



Testimony of Shannon Quinby
Eastern Regional Director
Preventing Tobacco Addiction Foundation/Tobacco 21
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Members of the Public Health Committee:

Thank you for allowing me to submit testimony on behalf of the Preventing Tobacco Addiction Foundation and the Tobacco 21 organization in strong support of Senate Bill 164 that would limit the sales all nicotine and tobacco products--including electronic cigarettes and nicotine devices--to those 21 and over.

According to the U.S. Surgeon General, 5.6 million American children alive today will die prematurely from smoking unless our trajectory changes.

In 2015, a Congressionally-mandated 347-page report compiled by the *Institute of Medicine* focused on a way to reduce this toll: raise the minimum legal sales age of all tobacco products to 21. The report, entitled *Public Health Implications of Raising the Minimum Age of Legal Access to Tobacco*, details the compelling evidence of the Tobacco 21 policy. Using conservative assumptions, the data indicates this policy alone would result in a 25% decrease in smoking initiation among 15 to 17-year-olds, the key target population for this policy.

Ninety-five percent of current smokers started before age 21. If a person has not become a smoker by age 21 there is only a 5% chance they ever will. Neuro-biological evidence tells us that normal adolescent development includes a strong urge for exploration, independence and peer acceptance, resulting in taking risks most adults would not. We also know the developing adolescent brain is uniquely sensitive to the addictive effects of nicotine. Big Tobacco knows this too, which is why it targets adolescents with predatory marketing. Fewer smokers under age 21 will mean fewer lifelong smokers and this in turn will significantly lower smoking prevalence in our schools, workforce and communities.

Properly enforced, Tobacco 21 laws disrupt the *social availability* of cigarettes and other tobacco products to young people. Tobacco 21 laws work by putting legal purchasers outside the social circle of most high school students and making it more difficult for 15- to 17-year-olds to pass as legal purchasers or have a legal purchaser as a friend.

Tobacco 21 saves future lives too. Teenage women under the age of 21 have a 50% higher rate of smoking during pregnancy than pregnant women over 21. Smoking during pregnancy increases the rate of infant mortality, miscarriage, stillbirth, premature birth, birth defects and sudden infant death syndrome.

Despite considerable progress, tobacco use is not an issue of the past and remains costly to society. Between excess absenteeism, smoking breaks and additional health care interventions smokers require, the total annual cost of a smoker in the U.S. to a private employer is about \$5,800.

Smoking is costly to Connecticut as well. The annual economic burden of smoking in Connecticut is estimated at about \$2 billion-- 1.25 billion of this in smoking-caused productivity losses. Medicaid costs in Connecticut directly caused by smoking are \$520 million each year, and the annual tax-payer cost of smoking-related government expenditures is \$853 per household.

As members of the Public Health Committee, you are undoubtedly aware of the toll of smoking on your state. Your commitment to the health of Connecticut is positively reflected in your indoor air policy, your high per-pack cigarette tax and your increase in coverage for tobacco cessation medications to Medicaid enrollees. Although Connecticut's adult smoking rate at 13.3% is below the national average, the rates of Connecticut high school students who smoke are above average at 10.3%. The importance of increased efforts to prevent youth from a lifetime of nicotine addiction cannot be overstated.

An additional word about electronic nicotine delivery systems, or e-cigarettes and vaping devices: Manufacturers of these products claim these devices are less harmful than combustible cigarettes. While this is in part true, what we also are seeing is youth are *initiating* on electronic cigarettes, especially very young teens, then transitioning to tobacco products later. Electronic cigarettes have become gateways to tobacco-cigarette use. These nicotine delivery devices are being marketed with flavors and colors to attract youth and we must stop this practice as well as raise the minimum sales age to 21.

We have a duty to protect our youth from addictive and deadly tobacco and nicotine products so they might become the first *truly tobacco-free generation*. Thank you for your dedication to public health, for preserving a healthy future for Connecticut's youth and for considering SB 164.