

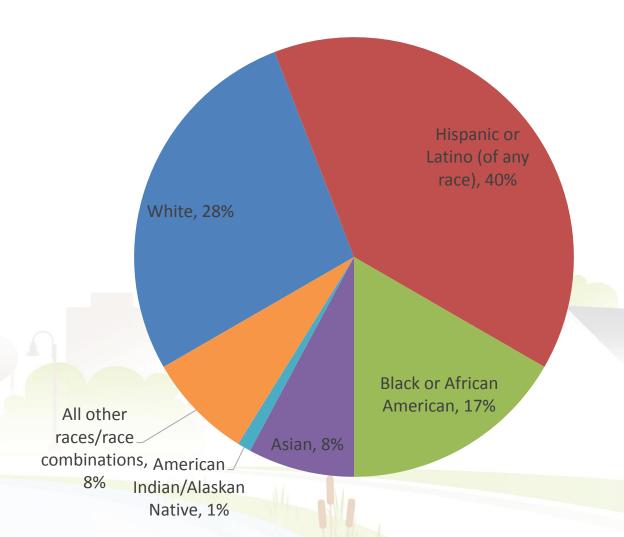
# Raising the Tobacco Sales Age to 21

#### **Overview**

- Tobacco use in Richfield
- Reasons to raise tobacco sales age to 21
- Who supports this?
- Successes in the Metro area
- FAQ's



#### Richfield School District by Race/Ethnicity



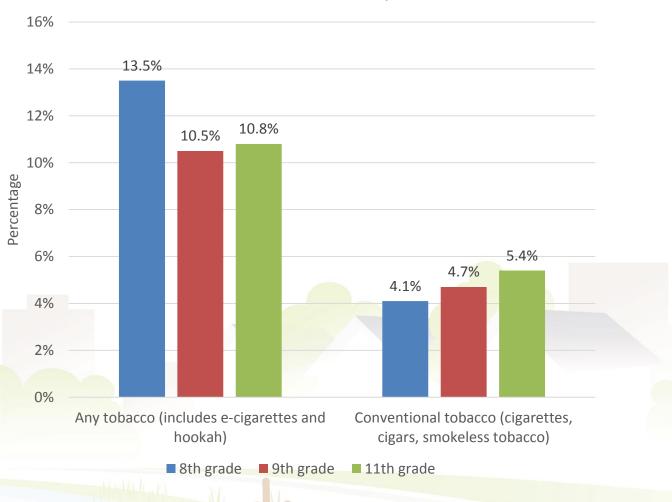


#### Conventional tobacco use (cigarettes, cigars, smokeless tobacco) in the last 30 days, Richfield School District



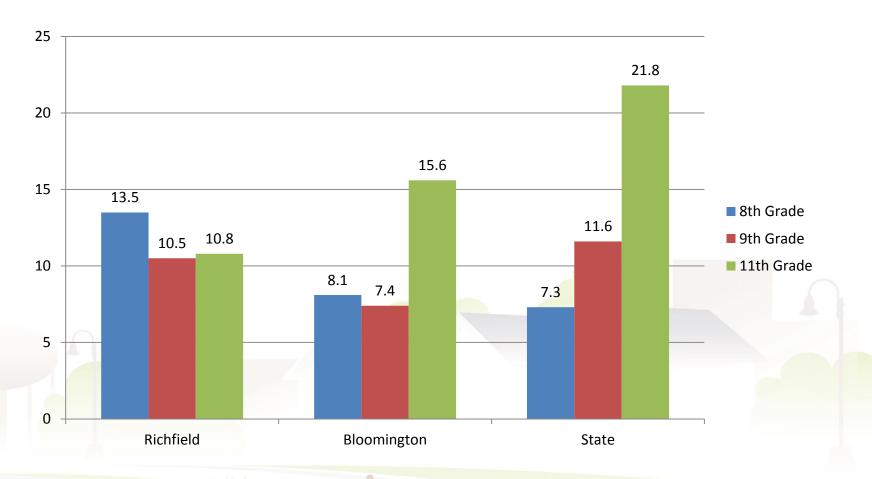


#### Student Tobacco Use in the past 30 days, Richfield School District, 2016





#### Use of Any Tobacco Product (including e-cigarettes and hookah) in the Past 30 Days



Percentage



# Reasons to raise tobacco sales to age 21

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

-Philip Morris report, January 21, 1986



#### Youth tobacco use is still a problem

- Tobacco use is the number one cause of preventable death and disease.
- In Minnesota, 19% of students used tobacco in the past 30 days.
- 9<sup>th</sup> and 11<sup>th</sup> graders are now using e-cigarettes at twice the rate of regular cigarettes.
- Flavored tobacco products are appealing to youth



# 95% of current adult smokers started before age 21

Keeping tobacco out of high schools will reduce the number of youth under 18 who become addicted to tobacco.



## Many youth get tobacco from older peers

- 59% of 18 19 year olds have been asked to buy cigarettes for someone younger.
- High school students are less likely to be around a 21-year old than they would be an 18 – 20 year old in a setting where they would ask for tobacco.

Sources: Ribisl et.al. 1999 Ahmed, S et. Al. 2005



## Human and economic cost to tobacco use

 6,000+ Minnesotans dies each year from tobacco use Smoking costs
 Minnesota more than
 \$3 billion annually in
 excess health care
 costs

Source: Blue Cross and Blue Shield of Minnesota, January 2017



## Impact of nicotine on the adolescent brain

No amount of nicotine is safe for youth

Exposure to nicotine has a lasting impact on the developing adolescent brain

The addictive properties of nicotine are particularly harmful to youth and can lead to heavier daily tobacco use and a difficult time quitting later in life

Sources: Nelson et.al. 2008 Abreu-Villaca et al. 2003



# The tobacco industry targets youth

 The tobacco industry spends \$115.8 million on marketing each year in Minnesota.

 The industry is constantly looking to replace smokers who die from diseases related to tobacco use.

Source: Campaign for Tobacco Free Kids



#### Needham, Massachusetts



In 2004, the town of Needham, Massachusetts – a suburb of Boston raised the sales age to 21.

Despite other cities not following their lead, within five years, tobacco use among high school students was reduced by nearly half.

Source: Kessel Schneider et.al. 2015



## Institute of Medicine Report – 2015

The IOM found that increasing the legal age to purchase tobacco to 21 would decrease smoking initiation among 15 – 17 year olds by 25%.

Source: Institute of Medicine. 2015



# Impact of tobacco 21 in Minnesota: 30,000 fewer youth will become smokers over the next 15 years.



# Community Voices features opinion pieces from a wide variety of authors and perspectives. (Submission Guidelines) Tobacco 21: a life-saving opportunity we can't afford to miss By Raymond Boyle | 02/20/17 Email Share Tweet Print



#### The growing list of supporters





## Public support for raising tobacco sales age

75% of adults

70% of current smokers

65% of young adults ages 18 – 24



#### FAVOR RAISING THE TOBACCO SALES AGE TO 21



## Minnesotans for a Smoke-Free Generation

- »A Healthier Southwest
- »African American Leadership Forum
- »Allina Health
- »American Cancer Society Cancer Action Network
- »American Heart Association
- »American Lung Association in Minnesota
- »Apple Tree Dental
- »Association for Nonsmokers Minnesota
- »Blue Cross and Blue Shield of Minnesota
- »CentraCare Health
- »Children's Hospitals and Clinics of Minnesota
- »ClearWay Minnesota
- »Essentia Health
- »Four Corners Partnership
- »Gillette Children's Specialty Healthcare HealthEast
- »HealthPartners
- »Hennepin County Medical Center
- »LAAMPP Institute
- »Lincoln Park Children and Families Collaborative
- »Local Public Health Association of Minnesota
- »Mayo Clinic

- »Medica
- »Minnesota Academy of Family Physicians
- »Minnesota Association of Community Health Centers
- »Minnesota Cancer Alliance
- »MN Chapter of the American Academy of Pediatrics
- »Minnesota Council of Health Plans
- »Minnesota Hospital Association
- »Minnesota Medical Association
- »Minnesota Oral Health Coalition
- »Minnesota Public Health Association
- »Model Cities of St. Paul, Inc.
- »North Memorial Health Care
- »NorthPoint Health and Wellness Center
- »PartnerSHIP 4 Health
- »Rainbow Health Initiative
- »SEIU Healthcare Minnesota
- »St. Paul Chamber of Commerce
- »Tobacco Free Alliance
- »Twin Cities Medical Society
- **»**UCare
- »Wellshare International



#### **Tobacco 21 success in Minnesota**

City of Edina - April 2017

City of St. Louis Park – July 2017

City of Bloomington – November 2017

City of Plymouth – November 2017

City of North Mankato – February 2018

City of Richfield – Spring 2018?



If someone can join the military at 18, shouldn't they be allowed to buy tobacco?

We want a military force that is physically ready, and tobacco use impairs that readiness

The DOD and each branch of the armed services has stated a goal of a tobacco-free military

There are several legal safeguards in place to protect the health and safety of our young people – e.g. the drinking age

Source: IOM, Combating Tobacco in Military and Veteran Populations, 2009



Won't youth find ways to get tobacco regardless of what we do?

Tobacco 21 makes it more difficult for youth to get tobacco from social sources

75% of smokers ages 15 – 17 get tobacco from social sources

High school students are less likely to be around a 21 year old than an 18 year old

Source: PATH Study, 2016

Ahmad, S. 2005



Will Tobacco 21 hurt retailers?

18- 20 year olds make up roughly 2-4% of tobacco sales but provide tobacco to the majority of underage smokers.

Retailers sell many non-addictive, non-disease causing products that could offset and losses.

The health benefit of saving kids from a lifetime of addiction and disease outweighs retailers having to adjust to a decline in sales.



Why should e-cigarettes be included in Tobacco 21 policies?

E-cigarettes are considered tobacco products in federal and state law.

E-cigarettes are not proven to be better for quitting smoking than existing treatments and the FDA has not approved them as quitting aids.

With smoking rates falling, e-cigarettes are a way for the tobacco industry to keep hooking the next generation on their products.

Source: US Surgeon General 2012 Vickerman et. al. 2013



Won't people just go to neighboring towns/cities?

Incremental change is progress

In Minnesota, the smoke-free movement was started at the local level.

Many communities in Minnesota are considering Tobacco 21.



#### In Summary.....

Preventing youth from initiation is essential to creating a tobacco-free generation.

Five states and over 285 cities have raised the tobacco age, including Edina, St. Louis Park, Bloomington, Plymouth and North Mankato.

Raising the tobacco sales age is about 13 – 17 year olds, not 18, 19 and 20 year olds.

Tobacco 21 addresses social sources at little cost to retailers.



## Thank you!

Richfield City Council
Bloomington Public Health
City of Edina
Association of Non-Smokers Minnesota (ANSR)

#### **Questions?**





#### Executive Summary for the Richfield City Council

#### March 2018

At the request of the Richfield City Council, the Richfield Human Rights Commission (HRC) has polled Richfield boards and commissions regarding their demographic make-up in 2014, 2016, and 2018 (Refer to Exhibit A for 2018 data). The City Council had also asked the Human Rights Commission to seek ways to increase awareness of and participation on the boards and commissions throughout the city, particularly with underrepresented populations. Efforts to increase community awareness and participation is making a difference, however, gaps remain and work on this project should continue. Please note that in 2017, Richfield had more applicants for board and commission openings than any time on record. Richfield currently has five open youth commissioner positions which suggests that a greater effort be made to recruit youth this year.

The Human Rights Commission has taken several specific steps to increase awareness of commissions and the need for diverse commissioners in Richfield. The 2017 efforts undertaken were:

- Increasing access and awareness online and on social media
- Reaching out to the public through the 4<sup>th</sup> of July Parade, Penn Fest and other public events to spread awareness
- Working with local churches to increase awareness

In 2018, the board and commission questionnaire was expanded to better align with the Minnesota Human Rights Act (Exhibit B). Notable 2018 findings (Exhibit C) are:

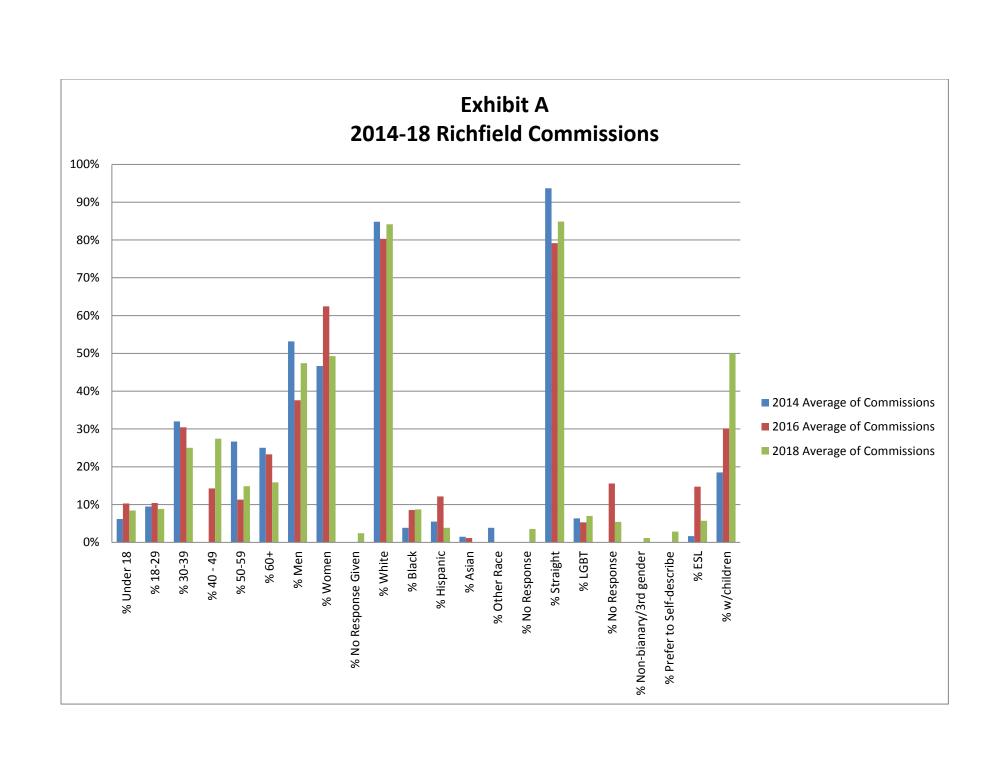
- The numbers of men (47%) and women (49%) have largely evened out
- There is a 9% decrease in people of color
- There is a 9% decrease in people who English is their second language
- There is 20% increase in parents of children under 18 at home
- Distributions of commissioners incomes are now reported (Exhibit D)

While efforts to increase awareness of boards and commissions have yielded tremendous responses within the greater Richfield community, the city still struggles to make an impactful difference in communities of color. Underrepresentation of immigrants and people with diverse faiths also continues.

The Human Rights Commission will continue to work with the city and various community networks to help engage people who have not always been represented in Richfield boards and commissions.

Sincerely,

Mark Westergaard & Debbie Eng Richfield Human Rights Commission



#### **Exhibit B**

#### This survey is voluntary and anonymous. Results will only be shared publically in aggregate.

The City of Richfield does not discriminate on the basis of race, color, religion, national origin, gender, sexual preference, age, or disability. In order to track the effectiveness of recruiting efforts for Board and Commission appointments, and to ensure we are considering the needs of all Richfield residents, please answer the following questions:

On which Commission/Board do you currently serve?	
☐ Advisory Board of Health	☐ Human Rights Commission
☐ Arts Commission	☐ Planning Commission
☐ Community Services Commission	☐ Transportation Commission
☐ Friendship City Commission	•
What is your age? $\square$ < 18 $\square$ 18-29 $\square$ 30-39 $\square$ 40-49 $\square$ 50-59 $\square$	60+
What is your country of birth?	
Is English your native language? $\square$ No $\square$ Yes	
What is your racial or ethnic identification? (Select all that apply)	
☐ American Indian or Alaska Native	☐ Native Hawaiian or Other Pacific Islander
☐ Asian	☐ White
☐ Black or African American	☐ Other
☐ Hispanic or Latino	$\square$ Prefer not to respond
What is your current gender identity?	
☐ Female	☐ Non-conforming
☐ Male	☐ Prefer to self-describe
☐ Non-binary/ third gender	☐ Prefer not to respond
Which of the following best describes your current sexual orientation?	
☐ Bisexual	☐ Prefer to self-describe
☐ Gay or Lesbian	☐ Prefer to self-describe
	□ Freier not to respond
☐ Straight/Heterosexual	
Which best describes your current marital status?	Married   Single
Which of the following best describes your religious affiliation, if any?	
☐ Atheist	☐ Muslim
☐ Buddhist	☐ Other:
☐ Christian	☐ None
☐ Hindu	☐ Prefer not to respond
☐ Jewish	
Do you have a sensory, ambulatory, or cognitive disability?	No □ Yes
What is your <i>approximate</i> <u>annual</u> household income?	\$
How many people are in your household? $\Box$ 1 $\Box$ 2	□ 3 □ 4 □ 5 □ 6+
Do you have children under 18 living in your household?	□ No □ Yes

#### Exhibit C

EXHIBIT C																						
2016 to 2018 Percent Changes in Richfield Commissions Demographic Make-up																						
	% Under							%	% No Response			%		% Other		%		% No	3rd	% Prefer to Self-		%
Commission Name	18	% 18-29	% 30-39	% 40 - 49	% 50-59	% 60+	% Men	Women	Given	% White	% Black	Hispanic	% Asian	Race	Response	Straight	% LGBT	Response	gender	describe	% ESL	w/children
Adv Board of Health	13%	-5%	27%	-18%	-18%	4%	4%	-3%	0%	-19%	25%	-5%	0%	0%	0%	0%	0%	0%	0%	0%	-5%	-14%
Arts Commission	-20%	0%	-60%	30%	50%	0%	80%	-80%	0%	60%	-40%	-20%	0%	0%	0%	20%	0%	-20%	0%	0%	-40%	-20%
Community Services Commission	-3%	29%	-3%	-4%	-3%	-17%	12%	-12%	0%	3%	0%	-3%	0%	0%	0%	3%	-3%	0%	0%	0%	-3%	24%
Friendship Commission	-20%	-20%	5%	13%	0%	23%	-15%	15%	0%	8%	-7%	-15%	0%	0%	0%	8%	0%	-7%	0%	0%	-7%	55%
<b>Human Rights Commission</b>	0%	-15%	-8%	8%	8%	7%	-8%	0%	0%	-8%	23%	-15%	-8%	0%	8%	-8%	15%	-7%	8%	0%	-8%	8%
Planning Commission	0%	0%	-20%	60%	0%	-40%	0%	0%	0%	0%	0%	0%	0%	0%	0%	20%	0%	-40%	0%	20%	0%	60%
Transportation Commission	17%	0%	21%	3%	-12%	-29%	-4%	-12%	17%	-17%	0%	0%	0%	0%	17%	-3%	0%	3%	0%	0%	0%	26%
2016 to 2018 Percent Changes	-2%	-2%	-5%	13%	4%	-7%	10%	-13%	2%	4%	0%	-8%	-1%	0%	4%	6%	2%	-10%	1%	3%	-9%	20%

Total 2018 Richfield Commissions & Boards Demographic Data (percentages)

	Total	Total																% Nor															%								
	Member	Current					# c	f										bianar	y % No							% No						% Other	Agnostic	/			% Prefer				
		Membe		# Youth		9	6 Res	po Respo	ons		% 18 -	% 30 -		% 50 -			%	/3rd	Respon	e		%		% O	ther Re	sponse	% USA	% Non-	% No	%		Religious	Atheist/I	V		% No	to Self-	%	%	%	
Commission Name	Positions	rs	% Filled	Seats	# Fille	ed Fill	led nda	nts e Ra	te % Ur	nder 18	29	39	% 40 - 49	59	% 60+	% Men	Worr	en gende	r Given	% White	% Black	Hispani	c % Asia	an Ra	ce (	Given	Born	USA Born	Response	Christian	% Muslim	Affiliation	one	% Straigl	ht % LGBT	Response	describe	Disabled	Married	d ESL	% w/childre
Adv Board of Health	11	11	100%	1	1	100	0% 8	739	6 1	13%	13%	63%	0%	0%	13%	13%	889	6 0%	0%	63%	25%	13%	0%	0	%	0%	88%	13%	0%	50%	0%	25%	25%	100%	0%	0%	0%	13%	75%	13%	13%
Arts	9	7	78%	2	0	09	% 2	299	6 (	0%	0%	0%	50%	50%	0%	100%	0%	5 0%	0%	100%	0%	0%	0%	0	%	0%	100%	0%	0%	50%	0%	50%	0%	100%	0%	0%	0%	0%	50%	0%	0%
Community Services	11	11	100%	2	2	100	0% 7	649	6 1	14%	29%	14%	29%	14%	0%	29%	719	6 0%	0%	86%	0%	14%	0%	0	%	0%	100%	0%	0%	71%	0%	14%	14%	86%	14%	0%	0%	14%	71%	14%	57%
Friendship City	9	7	78%	2	0	09	% 8	114	% (	0%	0%	25%	13%	0%	63%	25%	759	6 0%	0%	88%	13%	0%	0%	0	%	0%	75%	13%	13%	63%	13%	0%	13%	88%	0%	13%	0%	25%	50%	13%	75%
Human Rights	13	13	100%	2	2	100	0% 13	100	% 1	15%	0%	23%	23%	23%	15%	38%	549	6 8%	0%	69%	23%	0%	0%	0	%	8%	92%	0%	8%	54%	0%	15%	31%	77%	15%	8%	0%	15%	46%	0%	62%
Planning	7	7	100%	0	NA	N.	IA 5	719	6 1	NA	20%	0%	60%	0%	20%	60%	409	6 0%	0%	100%	0%	0%	0%	0	%	0%	100%	0%	0%	40%	0%	0%	60%	60%	20%	0%	20%	20%	60%	0%	60%
Transportation	11	10	91%	2	1	50	0% 6	609	6 1	17%	0%	50%	17%	17%	0%	67%	179	6 0%	17%	83%	0%	0%	0%	0	%	17%	100%	0%	0%	33%	0%	0%	67%	83%	0%	17%	0%	0%	83%	0%	83%
Tota	ls 71	66	93%	11	6	55	5% 49	749	6 1	10%	9%	25%	27%	15%	16%	47%	499	6 1%	2%	84%	9%	4%	0%	0	%	3%	94%	4%	3%	52%	2%	15%	30%	85%	7%	5%	3%	12%	62%	6%	50%

