

Messaging Harm Reduction for Smoking Cessation

A practical approach for meaningful conversations with decision makers.

Developed by the Network for Principled Nicotine Policy

The following is a recommended general guide for conversations with policymakers, health professionals and the media. For additional support, including citations for any statements below, refining messages for specific audience, or rehearsing for upcoming conversations, reach out to jeff.willett@nicotinepolicyhub.org.

Begin with your shared concern for youth.

- Keep in mind that protecting youth from nicotine use is likely the most important consideration for your audience.
- Stress that youth should not use any nicotine products.
- Speak to what you and/or your organization have done to protect youth from tobacco use.
- Mention that rates of youth nicotine use in the United States are at historic lows because existing policy and education efforts have been successful.

Transition to the incredible unmet need.

- Stress that keeping rates of youth use low is essential but emphasize we can **continue protecting youth while better supporting adults** who want to quit smoking.
- Today, there are roughly 30 million American adults who smoke cigarettes.
- Smoking and exposure to secondhand cigarette smoke still kills nearly 500,000 Americans every year.
- Most people who smoke want to quit, and half of those who smoke try to quit each year. However, despite the incredible demand for smoking cessation, few people can quit successfully through prevailing public health and medicinal approaches.
- The disease burden of cigarette smoking is now concentrated in specific communities.

- Speak to the disease burden on the communities your audience cares about:
 - Lower-income adults
 - Older adults
 - Adults who experience substance use disorders
 - Adults who experience mental health challenges
 - Veterans
 - LGBTQ+ community

Describe Science and Regulation.

- To protect public health, Congress gave FDA regulatory authority over tobacco products. The FDA is charged with two primary outcomes:
 - addressing the use of tobacco by young people, and
 - promoting cessation to reduce disease risk and the social costs associated with tobacco-related diseases.
- FDA has determined there is a continuum of risk for tobacco products with combustible products like cigarettes posing the greatest risk, and independent research shows that noncombustible tobacco products, including e-cigarettes and nicotine pouches, pose substantially less risk than cigarettes.
- Cigarette smoking is responsible for **nearly all** of the 500,000 tobacco-related deaths in the United States each year.
- FDA conducts thorough reviews of new tobacco products, including product chemistry and toxicologic reviews, the likelihood that adult cigarette smokers will transition to them, and their likely appeal to youth.
- After years-long reviews, the FDA has determined several new tobacco products meet a “public health standard” and pose greater public health benefits for adults who would switch to them than pose risks from youth initiation.
- Independent research shows that use of e-cigarettes is at least as effective in smoking cessation compared to use of medicinal therapies, such as nicotine patches and gum.
- Compared to medicinal nicotine replacement therapies which few people use for smoking cessation, millions of American adults are choosing lower-risk nicotine products to transition away from cigarettes.



Ask for their support.

Your audience is health professionals

- Health professionals should assess their ability to enhance support for people who want to quit smoking by: a) expanding medication management for use of smoking cessation medications, and b) expanding behavioral support, including periodic follow-up care.
- Health professionals should familiarize themselves with the FDA's tobacco regulatory framework and the list of reduced-risk nicotine products that have met FDA's public health standard.
- For patients who cannot or will not quit smoking using other means, including medicinal therapies, health professionals should advise their patients to consider using FDA-authorized nicotine products, instead of combustible cigarettes, to reduce their health risks.

Your audience is public policymakers

- Public policy should balance the need to protect youth from tobacco products while ensuring more adults either quit tobacco use entirely or significantly lower their risks by transitioning away from cigarettes.
- Public policy should ensure that all FDA-authorized reduced-risk nicotine products are legally available for adults who want to quit smoking and ensure reduced-risk products are taxed at lower rates than combustible cigarettes.
- Policymakers should ensure that efforts of publicly funded tobacco control programs are aligned with the science regarding the nicotine product continuum of risk and these programs place greater emphasis on quickly reducing the death and disease caused by adult cigarette use.

Your audience is the media

- Misperceptions regarding the harm caused by nicotine itself, and reduced-risk nicotine products generally, are prevalent and journalists can play a key role in correcting them.
- People who smoke cigarettes, policymakers and health professionals who significantly overestimate the harm of nicotine are less likely to make decisions that improve public health.
- Balanced coverage of these issues, reflecting credible science and providing unbiased counterpoints to anti-nicotine dogma, is aligned with journalism's core principles.

