

Tobacco prevention and control in Utah



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Annual report 2024



Utah Department of
Health & Human Services
Population Health

Utah Department of Health and Human Services
Tobacco Prevention and Control Program

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Executive summary

The investment made in Utah in tobacco prevention and control is paying off. Cigarette smoking is at its lowest recorded level and fewer Utah children are getting addicted to nicotine from vape products.^{1,2}

Despite this progress, tobacco use still poses a significant health and economic burden for Utah. While cigarettes and other combustible tobacco products are the major cause of tobacco-related disease and premature death, other tobacco and nicotine products are not without harm.³ In recent years, the tobacco industry has expanded its efforts to create and market new nicotine products such as vape devices and nicotine pouches with child-friendly flavors. Many of these products are designed to increase the likelihood of tobacco initiation, addiction, and sustained use.⁴

In addition, progress in reducing tobacco addiction has not been equal across all population groups. Poverty and unequal economic and social conditions create barriers to living a life free from tobacco-related death and disease. As a result, disparities in tobacco use persist by income, education, occupation, geography, race/ethnicity, sexual orientation, gender identity, and behavioral health status.⁵ Targeted tobacco industry marketing has further increased the risk for tobacco use in select population groups.⁵

The Utah Department of Health and Human Services (DHHS) Tobacco Prevention and Control Program (TPCP) and its many partners across the state use evidence-based tobacco prevention and cessation programs to make sure that all Utahns can be free of commercial tobacco use and nicotine addiction.

Key findings

In the past 10 years

- Utah adult cigarette smoking declined by **35%**.¹
- Cigarette smoking among Utah students declined by **77%**.²
- Exposure to secondhand smoke among Utahns declined by **49%**.¹

In the past 5 years

- Use of vape products among Utah students declined by **40%**.²
- Despite this decline, an estimated **20,000** Utah students used vape products in the past 30 days in 2023.² Nearly all Utah students (98%) who tried vaping used flavored products.²

Disparities in tobacco use persist by income, education, occupation, geography, race/ethnicity, sexual orientation, gender identity, and behavioral health status.¹

TPCP overview

Vision

For Utah to be free of commercial tobacco* use and nicotine addiction.

Mission

Use evidence-based and promising practices to promote health equity and reduce tobacco related illness, death, and disparities among all Utahns.

Goals

Prevent youth nicotine dependence, reduce commercial tobacco product use, and work with priority populations to reduce tobacco-related health disparities.



TPCP programs

Public education campaigns

TPCP media campaigns (*Way to Quit*; *See Through the Vape*) inform Utahns about the harms of tobacco, vape, and other nicotine products. The campaigns use TV, radio, digital, social, and print media to link anyone who would like to quit tobacco products to free **Tobacco and Nicotine Quit Services (1-800-QUIT-NOW)** in Utah.

Preventing youth nicotine addiction

TPCP works closely with local health departments, retailers, schools, and policymakers to pass, enforce, and educate about evidence-based policies that limit youth access to nicotine products. Evidence-based policies include flavor and age restrictions, youth access compliance checks, regulation of nicotine products and retail locations, and referrals to quit programs customized for youth.

Quit support

TPCP's **Utah Tobacco and Nicotine Quit Services (1-800-QUIT-NOW)** program offers free and confidential quit services for all ages and all nicotine products. Services are available via phone, online, text, and email, and include free counseling, nicotine replacement therapy, and other quit medications and materials.

Eliminating exposure to secondhand smoke and vape aerosol

In partnership with local health departments, TPCP assists communities with passing local tobacco-free policies that protect the right of all Utahns to breathe clean air at workplaces, schools, multi-housing units, and public buildings and venues.

Ending disparities in tobacco use

The tobacco industry disproportionately targets low-income neighborhoods, communities of color, LGBTQ+ people, and rural areas with tobacco and nicotine product advertising, discounts, and flavor promotions. TPCP partners with community organizations to improve tobacco-free policies and access to quit services for all Utahns and reduce disparities in tobacco-related disease and death.

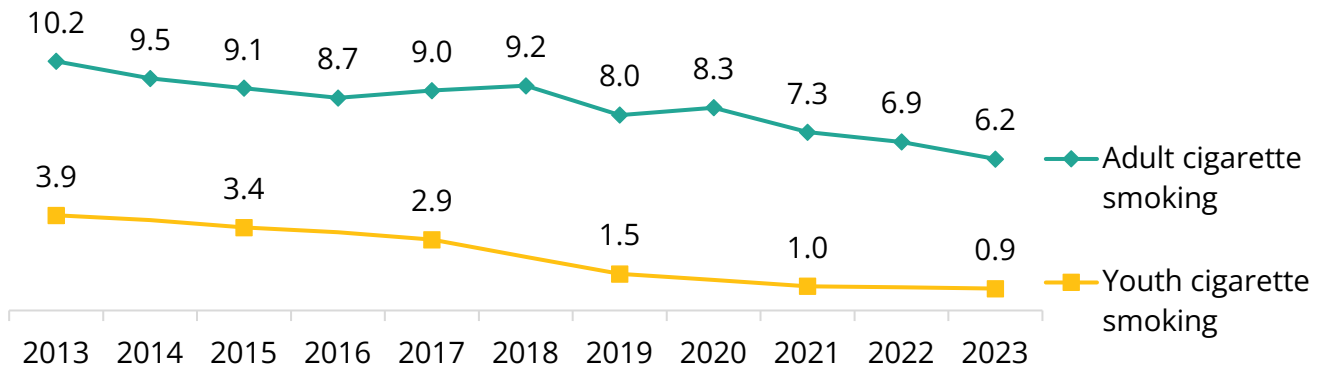
*Commercial tobacco is manufactured and sold by tobacco companies for recreational and habitual use in cigarettes, smokeless tobacco, pipe tobacco, cigars, hookahs, and other products. It does not include "traditional tobacco" used by Indigenous groups for religious or ceremonial purposes.

Cigarette smoking in Utah

Utah adult and youth cigarette smoking continue to decline.^{1,2}

- In 2023, cigarette smoking in Utah reached historic lows of 6.2% for adults and 0.9% for youth.^{1,2}
- Cigarette sales per person are three times lower in Utah compared to nationwide.⁶
- Ninety-two percent of Utah students believe that cigarette smoking puts people at risk for physical or other harm² and most Utah adults who use tobacco or nicotine products know about TPCP’s quit services (78.8%) and the [waytoquit](#) website (65.9%).¹
- TPCP will continue its efforts to protect all Utahns from nicotine use and addiction through community partnerships; public education; free quit services; and promotion of tobacco-free policies at worksites, in homes, schools, retail stores, and public places.

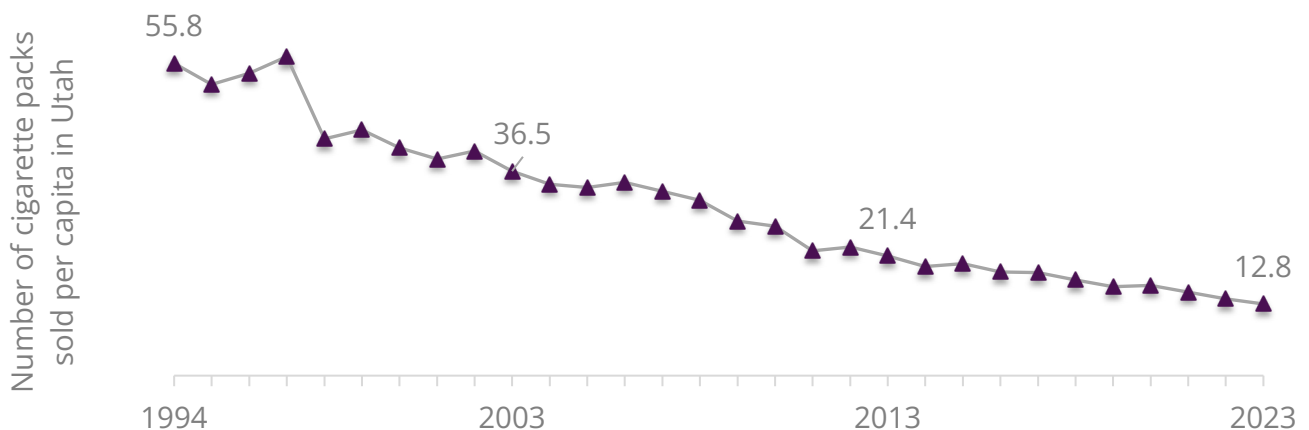
▲ Figure 1: Percentage of Utah adults who currently smoke cigarettes (age-adjusted) and students (grades 8, 10, and 12) who smoked cigarettes in the past 30 days, 2013-2023^{1,2}



Note: BRFSS rates (adults) in this graph are age-adjusted to the U.S. 2000 population. SHARP PNA data (youth) are collected in odd years only.

77% decline in per capita cigarette sales in Utah in the past 30 years⁶

▲ Figure 2: Number of cigarette packs sold annually per capita in Utah, 1994-2023⁶



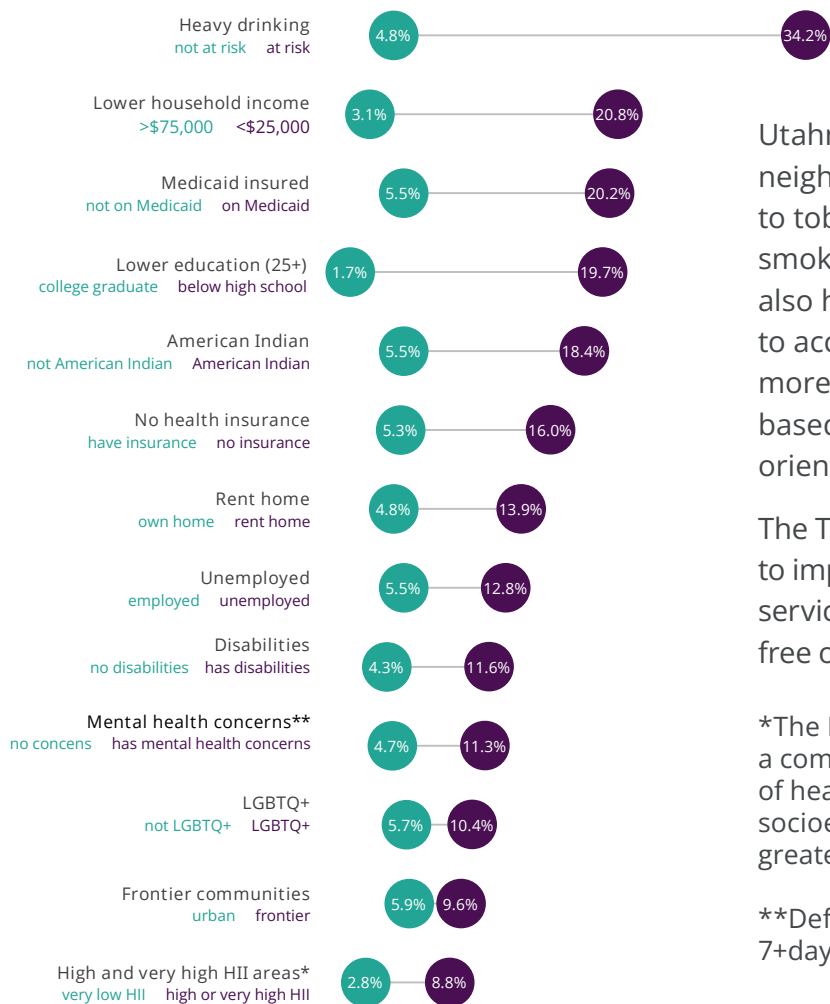
Disparities in cigarette smoking

According to the Surgeon General’s report “Eliminating Tobacco-related Disease and Death: Addressing Disparities” released in November 2024, tobacco-related disparities threaten the health and well-

The Surgeon General’s report lists the following factors as drivers of disparities in tobacco use:

- Demographic, social, and community conditions that impact health outcomes**, such as poverty.
- Targeted marketing and promotion of tobacco products**—including menthol—to certain population groups. This includes more tobacco marketing in poor neighborhoods.
- Gaps in protections** by tobacco prevention and control strategies, such as smoke-free air policies.
- Preemptive laws** that prevent or block communities from protecting their members’ health, such as through local smoke-free policies.
- Financial and other obstacles** to accessing treatments that help people quit using tobacco.⁵

▲ Figure 3: Percentage of Utah adults who smoke cigarettes by population characteristics, 2023 (age-adjusted)¹



Utahns who live in less affluent neighborhoods with greater exposure to tobacco marketing are more likely to smoke cigarettes. The risk for smoking is also higher among Utahns with barriers to accessing healthcare and Utahns more likely to experience hardship based on health status, poverty, sexual orientation, gender identity, or race.¹

The TPCP and partners are committed to improving policies and access to quit services to ensure that all Utahns can live free of tobacco-related disease and death.

*The Health Improvement Index (HII) is a composite measure of social drivers of health. A higher HII score (greater socioeconomic disadvantage) indicates a greater need for community improvement.

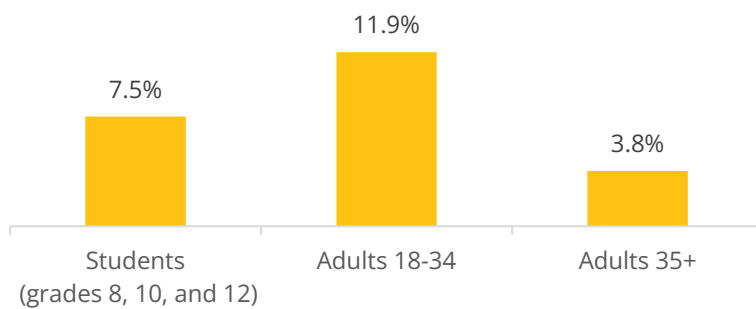
**Defined as mental health not good for 7+days during the past 30 days.

Vaping and nicotine addiction

Nicotine, whether smoked, vaped, or chewed, interferes with brain development, and has lasting effects on cognitive abilities and mental health.⁷

- Since the developing brain is most susceptible to the effects of nicotine, nicotine addiction usually starts in adolescence.⁴ To replace people who die from tobacco-related diseases, the tobacco industry regularly develops and markets new nicotine products with innovative designs and flavors that appeal to youth.
- Utah data show that vape products remain the main source of nicotine addiction for Utah youth and young adults. In 2023, 7.5% of Utah students in grades 8, 10, and 12 and 11.9% of young adults (ages 18-34) reported current use of vape products.^{1,2} Public education and Utah policies passed in recent years such as product regulation, taxes, and flavor restrictions are associated with declines in youth vaping since 2019. Despite this progress, Utah youth are still more likely to vape than Utah adults overall (6.5% in 2023).^{1,2}

▲ Figure 4: Percentage of Utahns who currently use vape products by age group, 2023^{1,2}



- In 2023, an estimated **20,000 Utah students** (equal to the number of students in approximately 770 Utah classrooms) used vape products in the past 30 days.^{2,8}
- Vape product use is highest among Utahns ages 18-34. Many Utahns in this age group started vaping in middle or high school. Flavors are a major reason why youth experiment with vaping.⁴

Note: Adult vape product use refers to vape products containing nicotine. Youth vape product use refers to use of vape products containing nicotine or marijuana.

Utah youth vaping facts (2023)

- **75%** of Utah students (grades 8, 10, and 12) who ever tried tobacco products started with vape products.²
- **80%** of Utah students (grades 8, 10, and 12) who vaped in the past 30 days used products containing nicotine.²
- **44%** of Utah students (grades 8, 10, and 12) who used vape products in the past 30 days vaped both nicotine and cannabis.²
- **98%** of Utah students (grades 8, 10, and 12) who ever vaped used products with **sweet, alcohol, and other flavors** (69.5%) or **mint and menthol** flavors (28.4%). Only 2% used **tobacco** flavored products.²

Further reductions in youth nicotine addiction depend on ongoing education and regulations such as flavor restrictions, monitoring of new vape and other nicotine products such as nicotine pouches, and collaboration with cannabis and other addiction prevention programs.

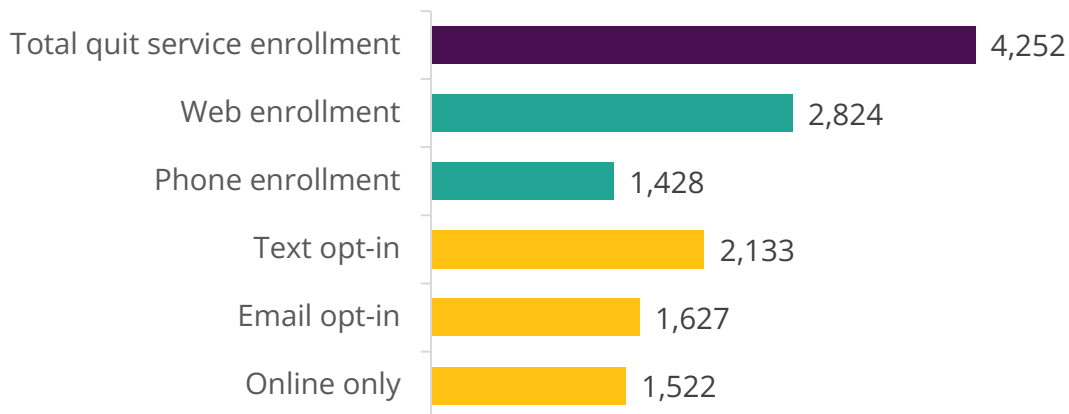
Quitting tobacco

Nicotine is highly addictive; quitting without counseling or medications is extremely challenging and takes, on average, 8-11 attempts before a successful quit.⁹

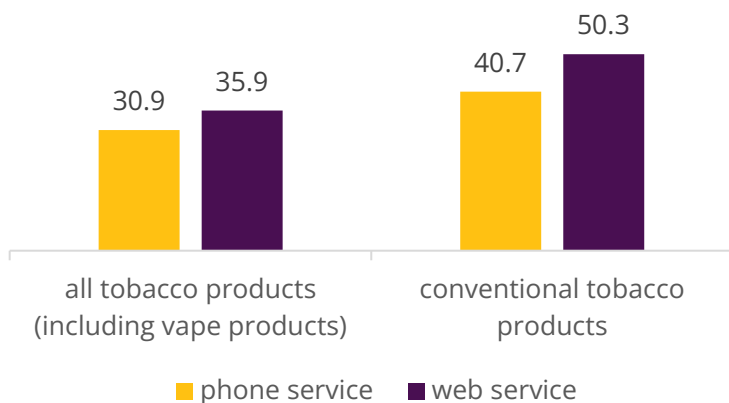
- Specialist behavioral support and quit medications increase the chances of successful quitting by 3 times.¹⁰
- TPCP offers free quit support and medications through the [Utah's Tobacco and Nicotine Quit Services \(1-800-QUIT-NOW\)](#) and waytoquit.org. During state fiscal year (FY) 2024, more than **4,000** Utahns enrolled in Utah Tobacco and Nicotine Quit Services.¹¹ In addition, to phone and web support, many quit service users selected email and text options (Figure 5).

Without help, only 7–8% of people who smoke cigarettes are successful at quitting.⁹ Utah Tobacco and Nicotine Quit Services participants report quit rates of 30% or higher.¹²

▲ Figure 5: Number of Utahns who enrolled in Utah Tobacco and Nicotine Quit Services by type of enrollment and service used, FY 2024¹¹



▲ Figure 6: Percentage of Utah adults who successfully quit after using Utah Tobacco and Nicotine Quit Services, FY 2023¹²



- Utah quit services participants reported higher quit rates for combustible tobacco products compared to all tobacco (vape products included). People who continue to vape are not considered tobacco-free due to the risk for dual use or switching back to combustible tobacco.
- Web service participants reported slightly higher quit rates compared to phone service participants.



Bear River Health Department (BRHD) tobacco statistics

	BRHD	STATE
Cigarette smoking		
Adult cigarette smoking (2023, age-adjusted) ¹	4.6%*	6.2%
Youth cigarette smoking in grades 8, 10, 12 (2021 and 2023, combined data) ²	0.8%	1.0%
Pregnant women smoking (2023) ¹³	1.5%	2.1%
Use of vape products and smokeless tobacco		
Youth experimentation with vape products in grades 8, 10, 12 (2023) ²	10.0%	15.0%
Youth use of vape products in grades 8, 10, 12 (2023) ²	4.5%	7.5%
Adult experimentation with electronic cigarettes/vape products (2023, age-adjusted) ¹	16.5%	21.3%
Adult use of electronic cigarettes/vape products (2023, age-adjusted) ¹	5.7%	6.5%
Adult use of chewing tobacco, snuff, or snus (2023, age-adjusted) ¹	2.2%*	2.1%
Secondhand smoke exposure (SHS)		
Adult exposure to SHS indoors/outdoors in the past week (2023, age-adjusted) ¹	21.2%	23.6%
Tobacco retailer compliance check results		
Illegal tobacco/vape sales to individuals younger than 21 during checks (FY 24) ¹⁴	2.8%	4.7%
Quit service utilization		
Number of phone and web-based quit service enrollments (FY 24) ¹¹	222	4,252

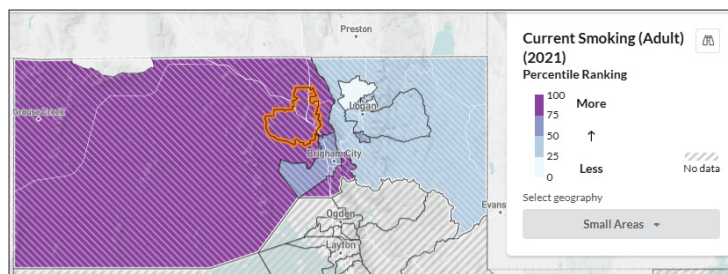
*These estimates have a relative standard error of >30% and do not meet DHHS standards for reliability.

Utah Healthy Places Index (HPI): BRHD community conditions and policy solutions

- The Utah HPI allows users to explore community conditions, health outcomes, and policy solutions for census tracts, small areas, health districts, and other geographies (<https://map.utah.healthylacesindex.org>).
- The BRHD small areas of Tremonton (12.4%), Box Elder County (other) (11.3%), and Brigham City (10.7%) have the highest percentages of adult cigarette smoking in Bear River health district and might benefit most from resource allocation and development of tobacco prevention and cessation programs and policies.

- Tremonton, Box Elder County (other), and Brigham City experience lower than average employment and lower than average levels of bachelors education compared to other Utah small areas. The HPI policy guide recommends partnerships with schools, workforce services, and worksites to increase educational and employment opportunities. These partnerships may also help establish tobacco-free policies and links to tobacco cessation resources where they are most needed. To learn more about policies to improve community conditions visit the HPI policy guide at <https://policies.utah.healthylacesindex.org/>.

Adult smoking percentiles in BRHD small areas (Utah HPI 2.0)



Note: Percentile scores show how well an area performs compared to other areas in the same geographic layer. The orange outline highlights the small area with the highest percentile of cigarette smoking in BRHD (Tremonton). Source: Utah HPI (adult smoking estimates from CDC Places 2021)



Central Utah Health Department (CUHD) tobacco statistics

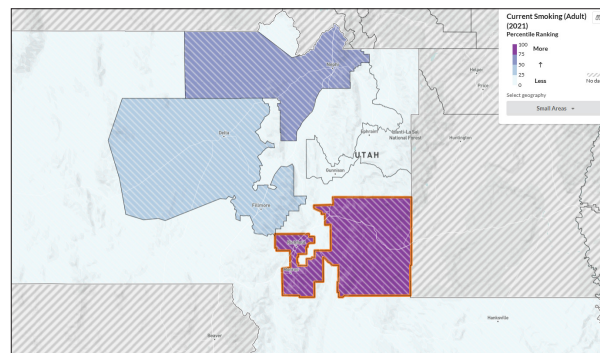
	CUHD	STATE
Cigarette smoking		
Adult cigarette smoking (2023, age-adjusted) ¹	9.0%	6.2%
Youth cigarette smoking in grades 8, 10, 12 (2021 and 2023, combined data) ²	1.1%	1.0%
Pregnant women smoking (2023) ¹³	3.5%	2.1%
Use of vape products and smokeless tobacco		
Youth experimentation with vape products in grades 8, 10, 12 (2023) ²	13.2%	15.0%
Youth use of vape products in grades 8, 10, 12 (2023) ²	5.3%	7.5%
Adult experimentation with electronic cigarettes/vape products (2023, age-adjusted) ¹	21.0%	21.3%
Adult use of electronic cigarettes/vape products (2023, age-adjusted) ¹	5.4%	6.5%
Adult use of chewing tobacco, snuff, or snus (2023, age-adjusted) ¹	4.7%*	2.1%
Secondhand smoke exposure (SHS)		
Adult exposure to SHS indoors/outdoors in the past week (2023, age-adjusted) ¹	24.0%	23.6%
Tobacco retailer compliance check results		
Illegal tobacco/vape sales to individuals younger than 21 during checks (FY 24) ¹⁴	6.6%	4.7%
Quit service utilization		
Number of phone and web-based quit service enrollments (FY 24) ¹¹	130	4,252

*This estimate has a relative standard error of >30% and does not meet DHHS standards for reliability.

Utah Healthy Places Index (HPI): CUHD community conditions and policy solutions

- The Utah HPI allows users to explore community conditions, health outcomes, and policy solutions for census tracts, small areas, health districts, and other geographies (<https://map.utah.healthypacesindex.org>).
- The CUHD small areas of **Richfield, Monroe, Salina (13.7%)**, and **Nephi/Mona (13.0%)** have the highest percentages of adult cigarette smoking in Central Utah health district and might benefit most from resource allocation and development of tobacco prevention and cessation programs and policies.
- The small areas of **Richfield, Monroe, Salina, and Nephi/Mona** experience **lower than average employment** and **higher than average levels of poverty** compared to other Utah small areas. The HPI policy guide recommends partnerships to enhance community economic capacity and increase the number, quality, and accessibility of jobs for local residents. These partnerships may also help establish tobacco-free policies and links to tobacco cessation resources where they are most needed. To learn more about policies to improve community conditions visit the HPI policy guide at <https://policies.utah.healthypacesindex.org/>.

Adult smoking percentiles for CUHD small areas (Utah HPI 2.0)



Note: Percentile scores show how well an area performs compared to other areas in the same geographic layer. The orange outline highlights the small area with the highest percentile of cigarette smoking in CUHD (Richfield, Monroe, Salina).

Source: Utah HPI (adult smoking estimates from CDC Places 2021)

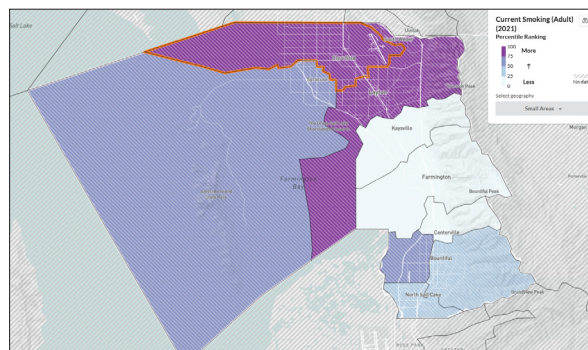


Davis County Health Department (DCHD) tobacco statistics		
	DCHD	STATE
Cigarette smoking		
Adult cigarette smoking (2023, age-adjusted) ¹	3.4%	6.2%
Youth cigarette smoking in grades 8, 10, 12 (2021 and 2023, combined data) ²	0.6%	1.0%
Pregnant women smoking (2023) ¹³	2.2%	2.1%
Use of vape products and smokeless tobacco		
Youth experimentation with vape products in grades 8, 10, 12 (2023) ²	9.3%	15.0%
Youth use of vape products in grades 8, 10, 12 (2023) ²	4.0%	7.5%
Adult experimentation with electronic cigarettes/vape products (2023, age-adjusted) ¹	18.5%	21.3%
Adult use of electronic cigarettes/vape products (2023, age-adjusted) ¹	4.9%	6.5%
Adult use of chewing tobacco, snuff, or snus (2023, age-adjusted) ¹	1.9%	2.1%
Secondhand smoke exposure (SHS)		
Adult exposure to SHS indoors/outdoors in the past week (2023, age-adjusted) ¹	19.5%	23.6%
Tobacco retailer compliance check results		
Illegal tobacco/vape sales to individuals younger than 21 during checks (FY 24) ¹⁴	0.8%	4.7%
Quit service utilization		
Number of phone and web-based quit service enrollments (FY 24) ¹¹	319	4,252

Utah Healthy Places Index (HPI): DCHD community conditions and policy solutions

- The Utah HPI allows users to explore community conditions, health outcomes, and policy solutions for census tracts, small areas, health districts, and other geographies (<https://map.utah.healthylacesindex.org>).
- The DCHD small areas of **Clearfield area/Hooper (9.6%)**, **Layton/South Weber (8.7%)**, and **Woods Cross/West Bountiful (8.6%)** have the highest percentages of adult cigarette smoking in Davis County health district. These small areas might benefit most from resource allocation and development of tobacco prevention and cessation programs and policies.
- Clearfield area/Hooper, Layton/South Weber, and Woods Cross/West Bountiful** experience **lower than average access to parks** and **higher than average traffic volume** compared to other Utah small areas. The HPI policy guide recommends partnerships with transportation agencies and city planners to increase park space and improve options for walking, biking, and use of public transit. These partnerships may also help establish tobacco-free policies and linking those who use tobacco to cessation resources. To learn more about policies to improve community conditions visit <https://policies.utah.healthylacesindex.org/>.

Adult smoking percentiles for DCHD small areas (Utah HPI 2.0)



Note: Percentile scores show how well an area performs compared to other areas in the same geographic layer. The orange outline highlights the small area with the highest percentile of cigarette smoking in DCHD (Clearfield area/Hooper).

Source: Utah HPI (adult smoking estimates from CDC Places 2021)

Salt Lake County Health Department (SLCoHD) tobacco statistics

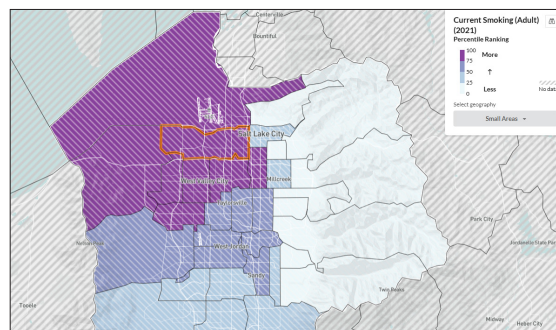
	SLCoHD	STATE
Cigarette smoking		
Adult cigarette smoking (2023, age-adjusted) ¹	6.7%	6.2%
Youth cigarette smoking in grades 8, 10, 12 (2021 and 2023, combined data) ²	1.1%	1.0%
Pregnant women smoking (2023) ¹³	2.1%	2.1%
Use of vape products and smokeless tobacco		
Youth experimentation with vape products in grades 8, 10, 12 (2023) ²	21.0%	15.0%
Youth use of vape products in grades 8, 10, 12 (2023) ²	11.0%	7.5%
Adult experimentation with electronic cigarettes/vape products (2023, age-adjusted) ¹	24.1%	21.3%
Adult use of electronic cigarettes/vape products (2023, age-adjusted) ¹	7.6%	6.5%
Adult use of chewing tobacco, snuff, or snus (2023, age-adjusted) ¹	1.3%	2.1%
Secondhand smoke exposure (SHS)		
Adult exposure to SHS indoors/outdoors in the past week (2023, age-adjusted) ¹	25.7%	23.6%
Tobacco retailer compliance check results		
Illegal tobacco/vape sales to individuals younger than 21 during checks (FY 24) ¹⁴	5.6%	4.7%
Quit service utilization		
Number of phone and web-based quit service enrollments (FY 24) ¹¹	1,766	4,252

*These estimates have a relative standard error of >30% and do not meet DHHS standards for reliability.

Utah Healthy Places Index (HPI): SLCoHD community conditions and policy solutions

- The Utah HPI allows users to explore community conditions, health outcomes, and policy solutions for census tracts, small areas, health districts, and other geographies (<https://map.utah.healthyplacesindex.org>).
- The SLCoHD small areas of **Salt Lake City (Glendale) (13.8%)**, **Salt Lake City (Rose Park) (12.5%)**, and **Magna (12.3%)** have the highest percentages of adult cigarette smoking in Salt Lake County health district and might benefit most from resource allocation and development of tobacco prevention and cessation programs and policies.
- The small areas of **Salt Lake City (Glendale)**, **Salt Lake City (Rose Park)**, and **Magna** experience **lower than average access to healthcare** and **a higher than average housing cost burden for low income homeowners** compared to other Utah small areas. The HPI policy guide recommends partnerships to increase affordable housing options, create job opportunities, expand benefits, and increase healthcare coverage. These partnerships may also help establish tobacco-free policies and links to tobacco cessation resources where they are most needed. To learn more about policies to improve community conditions visit <https://policies.utah.healthyplacesindex.org/>.

Adult smoking percentiles for SLCoHD small areas (Utah HPI 2.0)



Note: Percentile scores show how well an area performs compared to other areas in the same geographic layer. The orange outline highlights the small area with the highest percentile of cigarette smoking in SLCoHD (Salt Lake City - Glendale). Source: Utah HPI (adult smoking estimates from CDC Places 2021)



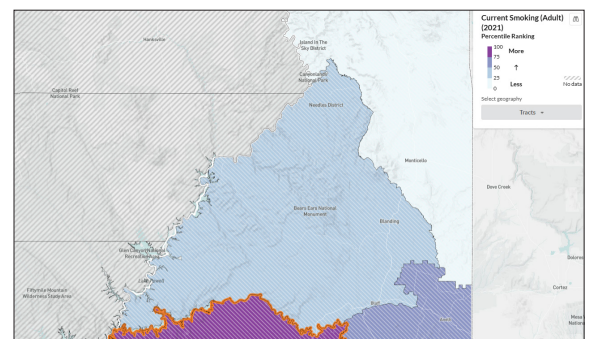
San Juan Public Health Department (SJPHD) tobacco statistics		
	SJPHD	STATE
Cigarette smoking		
Adult cigarette smoking (2023, age-adjusted) ¹	5.2%*	6.2%
Youth cigarette smoking in grades 8, 10, 12 (2019, 2021, and 2023, combined data) ²	0.8%*	1.1%
Pregnant women smoking (2021-23, combined data) ¹³	2.7%	2.4%
Use of vape products and smokeless tobacco		
Youth experimentation with vape products in grades 8, 10, 12 (2023) ²	7.9%	15.0%
Youth use of vape products in grades 8, 10, 12 (2023) ²	5.3%*	7.5%
Adult experimentation with electronic cigarettes/vape products (2023, age-adjusted) ¹	10.6%*	21.3%
Adult use of electronic cigarettes/vape products (2021-23, combined data, age-adjusted) ¹	1.2%*	6.8%
Adult use of chewing tobacco, snuff, or snus (2022-23, combined data, age-adjusted) ¹	5.0%*	2.2%
Secondhand smoke exposure (SHS)		
Adult exposure to SHS indoors/outdoors in the past week (2023, age-adjusted) ¹	16.9%	23.6%
Tobacco retailer compliance check results		
Illegal tobacco/vape sales to individuals younger than 21 during checks (FY 24) ¹⁴	5.7%	4.7%
Quit service utilization		
Number of phone and web-based quit service enrollments (FY 24) ¹¹	12	4,252

*These estimates have a relative standard error of >30% and do not meet DHHS standards for reliability.

Utah Healthy Places Index (HPI): SJPHD community conditions and policy solutions

- The Utah HPI allows users to explore community conditions, health outcomes, and policy solutions for census tracts, small areas, health districts, and other geographies (<https://map.utah.healthyplacesindex.org/>).
- The two SJPHD census tracts in the **south of the health district** have higher percentages of adult cigarette smoking (25.9% and 29.5%) than the tracts in the center and north (11.7% and 9.8%). The southern census tracts might benefit most from resource allocation and development of tobacco prevention and cessation programs and policies.
- SJPHD’s southern census tracts experience **lower than average employment, lower than average access to healthcare, and higher than average levels of poverty** compared to Utah census tracts overall. The HPI policy guide recommends partnerships to enhance community economic capacity and increase the number, quality, and accessibility of jobs and job benefits for local residents. These partnerships may also help establish tobacco-free policies and links to tobacco cessation resources where they are most needed. To learn more about policies to improve community conditions visit <https://policies.utah.healthyplacesindex.org/>.

Adult smoking percentiles for SJPHD census tracts (Utah HPI 2.0)



Note: Percentile scores show how well a census tract performs compared to other tracts in the same geographic layer. The orange outline highlights the census tract with the highest percentile of cigarette smoking in SJPHD.
 Source: Utah HPI (adult smoking estimates from CDC Places 2021)



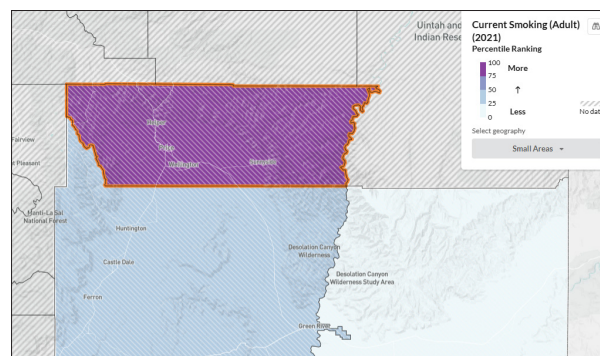
Southeast Utah Health Department (SEUHD) tobacco statistics

	SEUHD	STATE
Cigarette smoking		
Adult cigarette smoking (2023, age-adjusted) ¹	14.2%	6.2%
Youth cigarette smoking in grades 8, 10, 12 (2021 and 2023, combined data) ²	2.5%	1.0%
Pregnant women smoking (2023) ¹³	9.5%	2.1%
Use of vape products and smokeless tobacco		
Youth experimentation with vape products in grades 8, 10, 12 (2023) ²	19.2%	15.0%
Youth use of vape products in grades 8, 10, 12 (2023) ²	12.4%	7.5%
Adult experimentation with electronic cigarettes/vape products (2023, age-adjusted) ¹	31.5%	21.3%
Adult use of electronic cigarettes/vape products (2023, age-adjusted) ¹	9.8%	6.5%
Adult use of chewing tobacco, snuff, or snus (2023, age-adjusted) ¹	7.0%	2.1%
Secondhand smoke exposure (SHS)		
Adult exposure to SHS indoors/outdoors in the past week (2023, age-adjusted) ¹	28.9%	23.6%
Tobacco retailer compliance check results		
Illegal tobacco/vape sales to individuals younger than 21 during checks (FY 24) ¹⁴	1.8%	4.7%
Quit service utilization		
Number of phone and web-based quit service enrollments (FY 24) ¹¹	123	4,252

Utah Healthy Places Index (HPI): SEUHD community conditions and policy solutions

- The Utah HPI allows users to explore community conditions, health outcomes, and policy solutions for census tracts, small areas, health districts, and other geographies (<https://map.utah.healthyplacesindex.org/>).
- The SEUHD small area of **Carbon County (12.7%)** has the highest percentage of adult cigarette smoking in Southeast Utah health district and might benefit most from resource allocation and development of tobacco prevention and cessation programs and policies.
- This small area of **Carbon County** experiences **lower than average employment** and **per capita income**, and **a higher than average housing cost burden for low income renters and homeowners** compared to other Utah small areas. The HPI policy guide recommends partnerships to enhance community economic capacity and increase affordable housing options. The guide also has recommendations to increase the number, quality, and accessibility of jobs for local residents. These partnerships may also help establish tobacco-free policies and links to tobacco cessation resources where they are most needed. To learn more about policies to improve community conditions visit <https://policies.utah.healthyplacesindex.org/>.

Adult smoking percentiles for SEUHD small areas (Utah HPI 2.0)



Note: Percentile scores show how well an area performs compared to other areas in the same geographic layer. The orange outline highlights the small area with the highest percentile of cigarette smoking in SEUHD (Carbon County).

Source: Utah HPI (adult smoking estimates from CDC Places 2021)

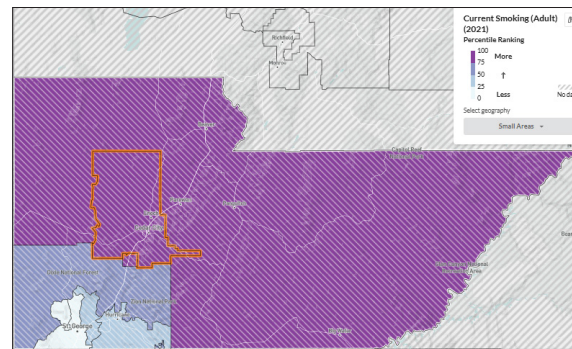


Southwest Utah Public Health Department (SWUPHD) tobacco statistics		
	SWUPHD	STATE
Cigarette smoking		
Adult cigarette smoking (2023, age-adjusted) ¹	8.3%	6.2%
Youth cigarette smoking in grades 8, 10, 12 (2021 and 2023, combined data) ²	1.4%	1.0%
Pregnant women smoking (2023) ¹³	1.7%	2.1%
Use of vape products and smokeless tobacco		
Youth experimentation with vape products in grades 8, 10, 12 (2023) ²	16.9%	15.0%
Youth use of vape products in grades 8, 10, 12 (2023) ²	7.2%	7.5%
Adult experimentation with electronic cigarettes/vape products (2023, age-adjusted) ¹	23.4%	21.3%
Adult use of electronic cigarettes/vape products (2023, age-adjusted) ¹	5.0%	6.5%
Adult use of chewing tobacco, snuff, or snus (2023, age-adjusted) ¹	2.9%	2.1%
Secondhand smoke exposure (SHS)		
Adult exposure to SHS indoors/outdoors in the past week (2023, age-adjusted) ¹	27.9%	23.6%
Tobacco retailer compliance check results		
Illegal tobacco/vape sales to individuals younger than 21 during checks (FY 24) ¹⁴	5.6%	4.7%
Quit service utilization		
Number of phone and web-based quit service enrollments (FY 24) ¹¹	318	4,252

Utah Healthy Places Index (HPI): SWUPHD community conditions and policy solutions

- The Utah HPI allows users to explore community conditions, health outcomes, and policy solutions for census tracts, small areas, health districts, and other geographies (<https://map.utah.healthyplacesindex.org>).
- The SWUPHD small areas of **Cedar City (11.5%)** and **Southwest LHD (other) (11.5%)** have the highest percentages of adult cigarette smoking in Southwest Utah health district. These areas might benefit most from resource allocation and development of tobacco prevention and cessation programs and policies.
- The small areas of **Cedar City** and **Southwest LHD (other)** experience **lower than average employment, lower than average access to healthcare, and higher than average levels of poverty** compared to other Utah small areas. The HPI policy guide recommends partnerships to enhance community economic capacity and increase the number, quality, and accessibility of jobs and job benefits such as healthcare coverage for local residents. These partnerships may also help establish tobacco-free policies and links to tobacco cessation resources where they are most needed. To learn more about policies to improve community conditions visit <https://policies.utah.healthyplacesindex.org/>.

Adult smoking percentiles for SWUPHD small areas (Utah HPI 2.0)



Note: Percentile scores show how well an area performs compared to other areas in the same geographic layer. The orange outline highlights the small area with the highest percentile of cigarette smoking in SWUPHD (Cedar City).

Source: Utah HPI (adult smoking estimates from CDC Places 2021)



Summit County Health Department (SCHD) tobacco statistics

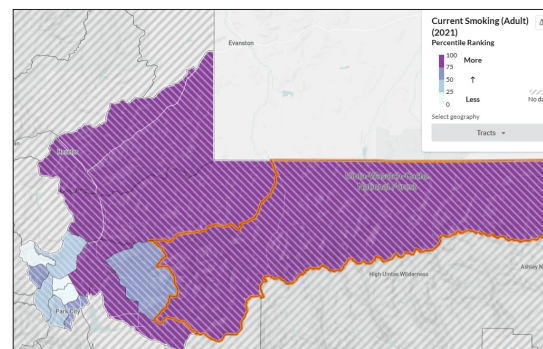
	SCHD	STATE
Cigarette smoking		
Adult cigarette smoking (2023, age-adjusted) ¹	5.1%*	6.2%
Youth cigarette smoking in grades 8, 10, 12 (2021 and 2023, combined data) ²	1.4%*	1.0%
Pregnant women smoking (2021-23, combined data) ¹³	1.4%	2.4%
Use of vape products and smokeless tobacco		
Youth experimentation with vape products in grades 8, 10, 12 (2023) ²	19.1%	15.0%
Youth use of vape products in grades 8, 10, 12 (2023) ²	11.8%	7.5%
Adult experimentation with electronic cigarettes/vape products (2023, age-adjusted) ¹	25.0%	21.3%
Adult use of electronic cigarettes/vape products (2023, age-adjusted) ¹	7.4%*	6.5%
Adult use of chewing tobacco, snuff, or snus (2023, age-adjusted) ¹	4.1%*	2.1%
Secondhand smoke exposure (SHS)		
Adult exposure to SHS indoors/outdoors in the past week (2023, age-adjusted) ¹	16.4%	23.6%
Tobacco retailer compliance check results		
Illegal tobacco/vape sales to individuals younger than 21 during checks (FY 24) ¹⁴	0%	4.7%
Quit service utilization		
Number of phone and web-based quit service enrollments (FY 24) ¹¹	22	4,252

*These estimates have a relative standard error of >30% and do not meet DHHS standards for reliability.

Utah Healthy Places Index (HPI): SCHD community conditions and policy solutions

- The Utah HPI allows users to explore community conditions, health outcomes, and policy solutions for census tracts, small areas, health districts, and other geographies (<https://map.utah.healthypacesindex.org/>).
- The SCHD census tracts in the **eastern part** of the health district have higher percentages of adult cigarette smoking (9.3%-10.8%) than the tracts in the southwest of the district. The eastern tracts might benefit most from resource allocation and development of tobacco prevention and cessation programs and policies.
- SCHD’s eastern census tracts experience a **higher than average severe housing cost burden for low-income homeowners** and for some tracts **lower than average employment** compared to Utah census tracts overall. The HPI policy guide recommends partnerships to enhance community economic capacity and increase affordable housing options. The guide also has recommendations to increase the number, quality, and accessibility of jobs for local residents. These partnerships may also help establish tobacco-free policies and links to tobacco cessation resources where they are most needed. To learn more about policies to improve community conditions visit <https://policies.utah.healthypacesindex.org/>.

Adult smoking percentiles for SCHD census tracts (Utah HPI 2.0)



Note: Percentile scores show how well a census tract performs compared to other tracts in the same geographic layer. The orange outline highlights the census tract with the highest percentile of cigarette smoking in SCHD.

Source: Utah HPI (adult smoking estimates from CDC Places 2021)



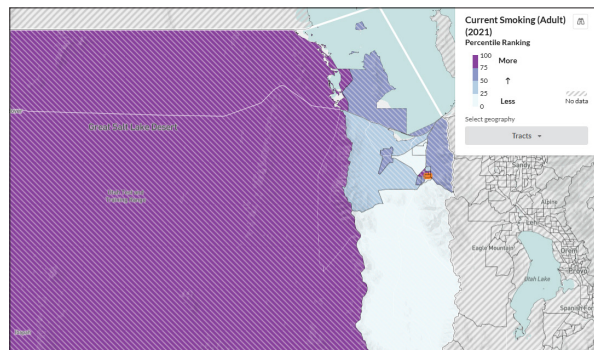
Tooele County Health Department (TCHD) tobacco statistics

	TCHD	STATE
Cigarette smoking		
Adult cigarette smoking (2023, age-adjusted) ¹	6.4%	6.2%
Youth cigarette smoking in grades 8, 10, 12 (2021 and 2023, combined data) ²	0.9%	1.0%
Pregnant women smoking (2023) ¹³	5.3%	2.1%
Use of vape products and smokeless tobacco		
Youth experimentation with vape products in grades 8, 10, 12 (2023) ²	18.4%	15.0%
Youth use of vape products in grades 8, 10, 12 (2023) ²	9.3%	7.5%
Adult experimentation with electronic cigarettes/vape products (2023, age-adjusted) ¹	33.1%	21.3%
Adult use of electronic cigarettes/vape products (2023, age-adjusted) ¹	9.8%	6.5%
Adult use of chewing tobacco, snuff, or snus (2023, age-adjusted) ¹	6.0%	2.1%
Secondhand smoke exposure (SHS)		
Adult exposure to SHS indoors/outdoors in the past week (2023, age-adjusted) ¹	21.2%	23.6%
Tobacco retailer compliance check results		
Illegal tobacco/vape sales to individuals younger than 21 during checks (FY 24) ¹⁴	2.5%	4.7%
Quit service utilization		
Number of phone and web-based quit service enrollments (FY 24) ¹¹	156	4,252

Utah Healthy Places Index (HPI): TCHD community conditions and policy solutions

- The Utah HPI allows users to explore community conditions, health outcomes, and policy solutions for census tracts, small areas, health districts, and other geographies (<https://map.utah.healthyplacesindex.org>).
- The TCHD census tracts in the **western part** of the district and the **city of Tooele** have the highest percentages of adult cigarette smoking (14.4%-15.0%) in Tooele County health district. These areas might benefit most from resource allocation and development of tobacco prevention and cessation programs and policies.
- These census tracts experience **lower than average levels of bachelor’s education** and **lower access to healthcare** compared to Utah census tracts overall. The HPI policy guide recommends partnerships with schools, workforce services, and worksites to increase educational opportunities as well as employment opportunities with benefits such as healthcare. These partnerships may also help establish tobacco-free policies and links to tobacco cessation resources where they are most needed. To learn more about policies to improve community conditions visit <https://policies.utah.healthyplacesindex.org/>.

Adult smoking percentiles for TCHD census tracts (Utah HPI 2.0)



Note: Percentile scores show how well an area performs compared to other areas in the same geographic layer. The orange outline highlights the census tract with the highest percentile of cigarette smoking in TCHD.

Source: Utah HPI (adult smoking estimates from CDC Places 2021)



TriCounty Health Department (TriCHD) tobacco statistics

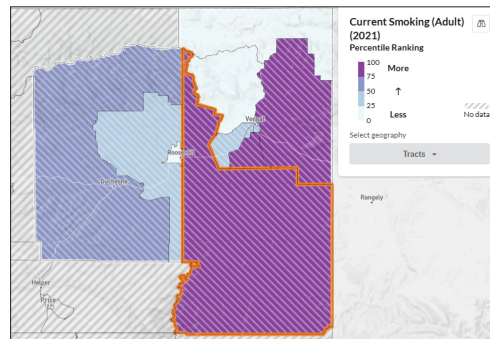
	TriCHD	STATE
Cigarette smoking		
Adult cigarette smoking (2023, age-adjusted) ¹	11.0%	6.2%
Youth cigarette smoking in grades 8, 10, 12 (2021 and 2023, combined data) ²	1.9%*	1.0%
Pregnant women smoking (2023) ¹³	7.0%	2.1%
Use of vape products and smokeless tobacco		
Youth experimentation with vape products in grades 8, 10, 12 (2023) ²	16.4%	15.0%
Youth use of vape products in grades 8, 10, 12 (2023) ²	7.7%	7.5%
Adult experimentation with electronic cigarettes/vape products (2023, age-adjusted) ¹	19.7%	21.3%
Adult use of electronic cigarettes/vape products (2023, age-adjusted) ¹	5.0%*	6.5%
Adult use of chewing tobacco, snuff, or snus (2023, age-adjusted) ¹	6.2%	2.1%
Secondhand smoke exposure (SHS)		
Adult exposure to SHS indoors/outdoors in the past week (2023, age-adjusted) ¹	23.9%	23.6%
Tobacco retailer compliance check results		
Illegal tobacco/vape sales to individuals younger than 21 during checks (FY 24) ¹⁴	6.6%	4.7%
Quit service utilization		
Number of phone and web-based quit service enrollments (FY 24) ¹¹	97	4,252

*These estimates have a relative standard error of >30% and do not meet DHHS standards for reliability.

Utah Healthy Places Index (HPI): TriCHD community conditions and policy solutions

- The Utah HPI allows users to explore community conditions, health outcomes, and policy solutions for census tracts, small areas, health districts, and other geographies (<https://map.utah.healthyplacesindex.org/>).
- The TriCHD census tracts in the **southeastern part** of the district have the highest percentages of adult cigarette smoking (14.5%-18.8%) in TriCounty health district. These areas might benefit most from resource allocation and development of tobacco prevention and cessation programs and policies.
- These census tracts experience **lower than average employment, lower than average bachelor's education and higher than average levels of poverty** compared to Utah census tracts overall. The HPI policy guide recommends partnerships with schools, workforce services, and community development agencies to enhance community economic capacity and increase the number, quality, and accessibility of jobs for local residents. These partnerships may also help establish tobacco-free policies and links to tobacco cessation resources where they are most needed. To learn more about policies to improve community conditions visit <https://policies.utah.healthyplacesindex.org/>.

Adult smoking percentiles for TriCHD census tracts (Utah HPI 2.0)



Note: Percentile scores show how well an area performs compared to other areas in the same geographic layer. The orange outline highlights the census tract with the highest percentile of cigarette smoking in TriCHD.

Source: Utah HPI (adult smoking estimates from



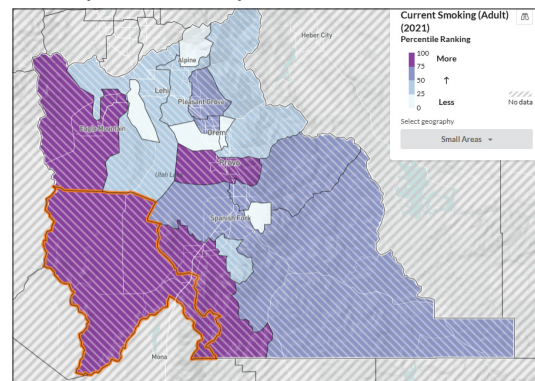
Utah County Health Department (UCHD) tobacco statistics

	UCHD	STATE
Cigarette smoking		
Adult cigarette smoking (2023, age-adjusted) ¹	4.4%	6.2%
Youth cigarette smoking in grades 8, 10, 12 (2021 and 2023, combined data) ²	0.8%	1.0%
Pregnant women smoking (2023) ¹³	0.9%	2.1%
Use of vape products and smokeless tobacco		
Youth experimentation with vape products in grades 8, 10, 12 (2023) ²	8.5%	15.0%
Youth use of vape products in grades 8, 10, 12 (2023) ²	4.1%	7.5%
Adult experimentation with electronic cigarettes/vape products (2023, age-adjusted) ¹	15.3%	21.3%
Adult use of electronic cigarettes/vape products (2023, age-adjusted) ¹	4.1%	6.5%
Adult use of chewing tobacco, snuff, or snus (2023, age-adjusted) ¹	1.5%	2.1%
Secondhand smoke exposure (SHS)		
Adult exposure to SHS indoors/outdoors in the past week (2023, age-adjusted) ¹	20.2%	23.6%
Tobacco retailer compliance check results		
Illegal tobacco/vape sales to individuals younger than 21 during checks (FY 24) ¹⁴	1.7%	4.7%
Quit service utilization		
Number of phone and web-based quit service enrollments (FY 24) ¹¹	552	4,252

Utah Healthy Places Index (HPI): UCHD community conditions and policy solutions

- The Utah HPI allows users to explore community conditions, health outcomes, and policy solutions for census tracts, small areas, health districts, and other geographies (<https://map.utah.healthyplacesindex.org/>).
- The UCHD small areas of **Utah County South (9.0%)**, **Provo West City Center (8.2%)**, **Payson (8.0%)**, and **Eagle Mountain/Cedar Valley (7.9%)** have the highest percentages of adult cigarette smoking in Utah County health district. These areas might benefit most from resource allocation and development of tobacco prevention and cessation programs and policies.
- The small areas of **Utah County South**, **Provo West City Center**, **Payson**, and **Eagle Mountain/Cedar Valley** experience **lower than average per capita income** and **lower than average preschool enrollment** compared to other Utah small areas. The HPI policy guide recommends partnerships to create opportunities for early learning and enhance community economic capacity with the goal of increasing the number, quality, and accessibility of jobs for local residents. These partnerships may also help establish tobacco-free policies and links to tobacco cessation resources where they are most needed. To learn more about policies to improve community conditions visit <https://policies.utah.healthyplacesindex.org/>.

Adult smoking percentiles for UCHD small areas (Utah HPI 2.0)



Note: Percentile scores show how well an area performs compared to other areas in the same geographic layer. The orange outline highlights the small area with the highest percentile of cigarette smoking in UCHD (Utah County South). Source: Utah HPI (adult smoking estimates from CDC Places 2021)



Wasatch County Health Department (WCHD) tobacco statistics

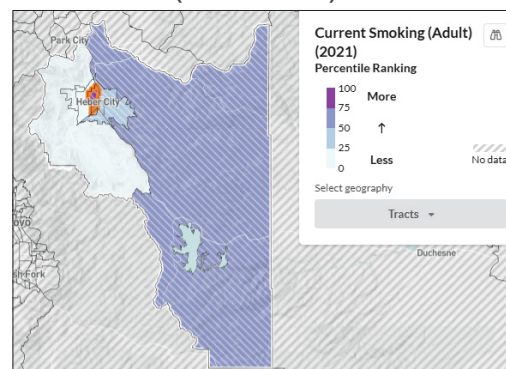
	WCHD	STATE
Cigarette smoking		
Adult cigarette smoking (2022-23, combined data, age-adjusted) ¹	8.1%*	6.2%
Youth cigarette smoking in grades 8, 10, 12 (2021 and 2023, combined data) ²	0.8%*	1.0%
Pregnant women smoking (2021-23, combined data) ¹³	1.5%	2.4%
Use of vape products and smokeless tobacco		
Youth experimentation with vape products in grades 8, 10, 12 (2023) ²	13.4%	15.0%
Youth use of vape products in grades 8, 10, 12 (2023) ²	7.1%	7.5%
Adult experimentation with electronic cigarettes/vape products (2023, age-adjusted) ¹	17.0%	21.3%
Adult use of electronic cigarettes/vape products (2022-23, combined data, age-adjusted) ¹	2.2%*	6.8%
Adult use of chewing tobacco, snuff, or snus (2021-23, combined data, age-adjusted) ¹	4.3%*	2.3%
Secondhand smoke exposure (SHS)		
Adult exposure to SHS indoors/outdoors in the past week (2023, age-adjusted) ¹	17.9%	23.6%
Tobacco retailer compliance check results		
Illegal tobacco/vape sales to individuals younger than 21 during checks (FY 24) ¹⁴	16.0%	4.7%
Quit service utilization		
Number of phone and web-based quit service enrollments (FY 24) ¹¹	20	4,252

*These estimates have a relative standard error of >30% and do not meet DHHS standards for reliability.

Utah Healthy Places Index (HPI): WCHD community conditions and policy solutions

- The Utah HPI allows users to explore community conditions, health outcomes, and policy solutions for census tracts, small areas, health districts, and other geographies (<https://map.utah.healthyplacesindex.org/>).
- A census tract on the western side of Heber City has the highest percentage of adult cigarette smoking (11.0%) in Wasatch County health district. This area might benefit most from resource allocation and development of tobacco prevention and cessation programs and policies.
- The highlighted Heber City census tract has a **higher than average severe housing cost burden for low-income homeowners** and **lower than average access to healthcare** compared to Utah census tracts overall. The HPI policy guide recommends partnerships with community agencies to provide housing support and develop new affordable housing. The HPI policy guide also recommends partnerships to enhance community economic capacity and increase the number, quality, and accessibility of jobs with worksite benefits such as healthcare. These partnerships may also help establish tobacco-free policies and links to tobacco cessation resources where they are most needed. To learn more about policies to improve community conditions visit <https://policies.utah.healthyplacesindex.org/>.

Adult smoking percentiles for WCHD census tracts (Utah HPI 2.0)



Note: Percentile scores show how well an area performs compared to other areas in the same geographic layer. The orange outline highlights the census tract with the highest percentile of cigarette smoking in WCHD.

Source: Utah HPI (adult smoking estimates from CDC Places 2021)

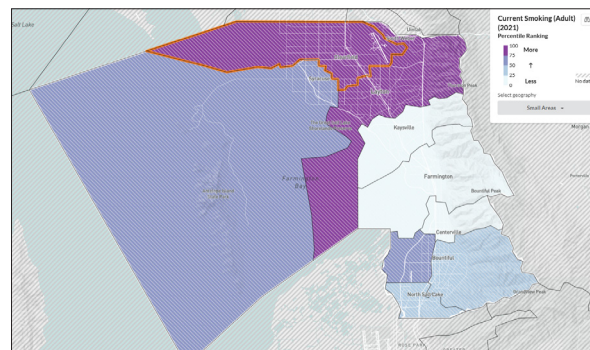


Weber Morgan Health Department (WMHD) tobacco statistics		
	WMHD	STATE
Cigarette smoking		
Adult cigarette smoking (2023, age-adjusted) ¹	7.9%	6.2%
Youth cigarette smoking in grades 8, 10, 12 (2021 and 2023, combined data) ²	0.8%	1.0%
Pregnant women smoking (2023) ¹³	3.7%	2.1%
Use of vape products and smokeless tobacco		
Youth experimentation with vape products in grades 8, 10, 12 (2023) ²	18.8%	15.0%
Youth use of vape products in grades 8, 10, 12 (2023) ²	9.6%	7.5%
Adult experimentation with electronic cigarettes/vape products (2023, age-adjusted) ¹	27.7%	21.3%
Adult use of electronic cigarettes/vape products (2023, age-adjusted) ¹	11.6%	6.5%
Adult use of chewing tobacco, snuff, or snus (2023, age-adjusted) ¹	2.2%	2.1%
Secondhand smoke exposure (SHS)		
Adult exposure to SHS indoors/outdoors in the past week (2023, age-adjusted) ¹	26.4%	23.6%
Tobacco retailer compliance check results		
Illegal tobacco/vape sales to individuals younger than 21 during checks (FY 24) ¹⁴	8.2%	4.7%
Quit service utilization		
Number of phone and web-based quit service enrollments (FY 24) ¹¹	515	4,252

Utah Healthy Places Index (HPI): WMHD community conditions and policy solutions

- The Utah HPI allows users to explore community conditions, health outcomes, and policy solutions for census tracts, small areas, health districts, and other geographies (<https://map.utah.healthyplacesindex.org>).
- The WMHD small areas of **Ogden Downtown (12.7%)** and **Ben Lomond (12.5%)** have the highest percentages of adult cigarette smoking in Weber-Morgan health district. These small areas might benefit most from resource allocation and development of tobacco prevention and cessation programs and policies.
- The small areas of **Ogden Downtown** and **Ben Lomond** experience **lower than average access to automobiles** and a **higher than average housing cost burden for low income renters** compared to other Utah small areas. The HPI policy guide recommends partnerships with transit and community development agencies to improve transit and other mobility services and provide housing support and develop new affordable housing. These partnerships may also help establish tobacco-free policies and links to tobacco cessation resources where they are most needed. To learn more about policies to improve community conditions visit <https://policies.utah.healthyplacesindex.org/>.

Adult smoking percentiles for WMHD small areas (Utah HPI 2.0)



Note: Percentile scores show how well an area performs compared to other areas in the same geographic layer. The orange outline highlights the small area with the highest percentile of cigarette smoking in WMHD (Ogden Downtown).
 Source: Utah HPI (adult smoking estimates from CDC Places 2021)

Utah tobacco facts

Tobacco and vape product use



156,700

estimated number of Utah adults who currently smoke cigarettes¹



64%

estimated percentage of Utah adults who smoke cigarettes and want to quit in the next year¹



43,000

estimated number of Utah youth who have tried vape products with nicotine or marijuana²

Social and economic burden



\$1.93 billion

estimated annual medical expenses and lost productivity due to smoking in Utah¹⁵



\$38.3 million

estimated annual tobacco industry marketing expenditure in Utah¹⁵



1,300

estimated number of Utahns who die each year due to cigarette smoking¹⁵

TPCP program reach



1.46 million

estimated number of Utah adults who saw anti-tobacco ads in the past year¹



23,900

estimated number of Utahns who visited the TPCP Way to Quit website on average each month in state fiscal year 2024 (July 1, 2023 to June 30, 2024)



4,252

number of enrollments in Utah Tobacco Quit and Nicotine Quit Services in state fiscal year 2024 (July 1, 2023 to June 30, 2024)¹¹

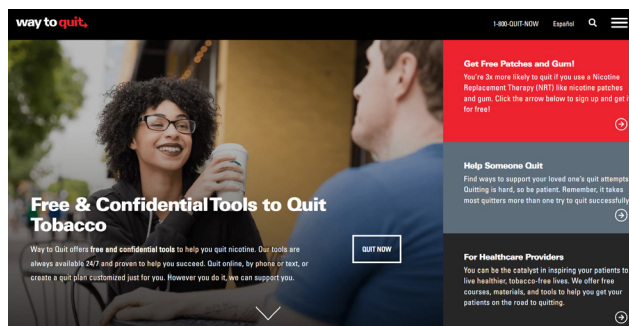
TPCP resources

The TPCP and partners provide information about tobacco, vape, and other nicotine products through websites, marketing campaigns, toolkits, and other means. In 2024, the TPCP continued to update its websites and develop new toolkits. Links to TPCP sites and materials are listed below.

TPCP websites

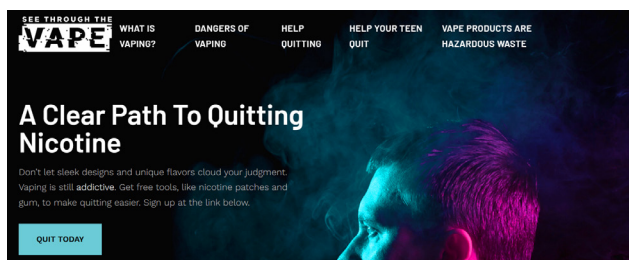
Way to Quit—waytoquit.org

- Informs Utahns about the dangers of tobacco and nicotine products
- Links people who use tobacco to Utah’s Tobacco and Nicotine Quit Services (1-800-QUIT-NOW) and other quit resources
- Provides healthcare providers with updates on quit medications and referrals to quit programs



See Through the Vape—seethroughthevape.org

- Explains the harms of vape products; educates about proper disposal of vape devices as hazardous waste
- Links to **My Life My Quit**, Utah’s quit program for youth—ut.mylifemyquit.org and other resources



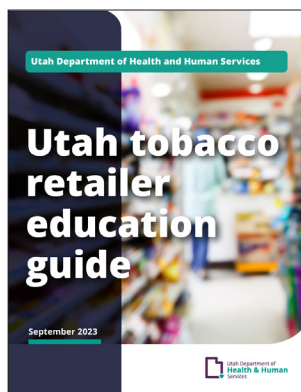
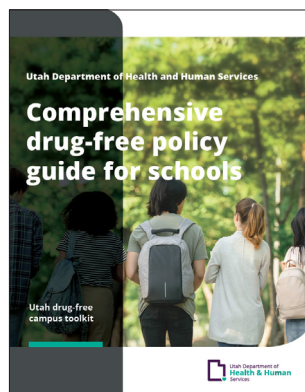
Tobacco-free Utah—tobaccofree.utah.gov

- Informs about Utah tobacco laws and data
- Provides links to tobacco prevention and cessation programs run by local health departments and community partners
- Informs about tobacco-free housing



TPCP toolkits

Youth tobacco use prevention



Comprehensive drug-free policy guide for schools

- Provides resources for school-based tobacco, alcohol, and marijuana prevention and cessation policies as well as policy enforcement

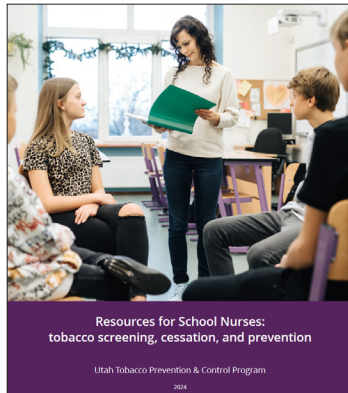
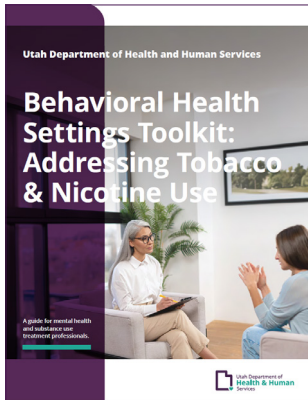
Utah tobacco retailer education guide

- Provides information on Utah tobacco retail laws, permits, underage sales, storage and disposal of vape products, and restrictions on smoking and vaping outlined in the Utah Indoor Clean Air Act (UICAA)

TPCP resources

TPCP toolkits

Resources for healthcare providers and worksites



[Behavioral health settings toolkit: addressing tobacco & nicotine use](#)

- Informs about tobacco use and health outcomes for patients with behavioral health conditions
- Provides resources to assess and treat tobacco and nicotine dependence in behavioral health clinics

[Resources for school nurses: tobacco screening, cessation, and prevention](#)

- Provides resources for school nurses to assist with screening for tobacco and nicotine product use and link students to prevention and cessation resources

[Dental vaping screening toolkit](#)

- Provides information on oral health effects of vaping for dental care providers
- Lists resources for patient education and for referrals to vape prevention and cessation services

[Tobacco-free workplace policy toolkit](#)

- Explains the benefits of a tobacco-free workplace and the cost of tobacco use at work
- Provides detailed instructions for creating tobacco-free workplace policies

YEMOP Committee

The Utah Youth Electronic Cigarette, Marijuana and Other Drug Prevention (YEMOP) committee makes policy recommendations for reducing youth use of electronic cigarettes, marijuana, and other drugs. YEMOP is an independent committee composed of lawmakers, community advocates, and DHHS staff. YEMOP is housed at the DHHS.

In the past year, TPCP and YEMOP collaborated on the following initiatives:

- A detailed review of drug-free school policies in Utah and the development of a [comprehensive drug-free policy guide for schools](#)
- Continued use of hazardous waste installments in schools to educate about dangerous chemicals in vape products and proper disposal of vape product waste

TPCP partners

- American Cancer Society
- American Heart Association
- American Lung Association
- Association for Utah Community Health
- Behavioral Risk Factor Surveillance System
- Bear River Health Department
- Campaign for Tobacco-Free Kids
- Center for HOPE, Huntsman Cancer Institute, University of Utah Health
- Centers for Disease Control and Prevention
- Central Utah Public Health Department
- Centro Hispano
- Children's Service Society of Utah
- Comagine Health
- Comunidades Unidas
- Davis County Health Department
- Head Start Utah
- Huntsman Cancer Institute
- Intermountain Healthcare
- Molina Healthcare
- National Jewish Health
- Primary Children's Hospital
- Project Success Coalition, Inc.
- R & R Partners
- RTI International
- San Juan Public Health Department
- Salt Lake County Health Department
- SelectHealth
- Southeast Utah Health Department
- Southwest Utah Public Health Department
- Steward Health Choice Utah
- Summit County Health Department
- The Queen Center
- The Urban Indian Center of Salt Lake
- Tobacco Control Network
- Tooele County Health Department
- Tri-County Health Department
- University of Utah
- University of Utah Health Plans
- Utah Association of Peer Support Specialists
- Utah Association of Local Health Departments
- Utah County Health Department
- Utah Dental Hygienists' Association
- Utah Department of Agriculture and Food
- Utah Department of Corrections
- Utah Department of Environmental Quality, Division of Waste Management and Radiation Control, Hazardous Waste Management Program
- Utah Department of Health and Human Services Center for Medical Cannabis
- Utah Department of Health and Human Services Division of Correctional Health Services
- Utah Department of Health and Human Services Division of Integrated Healthcare
- Utah Department of Health and Human Services Division of Population Health
- Utah Department of Health and Human Services Office of American Indian/Alaska Native Health and Family Services
- Utah Department of Health and Human Services Office of Health Equity
- Utah Department of Health and Human Services Office of Substance Abuse and Mental Health
- Utah Department of Public Safety State Bureau of Investigations
- Utah Indian Health Advisory Board
- Utah Local Association of Community Health Education Specialists (ULACHES)
- Utah Office of the Attorney General
- Utah Parent Teacher Association
- Utah Prevention Advisory Council
- Utah State Board of Education
- Utah State Fire Marshal's Office
- Utah State Tax Commission
- Utah Substance Abuse and Mental Health Advisory (USAAV+) Council
- Utah Tobacco-Free Alliance
- Utah Transit Authority
- Wasatch County Health Department
- Weber-Morgan Health Department

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