



January 30, 2014

Best Practices for Comprehensive Tobacco Control Programs–2014 Message from the Director

It is my honor and privilege to present the 2014 update to the Centers for Disease Control and Prevention’s Best Practices for Comprehensive Tobacco Control Programs.

Since its initial release in 1999, CDC’s Best Practices has provided a blueprint for comprehensive tobacco program planning. The series has been effective for program and strategic planning, for education and training, and for guiding work with policymakers. We expect that this update, Best Practices–2014, will continue this strong tradition.

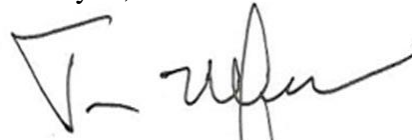
Statewide comprehensive tobacco control programs that are sustained over time have been shown to work: they reduce smoking rates, tobacco-related diseases and deaths, protect people from secondhand smoke exposure, encourage smokers to quit, and prevent youth from starting to smoke in the first place. Best Practices–2014 is a guide based on the best available knowledge and science that can help states plan and establish comprehensive tobacco control programs that achieve these goals.

This update to Best Practices is needed to better reflect our current understanding of the science of tobacco control. In many areas, we know how to do things better, more efficiently, and with greater reach. Best Practices–2014 reflects this knowledge. Furthermore, CDC believes that Best Practices–2014 will provide important information and clarity for state comprehensive tobacco control programs at a time when federal, state, and local roles are especially dynamic.

Fifty years after the 1964 Surgeon General’s report first confirmed the link between smoking and lung cancer, we have come a long way in reducing the death and disease from tobacco use. Adult smoking prevalence has dropped from over 40 percent to under 20 percent—and in some states, less than 15 percent. Twenty six states and the District of Columbia have comprehensive, statewide smoke-free air laws that protect everyone from being exposed to deadly secondhand smoke. Nationwide changes, such as the Affordable Care Act and the Family Smoking Prevention and Tobacco Control Act, promise systemic reforms that will make cessation services more accessible and prevent youth and young adults from starting to use tobacco.

However, wide geographic, occupational, and demographic disparities in smoking remain and only about half of U.S. residents live under state or local laws that make worksites, restaurants, and bars completely smokefree. We still have a long way to go before tobacco use is no longer the leading cause of preventable death in this country. Best Practices–2014’s guidance provides the map we need to get us there.

Thank you,

A handwritten signature in black ink, appearing to read 'Tim McAfee', written over a light gray rectangular background.

Tim McAfee, MD, MPH
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Centers for Disease Control and Prevention
Atlanta, Georgia