



THE OHIO STATE UNIVERSITY

COLLEGE OF PUBLIC HEALTH

RUNNING THE NUMBERS

Raising the minimum tobacco sales age to 21 will reduce tobacco use and improve public health in Franklin County, Ohio

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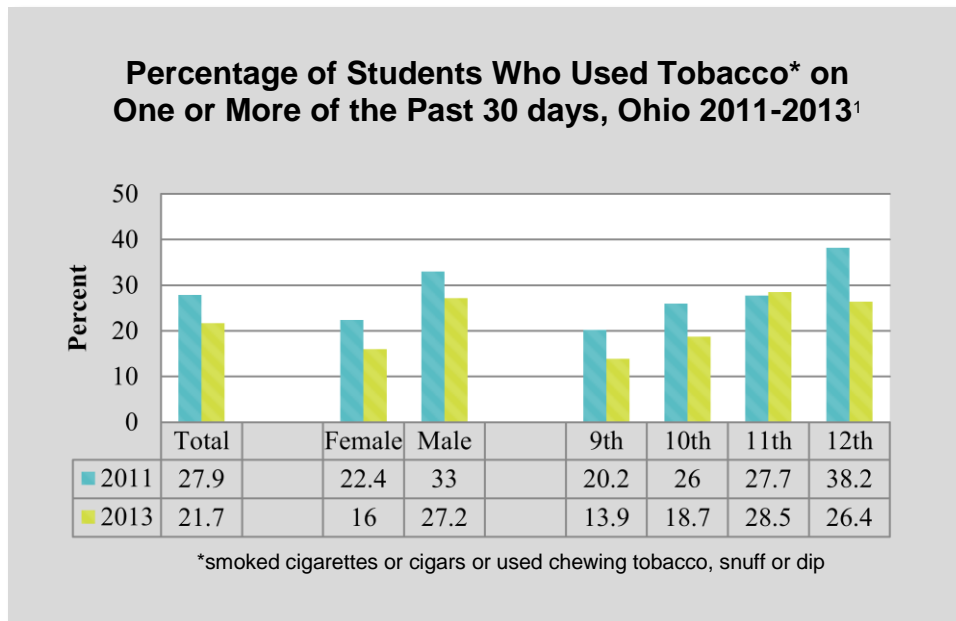
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Raising the minimum tobacco sales age to 21 is an effective way to reduce youth tobacco use and prevent lifelong addiction.

For the reasons discussed below, increasing the minimum sales age to 21 is one of the most powerful measures a community can take to protect its youth from a lifetime of addiction to tobacco.

If current trends continue, 259,000 Ohio youth alive today will die from tobacco use.

Despite progress in reducing tobacco use, youth tobacco use rates in Ohio and Franklin County remain high. In 2013, more than one in five Ohio high school students – and more than one in four juniors and seniors – reported using some form of tobacco during the past 30 days.¹



Nearly all adult smokers began smoking by the age of 18 – almost no one starts smoking after 21. The U.S. Surgeon General has referred to tobacco use as a “pediatric epidemic,” because most tobacco use starts in the high school years. Of those who begin smoking as youth, 80 percent will smoke into adulthood because of the powerful effects of nicotine, and one-half of adult smokers will die prematurely from tobacco-related diseases.²

Tobacco use in the teenage years has long-term consequences.

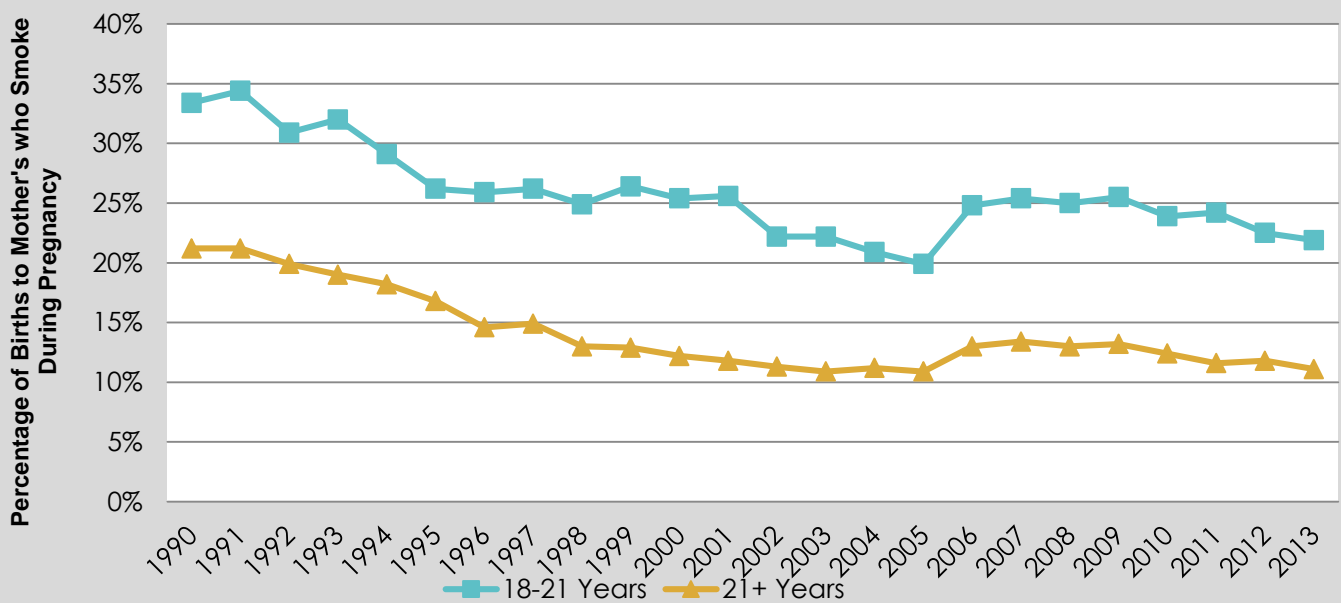
The teenage brain is particularly susceptible to nicotine addiction. Beginning smoking at a young age increases the risk of long-term addiction to tobacco and to other drugs and makes quitting more difficult. Lung cancer and other smoking-related diseases are more common among those who begin smoking as teens.²

Impact on Infant Mortality

There is a significant link between teen smoking and infant mortality in Franklin County.

The infant mortality rates in Franklin County and Ohio are well above the national average,³ and smoking during pregnancy causes premature birth, birth defects, and other risk factors for infant death.⁴ In Franklin County, 22 percent of women age 18-21 smoke during pregnancy, which is twice the rate of smoking during pregnancy for those over 21.⁵

Smoking During Pregnancy by Mother's Age, Franklin County, 1990-2013⁵



The tobacco industry spends more than \$1 million every day marketing its products in Ohio.⁶

The tobacco industry knows that recruiting new “replacement smokers” is key to its survival.⁷ The industry’s marketing causes kids to start smoking and continue smoking. Ohio spends less than nearly any other state to counter this barrage of tobacco advertising.⁸

Raising the tobacco sales age can help reduce racial and ethnic disparities.

Studies show that nonwhite young adults, particularly African Americans, are more likely than non-Hispanic white young adults to start smoking after turning 18.⁹ In particular, greater percentages of African Americans report beginning to smoke at ages 18, 19, and 20.¹⁰ Raising the legal purchasing age to 21 may therefore help to reduce smoking-related health disparities.

“Tobacco 21” is a policy approach that is catching on nationally.

Increasing the tobacco sales age to 21 is a promising strategy that can help to delay tobacco use until after high school – at which point initiation is substantially less likely to occur.⁴ Currently, 58 communities in seven states – from New York City to Hawaii – have acted to protect their kids by raising the tobacco sales age. Virtually all of these communities have included *all* forms of nicotine delivery (with the exception of FDA-approved cessation therapies) in their legislation.¹¹

THE EVIDENCE

Raising the minimum age for tobacco sales to 21 is a policy option supported by many different types of evidence.

Biological

A legal age of 18 is out of touch with current scientific data on brain development and addiction in adolescents. Biologically, adolescents are particularly vulnerable to long-term neurological harm. Because of the impact of nicotine on brain development, adolescent tobacco use leads to heavier daily consumption, stronger nicotine addiction, and more difficulty quitting tobacco use later in life.^{12,13,14,15,16,17,18}

Social Factors

Teen smoking is driven by sales to 18- to 20-year-olds. High school students get tobacco primarily from social sources (their friends) – but these social sources purchase them legally in stores. Currently, 90 percent of those who supply cigarettes to minors are themselves under the age of 21.¹⁹ Raising the minimum sales age to 21 puts legal purchasers outside the social circle of most high school students.

Social pressure to smoke and the urge to engage in risky behaviors decreases after the teenage years. Youth who have not fully developed their capacity for self-control should not be put at risk for a deadly, lifelong addiction. If tobacco use can be delayed beyond the age of 21, it is much less likely to occur.⁴

A legal age of 21 makes it much more difficult for 16- and 17-year-olds to purchase tobacco. Although most youth tobacco use results from *legal* sales to older youth, illegal sales to 16- and 17-year-olds also contribute to the problem.²⁰ Even if not fully effective at preventing purchases by those under age 21 (no law is perfectly enforced), raising the tobacco sales age to 21 would undoubtedly make it more difficult for younger teens to engage in illegal tobacco purchases.

Alcohol Sales Age

Raising the alcohol sales age to 21 resulted in reduced alcohol use by youth. When most states raised their sales age for alcohol to 21 in the 1980s, alcohol use, daily drinking, and binge drinking all dropped by more than a third among high school seniors. Deaths caused by drunk drivers under the age of 21 also fell significantly.^{22,23,24,25}

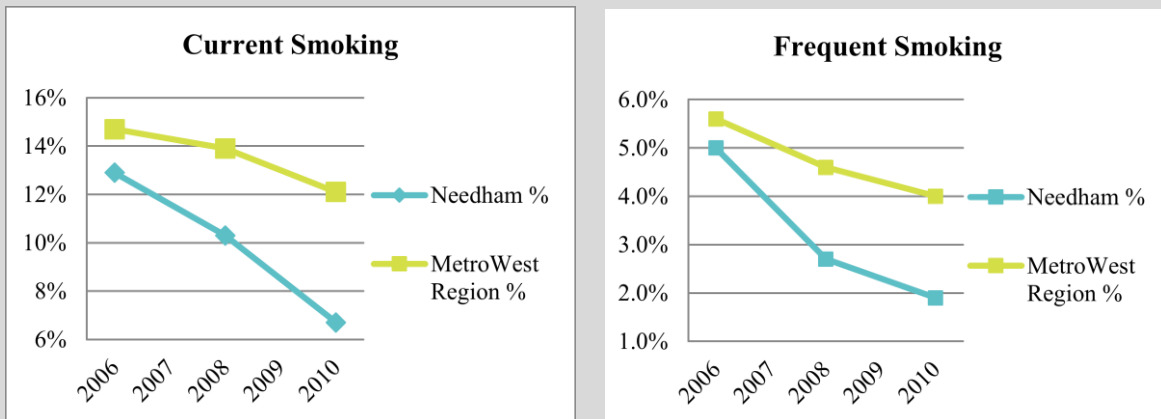
From the Tobacco Industry's Own Files

The tobacco industry knows that Tobacco 21 laws will be effective. In 1982, an R.J. Reynolds researcher stated, "If a man has never smoked by age 18, the odds are three-to-one he never will. By age 21, the odds are twenty-to-one."²⁶ In 1986, a Philip Morris strategist wrote in a confidential memo that "[r]aising the legal minimum age for cigarette purchase to 21 could gut our key young adult market (17-20)."²⁷ The industry will lobby against raising the tobacco sales age to 21 because it knows that such laws threaten its ability to recruit new customers.

Other Communities

Needham, Massachusetts saw a significant decrease in youth smoking after raising its tobacco sales age to 21. In 2005, Needham, Massachusetts became the first city in the U.S. to increase its tobacco sales age to 21. Data from Needham show a dramatic decline in youth smoking after the law was put in place. Current tobacco use among high school students dropped almost in half, and the rate of frequent tobacco use fell by 62 percent. Tobacco use among high school students fell significantly faster in Needham than in the sixteen surrounding suburbs.²¹

MetroWest Adolescent Health Surveys 2006-2010 – High School Smoking²¹



The Needham experience suggests that raising the tobacco sales age is effective, even if surrounding communities do not make the same change.

Needham's Tobacco 21 law effectively blocked the social sources that had been providing tobacco to Needham's high school students. Even without similar laws in place in surrounding communities, the law had a dramatic impact.

Addressing Concerns

The economic impact would be minimal. Sales to those under 21 account for only 2 percent of total cigarette sales.²⁸ Relatively few cigarettes are sold to those under 21, but those cigarettes are the ones that set Ohio teens on a path to lifelong addiction.²

Increasing the sales age will have a significant impact on public health, while the impact on tobacco retailers will be minimal. Moreover, raising the tobacco sales age to 21, equal to that of alcohol, will provide clerks with a uniform birth date reference when checking identification.

Sales will not shift to other cities. Opponents claim that the law will be ineffective because people will travel to other cities to purchase tobacco. A large amount of research demonstrates, however, that when customers need to travel a significant distance to obtain tobacco products, they are likely to decrease their use.^{29,30} This is particularly true for youth, who often have limited transportation options.

The minimum age of military service does not equal readiness to enlist in a lifetime of nicotine addiction. Tobacco use is not a right or a privilege; it is an addictive and deadly activity. For the overwhelming majority of smokers, tobacco use is not an “adult choice;” it is the result of an addiction that began when they were in high school or younger. Addiction to nicotine is the opposite of the “free choice” that tobacco companies claim to support.

The concerns raised by the opponents of Tobacco 21 laws echo the unfounded scare tactics used to oppose smoke-free laws in the past. There is no evidence that raising the tobacco sales age to 21 would harm the economy or lead to an increase in illegal cigarette sales.

There are no legal barriers to raising the minimum age to 21. There is nothing natural or unchangeable about the minimum age of 18. The fact that tobacco products are legal for adults does not mean the minimum age cannot be raised. Although federal law prohibits the FDA from requiring a minimum age higher than 18, it clearly permits state and local governments to increase the tobacco sales age.³¹

Tobacco 21 laws do not represent an expansion of government regulation. Such laws merely update and adjust existing regulations that already set a minimum age for tobacco sales. At the local level, such laws are typically enforced by health inspectors as part of the health code.

Tobacco is not like other products. Cigarettes are the most deadly product sold in America and the only legal product that, when used exactly as intended, will kill up to half of its long-term users.⁴ Each year, tobacco use takes more lives than AIDS, automobile accidents, homicides, suicides, alcohol, and illegal drugs combined.³² Unlike other products, such as alcohol, tobacco cannot be used safely in moderation.

Raising the tobacco sales age to 21 does not change anything for current smokers age 21 or older. Raising the tobacco sales age to 21 would protect our youth without changing any laws or regulations that apply to current smokers over the age of 20.

There is overwhelming support for this policy approach. There is broad agreement that we should do everything possible to protect the next generation from tobacco. A 2014 national poll of more than 3000 participants revealed 71% support for raising the minimum age. All demographic groups sampled, including current smokers, strongly endorsed an increase in the sales age to 21. Of those most affected by this policy, respondents aged 18-20 years old, 61.7% supported raising the legal purchase age to 21.³³

FINAL POINTS TO CONSIDER

Communities that raise the tobacco sales age to 21 are on the cutting edge of the fight against the nation's leading preventable cause of death.

Raising the minimum sales age to 21 also protects youth from newly emerging products such as electronic cigarettes. Recent survey evidence suggests that high school students may be using electronic cigarettes ("e-cigarettes") and other electronic nicotine devices as often – or even *more often* – than conventional cigarettes.³⁸ While much is unknown about the health effects of these products, we know they often contain nicotine at addictive levels, in addition to other toxins.³⁹ To protect our youth from a lifelong nicotine addiction, laws that increase the tobacco sales age to 21 should also include e-cigarettes and other nicotine products, with an exception for products approved as tobacco cessation aids by the FDA.

A minimum age of 21 for purchasing all nicotine and tobacco products draws a bright policy line that is easy to understand and enforce. This low-cost option is beneficial from both a public health and economic perspective. Raising the minimum age is a simple and effective way to save lives, while failure to do so endangers Ohio's youth.

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Consider This...

Smoking is costly to our community – in many ways. In Ohio, each family pays more than \$1000 per year in state and local taxes that goes toward government expenditures for smoking-related costs.⁶ The American Lung Association estimates that each pack of cigarettes consumed costs our society \$18.05 in increased health care and work-related expenditures.³⁴ An Ohio State University study demonstrated that an employee who smokes costs his or her employer more than \$5800 per year compared to a non-smoking employee. Those costs include markedly increased absenteeism, reduced productivity, increased health costs, and time lost to smoking breaks.³⁵

Many less risky activities have a minimum legal age of 21. All U.S. states prohibit the sale of alcohol to individuals under 21. Most states with casino gambling set 21 as the minimum gambling age. Those states with legal marijuana use set the minimum age at 21. The difference in minimum sales age cannot be explained on the basis of risk - tobacco use is *far more* deadly than these other activities.³⁶ Although 18 is often considered the age of majority, leaving the tobacco sales age at 18 is out of step with biological and social science evidence regarding human development and decision-making.

Without progress, Ohio will fall further behind. Ohio made progress in reducing youth tobacco use rates between 2002 and 2008, when it funded the Ohio Tobacco Prevention Foundation.³⁷ Since that time, the state has spent very little money on tobacco prevention compared to the almost \$400 million the tobacco industry has spent *each year* to promote its deadly products in Ohio.⁸ Raising the minimum age to 21 is an effective way to reduce tobacco use at minimal cost.

Notations

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