



March 25, 2024

The Honorable Robert Aderholt
 Chairman
 Subcommittee on Labor, Health and Human
 Services, Education, and Related Agencies
 Committee on Appropriations
 United States House of Representatives
 Washington, DC 20515

The Honorable Rosa DeLauro
 Ranking Member
 Subcommittee on Labor, Health and Human
 Services, Education, and Related Agencies
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 United States House of Representatives
 Washington, DC 20515

Dear Chairman Aderholt and Ranking Member DeLauro:

As your Subcommittee moves forward with the FY 2025 Labor, Health and Human Services, Education and Related Agencies Appropriations bill, we urge you to fund the Centers for Disease Control and Prevention’s (CDC) Office on Smoking and Health (OSH) at \$310 million. While we recognize that your subcommittee’s funding allocation will be tight for FY 2025, increased funding for OSH is needed to make substantial progress in reducing youth tobacco use, including e-cigarettes, and the devastating toll that tobacco¹ continues to take on our nation’s health. This investment will save lives and money.

Tobacco use has long been the leading preventable cause of death in the United States. Tobacco is responsible for more than 480,000 deaths and approximately \$241 billion in health care costs in the United States each year. Nearly one in three heart disease deaths and cancer deaths and nearly eight in 10 chronic obstructive pulmonary disease (COPD) deaths are caused by tobacco use. Tobacco use almost always begins during adolescence, and most adults who smoke want to quit, but overcoming an addiction to nicotine is difficult and often requires multiple quit attempts.

Youth use of e-cigarettes is a serious public health concern. CDC and the Food and Drug Administration’s (FDA) most recent National Youth Tobacco Survey showed that more than 2.1 million middle and high school students, including 10 percent of high schoolers, reported using e-cigarettes last year. Alarming, nearly 40 percent of high school e-cigarette users reported use on 20 days or more a month, including nearly 30 percent who reported daily use, a sign that youth are becoming addicted. According to the

¹ References to tobacco in this letter refer to commercial tobacco and not ceremonial tobacco which is used by some American Indian communities.

CDC, e-cigarettes expose users to nicotine and other potentially harmful substances and are not safe. A more robust public health response is needed to prevent e-cigarettes and other new tobacco products from placing a new generation at risk for nicotine addiction and tobacco use.

While smoking rates overall have declined, approximately 28 million people in the U.S. continue to smoke cigarettes. Smoking is higher among certain groups and in particular regions of the country, including people with lower incomes and lower levels of education, Native Americans, people living in rural communities, people with behavioral health conditions, and the LGBTQ community. Black individuals in the U.S. die from smoking-caused diseases at far higher rates than other individuals despite starting to smoke at a later age, smoking fewer cigarettes per day, and being more likely to make a quit attempt. Communities with higher rates of tobacco use are the targets of tobacco industry marketing and have fewer resources for tobacco cessation. Targeted action is needed to reduce tobacco use where it remains high.

OSH has a vital role to play in addressing tobacco use. OSH provides grants to states and territories to support tobacco prevention and cessation programs, runs a highly successful national media campaign called Tips from Former Smokers (Tips), conducts research on tobacco use, and develops best practices for reducing it. Additional resources will allow OSH to address the threat to public health posed by high rates of youth e-cigarette use while continuing to prevent and reduce other forms of tobacco use. With additional resources:

- CDC could strengthen efforts to assist groups who are disproportionately harmed by tobacco products, including by designing and implementing prevention and cessation programs that are tailored to address their specific needs.
- CDC could enhance efforts to end youth and young adult tobacco use, including e-cigarette use, by providing more resources to state and local health departments; educating youth, parents, health professionals, and others about tobacco products and the harms associated with their use; and identifying evidence-based strategies to protect youth and young adults from initiating tobacco use.
- CDC could expand a program that we know works to reduce tobacco use: the Tips media campaign. From 2012 through 2018, the Tips campaign helped approximately one million people who smoke quit, prevented an estimated 129,100 smoking-related deaths, and saved an estimated \$7.3 billion in health care costs.

Additional investments in tobacco prevention and cessation will save lives, reduce tobacco-related health disparities, and reduce the cost of treating tobacco-caused disease. We urge you to increase funding for CDC's OSH to \$310 million, which will enable CDC to address the challenges posed by e-cigarettes, continue to make progress reducing the death and disease caused by other tobacco products, and strengthen efforts to assist people disproportionately harmed by tobacco products.

Sincerely,

Academy of General Dentistry
Action on Smoking and Health
African American Tobacco Control Leadership Council
Allergy & Asthma Network
Alpha-1 Foundation
American Academy of Family Physicians
American Academy of Nursing
American Academy of Otolaryngology–Head and Neck Surgery
American Academy of Pediatrics
American Association for Cancer Research
American Association for Dental, Oral, and Craniofacial Research
American Cancer Society Cancer Action Network
American College of Cardiology
American College of Chest Physicians (CHEST)
American College of Obstetricians and Gynecologists
American College of Preventive Medicine
American Dental Education Association
American Heart Association
American Lung Association
American Medical Association
American Medical Women's Association
American Public Health Association
American Thoracic Society
Americans for Nonsmokers' Rights
Asian Pacific Partners for Empowerment, Advocacy and Leadership (APPEAL)
Association for Clinical Oncology (ASCO)
Association for the Treatment of Tobacco Use and Dependence
Association of American Indian Physicians
Association of Black Cardiologists
Association of Maternal & Child Health Programs
Association of State and Territorial Health Officials
Asthma and Allergy Foundation of America
Big Cities Health Coalition
BlackDoctor.org
Breathe Southern California

Campaign for Tobacco-Free Kids
CATCH Global Foundation
CenterLink: The Community of LGBTQ Centers
Community Wellness Alliance
COPD Foundation
Emphysema Foundation of America
First Focus Campaign for Children
GLMA: Health Professionals Advancing LGBTQ+ Equality
IntelliQuit
Leadership Council for Healthy Communities
NAACP
National Association of County and City Health Officials
National Association of Pediatric Nurse Practitioners
National Association of School Nurses
National Association of Social Workers
National Black Nurses Association
National Council of Negro Women (NCNW)
National Hispanic Medical Association
National LGBT Cancer Network
National Medical Association
National Network of Public Health Institutes
North American Quitline Consortium
Parents Against Vaping E-cigarettes
Prevent Cancer Foundation
Preventing Tobacco Addiction Foundation/Tobacco 21
Preventive Cardiovascular Nurses Association
Respiratory Health Association
Save A Girl Save A World
Society for Cardiovascular Angiography & Interventions
Society for Public Health Education
The African American Wellness Project
The Center for Black Health & Equity
The National Alliance to Advance Adolescent Health
The Society of Thoracic Surgeons
Trust for America's Health