



## INCREASING THE SALE AGE FOR TOBACCO TO 21 WILL REDUCE SMOKING AND SAVE LIVES

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Tobacco use remains the leading cause of preventable death in the United States, killing more than 480,000 Americans each year.<sup>1</sup> Tobacco use is known to cause cancer, heart disease and respiratory diseases, among other serious health problems, and costs the U.S. as much as \$170 billion in health care expenditures each year.<sup>2</sup> Each day, more than 250 kids under the age of 18 become regular, daily smokers; and almost one-third will eventually die from smoking.<sup>3</sup>

Because tobacco is so harmful, we should do everything we can to prevent tobacco use among young people. Increasing sale age for tobacco to 21 will help reduce smoking and save lives.

### **Raising the Minimum Legal Sale Age Will Help Save Lives**

A 2015 report by the Institute of Medicine (IOM) concluded that raising the tobacco sale age to 21 will have a substantial positive impact on public health and save lives.<sup>4</sup> The IOM finds that raising the tobacco sale age will:

- significantly reduce the number of adolescents and young adults who start smoking;
- reduce smoking-caused deaths, and
- immediately improve the health of adolescents, young adults and young mothers who would be deterred from smoking, as well as their children.

### **Raising the Minimum Legal Sale Age Is Being Adopted Across the U.S. and Is Popular**

- On December 20, 2019, President Trump signed legislation to amend the Federal Food, Drug, and Cosmetic Act, and raise the federal minimum age of sale of tobacco products from 18 to 21 years, effective immediately. Prior to the federal increase, nineteen states – Arkansas, California, Connecticut, Delaware, Hawaii, Illinois, Maine, Maryland, Massachusetts, New Jersey, New York, Ohio, Oregon, Pennsylvania, Texas, Utah, Vermont, Virginia and Washington – had raised the tobacco age to 21, along with Washington, DC and at least 540 localities.<sup>5</sup> Subsequent to the federal age of sale increase, another 11 states—Colorado, Indiana, Iowa, Kentucky, Minnesota, Mississippi, New Mexico, Oklahoma, South Dakota, Tennessee, and Wyoming—have raised their tobacco age to 21.
- Raising the legal sale age is popular with the public, including smokers. A 2017 CDC survey found that three quarters of adults favor raising the tobacco age to 21, including nearly two-thirds of adult smokers.<sup>6</sup>

### **Addiction Occurs Early—Most Adult Smokers Start Smoking Before Age 21**

- Tobacco companies target kids and young adults because they know that is when most users first try and become addicted to tobacco.
- About 95% of adult smokers begin smoking before they turn 21, and about 80% start before age 18. Four out of five become regular, daily smokers before they turn 21.<sup>7</sup>
- Nicotine is highly addictive and adolescents are particularly vulnerable to its effects. Because adolescence and young adulthood are critical periods of growth, exposure to nicotine can have lasting, negative consequences on brain development.<sup>8</sup>
- Delaying the age when young people first experiment or begin using tobacco can reduce the risk that they transition to regular or daily tobacco use and increase their chances of successfully quitting, if they do become regular users.<sup>9</sup>

### **Older Adolescents and Young Adults are a Source of Tobacco Products for Youth**

- Raising the age of sale will help keep tobacco out of high schools, where younger teens often obtain tobacco products from older students.
- More than 60% of 10<sup>th</sup> grade and nearly half of 8<sup>th</sup> grade students say it's easy to get cigarettes.<sup>10</sup>
- Friends and classmates are a common source of tobacco products for youth users. 75% of current smokers ages 15 to 17 reported obtaining cigarettes from social sources.<sup>11</sup>

## Raising the Tobacco Sale Age to 21 Will Have Minimal Impact on State Revenues

- In the short run, a tobacco sale age of 21 is expected to have minimal to no fiscal impact because 18- to 20-year olds account for just two to four percent of total cigarette consumption and unfortunately, most will not stop smoking as a result of this policy.<sup>12</sup>
- The policy begins working immediately to make it harder for youth and young adults to obtain cigarettes, but the consumption declines that would impact state revenues will take time to accrue. As a result, reductions in smoking initiation and prevalence will initially be small and will grow over time.

More information on increasing the sale age for tobacco products to 21 is available at [http://www.tobaccofreekids.org/what\\_we\\_do/state\\_local/sales\\_21](http://www.tobaccofreekids.org/what_we_do/state_local/sales_21).

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<sup>1</sup> U.S. Department of Health and Human Services. *The Health Consequences of Smoking: 50 Years of Progress. A Report of the Surgeon General*. Atlanta, GA: U.S. Department of Health and Human Services, Centers for Disease Control and Prevention, National Center for Chronic Disease Prevention and Health Promotion, Office on Smoking and Health, 2014

<sup>2</sup> HHS. *The Health Consequences of Smoking: 50 Years of Progress. A Report of the Surgeon General*, 2014; Xu, X., et al., "Annual Healthcare Spending Attributable to Cigarette Smoking: An Update," *Am J Prev Med*, 2014.

<sup>3</sup> Substance Abuse and Mental Health Services Administration (SAMHSA), HHS, *Results from the 2018 National Survey on Drug Use and Health, NSDUH: Detailed Tables*, 2018; CDC, "The Health Consequences of Smoking – 50 Years of Progress A Report of the Surgeon General 2014," <http://www.surgeongeneral.gov/library/reports/50-years-of-progress/50-years-of-progress-by-section.html>

<sup>4</sup> Institute of Medicine, *Public Health Implications of Raising the Minimum Age of Legal Access to Tobacco Products*, Washington, DC: The National Academies Press, 2015, <http://www.nationalacademies.org/hmd/Reports/2015/TobaccoMinimumAgeReport.aspx> ; In addition, a recent study suggests that raising the sale age to 21 is a promising practice, finding that the policy contributed to a greater decline in youth smoking in one community that passed a 21 ordinance compared to comparison communities that did not pass an ordinance restricting tobacco product sales to 21 and older. While the results are promising, the magnitude of the impact is unknown given that there are no baseline measurements and there were confounding issues that were not controlled for. See Kessel Schneider, S. et al, "Community reductions in youth smoking after raising the minimum tobacco sales age to 21," *Tobacco Control*, June 12, 2015, <http://tobaccocontrol.bmj.com/content/early/2015/06/12/tobaccocontrol-2014-052207.1.abstract>

<sup>5</sup> Some of the localities are in the states that subsequently enacted statewide laws. See:

[http://www.tobaccofreekids.org/content/what\\_we\\_do/state\\_local\\_issues/sales\\_21/states\\_localities\\_MLSA\\_21.pdf](http://www.tobaccofreekids.org/content/what_we_do/state_local_issues/sales_21/states_localities_MLSA_21.pdf).

<sup>6</sup> Gentzke, AS, et al., "Attitudes toward raising the minimum legal age of sale for tobacco products—United States, 2017," poster presented at the 2018 Annual Meeting of the Society for Research on Nicotine and Tobacco (SRNT).

<sup>7</sup> Calculated based on data from the Substance Abuse and Mental Health Services Administration (SAMHSA)'s public online data analysis system (PDAS), National Survey on Drug Use and Health, 2016, <https://pdas.samhsa.gov/#/survey/NSDUH-2016-DS0001>.

<sup>8</sup> HHS. *The Health Consequences of Smoking: 50 Years of Progress. A Report of the Surgeon General*, 2014.

<sup>9</sup> See, e.g., Khuder, SA, et al., "Age at Smoking Onset and its Effect on Smoking Cessation," *Addictive Behavior* 24(5):673-7, September-October 1999; D'Avanzo, B, et al., "Age at Starting Smoking and Number of Cigarettes Smoked," *Annals of Epidemiology* 4(6):455-59, November 1994; Chen, J & Millar, WJ, "Age of Smoking Initiation: Implications for Quitting," *Health Reports* 9(4):39-46, Spring 1998; Everett, SA, et al., "Initiation of Cigarette Smoking and Subsequent Smoking Behavior Among U.S. High School Students," *Preventive Medicine* 29(5):327-33, November 1999; Breslau, N & Peterson, EL, "Smoking cessation in young adults: Age at initiation of cigarette smoking and other suspected influences," *American Journal of Public Health* 86(2):214-20, February 1996.

<sup>10</sup> Johnston, L. D., et al. (2018). Monitoring the Future national survey results on drug use: 1975-2017: Overview, key findings on adolescent drug use. Ann Arbor: Institute for Social Research, The University of Michigan. <http://monitoringthefuture.org/pubs/monographs/mtf-overview2017.pdf>.

<sup>11</sup> Tanski, S, et al., "Youth Access to Tobacco Products in the United States: Findings from Wave 1 (2013-2014) of the Population Assessment of Tobacco and Health (PATH) Study," *Nicotine & Tobacco Research*, published online November 8, 2018.

<sup>12</sup> Chaloupka, F., Analysis of data from the Tobacco Use Supplement to the Current Population Survey, 2010-2011 (TUS-CPS) and Winickoff, JP, et al., "Retail Impact of Raising Tobacco Sales Age to 21 Years," *American Journal of Public Health* 104(11):e18-e21, 2014.