

ADVOCACY AND POLICY



Advocacy and Policy

The South Carolina state legislature, public health groups, and the research and medical communities have a legacy of collaboration on cancer prevention and care. An example of this collaboration is the funding passed in June 2005 that ensured cancer treatment for indigent women with breast and cervical cancer. During some of the leanest years in budget history, bi-partisan legislators have worked to find ways to put funding in place for cancer care. Now, through the membership and leadership of the South Carolina Cancer Alliance, we have the potential to accomplish even more.

The South Carolina Cancer Alliance provides a voice for the diverse group of individuals and organizations working to fight cancer in South Carolina. In addition to the key role of partnership and collaboration, the SCCA works to provide consistent, reliable information on cancer; to translate cancer data into everyday terms that can be used by policy makers, community leaders, and the media; and to make this information available to everyone in South Carolina through its website. This ranges from health care economics, to the toll of cancer on human lives, to recognition of the incredible community-based work being done all around this state to fight cancer.

Cancer continues to take the lives of more South Carolinians than any disease besides heart disease, and we can do more to fight back. The loss of the State Aid Cancer Program has left thousands of South Carolinians without resources for cancer treatment. Reducing the terrible cost of tobacco use is another central goal of the SCCA:

- South Carolina's youth tobacco rates are among the highest in the nation. An alarming 36% of high school students in South Carolina use tobacco, and more than 11,000 kids become new daily smokers each year (CTFK, 2005).
- South Carolina ranks 51st in the nation in funding for tobacco prevention (CTFK, 2005).
- South Carolina's current tobacco tax rate is the lowest in the entire nation – even though the majority of South Carolinians support an increase.

Tobacco policy is not a simple issue in states like South Carolina, with deep historical roots in tobacco production. Yet other tobacco-growing states, with equally strong traditions, have found ways to bridge their ties to the past with innovative policy-making. These states have worked to support family farmers, provide decent health care for their citizens, and fund prevention programs for tobacco at the same time.

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South Carolina currently has the lowest cigarette tax of the six tobacco-growing states. Previous attempts to pass legislation to increase this tax have not met with success. But South Carolina public opinion polls show that this legislative policy does not reflect the will of the people of South Carolina. An overwhelming majority of South Carolinians, 77 percent, supports a substantial increase in cigarette taxes to fund health care. This public support cuts across racial, political and geographic lines (State Newspaper, 2003).

There is good cause for this public support: increased cigarette taxes have been shown to reduce youth smoking, reduce health care costs and raise state revenues. Yet South Carolina's tax rate is only 7 cents per package, far below the national average of 85 cents per package.

South Carolina can do better. The SCCA, in partnership with the SC Tobacco Collaborative and its organizational members, will continue to work with the SC State Legislature to enact a reasonable tax rate for tobacco products in South Carolina. The SCCA will also promote policies that ensure tobacco settlement funds are allocated to preventing tobacco use and reducing the devastating cost of cancer to our state.

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Objective 1. To secure sustained legislative support to extend Medicaid coverage for treatment of breast and cervical cancer to all indigent women in South Carolina. Through the collaborative efforts of the SCCA, this objective was achieved for FY2006-2007.

Strategy 1. Educate key legislators and program officials to maintain support for the coverage.

Objective 2. By June 2007, secure legislative support to extend Medicaid coverage for screening, early detection, and treatment of colorectal cancer to indigent persons.

Strategy 1. Research the experiences of other states on obtaining Medicaid coverage; develop a briefing paper on issue.

Strategy 2. Educate key legislators and program officials to gain support for the coverage.

Strategy 3. Explore option of using tobacco tax increase (excise/sales tax) and/ or Tobacco Settlement funds for the required state match.

“Many of the most important cancer decisions are made not just in the doctor’s offices, but also in state houses... Government officials make decisions everyday about health issues that affect people’s lives. Laws and policies can fund cancer research, ensure access to care, offer prevention, early detection and quality cancer care to the medically underserved and reduce suffering from tobacco-related illnesses.”
American Cancer Society, 2005

Objective 3. By June 2007, increase insurance coverage (public and private) for breast/ cervical, colorectal, and prostate cancer screening by 15%.

Strategy 1. Work with insurance commission officials, key legislators and staff to promote changes in regulation/s/policies to increase cancer screening coverage.

Strategy 2. Support and work with partners to launch a media campaign to promote support for increased coverage.

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Objective 4. By June 2006, increase the SC sales tax on cigarettes to \$1.00 per pack.

Strategy 1. Develop and implement/disseminate a plan to educate and inform SC citizens regarding the rationale for increased user's fees (sales tax) on tobacco products.

Strategy 2. Publicize research findings supporting tax increase as an effective tool for preventing youth smoking.

Strategy 3. Ensure that the SC Department of Education collect/ secure data regarding youth behavior via Youth Risk Behavior Surveillance Survey (YRBSS); recruit a Department of Education representative for SCCA.

Strategy 4. Conduct town meetings at four targeted locations in SC to promote the increase in sales tax on cigarettes.

Strategy 5. Gain support of the necessary number of legislators to support tax increase to ensure passage.

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(from report)

Objective 5. By 2008, ensure that 25% of SC Tobacco Settlement funds and tobacco sales tax is earmarked for comprehensive cancer control.

Strategy 1. Mobilize cancer control advocates to educate and inform legislators and staff.

Strategy 2. Gain understanding of how these funds are currently committed.

Strategy 3. Recruit SCCA members to visit with key legislators and staff to provide briefings, education, and information on the benefits of a tax increase.