

PROTECT KANSAS KIDS FROM BIG TOBACCO

Raise The Age KS

Tobacco use remains the #1 cause of preventable death.

Nearly **95%** of adults who smoke started before the age of 21.



**Big Tobacco spends over \$76 million
on marketing in Kansas each year**

**At current rates, 61,000 Kansas kids will die prematurely from smoking,
with 1,500 children becoming new smokers each year.**



Raising the sale age of tobacco products to **21** could
reduce the prevalence of smoking by 12%, saving
thousands of lives and **millions of dollars**.

RAISE THE AGE
Kansas

Contact tfkcboard@gmail.com to learn more and get involved!

The Case for Tobacco 21

“Raising the legal minimum age for cigarette purchaser to 21 could gut our key young adult market”

Philip Morris report, January 21, 1986

The Problem

17% of Kansas high school students and 4.3% of middle school students smoke, according to a KDHE tobacco use survey. Two out of three Kansas teen smokers are acquiring their product through peers. Under 21 purchases are only 2% of total tobacco retail sales but account for 90 percent of new smokers. These statistics do not even consider the skyrocketing use of vaping products among adolescents. While there is extensive data on the danger of tobacco use, the studies on vaping have not caught up to use. These are products designed for youth consumption with flavors such as: cotton candy, gummy bear, and s'mores in brightly colored packaging. Vaping products have evolved into nicotine delivery systems that are immediately absorbed, similar to traditional cigarettes, making users vulnerable to addiction.

The Adolescent Brain

There is a significant gap of 4-7 years between physiological maturity and neurological maturity. The frontal lobe is not fully developed until age 25, making it especially susceptible to tobacco/nicotine addiction. This vulnerability is why most lifelong tobacco users, (90%) develop the addiction before age 21. Delaying the age of initiation is key to preventing a lifetime of addiction.

The Health Benefits

Tobacco use is the most preventable cause of death, killing 4,400 Kansans every year. 1,500 Kansas kids under 18 become new daily smokers each year. In an Institute of Medicine (IOM) study, the research estimates a reduction in tobacco use of 25% among 15-17 year-olds and a 15% reduction for 18-20 year-olds if a Tobacco 21 policy is in place. This would result in an overall smoking decline of 12%.

The Results

Needham, MA was the first city to adopt T21 in 2005. There is already evidence that the policy is working. Needham saw its youth smoking rates decline by 50%, while surrounding communities without T21 policies saw little reduction in youth use rates over the same period. More recently, Chicago studied the impact of its T21 policy in 2017 and found declines comparable to Needham's. Tobacco 21 is a prevention policy that works.

The Kansas Impact

Twenty Kansas cities and counties have adopted T21 ordinances, providing these protections. The following municipalities have acted: Bonner Springs, Garden City, Iola, Johnson County (unincorporated), Kansas City, Lansing, Leavenworth, Leawood, Lenexa, Merriam, Mission Hills, Olathe, Overland Park, Parsons, Prairie Village, Roeland Park, Shawnee County, Topeka, Westwood, Westwood Hills.

Arguments Raised in Opposition to T21

Argument: If you can go to war at 18, you have a right to purchase tobacco at 18.

Response: We have established 21 as the age of consent for many products/activities that are deemed risky. These include alcohol, gambling, and handguns. Raising the drinking age to 21 produced the beneficial results of reduced alcohol use and drunk driving fatalities.

The age at which young people may join the service is an unrelated discussion as to whether teens should be able to use tobacco. There is no express right to use tobacco. While the military argument is often used, ironically tobacco use among the armed forces has had a calamitous impact. The military is actively addressing tobacco use because it impacts readiness and is considering a tobacco ban on bases. The smoking rates are more than double the national average at 33% and the rate of lung cancer mortality for veterans is twice as high as the general population.

Finally, this argument assumes that the end user is 18. The reality is younger teens may be the recipients of tobacco purchased by older peers. As the IOM study demonstrates, the biggest percentage reduction in use with T21 will occur in the 15-17 age range.

Argument: Changing the age of purchase will hurt business.

Response: 18-20 year-olds comprise only 2 percent of tobacco sales. Target and CVS are large retailers that no longer sell tobacco products, leaving demand to remaining tobacco retailers. There is no data indicating that retailers are going out of business or not going into areas with T 21 ordinances in Kansas. In fact, money that is not spent on tobacco is often spent on other products. We should not encourage a business model that relies on addicting our kids to tobacco for life. The impact of tobacco use on all businesses is extremely damaging. A study completed by The Ohio State University finds that businesses incur more than \$5,000 per year per employee who smokes. There is a strong correlation between low smoking rates and higher socio-economic status in communities.

Argument: Underage purchasers should be penalized, not the retailers/sellers.

Response: Responsibility, and therefore compliance, must be with the industry and retailers that profit from this deadly addiction by targeting our teens through appealing, kid-friendly marketing. This is a public health issue that will only be solved if our kids are protected, not punished. There are underage users who are addicted and need cessation services, not a penalty. Interrupting the supply chain will only occur if retailers are held accountable. Practically speaking, expecting law enforcement to monitor and detect surreptitious use among kids is unrealistic and will not have any deterrent effect.

Argument: Adopting T21 constitutes government intrusion.

Response: There is a public benefit in reducing tobacco use for Kansas taxpayers in both health outcomes and health care costs. In Kansas, taxpayers pay \$237 million annually to treat smoking-related illness within the Medicaid program. Each Kansas household, regardless of tobacco use, subsidizes smoking to the tune of \$779 each year in state and federal taxes to pay for tobacco-related, government expenses.