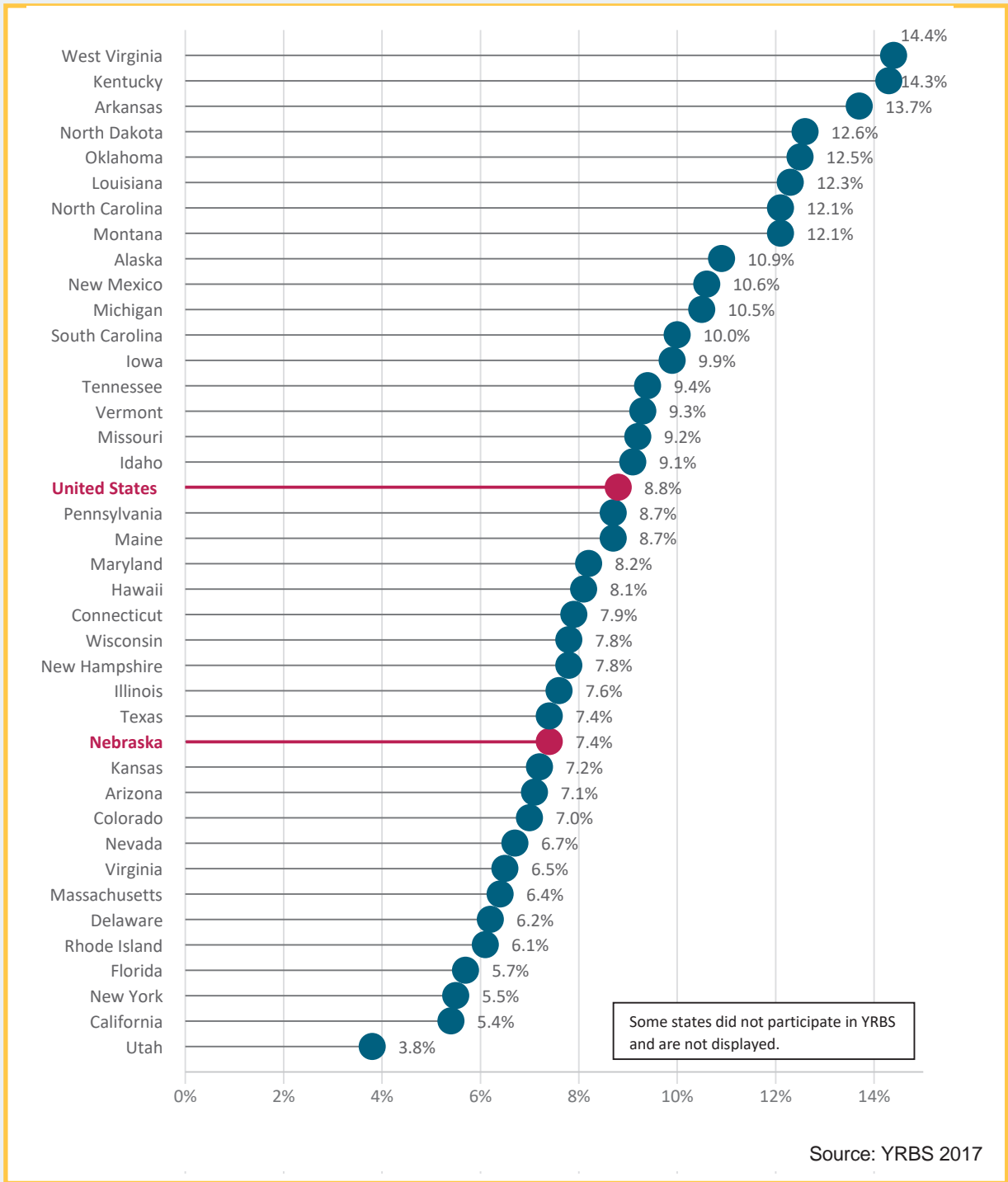


The high school youth cigarette smoking rate has dramatically declined since the early nineties. At that point in time approximately 1/3 of high school students reported smoking cigarettes in the last 30 days. Currently the percentage of students reporting smoking cigarettes in the last 30 days is in the single digits at 7.4%.

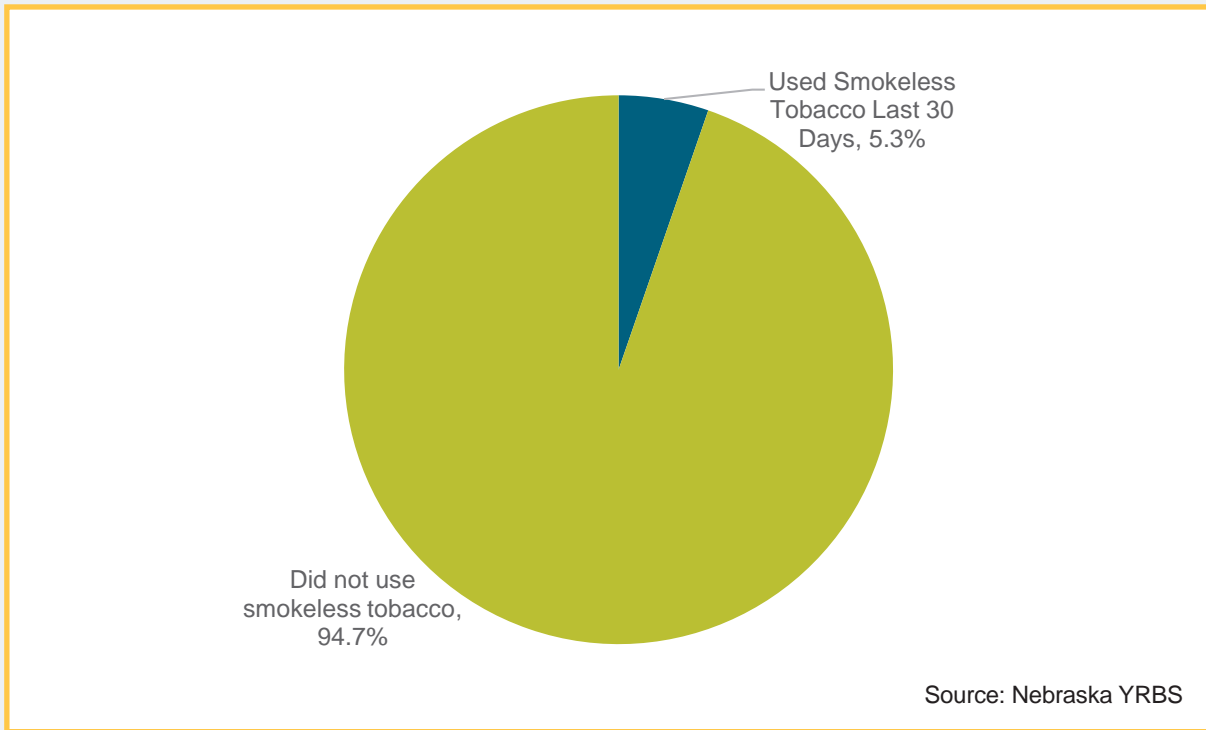
Calculated by summarizing the percentage of students who answered the question about smoking cigarettes in the previous 30 days.



# 2017: Youth Current Cigarette Smoking Rate by State



## 2017: Youth Smokeless Tobacco Use in Nebraska

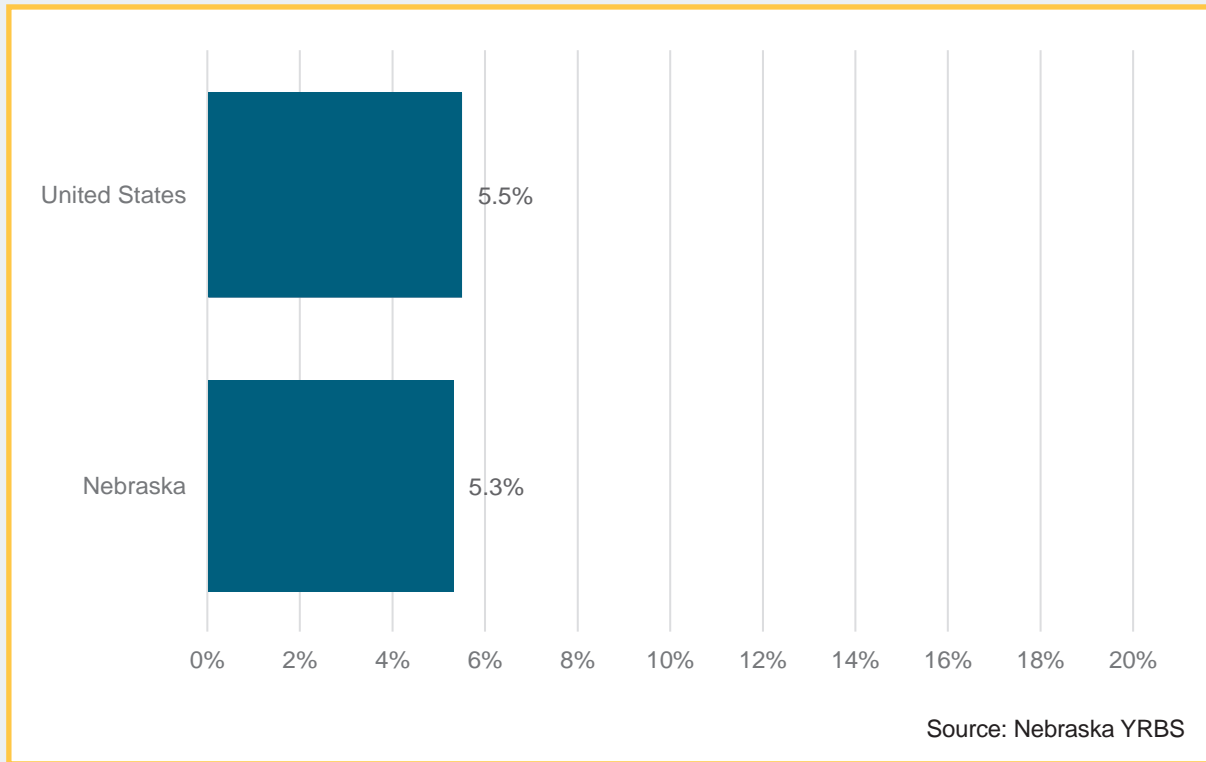


Close to 1 in 19 students (5.3%) reported using smokeless tobacco (chewing tobacco, snuff, dip, snus, or dissolvable tobacco products) during the past 30 days.

Trend data for smokeless tobacco use during the past 30 days are not available due to changes in how the question was asked.

Includes responses to the question: During the past 30 days, on how many days did you use chewing tobacco, snuff, dip, snus, or dissolvable tobacco products, such as Redman, Levi Garrett, Beechnut, Skoal, Skoal Bandits, Copenhagen, Camel Snus, Marlboro Snus, General Snus, Ariva, Stonewall, or Camel Orbs? (Do not count any electronic vapor products.)

## 2017: Youth Current Smokeless Tobacco Use - Nebraska vs. U.S.

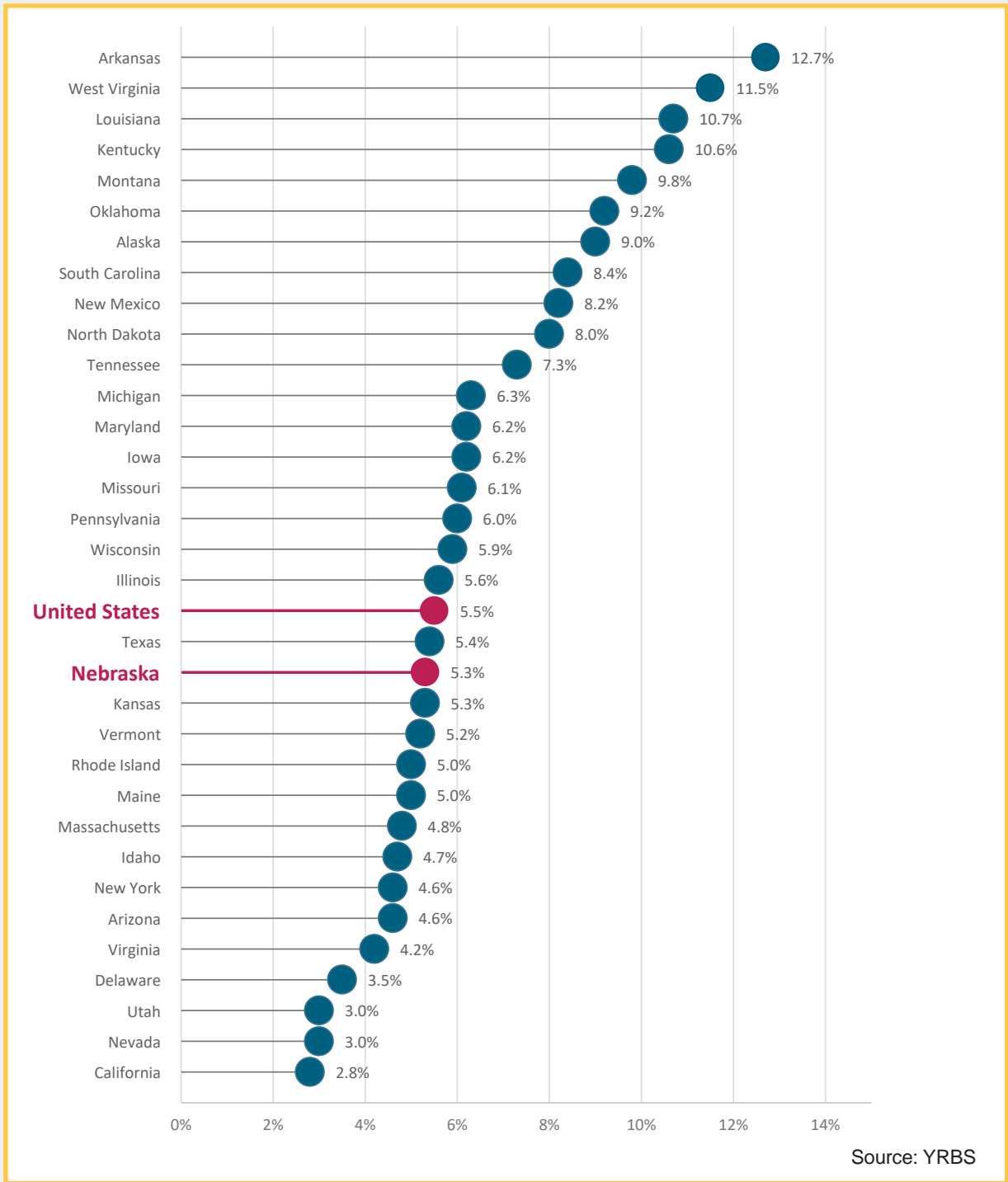


The percentage of Nebraska youth who have used smokeless tobacco in the last 30 days (5.3%) is very similar to the median for the United States (5.5%).

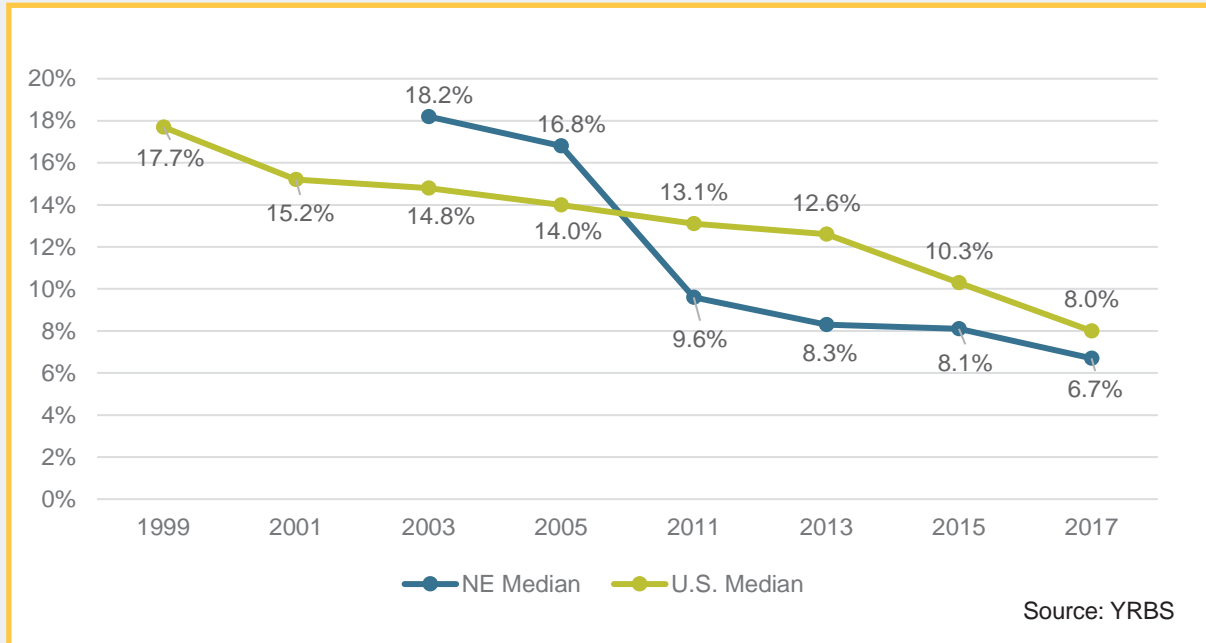
Includes responses to the question: During the past 30 days, on how many days did you use **chewing tobacco, snuff, dip, snus, or dissolvable tobacco products**, such as Redman, Levi Garrett, Beechnut, Skoal, Skoal Bandits, Copenhagen, Camel Snus, Marlboro Snus, General Snus, Ariva, Stonewall, or Camel Orbs? (Do not count any electronic vapor products).

**Note:** Trend data for smokeless tobacco for youth is not available due to a change in the wording of the question. The description of smokeless tobacco was expanded to explicitly include snuff, snus, and dissolvable tobacco. These products were not specifically listed before the 2017 administration.

## 2017: Youth Current Smokeless Tobacco Prevalence by State



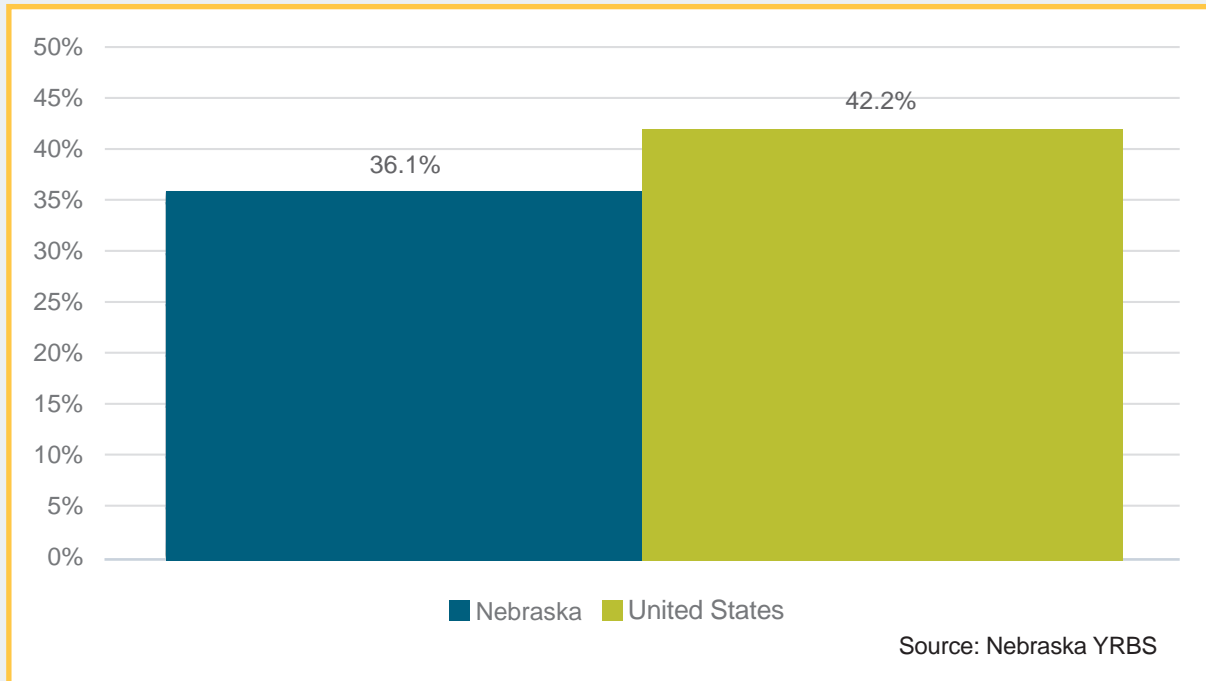
## 1999 - 2017: Prevalence of High School Youth in Nebraska Who Have Smoked Cigars in the Last 30 Days



Before 2005 the prevalence of high school youth using cigars in Nebraska exceeded the average for the United States. The rate for Nebraska was approaching 20% while the Median for the United States was closer to 15%. The use of cigars by youth in Nebraska significantly decreased from 16.8% in 2005 to under 10% (in 2011). Since that time (2008-2010) youth in Nebraska have used cigars at a lower rate than the median for the United States though the most recent data shows this gap narrowing (6.7% Nebraska and (8.0% for the United States).

Calculated by calculating the percentage of students who answered the question about smoking cigars in the previous 30 days.

## 2017: Youth E-Cigarette Use in Nebraska

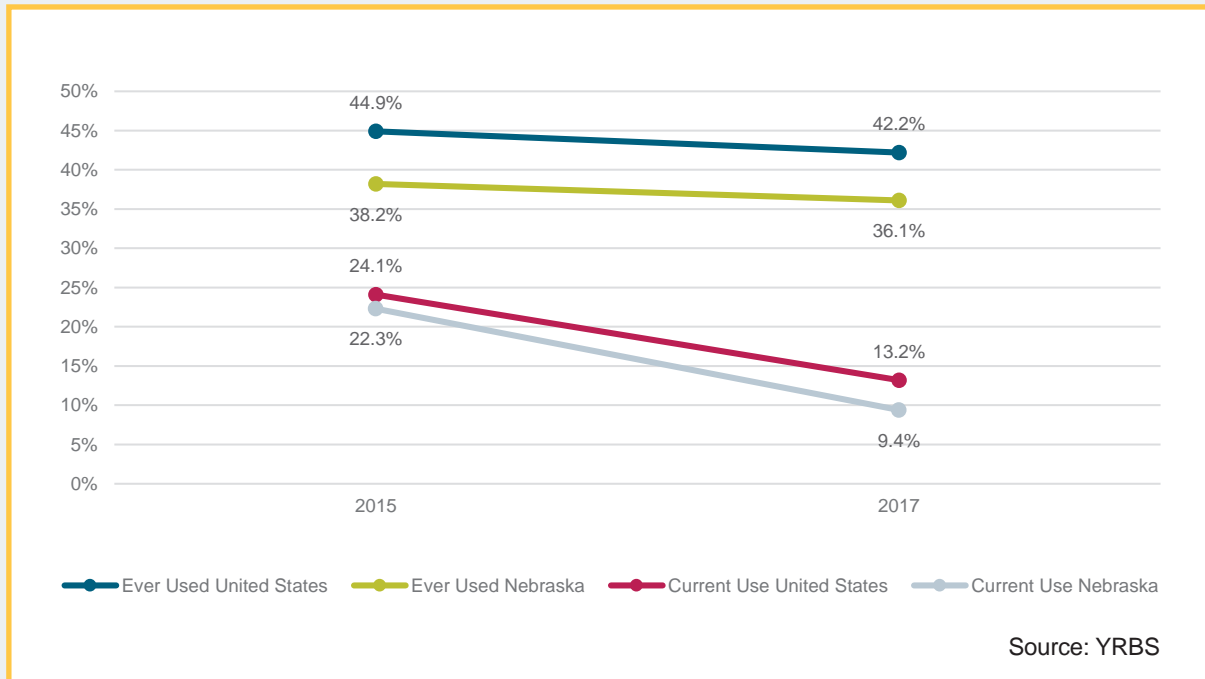


Slightly more than 1 in 3 Nebraska youth report having tried electronic cigarettes in their lifetime. This is lower than the median value of 42.2% for all participating states.

This item is calculated by reporting the percentage that marked 'yes' to the question *"Have you ever used an electronic vapor product?"*



## 2015 - 2017: Youth E-Cigarette Use in Nebraska



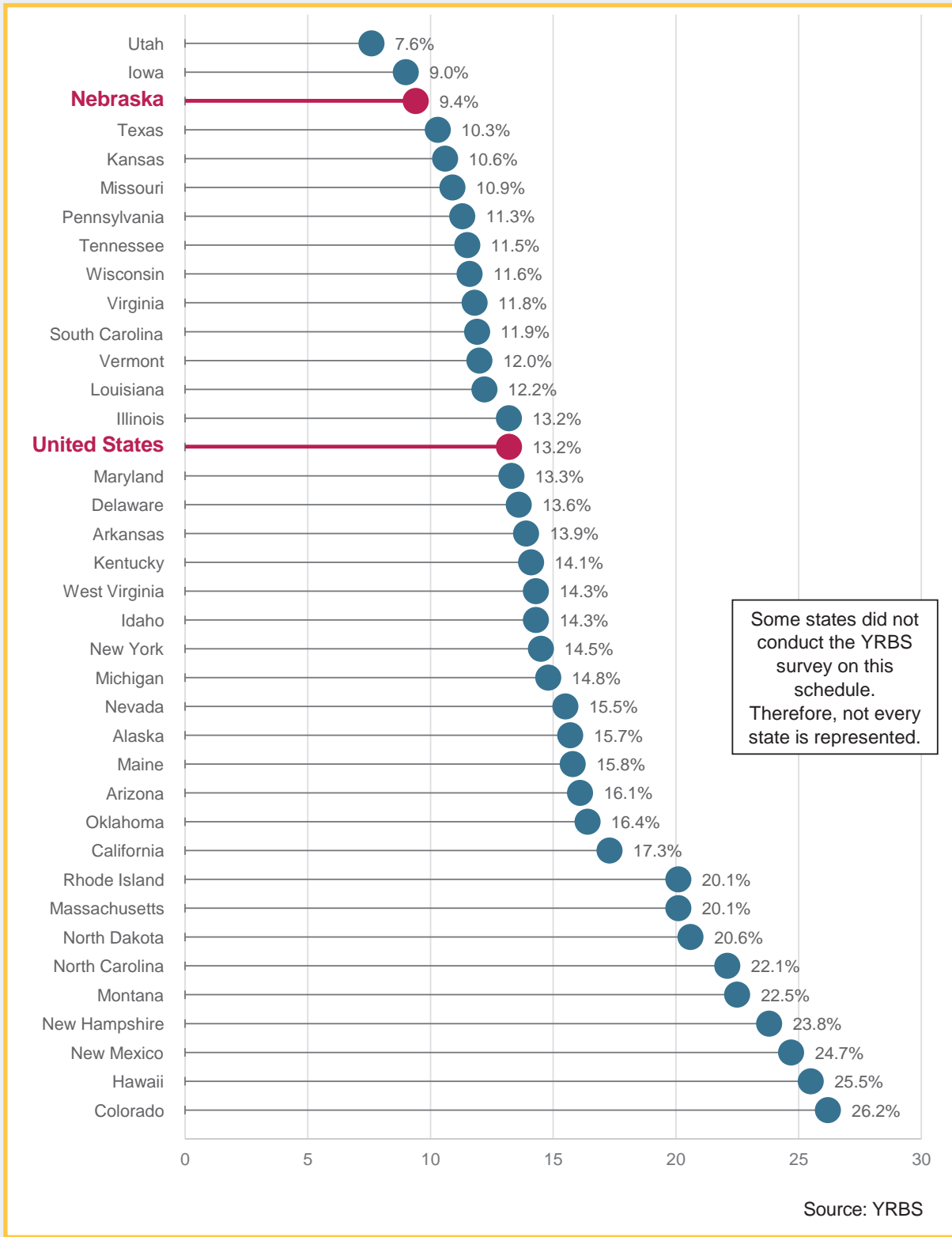
The median rate for ever trying e-cigarettes for United States youth was nearly 45% in 2015. This rate decreased by almost three points (2.7) in 2017 to 42.2%. Fewer youth in Nebraska have tried e-cigarettes in 2015 (38.2%) and 2017 (36.1%).

Current use of e-cigarettes decreased from 24.1% in 2015 (U.S. Median) to 13.2%. The current use rate for Nebraska youth decreased from 22.3% to 9.4%.

Because of recent product launch and marketing efforts among e-cigarette producers (for example, JUUL Labs), many experts believe the rate of youth e-cigarette use will increase in 2018-2019.

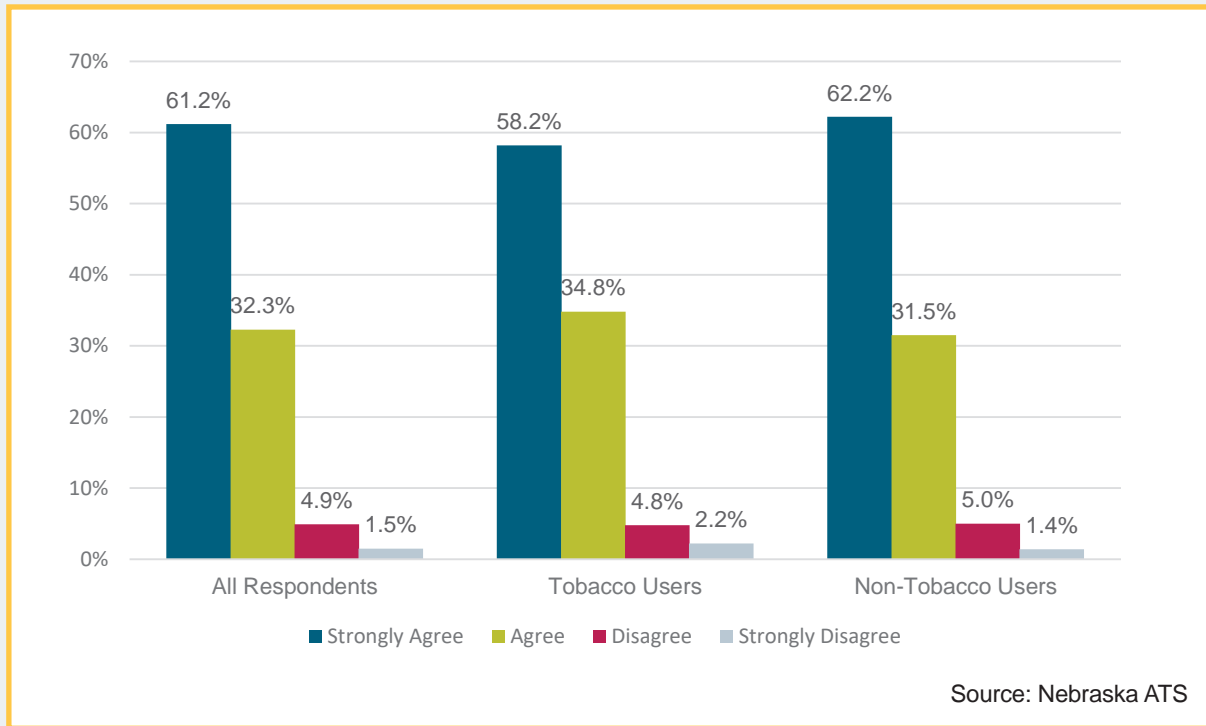
This measure is calculated by using responses to the questions *“Have you ever used an electronic vapor product?”* and *“During the past 30 days, on how many days did you use an electronic vapor product?”*

# 2017: Youth E-Cigarette Use by State





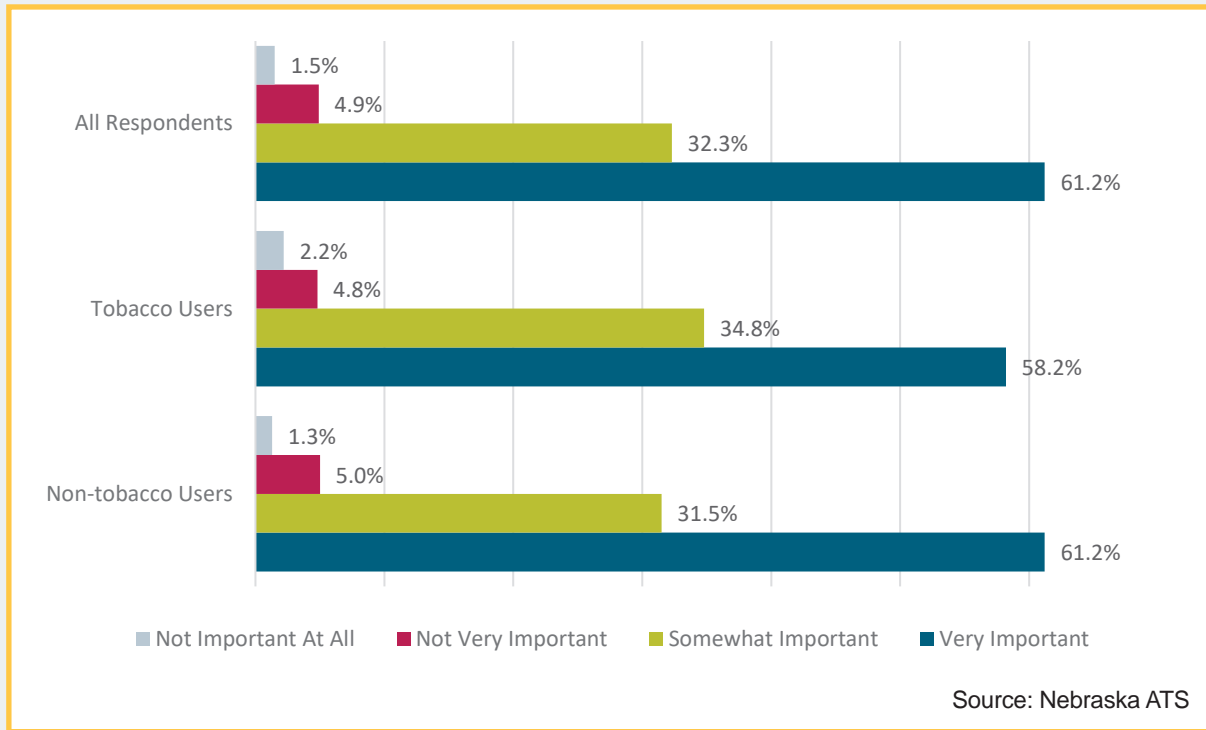
## 2017 Opinion: Should Nebraska Retail Stores be Penalized for Selling Tobacco to Minors



There is strong and consistent support for penalizing retailers that sell tobacco products to minors (under age 18). When analyzing all respondents, 93.5% either agree or strongly agree stores should be penalized for the sale of tobacco products to those under 18. Among those who use tobacco, 93% either agree or strongly agree with penalties (nearly identical). Individuals who do not use tobacco have a slightly stronger preference at 93.7%.

The graph (above) summarizes responses to the question: *“Stores should be penalized for the sale of tobacco products to persons under the age of 18.”*

## 2017: Importance of Preventing Retail Stores from Selling Tobacco to Minors in Nebraska

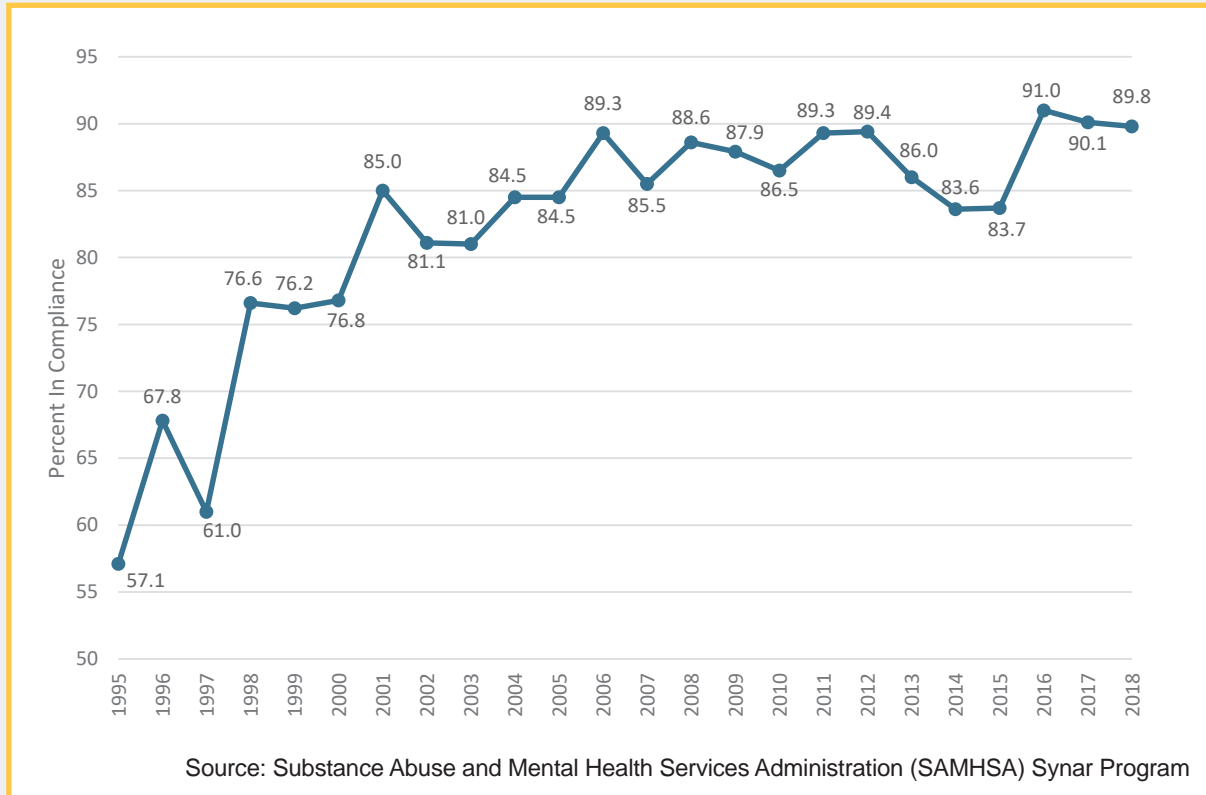


There is almost universal agreement among all respondents when asked *“How important is it that communities keep stores from selling products to teenagers?”*

Calculated by determining the valid percent who answered the question about retail control, *“How important is it that communities keep stores from selling products to teenagers”* and then splitting the results by tobacco use status.



## Retailer Compliance with State Law Restricting the Sale of Tobacco Products to Minors in Nebraska



The Nebraska State Patrol conducts random, unannounced compliance checks of tobacco retailers to determine the state's compliance rate as required by the Federal Substance Abuse and Treatment Block Grant. The results are used for the annual Synar report.

In 1995, only 57% of tobacco retailers checked complied with the law that restricts the sale of tobacco products to minors. Since then, compliance has substantially increased with compliance rates near or slightly exceeding 90% for the last three years.

## Nebraska Tobacco Excise Taxes

Tobacco excise taxes have the dual purpose of revenue generation for state operations and increasing the cost of tobacco products. An increase in retail cost is a best practice for reducing the prevalence of tobacco use and preventing youth from ever starting.

**Federal Excise Taxes:** A federal per-pack excise tax of \$1.01 is in place. Unless otherwise noted, this tax is not included in per-pack costs or retail prices in this report.

In Nebraska, the tobacco excise tax has been collected since the State Legislature passed the first cigarette excise tax law in 1947. Currently, the tobacco excise tax in Nebraska is \$.64 per pack of 20 cigarettes, \$.80 per pack of 25 cigarettes, \$.44 per ounce of snuff and 20% of the wholesale purchase price for other tobacco products.

The current state cigarette tax rate went into effect in 2002 and has no provision for inflation adjustment.

Tobacco Excise Taxes in Nebraska, 2018	
Tobacco Product	Tax
Combustible Cigarettes	\$.64 per pack (20 cigarettes) \$.80 per pack (25 cigarettes)
Electronic Cigarettes (E-cigarettes)	None
Snuff (finely cut, ground, or powdered not intended to be smoked)	\$.44 = per ounce
Other Tobacco Products (cigars, pipe tobacco, loose tobacco, etc.)	20% of wholesale price

Source: The Tax Burden on Tobacco, Orzechowski and Walker, 2017

## Statutory Cigarette Tax History in Nebraska

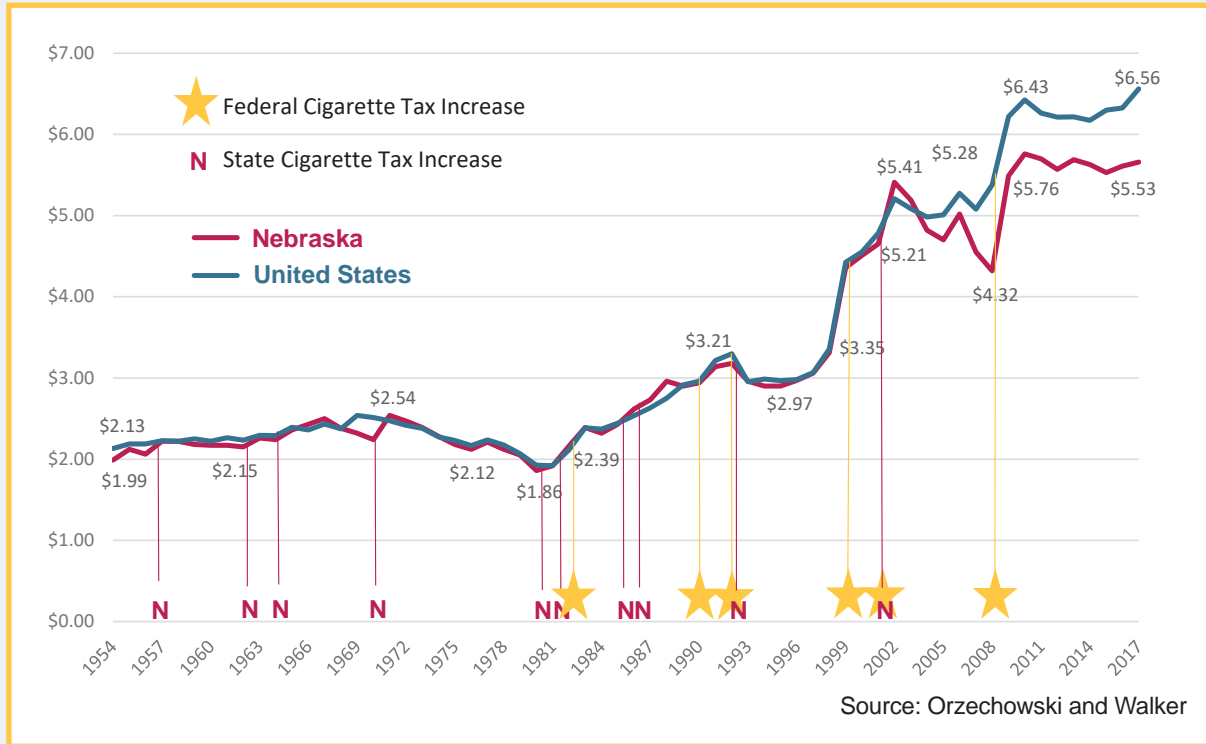
The original tax of \$.03 per pack went into effect in 1947. The following table details the tax changes over time.

Tax Increase	Effective Date	Years Between Increases (rounded to nearest year)	Tax Increase	Effective Date	Years Between Increases (rounded to nearest year)
<i>The original \$.03 tax went into effect on 7/1/1947</i>					
<b>\$.03 to \$.04</b>	9/20/1957	10	<b>\$.14 to \$.18</b>	5/1/1982	1
<b>\$.04 to \$.06</b>	6/1/1963	6	<b>\$.18 to \$.23</b>	3/1/1986	4
<b>\$.06 to \$.08</b>	4/1/1965	2	<b>\$.23 to \$.27</b>	7/1/1987	1
<b>\$.08 to \$.13</b>	4/28/1971	6	<b>\$.27 to \$.34</b>	7/1/1993	6
<b>\$.13 to \$.14</b>	8/30/1981	10	<b>\$.34 to \$.64</b>	10/1/2002	9

Source: The Tax Burden on Tobacco, Orzechowski and Walker, 2017

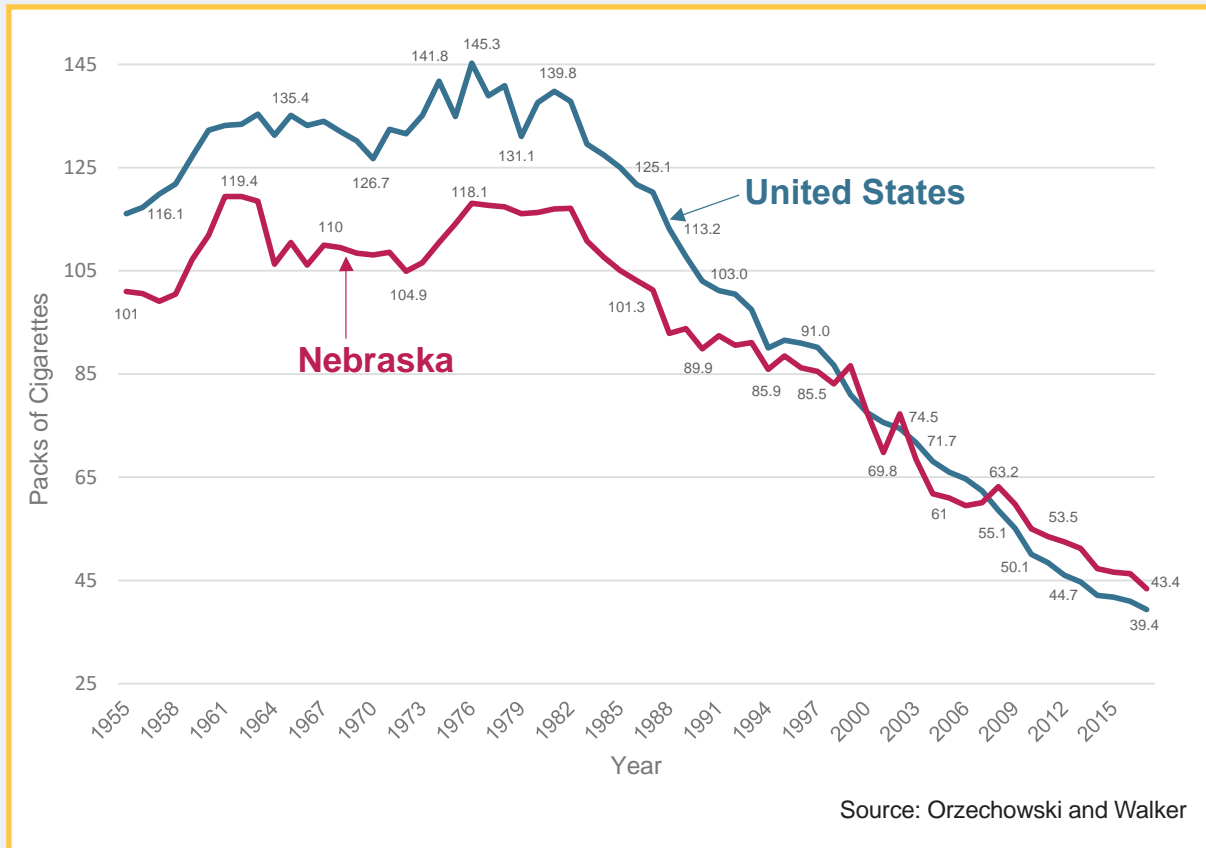
The last Nebraska state cigarette tax increase was in 2002. Hypothetically, if a tax increase took effect 7/1/2019, nearly 16 years will have passed since the last increase, the largest gap in state history.

## Nebraska and U.S. Median Pack Price, 1954 - 2017 Inflation Adjusted, Generics Included, Tax Increases Noted



From the time Nebraska started taxing cigarettes until the most recent tax increase (2002), Nebraska's cigarette retail cost mirrored the U.S. median. Beginning in 2002, the averages diverge as other states implemented new tax strategies. In 2017, the average per-pack cost of cigarettes (including generic brands) in Nebraska is \$5.53. That is \$1.03 less per pack than the U.S. median cost of \$6.56.

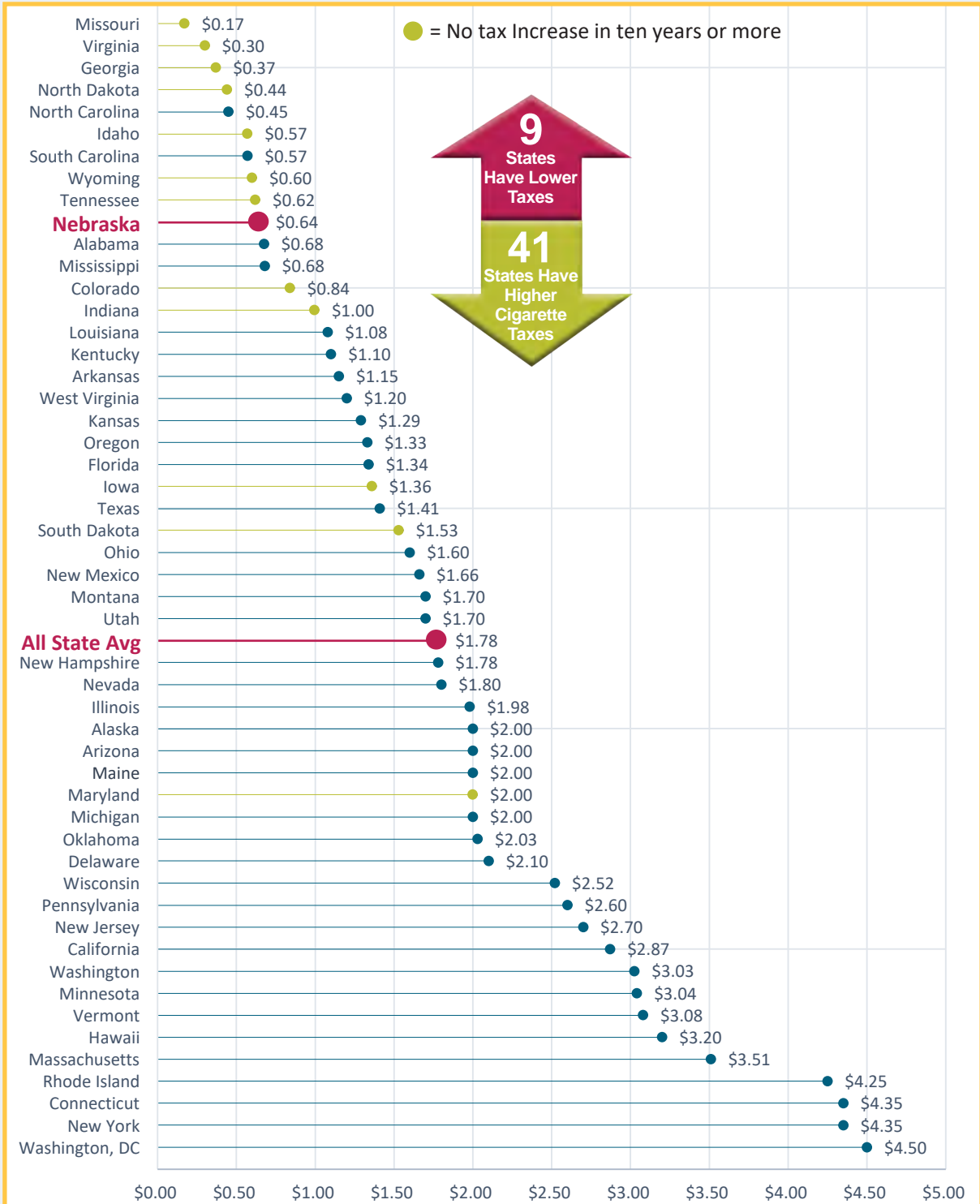
## 1955 - 2017: Per-Capita Cigarette Sales in Nebraska and U.S.



Until approximately 2000, the Nebraska per-capita sales of cigarettes lagged behind national averages. Since that time per-capita sales in Nebraska have outpaced the average for the United States.

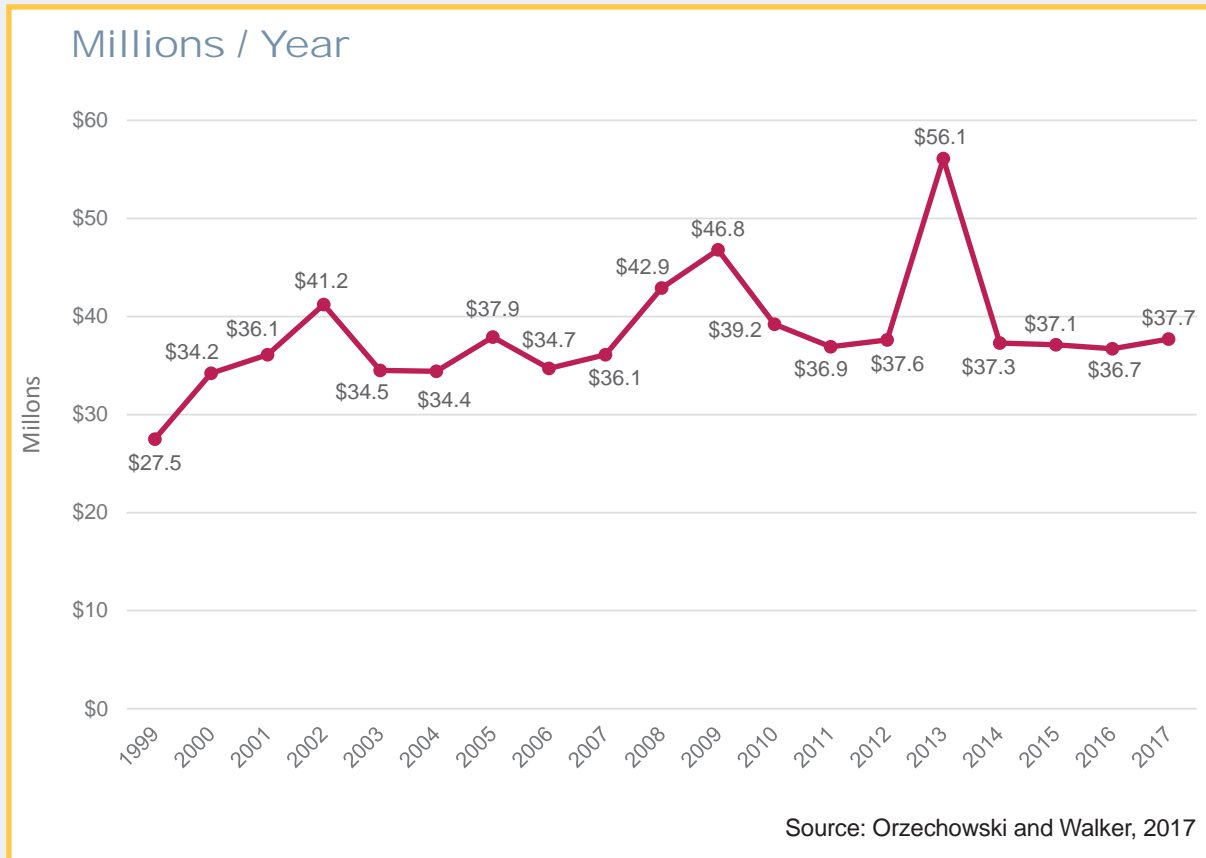
# State Excise Tax Per Pack of Cigarettes

Current: 9/2018



Source: Orzechowski and Walker, 2017

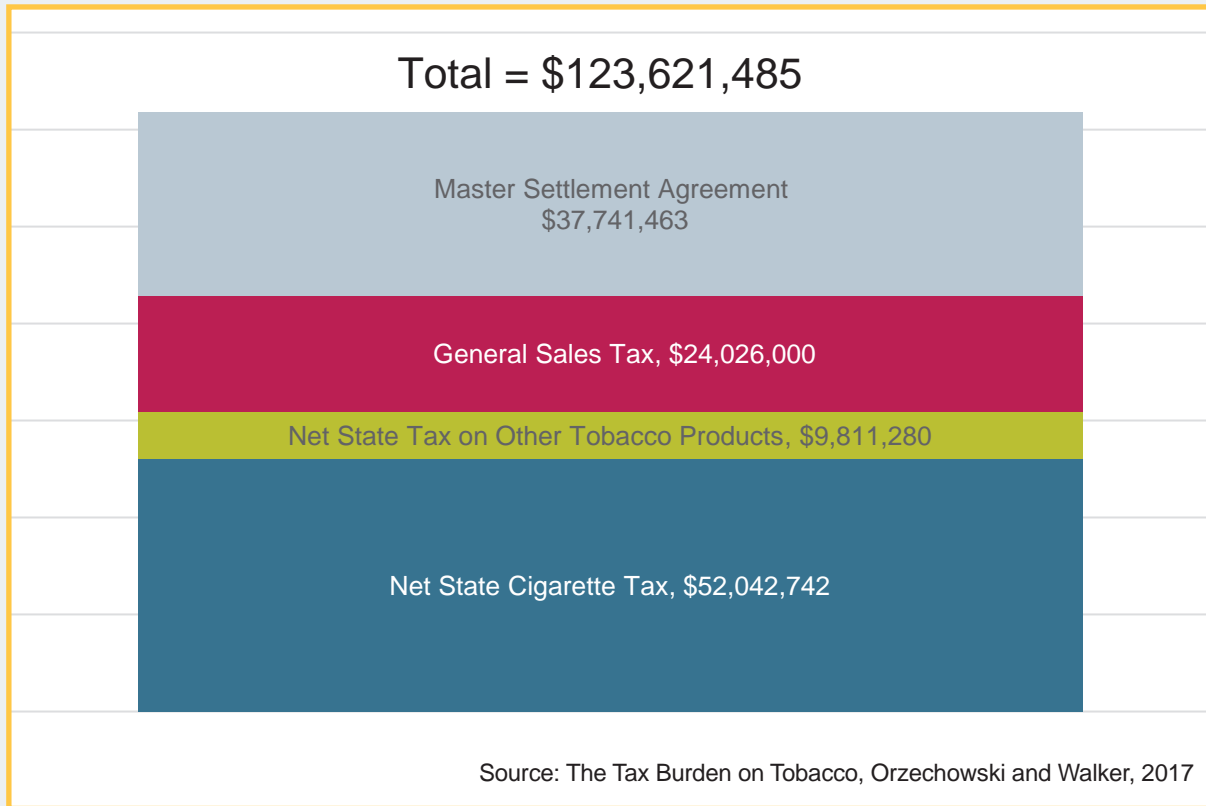
## 1999 - 2017: Master Settlement Agreement Payments to Nebraska



The Tobacco Master Settlement Agreement (MSA) was completed in 1998 between five major tobacco companies and the attorneys general from 46 states. This agreement set forth a number of activities tobacco companies may not conduct (like marketing to children). In addition, tobacco companies pay the participating states an annual payment under the MSA. Annually the tobacco companies make financial payments to the states and Nebraska's portion is displayed above.



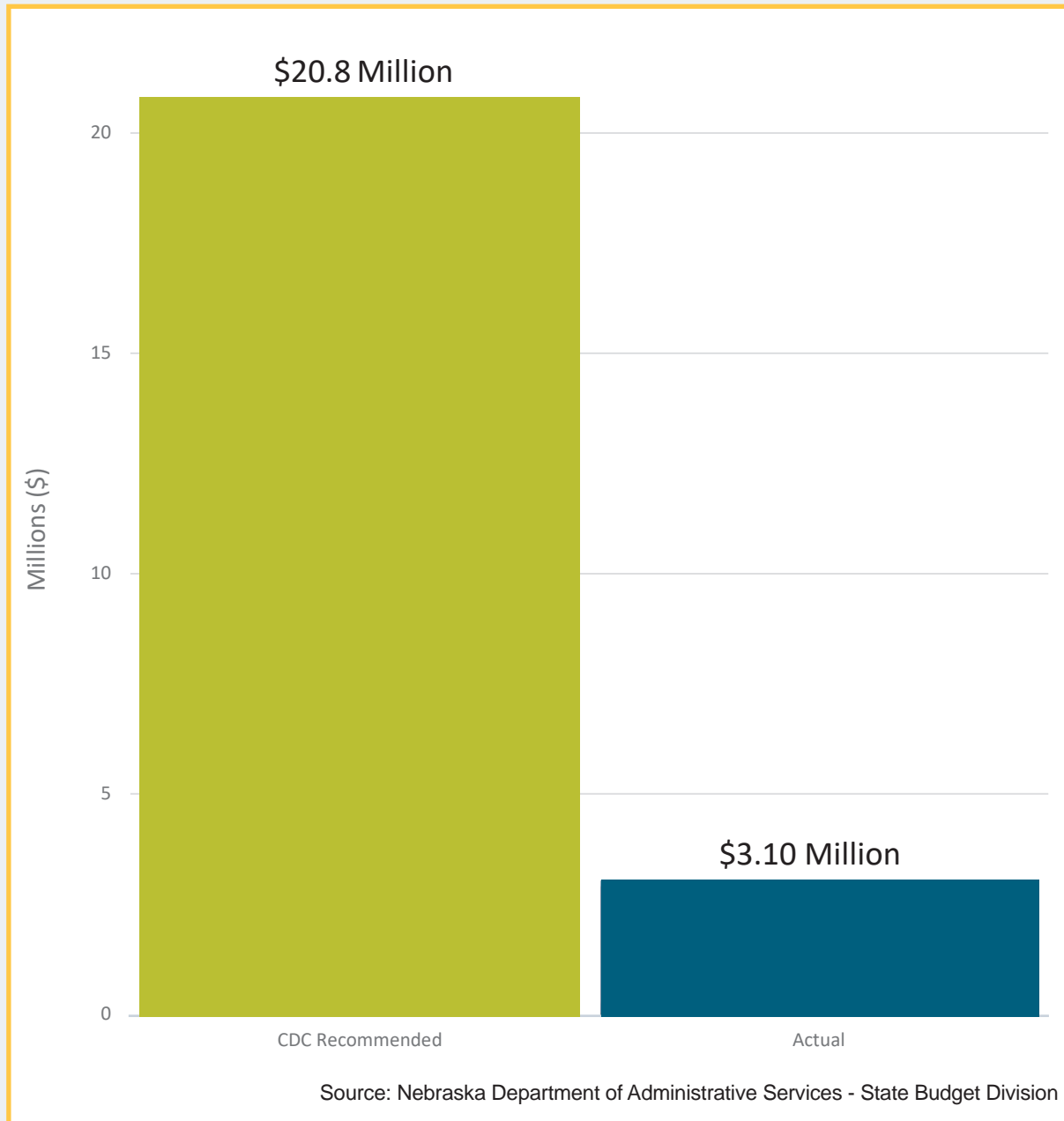
## 2017: Sources of Tobacco-Related Revenue in Nebraska



Revenue from the sale of tobacco products has been an important source of revenue for Nebraska. In 2017, taxes and fees related to tobacco products totaled more than \$123 million.

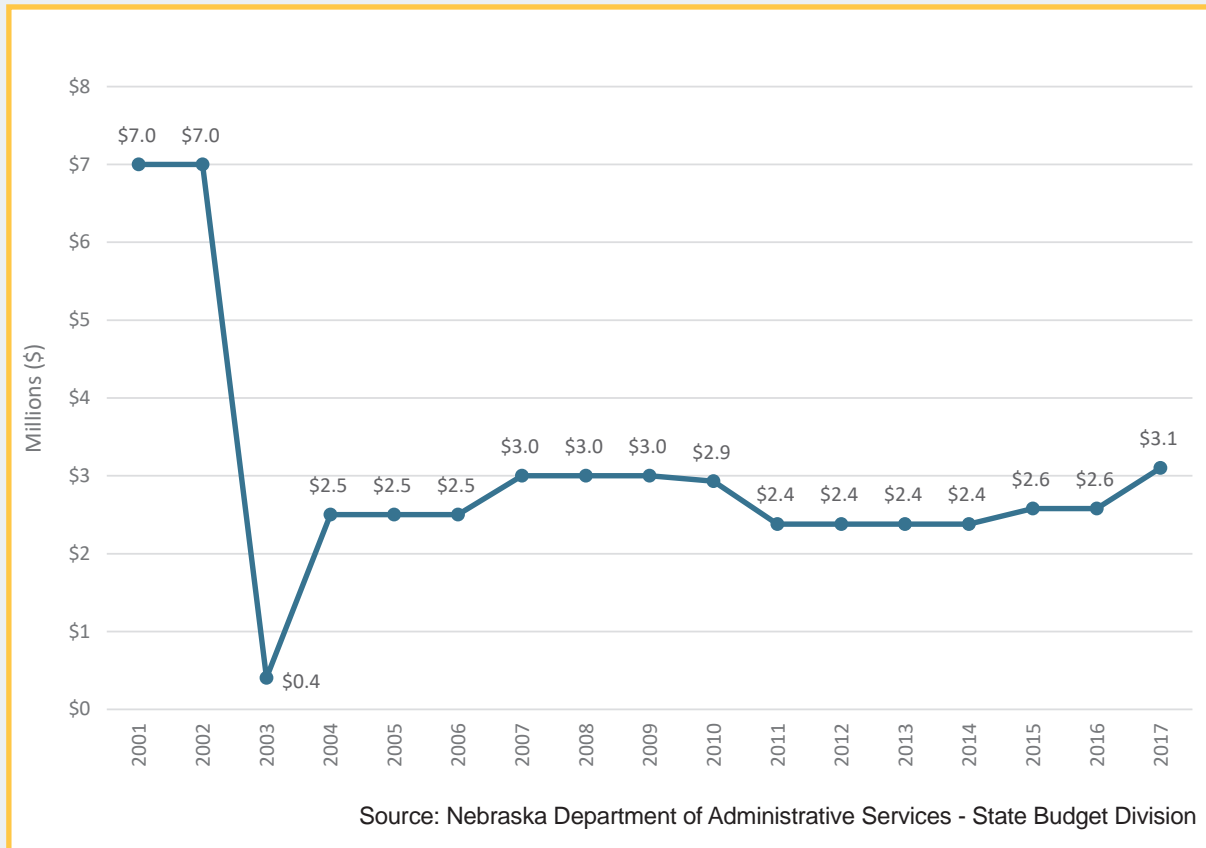


## CDC - Recommended Annual Tobacco Control Funding Compared to Current 2017 Nebraska Funding



<sup>1</sup> 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.

## Funding for the Tobacco Free Nebraska Program



In 2000, the Nebraska Unicameral passed Legislative Bill (LB) 1436, marking a milestone in Nebraska's tobacco prevention and cessation efforts. The bill allocated \$21 million over three years to the Tobacco Free Nebraska program from the multi-state Tobacco Master Settlement Agreement (MSA). This marked the first time the Unicameral allocated state funds for comprehensive tobacco prevention and cessation efforts. In 2004, the Nebraska Legislature passed LB 1089 which allocated \$2.5 million a year of MSA payments to the program.

In 2007 and 2009, state funding was \$3 million per year and in 2010 the allocation was cut by 5.0% to \$2,930,850. In 2011 the funding was again cut by 19% to \$2.37 million. In 2015 funding increased to \$2.58 million. In 2018, \$500,000 was added to the budget. A history of program funding is presented in the chart above.

## 2012 - 2017: Smoking-Related Fires, Deaths, Injuries, and Economic Losses in Nebraska

	Housing Type		Injuries		Fatalities		Property Loss
	1 or 2 Family	Multi-Family	Civilian	Fire Fighter	Civilian	Fire Fighter	Estimate Made by Fire Department
<b>2012</b>	103	44	3	10	2	0	\$3.74M
<b>2013</b>	138	29	2	3	2	0	\$2.55M
<b>2014</b>	148	50	12	5	3	0	\$2.74M
<b>2015</b>	131	25	6	7	5	0	\$2.64M
<b>2016</b>	65	34	1	8	3	0	\$2.63M
<b>2017</b>	72	45	0	3	1	0	\$1.32M
<b>Total</b>	<b>657</b>	<b>227</b>	<b>24</b>	<b>36</b>	<b>16</b>	<b>0</b>	<b>\$15.6M</b>

Combustible tobacco products cause many health-related deaths and are a common cause of accidental fires. These fires result in the loss of life and property as well as increased burden on public safety systems.

Smoke-free policies in homes and multi-unit housing can reduce the risk of smoking-related fires and prevent deaths, injuries, and subsequent damage. Many fires are of unknown origin and some of these fires could be related to smoking materials. Therefore, the information in the table (above) *underestimates* the smoking-related fires.

Source: Nebraska State Fire Marshal's Office/National Fire Incident Reporting System (NFIRS), U.S. Department of Homeland Security

## Number of Tobacco-Related Calls to Nebraska Regional Poison Center

	2011	2012	2013	2014	2015	2016	2017	2018 (through 8/31/18)	Total
<b>Cigarettes</b>	51	45	43	43	49	51	37	25	<b>344</b>
<b>Smokeless Tobacco</b>	6	9	6	17	11	12	15	14	<b>90</b>
<b>Other Tobacco (Including Unknown)</b>	3	4	10	5	1	6	11	4	<b>44</b>
<b>Electronic Cigarette or Nicotine Liquid</b>	4	2	11	36	37	32	23	27	<b>172</b>
<b>Total</b>	<b>64</b>	<b>60</b>	<b>70</b>	<b>101</b>	<b>98</b>	<b>101</b>	<b>86</b>	<b>70</b>	<b>650</b>

Source: Nebraska Regional Poison Center

Nicotine is not only very addictive, but poisonous as well. The amount of nicotine in one cigarette butt is enough to poison a child. Nicotine can be found in many tobacco products including cigarettes, cigars, chewing tobacco, pipe tobacco, nicotine gum, nicotine patches, and liquid nicotine used for electronic cigarettes. When an individual is exposed to nicotine, their symptoms are directly related to the dose of nicotine they received. Mild nicotine poisoning causes nausea, vomiting, dizziness, tremors, sweating and high blood pressure. Severe poisoning can be life-threatening and lead to seizures or even death.

From January 2011 to August 30, 2018, a total of 650 emergency calls related to tobacco/nicotine poisoning were received by the Nebraska Regional Poisoning Center, with a significant increase in the number of nicotine liquid poisoning cases in 2014 and 2015. Most of the tobacco-related emergencies (82%) were involving young children less than age 6.

Source: WebMD, Nicotine Poisoning, [www.webmd.com/smoking-cessation/nicotine-poisoning-can-you-overdose#1](http://www.webmd.com/smoking-cessation/nicotine-poisoning-can-you-overdose#1)

## Summary of Data Sources Included in This Report

**Behavioral Risk Factor Surveillance System (BRFSS):** The BRFSS is a telephone survey that uses CDC-developed questions to monitor health behaviors across the nation. The core BRFSS survey is conducted in every state. Each state can choose to conduct additional, supplemental BRFSS questionnaires that measure specific health behaviors. In 2011, the BRFSS implemented cell phone sampling and a new weighting methodology.

**Nebraska Adult Tobacco Survey (ATS):** The Nebraska Adult Tobacco Survey is a population based ongoing telephone survey. The Nebraska ATS is a CDC and state-developed random-digit-dialing (RDD) telephone survey. The survey provides tobacco-related information on Nebraska's adult population not captured through the BRFSS. In 2015, the ATS implemented cell phone sampling and a new weighting methodology.

**Nebraska Annual Synar Report:** The Nebraska State Patrol conducts random, unannounced compliance checks of businesses to monitor sales of tobacco products to minors. The State Patrol recruits underage persons to attempt to purchase tobacco products in stores throughout the state. Results of the purchase attempts are used to calculate Nebraska's compliance rate for the Substance Abuse Prevention and Treatment Block Grant.

**Pregnancy Risk Assessment Monitoring System (PRAMS):** The Pregnancy Risk Assessment Monitoring System is a joint project between the Nebraska Department of Health & Human Services, Office of Family Health and the CDC. PRAMS is an ongoing study that provides data from a representative sample of Nebraska women before, during and shortly after pregnancy.

**The Tax Burden on Tobacco — Historical Compilation:** The Tax Burden on Tobacco was first produced in 1949 and today is produced by economic consulting firm Orzechowski and Walker. This report provides both the historical and current state of taxes on tobacco product.

**Youth Risk Behavior Survey (YRBS):** The YRBS is used to monitor health behaviors that contribute to the leading causes of death, disability and social problems among youth in the United States. The YRBS includes national, state and local school-based surveys of representative samples of 9-12th grade students. A degree of caution must be used when interpreting Nebraska YRBS data for years when the data was not weighted. Due to low student response rate to the YRBS in these years, the results are representative of only those students who completed the questionnaires and not of all students statewide.

**Youth Tobacco Survey (YTS):** The YTS is a statewide school-based survey that provides information on Nebraska youth behaviors and attitudes toward tobacco. The survey is part of the CDC's national youth tobacco surveillance system to help states improve the capacity to design, implement and evaluate their own tobacco prevention and control programs. The survey gathers tobacco-related information not captured through the YRBS.

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