

FACTS

Tobacco: No Minor Issue

Raising the Minimum Sale Age to 21

OVERVIEW

Tobacco use continues to be a significant public health concern and a leading cause of preventable death in the US. Though we have made some great strides, nearly 25% of high school students still report using tobacco products, and the U.S. Surgeon General estimated that nearly 6 million children will die prematurely in adulthood if current trends continue.^{1,2,3,4} Further, in 2013, 2.1 million people smoked cigarettes for the first time, half of new smokers initiated under the age of 18.⁵ In fact, nearly 90% of smokers begin before age 18, and 95% begin before turning 26.⁶

Because of the addictive nature of nicotine, experimentation or initiation of tobacco use among youth and young adults is particularly troubling. This is a critical period for growth and development, one during which the brain may be especially susceptible and sensitive to the effects of nicotine.^{7,8} Increasing the minimum legal sale age (MLSA) for tobacco products to 21 would reduce our youth's access to, and use of, tobacco products.

UNDER 21: NO TOBACCO



Setting the MLSA at 21 would prohibit retailers from selling tobacco products to anyone under that age. The Tobacco to 21 Act (S. 2100/H.R. 3656) has recently been introduced in Congress, which would raise nationwide the minimum legal age of sale for tobacco products to 21.⁹ Additionally, as of September 2015, over 90 localities in eight states have raised the MLSA to 21,

including New York City, which in November 2013 became the first major city in the U.S. to raise its tobacco sales age to 21.^{10,11} Recently, Hawaii became the first state to raise the MLSA to 21.¹²

Raising the MLSA to 21 would target the age range at which many habitual smokers consume their first cigarette.⁶ Further, it would combat the tobacco industry's desire to attract a new, loyal generation of users and to re-engage those who have already quit.^{13,14}

TOBACCO MARKETING TO YOUTH

Though they are legally prohibited from marketing some tobacco products to youth under the age of 18, tobacco

companies still use a range of additional advertising tactics to appeal to a new generation of potential smokers.^{6,15,16} The tobacco industry has historically zeroed in on children with the marketing of flavored/sweet cigarettes and placing advertisements at a low height to be more easily seen by children.¹³ The industry also has recently begun heavily marketing e-cigarettes to children. From 2011 to 2014, the percentage of 12th-grade students who had ever used an e-cigarette increased from 4.7 to 17.2 percent.¹⁷ For the first time, more teenagers are using e-cigarettes than smoke cigarettes.^{17,18} Also:

- Tobacco advertising often uses imagery of social acceptance and popularity to make tobacco use appealing to youth and young adults.¹³
- Depictions of smoking in the movies is correlated with smoking initiation among young people.^{19,20}
- The tobacco industry promotes smoking at bars and clubs so that it will be viewed as a normal part of a healthy social life.²¹

TOBACCO: KILLING OUR FUTURE

Tobacco use has deadly consequences for our youth:

- Early signs of heart disease and stroke are found in young people who smoke.⁶
- Of every 3 young smokers, one will eventually die of a smoking-related illness or disease.²²
- The U.S. Surgeon General estimated that each year from 2009 to 2012, smoking-attributable health care costs were between \$289 billion and \$333 billion.⁴

WHY 21: THE EVIDENCE

Evidence shows that nicotine dependence and smoking intensity are strongly correlated with younger ages of smoking initiation.^{6,23} In other words, the younger people are when they smoke their first cigarette, the more likely they will be a smoker for life. Furthermore, some research suggests that adolescent smokers may experience more difficulty in quitting compared with adult smokers.²⁴

In 2015, the Institute of Medicine released a report that modeled the myriad of public health benefits for raising the MLSA.²⁵ Notably, the report concluded that raising the MLSA to 21 would decrease tobacco use by 12% and lead to:²⁵

- Nearly 225,000 fewer premature deaths.²⁵
- Nearly 50,000 fewer deaths from lung cancer.^{25,25}
- Almost 300,000 fewer pre-term births.²⁵

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- 4.2 million fewer years of life lost for those born between 2000 and 2019.²⁵
- Less of a likelihood that adolescents will have peer group members who over the MLSA.²⁵

Raising the MLSA to 21 is further supported by the success of the precedent-setting measure that established 21 as minimum legal age for purchasing and consuming alcohol. As a result of the states raising the drinking age to 21, studies have reported that binge drinking among high school seniors decreased by nearly 25%, fatal automobile accidents caused by youth drunk driving decreased by nearly 60%, and over 20,000 lives have been saved.^{26,27}

THE ASSOCIATION ADVOCATES

- The American Heart Association advocates for policies at the federal, state and local levels that prohibit the sale of all tobacco products, including e-cigarettes, to anyone under the age of 21.

¹ Holford, TR, et al. (2014). Tobacco control and the reduction in smoking-related premature deaths in the United States, 1964-2012. *Journal of the American Medical Association*, 311(2), 164-171

² Mozaffarian D, et al; on behalf of the American Heart Association Statistics Committee and Stroke Statistics Subcommittee. (2014). Heart disease and stroke statistics—2015 update: A report from the American Heart Association. *Circulation* 131, e01–e294.

³ Centers for Disease Control and Prevention (2014). Youth Risk Behavior Survey. Retrieved from: <http://www.cdc.gov/healthyouth/data/yrbs/results.htm>. Accessed on November 3, 2015.

⁴ Centers for Disease Control and Prevention. (2014). The Health Consequences of Smoking—50 Years of Progress: A Report of the Surgeon General. Retrieved from: <http://www.surgeongeneral.gov/library/reports/50-years-of-progress/full-report.pdf> Accessed on November 3, 2015.

⁵ Substance Abuse and Mental Health Services Administration. Results from the 2012 National Survey on Drug Use and Health: summary of national findings and detailed tables. <http://www.samhsa.gov/data/sites/default/files/NSDUHresultsPDFWHTML2013/Web/NSDUHresults2013.pdf> Accessed on November 3, 2015.

⁶ Centers for Disease Control and Prevention. (2012). Preventing Tobacco Use Among Youth and Young Adults: A Report of the Surgeon General. Retrieved from: <http://www.surgeongeneral.gov/library/reports/preventing-youth-tobacco-use/full-report.pdf>. Accessed on November 3, 2015.

⁷ Chambers RA, et al. (2003). Developmental neurocircuitry of motivation in adolescence: a critical period of addiction vulnerability. *American Journal of Psychiatry*. 160(6):1041–52.

⁸ Ferber, HJ. (2015). AAP releases multiple policies to protect youths from tobacco, nicotine. AAP News. Retrieved from: https://www2.aap.org/richmondcenter/pdfs/AAPNews_Oct2015_TobPolicies_SOTCo.pdf Accessed on December 2, 2015.

⁹ Tobacco to 21 Act, S. 2100, 114th Congress (2015) Medicine, Public Health Implications of Raising the Minimum Age of Legal Access to Tobacco Products (2015), available at <http://www.iom.edu/Activities/PublicHealth/TobaccoMinimumAge.aspx>.

⁹ New York City, N.Y., Local Laws No. 94-2013 (Nov. 19, 2013), <http://legistar.council.nyc.gov/LegislationDetail.aspx?ID=664290&GUID=4223E26A-7F3F-4B7D-9E3A-0E3F7B850155&Options=ID|Text|&Search=minimum+legal+smoking+age>

⁹ S.B. 1030 SD1 HD2, 28th Leg. (Haw. 2015), http://www.capitol.hawaii.gov/measure_indiv.aspx?billtype=SB&billnumber=1030&year=2015.

⁹ Calculated based on data in the National Survey on Drug Use and Health, 2013, <http://www.icpsr.umich.edu/icpsrweb/SAMHDA/>.

⁹ Ling, PM, et al. (2002). Why and How the Tobacco Industry Sells Cigarettes to Young Adults: Evidence From Industry Documents. *American Journal of Public Health*, 92(6):908 – 916.

⁹ Ling, PM, et al. (2004). Tobacco Industry Research on Smoking Cessation: Recapturing Young Adults and Other Recent Quitters. *Journal of General Internal Medicine*, 19:419 – 426.

¹⁰ Tobacco Twenty-One (website containing list of all tobacco communities with MLSA of 21) (last accessed October 21, 2015), available at <http://tobacco21.org>. Institute of Medicine, Public Health Implications of Raising the Minimum Age of Legal Access to Tobacco Products (2015), available at <http://www.iom.edu/Activities/PublicHealth/TobaccoMinimumAge.aspx>.

¹¹ New York City, N.Y., Local Laws No. 94-2013 (Nov. 19, 2013), <http://legistar.council.nyc.gov/LegislationDetail.aspx?ID=664290&GUID=4223E26A-7F3F-4B7D-9E3A-0E3F7B850155&Options=ID|Text|&Search=minimum+legal+smoking+age>

¹² S.B. 1030 SD1 HD2, 28th Leg. (Haw. 2015),

http://www.capitol.hawaii.gov/measure_indiv.aspx?billtype=SB&billnumber=1030&year=2015.

¹³ Ling, PM, et al. (2002). Why and How the Tobacco Industry Sells Cigarettes to Young Adults: Evidence From Industry Documents. *American Journal of Public Health*, 92(6):908 – 916.

¹⁴ Ling, PM, et al. (2004). Tobacco Industry Research on Smoking Cessation: Recapturing Young Adults and Other Recent Quitters. *Journal of General Internal Medicine*, 19:419 – 426.

¹⁵ NAAG (National Association of Attorneys General). 1998. Master settlement agreement. Retrieved from: <http://publichealthlawcenter.org/sites/default/files/resources/master-settlement-agreement>. Accessed on November 4, 2015.

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¹⁷ Johnston, L. D., et al. (2014). Use of alcohol, cigarettes, and number of illicit drugs declines among U.S. teens. University of Michigan News Service: Ann Arbor, MI. Retrieved from: <http://www.monitoringthefuture.org/data/14data.html#2014data-cigs>. Accessed on November 4, 2015.

¹⁸ Centers for Disease Control and Prevention (2013). Notes from the field: Electronic cigarette use among middle and high school students—United States, 2011–2012. *Morbidity and Mortality Weekly Report*, 62(35).

¹⁹ Song AV, et al. (2007). Smoking in movies and increased smoking among young adults. *Am J Prev Med*. 33(5):396-403.

²⁰ National Cancer Institute. The Role of the Media in Promoting and Reducing Tobacco Use. Tobacco Control Monograph No. 19. Bethesda, MD: U.S. Department of Health and Human Services, National Institutes of Health, National Cancer Institute. NIH Pub. No. 07-6242, June 2008.

²¹ Gilpin, E. A., et al. (2005). How effective are tobacco industry bar and club marketing efforts in reaching young adults? *Tob Control* 14(3): 186-192.

²² Centers for Disease Control and Prevention. (1996). Projected Smoking-Related Deaths Among Youth—United States, MMWR 45(44):971-974.

<http://www.cdc.gov/mmwr/PDF/wk/mm4544.pdf>

²³ Buchmann, A. F, et al. (2013). Early smoking onset may promise initial pleasurable sensations and later addiction. *Addiction Biology* 18(6):947–954

²⁴ Curry, S. J., et al. (2009). Therapy for specific problems: Youth tobacco cessation. *Annual Review of Psychology* 60:229–255.

²⁵ Institute of Medicine, Public Health Implications of Raising the Minimum Age of Legal Access to Tobacco Products (2015), available at <http://www.iom.edu/Activities/PublicHealth/TobaccoMinimumAge.aspx>. Accessed on November 5, 2015.

²⁶ Wagenaar, AC, et al. (2002). Effects of Minimum Drinking Age Laws: Review and Analyses of the Literature from 1960 to 2000. *J Stud Alcohol*, Supplement No. 14: 206-225.

²⁷ Kindelberger, J, Calculating Lives Saved Due to Minimum Drinking Age Laws, National Highway Traffic Safety Administration (NHTSA), March 2005.