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April 15, 2015

TO: The Honorable Floyd Prozanski, Chair  
The Honorable Jeff Kruse, Vice Chair  
Senate Committee on Judiciary

FROM: Karen Girard, Manager  
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Center for Prevention and Health Promotion  
Public Health Division  
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Subject: SB 732, Raising the minimum age for tobacco purchase to 21

Chair Prozanski and members of the committee, I am Karen Girard, the Health Promotion and Chronic Disease Prevention Manager for the Oregon Health Authority.

Oregon's Tobacco Prevention and Education Program (TPEP) is an evidence-based program that is effective. Since TPEP started in 1997, cigarette consumption in Oregon has been reduced by 50%.<sup>i</sup> The TPEP works in partnership with local public health authorities and tribes to prevent and reduce tobacco related deaths in every Oregon community.

Despite declines in tobacco use, it remains the No. 1 preventable cause of death and disease in Oregon. Tobacco is responsible for 7000 deaths in Oregon each year<sup>ii</sup>.

Most addiction to tobacco starts in adolescence; in fact, nine of ten adults who smoke report that they started smoking before turning 18, and almost 100 percent start before they turn 26.<sup>iii</sup> Increasing the minimum age of legal access to 21 will help prevent young people from ever starting to smoke and reduce the deaths, disease and health care costs caused by tobacco use.<sup>iv</sup>

Research shows that kids often turn to older friends and classmates as sources of tobacco.<sup>v</sup> Younger kids have regular contact with older friends who can legally purchase

tobacco for them. Among Oregon 8<sup>th</sup> grade students who smoke cigarettes, 34 percent report obtaining tobacco from friends that are 18 years-old or older.<sup>vi</sup> Raising the tobacco sale age to 21 would reduce the likelihood that young adults will be able to legally purchase tobacco products for other students and underage friends.

A recent report released by the Institute of Medicine details the public health implications of raising the minimum legal age to purchase tobacco products.<sup>vii</sup> The study found that increasing the minimum age to purchase cigarettes from 18 to 21 could have a meaningful impact, resulting in an estimated 12 percent decrease in smoking prevalence over time, and the prevention of 223,000 premature deaths among Americans born between 2000 and 2019.<sup>viii</sup> It would also result in about 286,000 fewer pre-term births and 438,000 fewer babies born with low birth weights (fewer mothers using tobacco).<sup>ix</sup>

Raising the minimum legal sale age for tobacco products to 21 is a promising strategy to reduce smoking and other tobacco use among Oregon youth. In the past two years New York City, Hawaii County, Evanston, Illinois and several communities in Massachusetts have raised the minimum legal sales age to 21. California, Washington, and Hawaii are currently considering this policy statewide.

The Public Health Division appreciates this committee addressing tobacco prevention. Thank you for the opportunity to testify today. I am happy to answer any questions you may have.

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<sup>i</sup> Orzechowski and Walker (2014). The Tax Burden on Tobacco Historical Compilation Volume 49, 2014. Arlington, Virginia. [http://www.taxadmin.org/fta/tobacco/papers/tax\\_burden\\_2014.pdf](http://www.taxadmin.org/fta/tobacco/papers/tax_burden_2014.pdf). Accessed April 3, 2015.

<sup>ii</sup> Oregon Vital Statistics. Oregon Vital Statistics Annual Report: Volume 2. Chapter 6: Mortality. Oregon Vital Statistics Webpage. <https://public.health.oregon.gov/BirthDeathCertificates/VitalStatistics/annualreports/13v2/Documents/table619.pdf>. Accessed April 3, 2015.

<sup>iii</sup> U.S. Department of Health and Human Services. Preventing Tobacco Use Among Youth and Young Adults: A Report of the Surgeon General, 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, 2012.

<sup>iv</sup> IOM (Institute of Medicine). 2015. *Public health implications of raising the minimum age of legal access to tobacco products*. Washington, DC: The National Academies Press.

<sup>v</sup> Campaign for Tobacco-Free Kids. Where do youth smokers get their cigarettes? Campaign for Tobacco-Free Kids Website. <http://www.tobaccofreekids.org/research/factsheets/pdf/0073.pdf>. Accessed April 14, 2015.

<sup>vi</sup> Oregon Healthy Teens (OHT) Survey, 2013. Oregon Health Authority. Chronic Disease Data. Youth Data. Tobacco use and related topics. Oregon Health Authority Webpage. [https://public.health.oregon.gov/DiseasesConditions/ChronicDisease/DataReports/Documents/datatables/ORAnnualOHT\\_Tobacco.pdf](https://public.health.oregon.gov/DiseasesConditions/ChronicDisease/DataReports/Documents/datatables/ORAnnualOHT_Tobacco.pdf). Accessed April 14, 2015.

<sup>vii</sup> IOM (Institute of Medicine). 2015. *Public health implications of raising the minimum age of legal access to tobacco products*. Washington, DC: The National Academies Press.

<sup>viii</sup> IOM (Institute of Medicine). 2015. *Public health implications of raising the minimum age of legal access to tobacco products*. Washington, DC: The National Academies Press.

<sup>ix</sup> IOM (Institute of Medicine). 2015. *Public health implications of raising the minimum age of legal access to tobacco products*. Washington, DC: The National Academies Press.