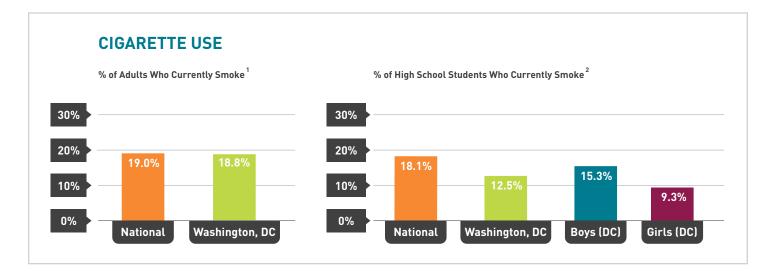


WASHINGTON DC + TOBACCO



OTHER TOBACCO PRODUCT USE

- The prevalence of smokeless tobacco use among adults in the District of Columbia was 1.5% in 2013. 4.6% of adult current cigarette smokers in D.C. were also current smokeless tobacco users in 2013.³
- In 2013, 4.3% of high school students in the District of Columbia used chewing tobacco, snuff, or dip on at least one day in the past 30 days. Nationally, 8.8% of high school students used smokeless tobacco on at least one day in the past 30 days.⁴
- In 2013, 16.5% of high school students in the District of Columbia smoked cigars, cigarillos, or little cigars on at least one day in the past 30 days. Nationally, 12.6% of high school students smoked cigars, cigarillos, or little cigars on at least one day in the past 30 days.⁴

ECONOMICS OF TOBACCO USE AND TOBACCO CONTROL

- In FY2015, the District of Columbia allocated \$2 million in state funds to tobacco prevention, which is 18.7% of the Centers for Disease Control and Prevention's (CDC) Annual Spending Target.⁵
- The health care costs in the District of Columbia, directly caused by smoking, amount to \$391 million annually.

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- City and federal Medicaid costs for the District of Columbia total \$94.4 million annually for smoking-caused health care.⁶
- The District of Columbia loses \$280.4 million in productivity each year due to smoking.
- The District of Columbia received an estimated \$70 million in tobacco settlement payments and taxes in FY2015.⁵

STATE TOBACCO LAWS^{7,8}

EXCISE TAX

 The city tax increased to \$2.50 per pack of cigarettes in October 2009. Little cigars are taxed at \$0.125 per cigar. All other tobacco products (except cigars, premium cigars, and pipe tobacco) are taxed at 12% of the gross receipts from the sale of or charges for the tobacco product plus \$0.75 per ounce.

CLEAN INDOOR AIR ORDINANCES

- Smoking is prohibited in all childcare facilities, government workplaces, private workplaces, schools, restaurants, retail stores, health care facilities, and recreational facilities.
- Smoking is prohibited in bars. Tobacco bars, which are defined as places that generate 10% or more of their total annual revenue from the on-site sale of tobacco products, are exempted, and allow for an economic hardship waiver.

YOUTH ACCESS LAWS

- The minimum age requirement for the purchase of tobacco products is 18, and penalties exist for both minors and merchants who violate this law.
- Establishments are required to post signs stating that sales to minors are prohibited as well as the Surgeon General's warning to pregnant smokers.

CESSATION STATISTICS AND BENEFITS

- The CDC estimates that 61.8% of adult smokers in the District of Columbia tried to quit smoking in 2013.
- The District of Columbia's quitline invests \$5.18 per smoker; the national average investment per smoker is \$3.65.89
- The District of Columbia does not have a private insurance mandate provision for cessation.

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REFERENCES

- ¹ CDC, Behavioral Risk Factor Surveillance System, 2013
- 2 CDC, Youth Risk Behavior Surveillance System, 2011
- ³ CDC, State-Specific Prevalence of Cigarette Smoking and Smokeless Tobacco Use Among Adults—MMWR, United States, 2011-2013
- ⁴ Campaign for Tobacco-Free Kids, Broken Promises to Our Children: a State-by-State Look at the 1998 State Tobacco Settlement 16 Years Later FY2015, 2014
- ⁵ Campaign for Tobacco-Free Kids, State Tobacco-Related Costs and Revenues, 2014
- ⁶ American Lung Association, SLATI State Reports, 2015
- ⁷ American Lung Association, State of Tobacco Control, 2015
- ⁸ CDC, Behavioral Risk Factor Surveillance System, State Tobacco Activities Tracking and Evaluation System, 2013

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