

EXECUTIVE ORDER NO. EO - 97 - 10

TOBACCO REDUCTION ADVISORY COMMITTEE

On November 5, 1996, Oregon voters passed Ballot Measure 44, resulting in an increase in the state tobacco tax. Of the total resultant tobacco tax revenue, 5.77 per cent is to be credited to the Tobacco Use Reduction Account and continuously appropriated to the Oregon Health Division to fund prevention and education programs designed to reduce cigarette and tobacco use.

This Executive Order creates the Tobacco Reduction Advisory Committee in order to assist the Oregon Health Division in crafting, analyzing, and prioritizing such programs which seek to reduce statewide tobacco use. It is essential that we achieve this goal, for the economic, health, and social costs attributed to tobacco use are substantial and inflict a needless toll upon our state and its citizens.

Tobacco use is linked to one quarter of all deaths in Oregon. It is the leading cause of preventable death in Oregon, accounting for more than four times the number of deaths from motor vehicle accidents, suicide, AIDS, and homicide combined. Mothers' use of tobacco is related to the occurrence of low-birth weight babies and infant deaths.

The direct costs of smoking in Oregon totaled over \$400 million in 1990, with 43% paid from public funds and 57% through private insurers and individuals. Employers bear the burden of indirect costs: tobacco-related illness led to over \$100 million in lost productivity during 1990. The 6500 Oregon deaths linked to tobacco in 1990 led to a further \$800 million in lost productivity.

In December, 1995, the Tobacco-Free Coalition of Oregon published the Oregon Statewide Prevention Plan. The Plan outlines goals, objectives, and strategies to reduce tobacco use and its impact on the health and economic well-being of Oregonians. It calls for a broad-based, comprehensive effort that involves state and local policy makers, the health care community, businesses, educators, parents, and children.

The Plan also provides the blueprint for allocation of tax revenues appropriated to the Health Division. Strategies outlined in the Plan have been found effective in other states and focus heavily upon changing public policy and community norms. The Plan shall

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serves as the strategic guide for the Committee as it seeks to reduce tobacco use in Oregon through the creation and implementation of specific programs aimed at the reduction of tobacco use.

The Tobacco Reduction Advisory Committee created by this Executive Order will be comprised of representatives from both private organizations and state agencies dedicated to the reduction of the harmful impact of Oregonians' tobacco use. The Committee will advise and assist the Health Division in the development and oversight of the Tobacco Prevention and Education Program. Prime among the Committee's goals is to assist the Health Division in establishing an outcome-oriented program which effectively decreases statewide tobacco use.

IT IS HEREBY ORDERED AND DIRECTED:

1. The Tobacco Reduction Advisory Committee is created. The Committee shall be comprised of one representative from each of the following organizations and agencies as designated by the executive authority of the organization or agency:
 - a. the American Cancer Society;
 - b. the American Heart Association;
 - c. the American Lung Association;
 - d. the Oregon Association of Hospitals;
 - e. the Oregon Medical Association;
 - f. the Conference of Local Health Officials;
 - g. Oregon Health Systems in Collaboration;
 - h. the Tobacco-Free Coalition of Oregon;
 - i. the Office of Alcohol and Drug Abuse Programs;
 - j. the Department of Education;
 - k. the Governor's Office;
 - l. the Oregon Health Division;
 - m. the Oregon Public Health Association.
2. Representatives may be removed and replaced at the discretion of

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the executive authority of the organization or state agency which they represent. The Health Division may request such removal and replacement if the representative fails to attend meetings or otherwise participate in the Committee's work. Such a request by the Health Division shall be binding upon the respective representative's organization or agency.

3. The Health Division representative and a representative chosen by a majority of the Committee shall serve as co-chairs of the Committee.
4. The Health Division shall convene and staff the meetings of the Committee. The Committee shall meet a minimum of two times per year, with additional meetings held as deemed necessary by the Health Division.
5. The Committee shall
 - a. Review the goals, strategies, and desired outcomes of the tobacco prevention and education programs;
 - b. Review the implementation plan for the Tobacco Prevention and Education Program and accompanying budget of the Health Division;
 - c. Review Administrative Rules drafted by the Health Division dealing with tobacco reduction and advise the Health Division on any necessary or desirable amendments;
 - d. Review the biennial report mandated by Section 15 of Ballot Measure 44 prior to its submission to the Legislative Assembly and the Governor and advise the Health Division on any necessary or desirable amendments;

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- e. Review the overall effectiveness of tobacco use reduction programs and advise the Health Division on any necessary or desirable amendments.

Done at Salem, Oregon, this 30th day of January, 1997.

/S/
John A. Kitzhaver, M.D.
GOVERNOR

ATTEST:

/S/
Phil Keisling
SECRETARY OF STATE