



TOBACCO 21

raising the age of sale for tobacco

Why should we raise the age of sale for tobacco to 21?

Protects Kids

- In Summit County, 1 in 7 kids (13.5%) in 9th - 12th grade has used cigarettes in the last 30 days.
- Kids who use tobacco commonly get it from people between ages 18-20.
- The brain is still developing during the late teens and early 20s, and the probability of nicotine addiction is especially high during this time.
- Youth addicted to nicotine are 7 times more likely to have a drug use disorder.

Proven to Work

- Just 2% of tobacco sales (under 21) produce 90% of new smokers.
- People who have not used tobacco by age 21 are unlikely to ever start.
- Research shows that a sales age of 21 across the U.S. could result in:
 - 286,000 fewer pre-term births
 - 438,000 fewer babies with low birth weight

Pays Off

- Smoking-related illnesses hurt our health and our wealth. Hospital patients who smoke have longer stays and higher medical costs than non-smokers.
- A sales age of 21 across the U.S. would save society an estimated \$212 billion over a 50-year period.

Popular Across the USA

- 75% of adults support raising the age to 21, including 70% of smokers.
- 5 states and more than 270 U.S. cities have already raised the age to 21.

How tobacco affects health outcomes and healthcare spending²

Tobacco use contributes to many of Ohio and Summit County's greatest health challenges, including cardiovascular disease, cancer and infant mortality. In addition, tobacco use is a cost driver for Medicaid and employers. Researchers estimate that 15 percent of U.S. Medicaid costs are attributable to cigarette smoking and a recent Indiana study found that per member per month (PMPM) Medicaid expenditures were 51.4 percent higher for smokers compared to non-smokers.

Smoking also increases healthcare costs for employers. As shown in the figure to the right, Ohio ranks in the bottom half of states for all tobacco-related metrics in the 2017 Health Value Dashboard released by the Health Policy Institute of Ohio.

The Health Value Dashboard found that overall, Ohio ranks 46 out of 50 states and the District of Columbia on health value, a composite measure of population health outcomes and healthcare spending. This means that Ohioans are living less healthy lives and spending more on health care than people in most other states

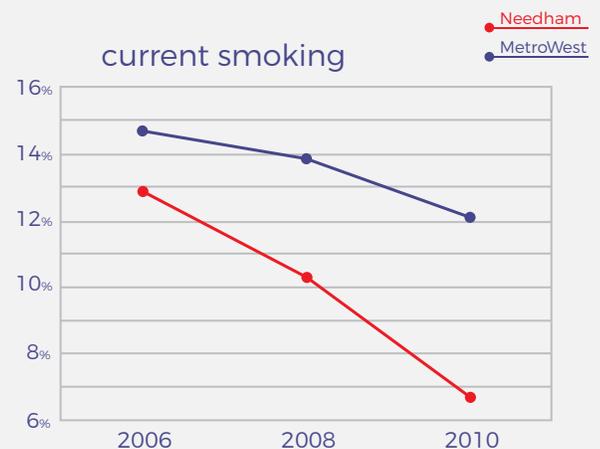
Ohio's health value	rank
Ohio's health value	46
Ohio's performance on tobacco related metrics	
children exposed to second-hand smoke	49
adult smoking	43
youth tobacco use	37
tobacco prevention spending	33
cigarette tax	29

Tobacco use is one of the key factors contributing to Ohio's poor performance. Ohio ranks in the bottom quartile for both adult smoking and secondhand smoke exposure for children. Analysis of the Dashboard data found a strong correlation between a state's adult smoking rate and its health value rank.

T21 Case Study - Needham, Massachusetts¹

In 2005, Needham, Massachusetts voted to raise and enforce the minimum tobacco sales age to 21. In 2006, before full enforcement, the town had a youth smoking rate of 13% compared with 15% in the surrounding communities. Over a three-year period from 2005-2008, Needham gradually raised the legal sales age for tobacco from age 18 to 21. It seemed largely a symbolic gesture at the time as other Boston suburbs tightly surround Needham. Surely young people would just buy nearby?

But there was a surprise. The MetroWest Health Foundation, serving 29 Boston suburbs, began surveying high school students on risk behaviors every two years beginning in 2006. By 2010, cigarette smoking by Needham High School students had dropped by more than half (red) while the surrounding MetroWest suburbs (blue) fell only slightly. The percent decline in youth smoking in Needham was nearly triple that of its neighbors. Experts attribute this decrease to loss of social sources. Teen smoking is not powered by illegal sales nearly as much as by legal sales to older youth. Raising access to age 21 puts legal purchasers outside the social circle of most high school students.



1. adapted from materials available from Tobacco Twenty-One, www.tobacco21.org

2. adapted from materials developed by the Health Policy Institute of Ohio, www.healthpolicyohio.org

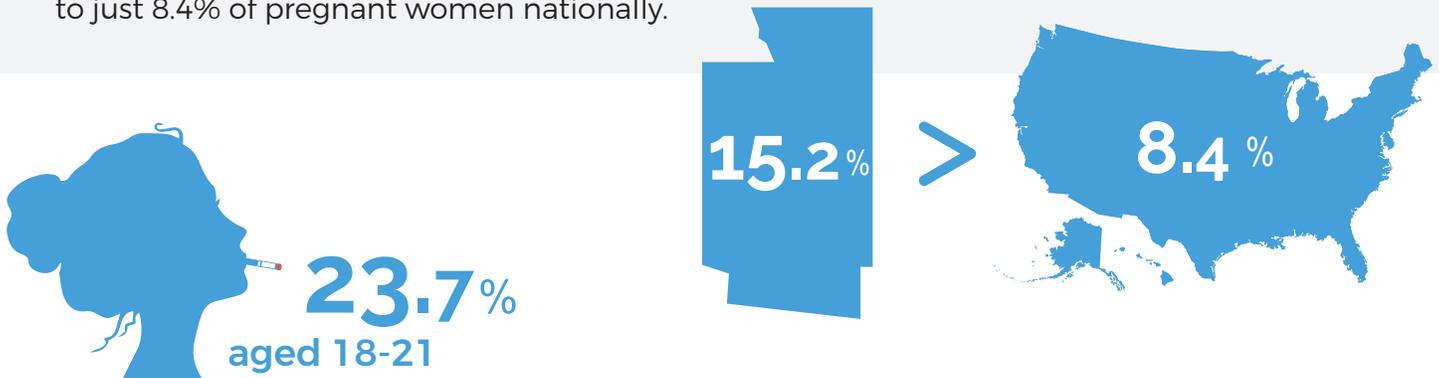


TOBACCO 21 & INFANT MORTALITY

We know raising the minimum sales age for tobacco to 21 years old improves health outcomes, saves communities money, and prevents children, teens and young adults from accessing tobacco. But could it also help fight the infant mortality crisis in Summit County?

Smoking During Pregnancy

- According to 2014 data, the pregnancy smoking rate in Summit County is nearly twice the national average.
- In Summit County, 15.2% of all pregnant women smoked during their pregnancy, compared to just 8.4% of pregnant women nationally.



Younger Moms Smoke More

- In Summit County, pregnant women under aged 21 smoke much more than their older counterparts.
- According to 2014 Summit County data, 23.7% of pregnant women aged 18-21 smoked while pregnant, compared to 14.0% of pregnant women aged 22 or older.
- The high rate of smoking in pregnant women aged 18-21 in Summit County is almost triple the smoking rate in all pregnant women nationally (23.7% vs 8.4%).

Could T21 Improve Birth Outcomes?

- Along with higher rates of smoking while pregnant, Summit County also has a high infant mortality rate. The infant mortality rate in Summit County is 30% higher than the US rate.
- From 2012-2016, 23.9% of infant deaths were to mothers who smoked during pregnancy.
- During that period, the rate of maternal smoking for mothers with infant deaths was 65% higher than the county average for all births.