Editorial on tobacco taxes

Measure 11.2.4 A

Submitter: City of Portland, Public Health Division (ME) (PHAB Beta Test Site)

Demographic Information:

- Population served: 276,000, urban, rural, suburban
- FTEs: number: 89
- State structure: mixed

Required documentation:

1. Grant applications and/or examples of leveraging funds to increase resources
2. Appropriate communications with others concerning the need for improvement in public health

Submitter justification:
This is a well-written editorial that argues how tobacco taxes are a proven strategy to reduce smoking rates and health care costs.

Note: none of the beta test sites received accreditation status or an indication of the likelihood of accreditation status through the testing process, and therefore this documentation does not reflect items that have officially been approved by PHAB for the purposes of meeting a standard or measure.
Columnist was 'flat wrong' on tobacco tax claims

Leigh Donaldson's columns from Sept. 14, arguing that tobacco taxes are not a matter of public health, makes several assertions that are patently untrue and which deserve a reply from those of us who work in public health.

Perhaps the most objectionable of Donaldson's assertions is that "People choose to stop smoking because they want to, sometimes because their health is at risk, not because the cost of their habit increases."

He claims that policies like smoking bans and high taxes aren't effective in changing behavior.

He is flat wrong. Studies show that raising the cost of unhealthy products like tobacco does make people stop smoking. Most smokers are fully aware that their health is at risk from smoking, but don't make the choice to stop until the habit is made too expensive and inconvenient to continue.

The national decline in smoking rates between 1980 and 2002, which took the number of smokers from one in three people (33 percent) to about one in five (20 percent), is largely attributable to the increase in the cost of the habit and to policies that made it less convenient for people to smoke.

Research from the Campaign for Tobacco-Free Kids demonstrates that if Maine were to increase its cigarette tax by $1, 5,400 adults would quit. Here in Maine we already have evidence that an increase in the cost of cigarettes spurs smokers to kick the habit.

When the cost of cigarettes increased last April, the Maine Tobacco Helpline (a smoking cessation telephone service) saw a 50 percent increase in calls from people seeking to quit, compared to the previous year.

The price went up and people decided to abandon the habit. This is good news, from both the perspectives of public health and public fiscal policy.

We all have a stake in helping people quit tobacco, because the costs of treating people afflicted with tobacco-caused diseases are costs that we all bear.

As Donaldson notes, smoking rates are higher among people who have the lowest incomes. Many of the people who develop respiratory or cardiovascular illnesses as a result of smoking either do not have health insurance or rely on MaineCare.

In either case, the expense of their care is thus carried by all of us. Reducing smoking rates by raising taxes is therefore not only good public health policy, it is also prudent financial policy.

Donaldson also claims that obesity has overtaken tobacco use as the No. 1 cause of preventable health conditions.

That claim is technically incorrect right now, although it may be true in a year or two. We actually think that Mr. Donaldson is more right than he intends to be when he says that when it comes to taxes, perhaps "it's time to look at alcohol, fast food, etc., in the same manner" as tobacco.

So agree. Raising the prices of the unhealthy foods that contribute to the obesity epidemic or other chronic conditions will likely have the same effects that raising the prices of tobacco products had on the eating behaviors that make people sick and cost society billions in health care costs will decline.

Finally, Mr. Donaldson's claim that "The good (raising tobacco taxes) does the health of the smoker and society as a whole is minimal" is also incorrect.

Raising the cost of the habit does improve the health of the smoker by incentivizing him or her to quit. Another benefit that Donaldson doesn't mention is that tobacco taxes keep kids - "new smokers" - from starting.

The $1 increase that motivates 5,400 Maine adults to quit smoking keeps another 8,600 kids from ever starting.

And as we mention above, raising taxes on tobacco does benefit society. Doing so saves us all billions of dollars by improving the health of millions of people who might otherwise get sick.
And keeping people from getting sick is precisely what public health is all about.

— Special to the Press Herald

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