





TOBACCO USE PREVENTION PROGRAM

Montana Tobacco Use Prevention Program

The mission of the Montana Tobacco Use Prevention Program (MTUPP) is to address the public health crisis caused by the use of all forms of commercial tobacco products. MTUPP works to eliminate tobacco use, especially among young people, through statewide programs and policies to:

- Save Montanans \$511 million spent annually on health care costs and \$87.2 million in Medicaid costs directly caused by smoking
- Prevent 1,600 adults from dying each year from smoking
- Prevent 1,800 kids from trying cigarettes for the first time each year.¹

\$511,000,000

Spent on health care costs directly caused by smoking

128,571

Number of Montana adults who smoke

\$4,286

Average cost per adult per year who smokes



MTUPP has four main goals:

Eliminate exposure to secondhand smoke

Promote quitting among adults and youth

Prevent initiation among youth and young adults

Identify and eliminate commercial tobacco-related disparities

MTUPP acknowledges the traditional and sacred use of tobacco among American Indian people. In this report, tobacco refers to the use of commercial tobacco products sold with the intention of driving profits and addiction, unless otherwise stated.

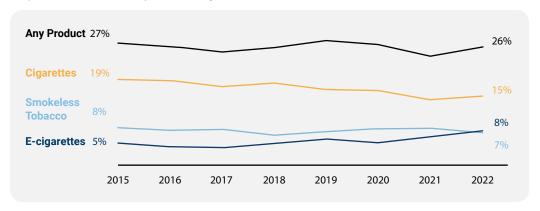


Adult Tobacco Use Trends

More than a quarter of Montana adults currently use at least one tobacco product (*Figure 1*). While smoking remains the leading cause of preventable death in the U.S., cigarettes are still the most commonly used tobacco product among Montana adults (15%). Smokeless tobacco (chew, snuff, or snus) is also associated with numerous health problems: nicotine addiction; cancer of the mouth, esophagus, and pancreas; and increased risk of death from heart disease and stroke ² While 8% of all Montana

adults currently use smokeless tobacco, use varies significantly by gender: 13% of males currently use smokeless tobacco compared to only 1% of females.³

Figure 1 - Current tobacco product use by Montana adults, 2015-2022



Data Source: Montana Behavioral Risk Factor Surveillance Survey, 2015-2022



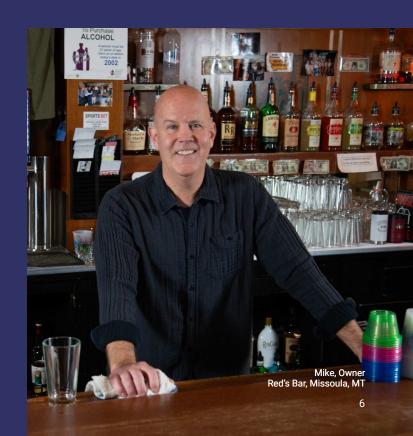
89%

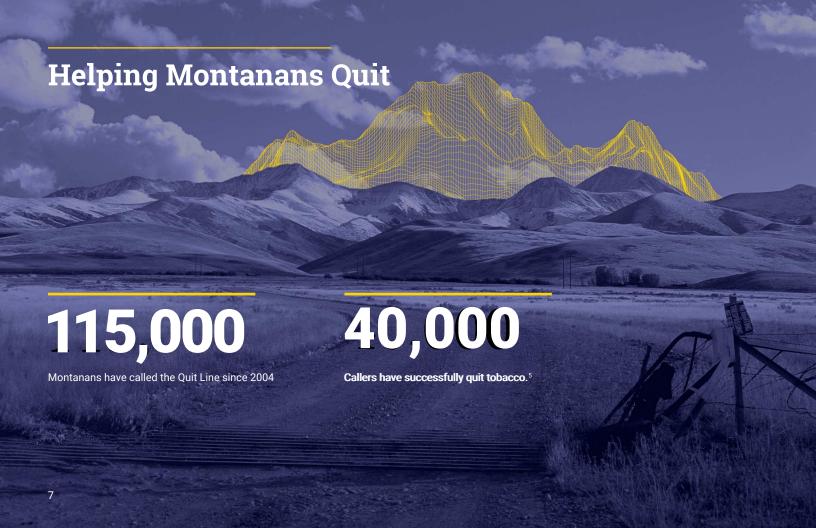
of Montana voters support the CIAA4

Montana's Clean Indoor Air Act (CIAA) has protected Montanans from secondhand smoke for almost 20 years.

Since passage of this important public health law in 2005 and full implementation in 2009, smoking has been prohibited in public indoor spaces and places of work. According to a poll conducted in 2021, 89% of Montana voters support the CIAA, with three-quarters saying they are strongly in support of the law.⁴

Although the CIAA is a huge public health success for Montanans, future implementation of exemptions for cigar bars or other consumption lounges could weaken these protections.







The Montana Tobacco Quit Line celebrated its 20th anniversary in May of 2024. To commemorate this milestone, the Quit Line got a brand-new logo and new name: Quit Now Montana. Quit Now Montana continues to be a free service for all Montanans who are ready to quit using tobacco products. This program offers free coaching with trained Tobacco Treatment Specialists, individually tailored quit plans, interactive online quit plan assistance, motivational text and email messaging, twoway online chat, personalized education materials, and free nicotine replacement therapy (patches, gum or lozenges) or cessation medication.

Quit Now Montana offers four specialized programs tailored to populations disproportionately burdened by tobacco use: the Pregnancy Program, American Indian Commercial Tobacco Program, My Life, My Quit™, and the Behavioral Health Program. More information about each program can be found throughout this report.



Disparities in the American Indian Population



Leading causes of death (number of deaths) among American Indian adults aged 45 years or older in Montana, 2018-2022

616 Heart Disease

542 Cancer

407 COVID-19

216 Liver Disease

1,305 All Other Causes

American Indians throughout Montana are disproportionately affected by the harms of commercial tobacco addiction.

Data Source: Montana Department of Public Health and Human Services, Montana Office of Vital Statistics, death data 2018-2022.

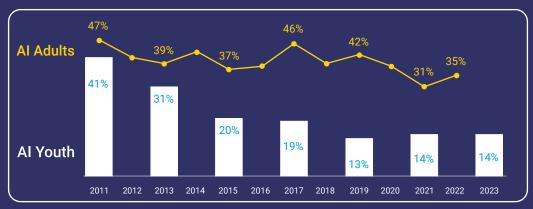


The median age at death is 60 among American Indian (AI) men and 63 among AI women. That is 15 years younger than white men and 18 years younger than white women in Montana.⁶ Heart disease and cancer are the two leading causes of death for American Indians aged 45 years and older. Both are directly related to commercial tobacco use; more than a third of American Indian adults in Montana currently smoke cigarettes.

Montana American Indian Tobacco Education Specialists (MAITES) are working to break this trend. In 2021, they developed a strategic plan and a vision statement that aims to empower American Indian communities to use culture to re-frame the understanding around commercial and traditional tobacco and to sustain the health and wellness of Indigenous people for generations to come.

Current cigarette use among American Indian youth has decreased significantly, from 41% in 2011 to 14% in 2023.

Current cigarette smoking prevalence among American Indian adults and youth in Montana



Data Source: Behavioral Risk Factor Surveillance System, 2011-2022 Youth Risk Behavior Survey, 2011-2023



To combat high cigarette smoking rates among adults, the MAITES are changing the landscape of tobacco in their communities. Community members respond favorably to storytelling, sharing ideas over food, traditional healing kits, traditional knowledge, and playing Native games. These activities allow MAITES to communicate the important differences between commercial and traditional tobacco and the harms associated with nicotine addiction from conventional cigarettes and other commercial tobacco products.

MTUPP and the MAITES partnered with Good Health and Wellness in Indian Country (GHWIC) housed under the Rocky Mountain Tribal Leaders Council to create the "Montana Indian Nations Sacred Plant Guide", which investigates the uses of indigenous plants and honors cultural history and knowledge. MAITES also hosted monthly "Tobacco Talks" on Facebook Live-stream. These talks are informal conversations among the MAITES and other tribal guest speakers across Montana on reclaiming AI tradition.

Quit Now Montana offers the American Indian Commercial Tobacco Program (AICTP), which consists of 10 free coaching calls with American Indian coaches who understand and respect the difference between traditional tobacco use and commercial tobacco addiction.

Over 500

American Indian adults have participated in the AICTP since its launch in 2015.⁷

94%

of participants in this program would recommend it to another American Indian.8



While the percentage of pregnant women who smoke in Montana is still double the national average, it has decreased significantly from 16% in 2016 to under 9% in 2022.



Data source: Montana Department of Public Health and Human Services, Montana Office of Vital Statistics, birth data 2009-2022; National Vital Statistics. birth data 2013-2022.

Since its launch in 2013,

over 540 pregnant Montanans have benefited from Quit Now Montana's Pregnancy and Postpartum Program.²⁷

Quit Now Montana offers a free program for women who want to quit tobacco while pregnant. Participants can receive \$20 for each completed coaching session while pregnant and \$30 for each completed coaching session during postpartum.

During pregnancy, the coach helps design a personal quit plan, provides helpful tools and talks about tips for staying tobacco-free after the baby is born. Participants who engaged in three or more coaching calls during pregnancy and postpartum reported quit rates of 68%.⁵



American Indian Pregnant Women

The percent of American Indian (AI) women in Montana who smoke during their pregnancy is consistently twice as high as white women. However, there has been significant progress in the past five years, with the percent of AI women who smoke during pregnancy decreasing from 29% in 2017 to 20% in 2022.9

Montana is the first and only state to offer a combined program which connects American Indian pregnant women with a dedicated female American Indian coach who respects traditional tobacco and cultural values while quitting commercial tobacco. Participants in the combined program have access to up to 14 coaching calls and \$320 in incentives.



Medicaid

90% of Montana Medicaid recipients who use tobacco are aware of Montana's tobacco quit line and more than 50% have made a quit attempt in the past year. 10



A quarter (24%) of Montana's adult Medicaid recipients currently smoke cigarettes.¹⁰

MTUPP and Montana Medicaid collaborate to ensure members are aware of and have access to cessation counseling and medications. Montana Medicaid covers all seven FDA-approved cessation medications and individual counseling. Group counseling, however, is not covered and certain providers, such as nurses and pharmacists, cannot bill for providing brief cessation interventions to patients.

MTUPP partners with Medicaid to promote Quit Now Montana to its members. Information on Quit Now Montana is included in the Montana Medicaid Member Guide and the Montana Health Care Programs Messenger, an electronic newsletter that goes out to members on a quarterly basis. MTUPP also worked with Montana Medicaid to implement a poster campaign which encouraged health care providers to talk with their patients about Medicaid cessation benefits and educated members on the ways their coverage can support their quit journey.

Behavioral Health



25% of Montana adults who use tobacco report having poor mental health compared to 14% of those who do not use tobacco.³

65% of Montana high school students who vape report having felt sad or hopeless compared to 36% of students who do not vape.¹¹

People with behavioral health conditions represent 25% of the adult population yet consume 40% of all cigarettes.¹²

Some people turn to tobacco to cope with stress, but nicotine use worsens symptoms of stress, anxiety and depression. *One in three* Montana high school students who currently use e-cigarettes said they use them because they were feeling anxious, stressed, or depressed.¹¹

People with behavioral health conditions are less successful in quitting; only 23% of participants with a behavioral health condition quit tobacco compared to 54% of participants without a behavioral health condition. Quitting can lower levels of stress, improve mood and quality of life, and increase chances of sobriety. On July 1, 2022, Quit Now Montana began offering a program staffed with specially trained coaches designed to provide extra support for those with behavioral health conditions. Over 750 individuals have opted into the program since its launch 13

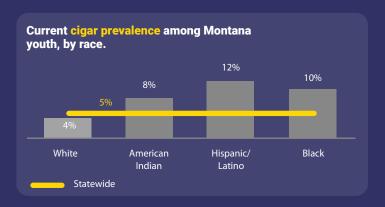
More than half of participants in Quit Now Montana report having a behavioral health condition.⁵

>50%

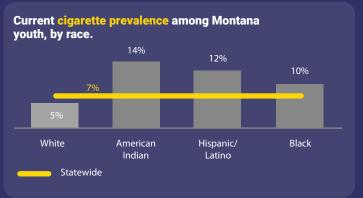


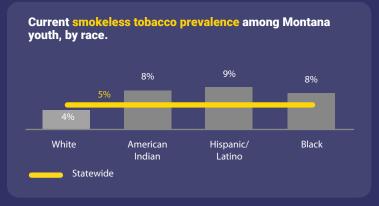
Klazina - Bozeman, MT - Quit smoking and drinking

Preventing Youth Initiation



Youth use of combustible (cigarettes and cigars) and smokeless tobacco products has been declining in Montana. However, while the statewide prevalence of these products is low, significant disparities exist among racial groups.



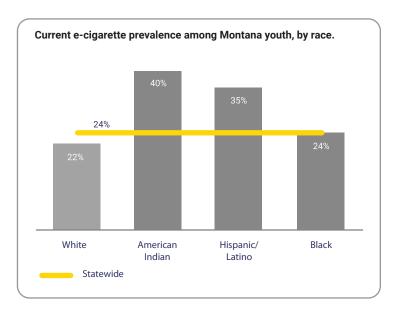


Data source: Montana Youth Risk Behavior Survey, 2023

In 2023, almost half of Montana students had tried e-cigarettes and one in four students currently used e-cigarettes.¹¹ In contrast, only 5% of Montana adults (aged 25+ years) reported current e-cigarette use in 2022.³

The number of Montana high school students who report they are "current cigarette smokers" has declined by more than 50% in the last 10 years. 18 However, e-cigarettes have taken the place of conventional smoking. E-cigarettes entered the U.S. marketplace around 2007 and, since 2015, have been the most commonly used tobacco product among youth in Montana.

Racial disparities exist among e-cigarette users; the prevalence of current e-cigarette use among American Indian youth (40%) and Hispanic/Latino youth (35%) is significantly higher than other racial groups.¹¹



Data source: Montana Youth Risk Behavior Survey, 2023

The amount of nicotine in some disposable e-cigarettes is now comparable to several cartons of cigarettes.¹⁵

Almost all (99%) e-cigarettes sold in U.S. convenience stores contain nicotine. Almost all (99%) e-cigarettes sold in U.S. convenience stores contain nicotine. Almost any form, is harmful to youth because the brain continues developing until about age 25. Nicotine exposure during adolescence harms the parts of the brain that control attention, learning, mood, and impulse control. Nicotine is a highly addictive substance, priming the brain for addiction to other drugs in the future and worsening symptoms of anxiety and depression.

Since the FDA placed flavor restrictions on pod-based e-cigarette products, like JUUL, disposable e-cigarettes, like Elf Bar, have increased in popularity and become cheaper and stronger. Between 2017 and 2022, disposable e-cigarettes sold in the U.S.:

- Quintupled in e-liquid capacity;
- Dropped in price by nearly 70%, making it easier for kids to buy; and,
- Nearly tripled in nicotine strength.

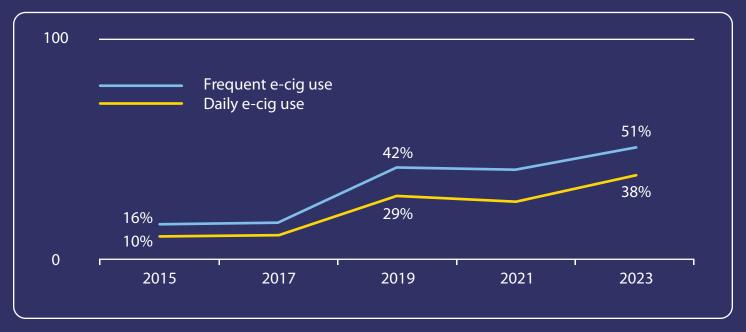
Teens who use e-cigarettes are 4x more likely to start smoking cigarettes in the future.¹⁶





Visit KnowTheFactsMT.com to learn more about youth e-cigarette use in Montana.

Vaping is addictive. Among youth who report currently using vaping products, the percent who use Frequently (20 or more of the past 30 days) and Daily has significantly increased from 2015 to 2023.



Data source: Montana Youth Risk Behavior Survey, 2015-2023

Mass-reach Media Campaigns

Between SFY22 and SFY24, MTUPP aired the "It's Not Worth It" campaign featuring real Montana teens talking about the negative impacts of vaping on mental health. The campaign promotes My Life, My Quit and ReACT. The ads have been aired on television and streaming platforms and placed on billboards, social media and radio.

In SFY24, MTUPP partnered with Good Health and Wellness in Indian Country (GHWIC) to develop a media campaign to educate parents and other adult community members on the risks associated with youth e-cigarette use. The campaign is tailored to the American Indian community; the messages, however, are relevant to a broader population. The campaign directs viewers to www.KnowTheFactsMT.com.



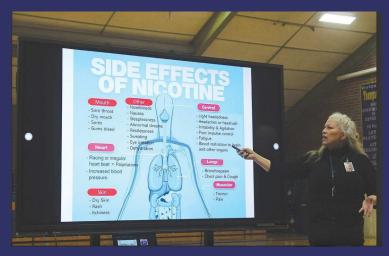


Montana Office of Public Instruction (OPI)

MTUPP maintains a Memorandum of Understanding (MOU) with OPI dedicated to tobacco prevention and education in Montana's middle and high schools. In SFY24, staff capacity at OPI's tobacco prevention program increased after adding an additional full-time member to the team. OPI staff delivered e-cigarette presentations to middle and high school staff and students across the state.

Additionally, 13 school districts received mini-grants to implement various tobacco prevention strategies, including alternative to suspension programs for students who are caught on school property with tobacco products.

During the 2022-23 and 2023-24 school years, these presentations reached a total of 11,694 students in 78 schools across Montana.



Dr. Beth Dominicis, Tobacco Use Prevention Education Specialist with OPI presenting at Thompson Falls High School.

Emerging Nicotine Products:Oral Nicotine Pouches

Oral nicotine pouches, like Zyn or Rogue, contain nicotine that is absorbed into the bloodstream through membranes in the mouth, similar to smokeless tobacco products like dip, chew, or snus. Unlike smokeless products, however, oral nicotine pouches do not contain tobacco leaf, but instead contain nicotine that is derived from tobacco in a lab or manufactured synthetically. Nicotine concentrations vary considerably across nicotine pouch brands, from zero nicotine to nearly 50mg of nicotine per pouch (roughly two times the amount of nicotine in a pack of cigarettes).¹⁷ According to a recent survey, 22% of Montanans aged 15-25 reported having tried nicotine pouches.¹⁸

While these products claim to be tobacco-free, they still contain nicotine and youth use of any form of nicotine is unsafe due to its harmful effects on the developing brain. Nicotine pouches are not taxed in Montana, do not fall under the regulations set forth in the Montana Youth Access to Tobacco Products Control Act, and are not the same as FDA-approved nicotine replacement therapy.

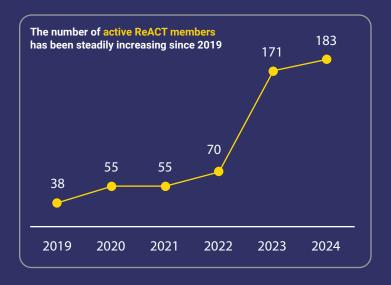
Sales of nicotine pouches have increased more than 300-fold since they entered the market in 2016, with sales rising from \$710k in 2016 to \$216 million by June 2020.¹⁹



ReACT/Youth Engagement

ReACT is a teen-led movement rejecting the culture of commercial tobacco use and upholding the sacredness of traditional tobacco through education, advocacy, and action. It provides youth and young adults the opportunity to educate, inform, promote and help build the first tobacco/nicotine-free generation in Montana. During the past two years, MTUPP has awarded 10 mini-grants across Montana to ReACT coalitions to support youth-led tobacco prevention events. The number of ReACT coalitions and members across the state has more than doubled in the past two years.

ReACT hosts an annual summer summit to increase youth leadership in tobacco education, advocacy, and action across Montana. The 2024 ReACT Summit was held in Helena over a three-day period, hosting approximately 75 participants, volunteers and supporting partners. Attendees included youth group leaders and members, Tobacco Education Specialists, and partners from around the state. Youth built connections with other youth across the state while receiving training and education.









Tobacco Warrior Summit



Annually, the American Indian Tobacco Education Specialists (TES) pool resources to fund and create a statewide youth camp.

The Tobacco Warrior Summit brings together youth ages 13-17 from the ten local areas. The summit takes place in June and rotates to a different reservation or urban location each year. These summits provide three days of cultural teachings by local elders, commercial tobacco education, leadership skills, native games, art, walks, and, most importantly, relationship building.

In 2023, the summit was hosted by the Northern Cheyenne Tribe with 80 youth in attendance and in 2024, it was hosted by the Blackfeet Tribe with over 50 youth in attendance.



Native Games at the 2023 Tobacco Warrior Summit



A 2021 multi-state evaluation of My Life, My Quit[™] found a quit rate of greater than 60% reported by program participants.²⁰

On July 1, 2019, Quit Now Montana began offering a new program for Montanans under the age of 18 who need help quitting all forms of tobacco product use, including e-cigarettes. **My Life, My Quit™** offers youth a new way to reach quit coaches using live text messaging and online chat that is 100% confidential.

Since its launch, over 200 Montana youth have participated in My Life, My Quit™.⁵



Young Adult Tobacco Use

When e-cigarettes first became a mainstream tobacco product, teenagers were the primary users. As those teens have become young adults, e-cigarettes use among 18 to 24-year-olds has also increased. Compared to adults aged 25 and older, the prevalence of e-cigarette use among young adults is now five times higher.³

MTUPP contracts with National Association of Student Personnel Administrators (NASPA) to increase awareness and educate college students and faculty about tobacco use, social norms, exposure to secondhand smoke, and the importance of tobacco-free campus policies. They work to help campuses build capacity to create, implement, and evaluate sustainable programs for prevention of chronic disease, including commercial tobacco prevention. Currently, 19 college campuses are being supported by NASPA staff with stipends, training, and technical assistance.

Current e-cigarette use among young adults in Montana has steadily increased while use among adults 25 years and older remained the same.



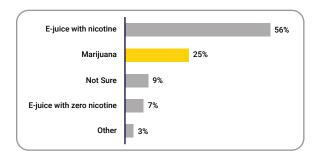
Data source: Montana Behavioral Risk Factor Surveillance System, 2015-2022.



Hot Topic: Cannabis and Tobacco

E-cigarettes are most commonly used to deliver nicotine; however, the devices can also be used to deliver marijuana and other drugs. Among Montana high school students who vaped in the last 12 months, 25% used an e-cigarette to deliver marijuana.²¹

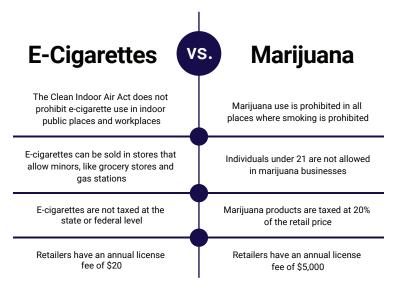
Percent of Montana high school students who used e-cigarettes to vape various substances (among those who vaped in the last 12 months).



Data source: Montana Prevention Needs Assessment, 2022.

Teens who use e-cigarettes are 20x more likely to vape marijuana than teens who do not use e-cigarettes.²²

Recreational marijuana was legalized for sale in Montana January 1, 2021, and along with legalization came various restrictions to limit youth access and exposure to marijuana products. Many of the restrictions, however, do not apply to e-cigarette devices and, therefore, leave a large gap in exposure.



Advancing Smokefree and Tobacco-free Environments

Creating smokefree and commercial tobacco-free spaces promotes community wellness. These types of policies protect youth and adults from exposure to harmful secondhand smoke, establish healthy and positive community norms, and protect our environment by reducing toxic or hazardous litter. Equally important, smokefree housing policies help limit exposure to carcinogenic third-hand smoke and reduce costly property damage.

MTUPP has successfully implemented smokefree and tobacco-free policies for public parks, community events, college campuses and multi-unit housing facilities across Montana.





Looking Forward

MTUPP is committed to promoting policies throughout Montana that aim to reduce initiation of tobacco product use among youth, encourage people who currently use tobacco products to quit, and protect nonusers from secondhand smoke and e-cigarette aerosol exposure.

Including e-cigarettes in smokefree laws

Prohibiting the use of e-cigarettes in indoor public spaces and places of work not only protects the public from exposure to secondhand e-cigarette aerosol, but it also sends a strong message to Montana youth that e-cigarette use is not safe. According to the U.S. Surgeon General, e-cigarette aerosol is not harmless. It contains addictive nicotine, heavy metals, and ultra-fine particles that have been shown to be toxic, cause cancer, and lead to heart and respiratory disease.

When the sale of recreational marijuana was legalized, Montana law was updated to prohibit use of marijuana products in places where smoking is prohibited. Use of e-cigarettes, however, is still allowed under the Montana Clean Indoor Air Act even though these devices can be used to deliver marijuana.

Increasing the price of tobacco products

According to the U.S. Surgeon General, increasing the price on cigarettes results in both a decrease in youth initiation and an increase in cessation among young adults.²³ Every 10% increase in the price of cigarettes reduces consumption by about 4% among adults and about 7% among youth.²⁴ Montana has not increased its tobacco tax since 2005 and there is currently no tax on e-cigarette products or nicotine pouches. In addition, Montana's tax on smokeless tobacco is not comparable to that of cigarettes and is low and ineffective as a deterrent.²⁵

Increasing the minimum legal sales age of tobacco products from 18 to 21

On December 20, 2019, the President signed legislation raising the federal minimum age of sale of tobacco products from 18 to 21. The law became effective immediately, making it illegal to sell tobacco products, including e-cigarettes, to anyone under the age of 21. While tobacco retailers are required to follow federal law, the minimum age of sale of tobacco products under Montana law currently remains at age 18. National public health partners urge states to align state law with the new federal law to make it easier for those trying to comply with or enforce the law.²⁶

10 localities in Montana have taken action to prohibit the use of e-cigarettes in workplaces and indoor public places, covering 36% of Montana's total population.²⁸



Sources

- Campaign for Tobacco Free Kids. The Toll of Tobacco in Montana. http://www.tobaccofreekids.org/facts_issues/ toll_us/montana. Accessed April, 2024.
- Centers for Disease Control and Prevention. Health Effects of Smokeless Tobacco. https://www.cdc.gov/tobacco/othertobacco-products/smokeless-tobacco-health-effects.html. Accessed June, 2024.
- 3. Montana Behavioral Risk Factor Surveillance System, 2022.
- American Cancer Society Cancer Action Network and American Heart Association Poll, 2021.
- National Jewish Health. Montana Tobacco Quit Line Outcomes Report, 2023.
- Montana Department of Public Health and Human Services. Montana Office of Vital Statistics, death data 2022.
- 7. National Jewish Health. Montana Tobacco Quit Line Outcomes Report, 2015 - 2023.
- 8. National Jewish Health. AICTP Evaluation Stakeholder Report, 2020.

- Montana Department of Public Health and Human Services.
 Montana Office of Vital Statistics, bi th data 2017 and 2022.
- 10. Montana Medicaid Survey, 2022.
- 11. Montana Youth Risk Behavior Survey, 2023.
- National Alliance on Mental Illness. Smoking. https://www. nami.org/about-mental-illness/common-with-mental-illness/ smoking/#:~:text=People%20with%20mental%20illness%20 or,without%20a%20mental%20health%20condition (accessed 6/24).
- National Jewish Health. Montana Tobacco Quit Line Reports, SFY2023 – SFY2024.
- Marynak KL et al. (2017) Sales of Nicotine-Containing Electronic Cigarette Products: United States, 2015. American Journal of Public Health. 107(5):702-705.
- 15. Diaz MC, Silver NA, Bertrand A, et al. Bigger, stronger and cheaper: growth in e-cigarette market driven by disposable devices with more e-liquid, higher nicotine concentration and declining prices. Tobacco Control. Published Online First: 03 August 2023.
- Sonjeli et al., Soneji S., Barrington-Trimis, J.L., Wills, T.A., Leventhal, A., Unger, J.B., et al. (2017). E-Cigarette Use and Subsequent Cigarette Smoking Among Adolescents and Young Adults: A Systematic Review and Meta-Analysis. JAMA Pediatrics.
- 17. Mallock N, Schulz T, Malke S, et al. Tob Control 2024; 33:193-199.

- 18. Montana Tobacco and Nicotine Use and Prevention Messaging Survey, 2022.
- 19. Marynak KL et al. (2021) Nicotine Pouch Unit Sales in the US, 2016-2020. JAMA. 326(6): 566-568.
- National Jewish Health. Montana Monthly Quit Line Reports, 2019-2024.
- 21. Montana Prevention Needs Assessment, 2022.
- 22. Kreski et al. (2023). Nicotine Vaping and Co-occurring Substance Use Among Adolescents in the United States from 2017–2019. Substance Use and Misuse. 58(9):1075-1079.
- 23. Centers for Disease Control and Prevention. Health System Transformation, Health Impact in 5 years, Tobacco Control Interventions. http://www.cdc.gov/policy/hst/hi5/tobaccointerventions/index.html.
- 24. Tauras JA, O'Malley PM, Johnston LD, "Effects of Price and Access Laws on Teenage Smoking Initiation: A National Longitudinal Analysis," Bridging the Gap Research, ImpacTeen, April 2001. Available at: https://impacteen.uic. edu/access.htm.
- 25. Campaign for Tobacco Free Kids. State Excise Tax Rates for Non-cigarette Tobacco Products. https://www.tobaccofreekids.org/assets/factsheets/0169.pdf.

- 26. Public Health Law Center. The New Federal Tobacco-21 Law: What it Means for State, Local, and Tribal Governments. https://www.publichealthlawcenter.org/blogs/2020-01-07/new-federal-tobacco-21-law-what-it-means-state-local-and-tribal-governments.
- 27. Montana Tobacco Quit Line Data, SFY2014 SFY2024.
- 28. United States Census Bureau, 2018 Population Estimates.

Addendum: Updated Data (October 2024)

Since the publication of this report, additional data regarding adult tobacco use have become available. This addendum presents the updated data to provide the most current information.

Page 1:

· Number of Montana adults who smoke - 108,317 (BRFSS, 2023)

Page 4:

- Current tobacco product use by Montana adults 23% (BRFSS, 2023)
- Current cigarette use by Montana adults 12% (BRFSS, 2023)
- Current smokeless tobacco use by Montana adults 6% (BRFSS, 2023)
- Current e-cigarette use by Montana adults 8% (BRFSS, 2023)
- Current smokeless tobacco use by Montana adult males 11% (BRFSS, 2023)
- Current smokeless tobacco use by Montana adult females 2% (BRFSS, 2023)

Page 11:

Current cigarette use by American Indian adults in Montana – 25% (BRFSS, 2023)

Page 19:

- Current cigarette use by American Indian adults in Montana 25% (BRFSS, 2023)
- Adult tobacco users in Montana with poor mental health 29% (BRFSS, 2023)
- Adult non-tobacco users in Montana with poor mental health 15% (BRFSS, 2023)

Page 33:

- Current e-cigarette use by Montana adults age 18-24 years 22% (BRFSS, 2023)
- Current e-cigarette use by Montana adults age 25+ years 6% (BRFSS, 2023)

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Quit Now Montana



Know the Facts



