march of dimes[•]



Restricting Tobacco Access to Age 21

According to the Institute of Medicine, roughly ninety percent of adult smokers began smoking during their teenage years.¹ Increasing the minimum age of access can have significant public health benefits for women, children, infants and families by delaying the age at which people begin smoking.

The Effects of Tobacco Use on Maternal and Child Health

Both smoking and exposure to secondhand smoke raise the risk for a wide range of negative pregnancy outcomes for women of childbearing age, pregnant women, and their babies.² Smoking directly affects fetal growth and increases the risk of a baby being born preterm or at low birthweight. According to the 2014 Surgeon General's report, 100,000 babies have died in the last 50 years from sudden infant death syndrome, complications from prematurity, complications from low birthweight or other pregnancy problems resulting from parental smoking.

An estimated \$122 million per year is spent each year on neonatal health care costs attributable to maternal smoking.³

Restrictions on Youth Access to Tobacco Products

In 2009, Congress enacted the Family Smoking Prevention and Tobacco Control Act, which set the "floor" of 18 years old as the minimum age of legal access to tobacco products (MLA), with a provision allowing states and localities to raise the age.

Across the United States, youth access laws and their implementation and enforcement vary. Currently, most states set the MLA at 18 years old, while four states set it at 19, New York City and several other localities around the country have raised the MLA to 21, and Hawaii is the first state to raise it to age 21.

The Institute of Medicine report, *Public Health Implications of Raising the Minimum Age of Legal Access to Tobacco Products*, predicts that raising the minimum age for the sale of tobacco products to 21 will, over time, reduce the smoking rate by about 12 percent and smoking-related deaths by 10 percent, which translates into 249,000 fewer premature deaths, 45,000 fewer deaths from lung cancer, and 4.2 million fewer years of life lost.

The March of Dimes supports raising the minimum legal age of access to tobacco to age 21.

Key Points

- Tobacco use remains the leading cause of preventable death in the United States, killing more than 480,000 people each year.¹
- For pregnant women, smoking can result in adverse maternal, fetal, and infant outcomes including preterm birth, low birthweight, and sudden infant death.²
- Roughly 90 percent of adult smokers begin smoking before they turn 21.¹
- In June 2015, Hawaii became the first state to raise the tobacco sale age to 21.
- Raising the minimum age for the sale of tobacco products to 21 will, over time, reduce the smoking rate by about 12 percent.¹
- Increasing the minimum age of legal access to tobacco products will likely prevent or delay initiation of tobacco use by adolescents and young adults.¹

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The March of Dimes is a national voluntary health agency whose volunteers and staff work to improve the health of infants and children by preventing birth defects, premature birth and infant mortality. Founded in 1938, the March of Dimes funds programs of research, community services, education and advocacy. For the latest resources and information, visit **marchofdimes.org** or **nacersano.org**. ¹Public Health Implications of Raising the Minimum Age of Legal Access to Tobacco Products. Institute of Medicine. March

2015. ²Smoking Cessation During Pregnancy. ACOG Committee Opinion No. 316. American College of Obstetricians and Gynecologists. 2005.

³Adams EK, et al. 2001. "Infant Delivery Costs Related to Maternal Smoking: An Update." *Nicotine and Tobacco* Research.13 (8): 627-637.