



## Policy Recommendation

### Raising the legal purchasing age of tobacco from 19 to 21

#### **Policy:**

The Anchorage Health Department (AHD) supports raising the legal purchasing age of tobacco from 19 to 21 within the Municipality of Anchorage.

#### **Justification:**

Raising the purchasing and consumption age of tobacco to 21, known as “Tobacco 21,” is an evidenced-based policy that decreases youth smoking initiation while leveling extremely minimal effects on the tobacco industry and decreasing community healthcare expenditures. Approximately 290 local jurisdictions in the United States have raised the legal tobacco purchasing age from 18 to 21 (including Sitka, Alaska).<sup>i</sup>

Research projects that federal Tobacco 21 legislation would result in a 25% decrease in smoking initiation in high school students and a substantial overall decrease in the prevalence of tobacco users nationwide,<sup>ii</sup> because approximately 90% of daily smokers in the United States report first using cigarettes before age 19.<sup>iii</sup> The first municipality to enact a Tobacco 21 law, Needham, Massachusetts, saw a 47% decrease in the rate of high school smoking four years after enacting the law, while nearby communities that had not enacted Tobacco 21 saw only a 20% decrease.<sup>iv</sup>

Youth nicotine use can lead to substance misuse, addiction, and mental illness later in life,<sup>v</sup> on top of the negative health effects of smoking tobacco, a highly addictive substance which can cause a host of adverse health conditions.<sup>vi</sup> Most underage tobacco users get tobacco products from their 18-20 year old peers.<sup>vii</sup> Tobacco 21 laws can disrupt this access by making it less likely that those who are legally able to purchase tobacco will be in the same social networks as high school students.

At the same time, just 2% of cigarette sales in the United States go to individuals under 21,<sup>viii</sup> meaning that the burden of Tobacco 21 policy would not fall heavily on tobacco retailers. In fact, the CEO of the tobacco company Altria Group just came out in support of raising the legal smoking age to 21 nationwide.<sup>ix</sup>

Analysis of tobacco policy indicates that a 10% relative reduction in smoking prevalence between a state and the national average in one year is followed by an average \$6.3 billion reduction in health care expenditures the following year. This research finds that states with strict tobacco control policies have lower health care expenditures than states without these policies.<sup>x</sup>

Tobacco use is the leading cause of preventable death in the United States. Cigarette smoking is responsible for more than 480,000 deaths in the United States each year, including 42,000 deaths from secondhand smoke.<sup>xi</sup> An estimated 20% of American adults and 3% of youth ages 12-17 smoke cigarettes,<sup>xii</sup> and in 2018 21% of American 12<sup>th</sup> graders reported that they vaped nicotine in the past month, a 91% increase from 2017 when just 11% of 12<sup>th</sup> graders reported vaping.<sup>xiii</sup>

In Anchorage, 13% of adults (age 18+) reported everyday smoking in 2017, including 23% of Alaska Natives, 10% of whites, and 9% of all other races (Black, Asian, Pacific Islander/Native Hawaiian,

Hispanic, Latino). Males in the city report higher rates of smoking than females, and lower income is highly associated with higher rates of smoking: 23% of Anchorage residents making less than \$50,000/year reported smoking every day in 2017, compared to 6% of those making more than \$50,000 annually.<sup>xiv</sup>

The highest rates of tobacco use among Anchorage youth occur in alternative high schools, where 17% of students reported smoking cigarettes on 20+ days in the past month in 2017, compared to 1.3% of traditional high school students. Smokeless tobacco use is increasing across all youth demographics in the Municipality, and in 2017 18% of high school students reported currently using an electronic vapor product.<sup>xv</sup> Left unaddressed, teen vaping could contribute to some of the first increases in youth tobacco use nationwide in 20 years, as more teenagers develop nicotine addictions due to vape product use.

The economic costs of smoking to Alaska are immense. The State of Alaska Department of Health and Social Services estimated that 697 Alaskans died each year from 2012-2016 from smoking-related diseases, representing an annual average of \$264 million in lost productivity. More Alaskans die each year from the direct effects of smoking tobacco than from suicide, motor vehicle crashes, chronic liver disease and cirrhosis, homicide, and HIV/AIDS combined. Moreover, 2014 estimates indicate that smoking cost Alaska approximately \$575 million in direct medical expenditures.<sup>xvi</sup>

## References:

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- <sup>ii</sup> Institute of Medicine of the National Academies. *Public Health Implications of Raising the Minimum Age of Legal Access to Tobacco Products*. National Academy of Sciences, 2015, *Public Health Implications of Raising the Minimum Age of Legal Access to Tobacco Products*.
- <sup>iii</sup> Institute of Medicine of the National Academies. *Public Health Implications of Raising the Minimum Age of Legal Access to Tobacco Products*. National Academy of Sciences, 2015, *Public Health Implications of Raising the Minimum Age of Legal Access to Tobacco Products*.
- <sup>iv</sup> Schneider, Shari Kessel, et al. "Community Reductions in Youth Smoking after Raising the Minimum Tobacco Sales Age to 21." *Tobacco Control*, 12 May 2015.
- <sup>v</sup> Goriounova, NA, HuiBERT D MansvelDER. "Short- and Long-Term Consequences of Nicotine Exposure during Adolescence for Prefrontal Cortex Neuronal Network Function." *Cold Spring Harbor Perspectives in Medicine*, vol. 2, no. 12, Dec. 2012. *PMC*; Kutlu, Munir Gunes, et al. "Nicotine Addiction and Psychiatric Disorders." *International Review of Neurobiology*, vol. 124, 2015, pp. 171–208. *PMC*.
- <sup>vi</sup> National Institute on Drug Abuse. *Cigarettes and Other Tobacco Products*, National Institutes of Health, Tobacco 21. *Tobacco 21 Fact Sheet*, tobacco21.org/tobacco-21-fact-sheet/.
- <sup>vii</sup> Winickoff, Jonathan P et al. "Retail impact of raising tobacco sales age to 21 years" *American journal of public health* vol. 104,11 (2014): e18-21.
- <sup>ix</sup> Willard, Howard A. "Raise the Legal Age for All Tobacco Products to 21." *The Hill*, 26 Feb. 2019, thehill.com/opinion/healthcare/431651-raise-the-legal-age-for-all-tobacco-products-to-21.
- <sup>x</sup> Hall, Wayne, and Chris Doran. "How Much Can the USA Reduce Health Care Costs by Reducing Smoking?" *PLOS Medicine*, vol. 13, no. 5, May 2016. *PMC*.
- <sup>xi</sup> *Ibid*.
- <sup>xii</sup> Substance Abuse and Mental Health Administration. *2016-2017 National Survey on Drug Use and Health: Model-Based Prevalence Estimates (50 States and the District of Columbia)*. SAMHSA, 2018.
- <sup>xiii</sup> University of Michigan Institute for Social Research. *Monitoring the Future Report: National Adolescent Drug Trends in 2018*. Monitoring the Future, 2018.
- <sup>xiv</sup> Alaska Department of Health and Social Services. *Behavioral Risk Factor Surveillance System*, State of Alaska, [ibis.dhss.alaska.gov/query/selection/brfss23/BRFSSSelection.html](https://ibis.dhss.alaska.gov/query/selection/brfss23/BRFSSSelection.html).
- <sup>xv</sup> Alaska Department of Health and Social Services. *Youth Risk Behavior Surveillance System*, State of Alaska, [ibis.dhss.alaska.gov/query/selection/yrb123/YRBSSelection.html](https://ibis.dhss.alaska.gov/query/selection/yrb123/YRBSSelection.html).
- <sup>xvi</sup> Tobacco Prevention and Control Program. *Alaska Tobacco Facts 2018 Update*. Alaska Department of Health and Social Services, 2018.