

## **Resolution Supporting Raising the Legal Sales Age for Tobacco & Vapor Products from 18 to 21**

**WHEREAS** tobacco use remains the leading cause of preventable death in the United States, killing more than 8,300 Washingtonians each year, and causing cancer, heart disease, and respiratory diseases, among other health disorders, that add an estimated \$2.81 billion in annual health care costs in Washington alone;

**WHEREAS** about 95 percent of adult smokers begin smoking before they turn 21;

**WHEREAS** adolescence and young adulthood are critical periods of growth and development, and exposure to nicotine has lasting, adverse consequences on brain development;

**WHEREAS**, the Surgeon General has stated that “e-cigarette use poses a significant – and avoidable – health risk to young people in the United States. Besides increasing the possibility of addiction and long-term harm to brain development and respiratory health, e-cigarette use is associated with the use of other tobacco products that can do even more damage to the body;”

**WHEREAS**, in 2016, of Washington state 12<sup>th</sup> graders, 20% used e-cigarettes; 11% smoked cigarettes; 9% smoked cigars, and 6% used smokeless tobacco;

**WHEREAS** on September 12, 2018, FDA Commissioner Scott Gottlieb announced that youth use of electronic-cigarettes and vapor products has reached an "epidemic proportion of growth", and significant efforts must be taken to prevent a new generation from becoming addicted to nicotine;<sup>6</sup>

**WHEREAS** in 2015 the Institute of Medicine (IOM) concluded that raising the legal sales age for all tobacco products to 21 would reduce tobacco initiation among youth, especially those aged 15-17, improve health across the lifespan, and save lives;<sup>7</sup>

**WHEREAS**, the IOM projected that if the legal sales age for tobacco products were raised to 21 nationwide, there would be approximately 223,000 fewer premature deaths, 50,000 fewer deaths from lung cancer, and 4.2 million fewer years of life lost for persons born in the US between 2000 and 2019, and result in near-immediate reductions in preterm births, low birth weight babies, and sudden infant death syndrome;<sup>8</sup>

**WHEREAS** the states of California, New Jersey, Massachusetts, Oregon, Hawaii and Maine and over 350 localities, including New York City, Chicago, San Antonio, Boston, Cleveland, Minneapolis, and both Kansas Cities have raised the minimum legal sale age of tobacco to 21;

**WHEREAS** legislation to raise the legal sales age for tobacco and vapor products from 18 to 21 has been introduced in the Washington State Legislature but has not yet been enacted;

**WHEREAS** the King County Democrats want to protect the young people of our district from the devastating impacts of tobacco and nicotine addiction;

**THEREFORE BE IT RESOLVED** the King County Democrats call upon our representatives in the State Legislature to raise the legal sales age for nicotine delivery systems (including tobacco) and vapor products from 18 to 21; we also call upon the Board of Health of Seattle-King County to provide for best practices enforcement and ongoing tobacco prevention education for the community.

*Adopted November 27, 2018, by the King County Democratic Central Committee*

Originated by Tobacco-Free Kids and Tobacco at 21  
Adopted by the 46<sup>th</sup> LD on October 17, 2018, Julie Anne Kempf, Chair  
Submitted to KCDCC by the 46<sup>th</sup> LD and by Corina Pfeil

1. CDC, *Best Practices for Comprehensive Tobacco Control Programs—2014*.
2. United States Department of Health and Human Services. Substance Abuse and Mental Health Services Administration. Center for Behavioral Health Statistics and Quality. National Survey on Drug Use and Health, 2014. ICPSR36361-v1. Ann Arbor, MI: Inter-university Consortium for Political and Social Research [distributor], 2016-03-22. <http://doi.org/10.3886/ICPSR36361.v1>
3. HHS, *The Health Consequences of Smoking—50 Years of Progress: A Report of the Surgeon General*, 2014, <http://www.surgeongeneral.gov/library/reports/50-years-of-progress>
4. National Academies of Sciences, Engineering, and Medicine (NASEM), *Public Health Consequences of E-Cigarettes*, Washington, DC: The National Academies Press, 2018, <http://nationalacademies.org/hmd/Reports/2018/public-health-consequences-of-e-cigarettes.aspx>
5. Washington Healthy Youth Survey, 2016
6. U.S. Food and Drug Administration. FDA takes new steps to address epidemic of youth e-cigarette use. News Release September 12, 2018 <https://www.fda.gov/NewsEvents/Newsroom/PressAnnouncements/default.htm>
7. Institute of Medicine, *Public Health Implications of Raising the Minimum Age of Legal Access to Tobacco Products*, Washington, DC: The National Academies Press, 2015, <http://www.nationalacademies.org/hmd/Reports/2015/TobaccoMinimumAgeReport.aspx>
8. Ibid
9. Campaign for Tobacco-Free Kids, [https://www.tobaccofreekids.org/assets/content/what\\_we\\_do/state\\_local\\_issues/sales\\_21/states\\_localities\\_MLSA\\_2\\_1.pdf](https://www.tobaccofreekids.org/assets/content/what_we_do/state_local_issues/sales_21/states_localities_MLSA_2_1.pdf)