

Preventing Teenage Tobacco Addiction

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Tobacco use remains a major health problem among children and adolescents. Restrictive school policies on tobacco use and enforcement of laws prohibiting the sale of tobacco to minors can produce substantial reductions in tobacco use among this population. This

article provides practical, step-by-step instructions to help physicians get these policies implemented in their communities.

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Despite a steady decline in adult smoking, tobacco use among children and teenagers continues at alarming rates.¹ Smoking among high school seniors dropped by 29% in the 4 years preceding 1981, but since then the decline has slowed to less than one tenth of that rate. Furthermore, the use of smokeless tobacco by youths has increased dramatically during the past two decades.²

Two recent studies have unveiled a new tool that is producing important results in reducing tobacco use among teenagers.^{3,4} If you are concerned about this problem in your community, there is now something simple and effective you can do.

Whereas early research suggested that peer pressure and parental example were the key factors contributing to tobacco use by adolescents, more recent studies indicate that three factors are of greater importance: the sale of tobacco to minors,^{3,4} school policies on smoking,⁵ and the advertising and promotion of tobacco.⁶ Policies are more easily changed than peer or parental behavior. This article concerns the importance of policies regarding smoking in schools and access to tobacco purchases.

School Policies

During the 1970s and 1980s, many schools made it convenient for students to smoke by setting up smoking areas within schools. This was done even in states where it was illegal to purchase or possess tobacco products before the age of 18 or 19. School smoking areas then, as

now, provided students with a safe haven where they could obtain and experiment with tobacco without fear of repercussions. School smoking areas have been a public health policy disaster. A British study showed early in the 1980s that smoking rates were much higher among students graduating from schools that permitted student smoking.⁵

Smoke-free school policies have been endorsed by the National School Boards Association.⁷ A model school smoking policy⁸ is shown in Table 1.

You can determine what the smoking policy is in your school system by calling the superintendent's office. If students are allowed to smoke, your first priority should be to get this policy changed. A letter from you and concerned colleagues can be addressed to the superintendent of schools and to the school board. If the policy is not changed quickly, the next step is to request an opportunity to address the school board on the issue. Through your practice you should be able to identify concerned and articulate parents to accompany you to the board meeting. If there is a parent-teachers association (PTA) it may provide help as well. It is unlikely that there would be any significant opposition to a ban on student smoking.

Access to Tobacco

Laws in 46 states that prohibit the sale of tobacco to underage purchasers have been widely ignored.⁹ Across the country, the age at which young people are legally permitted to buy cigarettes ranges from 16 to 19, yet 75% of tobacco retailers illegally sell tobacco to children as young as 11 years of age.^{10,11} The tobacco industry asserts that the illegal sale of their products to minors has no effect on teenagers' use of tobacco. Yet when Wood-

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Table 1. Model School Policy on Tobacco

1. Students shall not be allowed to possess tobacco products on school grounds. Tobacco products brought onto school grounds shall be confiscated.
2. Use of tobacco products by students, staff, and visitors shall be prohibited in school buildings, on school property, and at school functions.
3. If students possess tobacco products, their parents shall be notified and invited to meet with school personnel concerning the matter.
4. Students possessing tobacco products shall be offered treatment for potential nicotine addiction.
5. Help with smoking cessation shall be offered to students in school on a regular basis.
6. Students possessing tobacco products shall face appropriate disciplinary action.
7. All grades, K through 12, shall receive instruction concerning tobacco on an annual basis.

Adapted from DiFranza,⁸ with permission.

ridge, Illinois, became the first community in the United States to stop the illegal sale of tobacco to minors, daily smoking among junior high school students in Woodridge dropped by an astounding 69%.³ In Leominster, Massachusetts, initial enforcement efforts have so far managed to convince about two thirds of retailers to obey the law.⁴ Even with this limited compliance, smoking at the junior high school level fell by 40% over a 1-year period. These studies strongly suggest that the careless sale of tobacco to children is a major factor in continuing high rates of tobacco use in this population.

The purpose of the Woodridge and Leominster programs is quite simple: find out who is selling tobacco to minors and make them stop. Retailers who are selling to minors are identified by test buys conducted by underage buyers employed by the enforcing agency. Underage buyer inspections should be conducted 5 to 6 times each year. A system of fines and license suspensions should be used to encourage retailers to refrain from making future sales to minors (Table 2).

Even if you live in a state that does not prohibit the

Table 2. Model Regulations Concerning the Sale and Distribution of Tobacco

- It is illegal to sell, give, or furnish tobacco in any form to an individual under the age of 21.
- Before tobacco is sold to an individual, the retailer must obtain positive proof that the customer is of legal age to purchase tobacco.
- The distribution of free samples of tobacco is prohibited.
- The sale of candy products manufactured to resemble tobacco products is prohibited.
- Tobacco may be sold only by licensed tobacco retailers.
- The sale of tobacco from a vending machine is prohibited.
- These regulations will be enforced through routine compliance testing conducted by law enforcement officials employing underage shoppers.
- A violation of these regulations will be considered a civil offense punishable by a fine or a license suspension or both.

sale of tobacco to minors, your community should still be able to adopt a local ordinance.

The effort to halt the illegal sale of tobacco to children is best portrayed as exactly what it is: a children's health issue. The first step is to generate community concern over the problem of children using tobacco. At the same time you will want to start to identify other people in your community who will support your efforts.

Family physicians have successfully used two techniques to raise community awareness and concern. One is to demonstrate how common tobacco use is among children in your community by conducting a survey of junior and senior high school students. This can be arranged by contacting a school nurse, a sympathetic teacher, or a member of the school administration. The survey should be anonymous and can be quite brief (Table 3).

If the school is small, you may want to survey all the students. If it is large, a representative sample from each grade is sufficient. The school can tell you how many students are enrolled in each grade. Since the prevalence of tobacco use is inversely related to academic performance, do not survey only the honors classes.

When you obtain your results remember that the only acceptable rate of tobacco use among teenagers is zero. From the smoking rates obtained for each grade, extrapolate to the entire school population to determine the number of underage smokers in the community. By assuming that each teenaged smoker smokes one half pack of cigarettes each day, you can estimate the number of illegal sales of tobacco that occur in the community each year.

These data should be shared with elected officials and members of the health department, the police, and the school department. Ask these persons for a commitment to help end the illegal sale of tobacco to minors.

You will probably want to release the data to the local media. If the community is served by a local paper, the publisher will undoubtedly want to give this issue considerable coverage. You should talk to the assignment editor of the paper to determine which reporter covers health issues. That reporter will appreciate being informed about future antismoking activities. It may also be helpful to meet with the newspaper editorial board to explain your concerns and plans.

The second technique, which has been widely used to generate concern, is to demonstrate how easy it is for children to buy tobacco. This is done by enlisting the cooperation of a young child. Illegal sales to children who are 11 or 12 years old generate much more concern than sales to a 16-year-old. Girls have more success at purchasing tobacco than boys, so it may be most productive to enlist the aid of an 11- or 12-year-old girl. An adult should take the child to 10 or more stores. While the adult waits outside, the child attempts to purchase

Table 3. Sample School Survey

Age _____ Male Female

Have you ever smoked even a single cigarette?
Yes _____ No _____

Have you ever tried using chewing tobacco or snuff?
Yes _____ No _____

How old were you when you first used tobacco? _____
Never have used _____

Have you smoked or used chewing tobacco or snuff in the past week?
Yes _____ No _____

Where do you buy most of your tobacco?
 Vending machines
 Convenience stores
 Supermarkets
 Drug stores
 Gas stations
 Other _____ (write in)

tobacco. A record is made of each attempt and the results. Be sure to include vending machines. If you do not want to undertake the investigation yourself, you may suggest it to a local reporter.

If it is illegal in your state for children to purchase or possess tobacco, obtain permission from your local law enforcement officials first or conduct "sham" buys. In a sham buy, the child asks for tobacco but, when it is clear that the salesperson is willing to make the sale, the child states that she does not have enough money to pay for it. With a vending machine the child inserts the correct change, and if she has not been stopped by then, simply pulls the coin return lever and retrieves the money instead of making the purchase.

It is important not to create the impression that you are against, or trying to embarrass, the local business community. Most retailers do not want children to smoke and will cooperate with efforts to enforce the law

if they see it as a positive health effort rather than an attempt to get them into trouble. Thus, do not release the names of offending stores to the news media.

Once you have identified teenagers' tobacco use as a problem, the next step is to propose a solution. In most communities some effort is usually made to obtain voluntary compliance with the law by educating vendors (Table 4). This may be as simple as a letter from the police chief or as elaborate as a multimedia campaign. Studies have shown that such efforts will usually result in a moderate increase in compliance that diminishes with time.¹² After efforts to obtain voluntary compliance have been completed, it is time to conduct a test of merchant compliance using underage buyers. The failure of voluntary compliance efforts will make it clear to the community that active law enforcement is necessary.

Model tobacco-access laws are available.^{10,13-15} Some key provisions are outlined in Table 2. The established standard is that proof of age is required for all tobacco purchases.

Most state laws on access to tobacco make enforcement difficult since they consider the sale of tobacco to a minor to be a criminal rather than a civil offense. This requires that violations of the law be prosecuted through the court system. This may be burdensome and time consuming. It is preferable that sales to minors be considered a civil offense, similar to a parking violation, which can then be handled administratively outside of the courts through the issuance of a citation. Violations may be punishable by fining the retailer, or by suspending or revoking the retailer's tobacco permit or license.

A permit or license should be required for all tobacco retailers. This provides enforcement authorities

Table 4. Possible Responses to Retailers Who Oppose Tobacco Sales Restrictions

If retailers are approached early in the process for their input they will often, but not always, be supportive of your efforts. Here are some arguments you may hear and how you might respond.

RETAILER: Why bother? Kids will just go somewhere else to buy tobacco. They will go to the next town or get older kids to buy for them.
RESPONSE: Although some kids will go through the extra work of obtaining tobacco, the dramatic drop in tobacco use in Woodridge and Leominster³ demonstrate that these laws are effective.

RETAILER: Why restrict vending machines? Only 3% of tobacco sales are from vending machines.
RESPONSE: The younger a child is, the more likely he or she is to use vending machines. Twenty-two percent of 12-year-olds obtain their tobacco from vending machines as compared with 2% of 17-year-olds. Children use vending machines if they cannot buy cigarettes over the counter. Alcohol cannot be sold from vending machines.

RETAILER: Locking devices on vending machines make them equivalent to selling tobacco over the counter because a face-to-face interaction is required.
RESPONSE: It may seem so, but when Utah required locking devices on vending machines, they found that 90% of the machines were never equipped with them. In St Paul, Minnesota, 1 year after a locking device law went into effect, 30% of the vending machines were not equipped with the devices.*

RETAILER: This is just more regulation.
RESPONSE: In most states, laws prohibiting the sale of tobacco to minors have been on the books since the turn of the century. We are simply trying to make an old law enforceable.

*Forester JL, Hourigan ME, Kelder S. Evaluation of a city ordinance requiring locking devices on cigarette vending machines. Unpublished data, 1992.

with both a list of tobacco retailers and the funds to support the small cost of enforcement. Officials may then use the threat of suspension or revocation of the licenses of violators as a means of enforcement.

Tobacco vending machines should be banned because they provide easy access to minors even when they are located in bars. If a total ban on vending machines does not seem achievable, your efforts can be directed toward the requirement that all vending machines have remote control locking devices installed to prevent them from being used by minors without authorization.

In many communities, the board of health has the authority to establish regulations concerning tobacco sales. Alternatively, the local governing body may authorize ordinances or bylaws. It should take only a few telephone calls to determine which municipal body is appropriate. In the long run, tobacco use should be a higher priority problem for the health department than for the police department, so if possible, it would be best to approach the board of health.

Conclusions

The adoption of appropriate school policies on tobacco use and the enactment and enforcement of laws prohibiting the sale of tobacco to minors have proven to be effective at reducing tobacco use by adolescents. With all that is known today about the addictive and dangerous properties of tobacco, there is no excuse for communities to fail to enact and enforce these lifesaving policies.

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