

**Please Support the Elimination of Youth Penalties for Tobacco**

We urge Vermont legislators to remove the fines on youth for possessing and purchasing tobacco products as noted in [S.41](https://legislature.vermont.gov/Documents/2022/Docs/BILLS/S-0041/S-0041%20As%20Introduced.pdf).

**Youth Purchase Use or Possession (PUP) laws are not effective public health prevention, because they:**

* **Distract from more effective enforcement measures**: Penalizing kids is not an effective strategy to reduce youth tobacco use, a finding that is even more relevant when the behavior in question is addictive. Some experts argue that PUP laws could detract from more effective enforcement measures and tobacco control efforts. [[1]](#footnote-1)
* **Make kids, many of whom are addicted to tobacco, the victims.** PUP laws unfairly punish and stigmatize kids, many of whom become addicted because of the tobacco industry’s aggressive marketing to kids.
* **Prevent youth from seeking counseling or cessation resources for fear of being fined.**
* **Are not a proven measure for reducing youth smoking.** Tobacco companies, including Reynolds America, and their allies have a history of supporting PUP laws as alternatives to tougher tobacco industry regulations that would produce greater declines in youth smoking.

**Background**

Tobacco and e-cigarette manufacturers claim they do not target youth. Yet, they sell kid-appealing, flavored tobacco products, produce colorful, tech-savvy designs and promote these products through social media. According to the U.S. Surgeon General, we now have an e-cigarette epidemic among our middle and high-school students. The statistics are alarming:

* 90 percent of adult smokers started smoking before the age of 18. [[2]](#endnote-1)
* 70% of US middle and high school tobacco users have used at least one flavored tobacco product in the past 30 days.[[3]](#endnote-2)
* There are more than 15,500 flavors on the market today. Up from 7,700 in 2014.[[4]](#endnote-3)
* Tobacco industry internet marketing increased from $125,000 in 1998 to $36.1 million in 2017[[5]](#endnote-4)
* The tobacco industry also spends billions on in-store marketing. 29% of Vermont schools are within 1,000 ft of a tobacco retailer.[[6]](#endnote-5)

**PUP laws are also inequitable because they disproportionately affect youth of color:**

* Youth of color are more likely to smoke because these populations have been targeted via advertising and retailer placement by the tobacco industry.[[7]](#endnote-6) [[8]](#endnote-7)
* In addition to carrying a higher burden of tobacco-related harm, African American and Hispanic youth report higher citation rates than their white peers even after accounting for smoking frequency.[[9]](#endnote-8) These findings mirror disparities recorded throughout criminal justice and school disciplinary systems.
* Enforcement of PUP laws also disproportionately affects youth from low-income communities. High smoking rates are correlated with low income, and there are more tobacco retailers and advertisements in less affluent areas.[[10]](#endnote-9) Consequently, low-income youth are more likely to smoke and to be affected by PUP laws.
* A child with a job, a single parent, or 2 parents who work outside the home may struggle to complete community service or pay fines. If a violation results in suspension of a driver’s license, travel to school, a job, or a community service site becomes more difficult. A child who is unable to complete community service or pay fines may be subject to escalating penalties that are increasingly difficult to resolve. Further, the resulting stress takes a toll on health and increases the likelihood of risky behaviors or involvement with juvenile justice, mental health, substance use, or other systems.[[11]](#endnote-10)

Public health experts know the evidence-based strategies that help reduce tobacco use and help prevent youth from ever using a tobacco product include: **prohibiting the sales of all flavored tobacco products, tobacco price increases, comprehensive smoke-free policies and a fully-funded tobacco prevention program that includes strategic anti-tobacco media campaigns.**

For more information, contact:

Jill Sudhoff-Guerin, jsudhoffguerin@vtmd.org, 802- 917-5817

Stephanie Winters, swinters@vtmd.org, 802-223-7898

Tina Zuk, tina.zuk@heart.org, 802-578-3466

1. 1 Wakefield, M, and Giovino, G, “Teen penalties for tobacco possession, use, and purchase: evidence and issues,” Tobacco Control, 12(SupplI):i6-i13, 2003; Jason, LA, et al., “Youth Tobacco Sales-to-Minors and Possession-Use-Purchase Laws: A Public Health Controversy,” J Drug Education, 35(4):275-290, 2005. [↑](#footnote-ref-1)
2. U.S. Department of Health and Human Services. The Health Consequences of Smoking—50 Years of Progress: A Report of the Surgeon General. Atlanta: 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 [accessed 2019 Feb 28]. [↑](#endnote-ref-1)
3. Corey, C.G., et al., Flavored tobacco product use among middle and high school students—United States, 2014. MMWR Morbitity and Mortality Weekly Report, 2015. 64(38): p. 1066-1070 [↑](#endnote-ref-2)
4. Zju, S-H, et al. Evolution of Electronic Cigarette Brands from 201302014 to 2016-2017: Analysis of Brand Websites. Journal of Medical Internet Research. 2018 Mar; 20(3) e80. [↑](#endnote-ref-3)
5. U.S. Federal Trade Commission (FTC), Cigarette Report for 2017, 2019, https://www.ftc.gov/system/files/documents/reports/federal-tradecommission-cigarette-report-2017-federal-trade-commission-smokeless-tobacco-report/ftc\_cigarette\_report\_2017.pdf [data for top 5

manufacturers only]. [↑](#endnote-ref-4)
6. <https://counterbalancevt.com/get-the-facts> [↑](#endnote-ref-5)
7. Bach, L. Tobacco Company Marketing to Kids. Washington, DC: Campaign for Tobacco-Free Kids. [www.tobaccofreekids.org/assets/factsheets/0008.pdf](http://www.tobaccofreekids.org/assets/factsheets/0008.pdf) . Accessed on March 5, 2019. [↑](#endnote-ref-6)
8. American Lung Association, Campaign for Tobacco-Free Kids, American Cancer Society, et al. Achieving Health Equity in Tobacco Control. truthinitiative.org/sites/default/files/Achieving%20Health%20 Equity%20in%20Tabacco%20Control%20-%20Version%201.pdf. Published December 8, 2015. Accessed on March 5, 2019. [↑](#endnote-ref-7)
9. Gottlieb NH, Loukas A, Corrao M, McAlister A, Snell C, Huang PP. Minors’ tobacco possession law violations and intentions to smoke: implications for tobacco control. Tobacco Control. 2004;13(3):237. [↑](#endnote-ref-8)
10. American Lung Association, Campaign for Tobacco-Free Kids, American Cancer Society et al. Achieving Health Equity in Tobacco Control. truthinitiative.org/sites/default/files/Achieving%20Health%20 Equity%20in%20Tabacco%20Control%20-%20Version%201.pdf. [↑](#endnote-ref-9)
11. Rew L, Horner SD. Youth resilience framework for reducing health-risk behaviors in adolescents. J Pediatr Nurs. 2003;18(6):379- 388. [↑](#endnote-ref-10)