purposes of this subsection, "non-emergency situation" means any situation that does not reasonably constitute a threat to the public interest, safety or welfare.

(2) The respondent named in a charging document shall be given notice of the date of the adjudicatory hearing which may appear on the face of the notice of violation, citation, or other charging document. Notice of the hearing date may be given in any of the following ways: (i) by first class mail or by overnight or two-day commercial delivery service at the respondent's last known address or if the respondent is a business entity, at any address identified for its registered agent or at its principal place of business; or, (ii) by personal service, (iii) by posting upon the property that is the site of the alleged violation(s) when the respondent is the owner or person in control of the property, or (iv) by any other means permitted by law for service of civil summons.

(3) If service is provided by first class mail or by overnight or two-day commercial delivery service, the fifteen-day period shall begin to run on the day that the notice is deposited in the mail or given to the commercial delivery service, as applicable.

(d) The original or a legible copy of the notice of violation, citation, or other charging document shall be filed with the office of administrative hearings as soon as practicable at the place and in the manner as the administrative hearings supervisor directs. Upon receiving the original or legible copy of the charging document, the administrative hearings supervisor shall select a hearing date and give respondent notice of the date, time, and place of the hearing in the manner set forth in subsection (c), unless the charging document sets forth the date, time, and location of the hearing and was served on the respondent as provided in subsection (c)(2).

(e) Parties to an adjudicatory hearing may be represented by an attorney, present witnesses, and cross-examine opposing witnesses. Parties may request the administrative law judge to issue subpoenas according to the authority granted in subsection 8-6(c).

(Ord. No. 07-O-0061, § 2, 8-6-2007)

Sec. 8-9. - Representation at hearings.

(a) *City representation:* The case for the city may be presented by a city employee, or by an attorney designated by the city attorney, but not by an employee or other representative of the office of administrative hearings except as allowed by subsection 8-7(b).

(b) *Respondent representation:* The case for the respondent may be presented by the respondent or by an attorney or agent of the respondent. An attorney or agent appearing at an adjudicatory hearing on behalf of a respondent shall present the administrative law judge with a signed appearance form stating, on oath or affirmation, that he or she has been authorized by the respondent to represent the respondent at the hearing.

(Ord. No. 07-O-0061, § 2, 8-6-2007)

Sec. 8-10. - Default.

(a) If at the time set for hearing, the respondent, or his/her attorney or agent of record, fails to appear, the administrative law judge may enter a default judgment of liability against the respondent and impose fines and assess costs. A copy of the order of default shall be served in any manner permitted by this article and applicable to the violation. The order shall advise the respondent of the procedure for setting aside the default judgment and shall also apprise the respondent of the availability of an appeal of the default judgment to the Circuit Court of DuPage County. The default judgment shall be

mailed promptly to the respondent as provided by subsection 8-8(c)(1). The default judgment constitutes a final determination for purposes of judicial review and is subject to review under the Illinois Administrative Review Act.

(b) A respondent against whom a default judgment has been entered may file a motion with the office of administrative hearings to set aside the default judgment and request a new hearing. A motion to set aside a default judgment may be filed at any time if the respondent alleges lack of subject matter or personal jurisdiction. In all other cases, the motion must be filed within twenty-one (21) days of entry of the default judgment. A motion to set aside a default judgment shall set forth the reason(s) the respondent failed to appear on the original hearing date. The administrative law judge shall hear and rule on the motion. If the administrative law judge grants the motion, a hearing will be held immediately on the alleged Code violation(s) set forth in charging document unless the respondent requests another hearing date and presents good cause for continuing the hearing.

(c) If any default judgment is set aside pursuant to this section 8-10, the administrative law judge shall have authority to enter an order extinguishing any lien which has been recorded for any debt due and owing the city as a result of the vacated default judgment.

(Ord. No. 07-O-0061, § 2, 8-6-2007)

Sec. 8-11. - Fines; compliance bond.

(a) All fines and other payments must be made within ten (10) calendar days from the date of the final determination.

(b) If the administrative law judge issues an order of compliance, the administrative law judge may order the respondent to post either a cash bond or other security bond to ensure respondent's timely compliance. Any non-cash security bond shall name the city as beneficiary and shall be in the amount specified by the administrative law judge. Any bond issued as a result of an administrative law judge's order is subject to review and approval for sufficiency of the bond by the city administrator. If the respondent fails to timely remedy the Code violation(s) for which a bond has been issued and the city undertakes remediation or otherwise expends funds related to the Code violation(s), the administrative law judge, after giving the parties notice and opportunity to be heard, may issue an order permitting the city to draw against the bond in an appropriate amount. The administrative law judge shall order the bond amount, less the reasonable costs incurred by the city, returned to the respondent upon proof of compliance. Upon failure to achieve compliance, the administrative law judge shall, upon written petition of the city, increase the assessed fine by ten (10) percent for each day beyond the original compliance date that compliance has not been achieved.

(c) Nothing in this article shall prevent the administrative hearings supervisor from issuing citations which are payable to the city without a hearing.

(Ord. No. 07-O-0061, § 2, 8-6-2007)

Sec. 8-12. - Enforcement of administrative law judge's order.

(a) Any fine and any administrative, enforcement, or compliance costs imposed by an administrative law judge's order that remain unpaid after the exhaustion of, or the failure to exhaust, judicial review procedures, unless stayed by a court of competent jurisdiction, shall be a debt due and owing the city and may be collected in accordance with applicable law.

(b) After the expiration of the period for which judicial review may be sought, unless stayed by a court of competent jurisdiction, the determination of liability of an administrative law judge may be

enforced in the same manner as a judgment entered by a court of competent jurisdiction. At such time, the administrative hearings supervisor shall send a notice of final determination of liability to respondent.

(c) Any fine, penalty, and/or cost remaining unpaid after the notice of final determination of liability is sent shall constitute a debt due and owing the city. Failure of the respondent to pay such fine or penalty within twelve (12) days of the notice may result in a lien against the respondent's property (and foreclosure of such a lien) or such other remedies as may be available by law, including the denial of the issuance or renewal of licenses or permits from the city.

(d) In any case in which a respondent fails to comply with an administrative law judge's order to correct a Code violation, any expenses incurred by the city to enforce the administrative law judge's order, including but not limited to attorney's fees, court costs and costs related to property demolition or foreclosure, shall be a debt due and owing the city. Prior to any expenses being fixed by an administrative law judge pursuant to this subsection (d), the respondent shall be provided with notice that directs the respondent to appear at a hearing before an administrative law judge to determine whether the respondent has failed to comply with the administrative law judge's order. The notice shall set the place and the time for the hearing, which shall not be less than seven (7) days from the date the notice is served. Notice may be served by first class mail or by an overnight or two-day commercial delivery service and the seven-day period shall begin to run on the date that the notice was personally served, deposited in the mail or placed with the overnight or commercial delivery service.

(e) Nothing in this section shall prevent the city from enforcing or seeking to enforce any order of an administrative law judge in any manner provided by law.

(Ord. No. 07-O-0061, § 2, 8-6-2007)

Sec. 8-13. - Drivers license suspension for unpaid parking violations.

(a) A notice of impending suspension of a person's drivers license shall be sent to any person determined to be liable for the payment of any fine or penalty that remains due and owing on ten (10) or more vehicular standing or parking regulation violation(s):

  (1) The notice shall state that the failure to pay the fine or penalty owing within forty-five (45) days of the date of the notice will result in the municipality's notifying the Secretary of State that the person is eligible for initiation of suspension proceedings under Chapter 625 ILCS 5/6-306.5, which section is incorporated herein by reference.

  (2) The notice of impending drivers license suspension shall be sent by first class mail, postage prepaid, to the address recorded with the Secretary of State.

  (3) The notice shall also state that the person may obtain a photostatic copy of an original ticket imposing a fine or penalty by sending a self addressed, stamped envelope to the municipality along with a request for the photostatic copy.

(b) Upon a failure to pay fines and penalties deemed due and owing the municipality after the exhaustion of administrative procedures set forth in Chapter 8, Article I, for ten (10) or more vehicular parking violations, the hearings supervisor, or his/her designee, shall make a certified report to the secretary of state stating that the owner of a registered vehicle has failed to pay any fine or penalty due and owing the municipality as a result of ten (10) or more violations of municipal vehicular standing or parking regulations and thereby cause the suspension of that person's driver's license.

(c) The hearings supervisor shall take no further action unless and until the fines and penalties due and owing the municipality are paid or upon determination that the inclusion of the person's name on the certified report was in error. At such time, the hearings supervisor shall submit to the secretary of state a notification which shall result in the halting of a driver's license suspension proceedings. The person named therein shall receive a certified copy of such notification upon request and at no charge.

(d) Persons may challenge the accuracy of the certified report by completing a form provided by the hearings supervisor or his/her designee. The form shall specify the grounds on which such challenge is based. Grounds for challenge shall be limited to the following:

(1) The person was neither the owner nor the lessee of the vehicle so receiving ten (10) or more violation notices on the date or dates such notices were issued; or

(2) The person has paid the fine and/or penalty for the ten (10) or more violations indicated on the certified report.

(e) The hearings supervisor shall render a determination within fourteen (14) business days of receipt of the objection form and shall notify the objector of the determination.

(Ord. No. 07-O-0042, § 3, 6-4-2007; Ord. No. 08-O-0020, § 3, 3-17-2008)

Sec. 8-14. - Election of remedies.

In no case may an administrative law judge conduct an adjudicatory hearing for an alleged Code violation where the remedy is a punishment of imprisonment.

Nothing in this article, however, shall preclude the city from petitioning a court of competent jurisdiction to adjudicate any ordinance violation or an ordinance violation, which provides the remedy of imprisonment, or from petitioning a court of competent jurisdiction to impose the remedy of imprisonment for failure to comply with an order of an administrative law judge.

(Ord. No. 07-O-0042, § 3, 6-4-2007; Ord. No. 07-O-0061, § 2, 8-6-2007; Ord. No. 08-O-0020, § 4, 3-17-2008)"

Section 2. That all ordinances and resolutions, or parts thereof, in conflict with the provisions of this Ordinance are, to the extent of such conflict, hereby repealed

Section 3. That this Ordinance shall be in full force and effect from and after its passage, approval and publication in pamphlet form as provided by law.

PASSED this 7th day of May 2018.

Alderman J. Beifuss	_____	Alderman L. Chassee	_____
Alderman J. Sheahan	_____	Alderman H. Brown	_____
Alderman A. Hallett	_____	Alderman Ferguson	_____
Alderman Birch Ferguson	_____	Alderman S. Dimas	_____
Alderman K. Meissner	_____	Alderman M. Garling	_____
Alderman R. Stout	_____	Alderman G. Garcia	_____
Alderman N. Ligino-Kubinski	_____	Alderman B. Gagliardi	_____

APPROVED as to form: _____
City Attorney

APPROVED this 7th day of May 2018.

_____
Mayor, Ruben Pineda

ATTEST:

_____
City Clerk, Nancy M. Smith

PUBLISHED: _____

CITY OF WEST CHICAGO

PUBLIC AFFAIRS COMMITTEE
AGENDA ITEM SUMMARY

ITEM TITLE:

Ordinance No. 18-O-0018 – Authorizing the Disposal of Surplus Equipment, Stock Inventory, and/or Personal Property Owned By the City Of West Chicago

AGENDA ITEM NUMBER: 4.C.

COMMITTEE AGENDA DATE: April 23, 2018
COUNCIL AGENDA DATE: May 7, 2018

STAFF REVIEW: Michael Uplegger, Chief of Police **SIGNATURE**_____

APPROVED BY CITY ADMINISTRATOR: Michael L. Guttman **SIGNATURE**_____

ITEM SUMMARY:

City staff has identified surplus equipment, stock inventory, and/or personal property that has no useful life and is no longer useful to the City, has little or no salvage value, and should be properly disposed of (please refer to Ordinance No. 18-O-0018 and Attachment "A" for additional information).

Therefore, staff is requesting that these items be declared surplus so that they may be disposed of through the City's contractual waste hauler, recycled, donated, or sold to a local scrap dealer for scrap value; in a manner deemed appropriate by the City Administrator, with or without consideration.

ACTIONS PROPOSED:

Staff recommends adoption of Ordinance No. 18-O-0018.

COMMITTEE RECOMMENDATION:

ORDINANCE NO. 18-O-0018

AN ORDINANCE AUTHORIZING THE DISPOSAL OF SURPLUS EQUIPMENT, STOCK INVENTORY, AND/OR PERSONAL PROPERTY OWNED BY THE CITY OF WEST CHICAGO

WHEREAS, in the opinion of the corporate authorities of the City of West Chicago, it is no longer necessary or useful to or for the best interests of the City of West Chicago, to retain ownership of the surplus equipment, stock inventory, and/or personal property hereinafter described; and,

WHEREAS, it has been determined by the City Council of the City of West Chicago to properly dispose of said surplus equipment, stock inventory, and/or personal property.

NOW, THEREFORE, BE IT ORDAINED by the City Council of the City of West Chicago, Illinois, in regular session assembled as follows:

SECTION I. Pursuant to 65 ILCS 5/11-76-4, the City Council of the City of West Chicago finds that the surplus equipment, stock inventory, and/or personal property listed on Attachment "A" are no longer necessary or useful to the City of West Chicago and the best interests of the City of West Chicago will be served by their disposal.

SECTION 2. Pursuant to said Statute, the City Administrator is hereby authorized and directed to dispose of the aforementioned surplus equipment, stock inventory, and/or personal property in any manner deemed appropriate, with or without consideration.

SECTION 3. All ordinances and resolutions, or parts thereof, in conflict with the provisions of this Ordinance are, to the extent of such conflict, hereby repealed.

SECTION 4. That this Ordinance shall be in full force and effect ten (10) days from and after its passage, approval, and publication in pamphlet form as provided by law.

PASSED this 7th day of May 2018.

Alderman J. Beifuss	_____	Alderman L. Chassee	_____
Alderman J. Sheahan	_____	Alderman H. Brown	_____
Alderman A. Hallett	_____	Alderman Ferguson	_____
Alderman Birch Ferguson	_____	Alderman S. Dimas	_____
Alderman K. Meissner	_____	Alderman M. Garling	_____
Alderman R. Stout	_____	Alderman G. Garcia	_____
Alderman N. Ligino-Kubinski	_____	Alderman B. Gagliardi	_____

APPROVED as to form: _____
City Attorney

APPROVED this 7th day of May 2018.

_____
Mayor Ruben Pineda

ATTEST:

_____
City Clerk, Nancy M. Smith

PUBLISHED: _____

ATTACHMENT "A"
LISTING OF SURPLUS ITEMS

ORDINANCE NO. 18-O-0018

SERIAL NUMBER	BRAND	DESCRIPTION
PM200GT501220297	PRECISION MOUNTING TECHNOLOGIES	PANASONIC GETEC DOCKING STATION
PM200GT501220348	PRECISION MOUNTING TECHNOLOGIES	PANASONIC GETEC DOCKING STATION
PM200GT501220349	PRECISION MOUNTING TECHNOLOGIES	PANASONIC GETEC DOCKING STATION
PM200GT501220351	PRECISION MOUNTING TECHNOLOGIES	PANASONIC GETEC DOCKING STATION
PM200GT501220355	PRECISION MOUNTING TECHNOLOGIES	PANASONIC GETEC DOCKING STATION
PM200GT501220356	PRECISION MOUNTING TECHNOLOGIES	PANASONIC GETEC DOCKING STATION
PM200GT501220357	PRECISION MOUNTING TECHNOLOGIES	PANASONIC GETEC DOCKING STATION
PM200GT501220358	PRECISION MOUNTING TECHNOLOGIES	PANASONIC GETEC DOCKING STATION
PM200GT501220360	PRECISION MOUNTING TECHNOLOGIES	PANASONIC GETEC DOCKING STATION
PM200GT501220361	PRECISION MOUNTING TECHNOLOGIES	PANASONIC GETEC DOCKING STATION
PM200GT501220365	PRECISION MOUNTING TECHNOLOGIES	PANASONIC GETEC DOCKING STATION
PM200GT501220369	PRECISION MOUNTING TECHNOLOGIES	PANASONIC GETEC DOCKING STATION
PM200GT501220370	PRECISION MOUNTING TECHNOLOGIES	PANASONIC GETEC DOCKING STATION
PM200GT501220371	PRECISION MOUNTING TECHNOLOGIES	PANASONIC GETEC DOCKING STATION
PM200GT501220372	PRECISION MOUNTING TECHNOLOGIES	PANASONIC GETEC DOCKING STATION
PM200GT501220375	PRECISION MOUNTING TECHNOLOGIES	PANASONIC GETEC DOCKING STATION
01114-GTC100-0365	HAVIS	PANASONIC GETEC DOCKING STATION
01114-GTC100-0366	HAVIS	PANASONIC GETEC DOCKING STATION
01114-GTC100-0367	HAVIS	PANASONIC GETEC DOCKING STATION
01114-GTC100-0368	HAVIS	PANASONIC GETEC DOCKING STATION
BAK092512039367	PANASONIC	iKEY USB KEYBOARD
BAK092512039369	PANASONIC	iKEY USB KEYBOARD
BAK092512039378	PANASONIC	iKEY USB KEYBOARD
BAK092512039380	PANASONIC	iKEY USB KEYBOARD
BAK092512039388	PANASONIC	iKEY USB KEYBOARD
BAK092512039390	PANASONIC	iKEY USB KEYBOARD
BAK092512039396	PANASONIC	iKEY USB KEYBOARD
BAK092512039397	PANASONIC	iKEY USB KEYBOARD
P302297	LEDCO	PANASONIC DOCKING STATION
P302304	LEDCO	PANASONIC DOCKING STATION
UNKNOWN	LEDCO	PANASONIC DOCKING STATION
UNKNOWN	UNKNOWN	VEHICLE INTERIOR PARTITION
2316	MOTOROLA	FINGERPRINT CABINET
725166044C	MOTOROLA	MONITOR ATTACHED TO CABINET
C-DMM-116	HAVIS	2 - MOUNTING BRACKETS
C-DMM-120	HAVIS	6 - MOUNTING BRACKETS
C-MD-302	HAVIS	1 - MOUNTING BRACKET
	1 - 50 GAL PALSTIC GARBAGE CAN	VARIOUS METAL BRACKETS
	1 - 21 GALLON STORAGE CONTAINER	VARIOUS METAL BRACKETS
	3 - 21 GALLON STORAGE CONTAINERS	VARIOUS WIRES AND WIRE HARNESSES
		5 - SILVER METAL STORAGE COMAPRTMENTS
		5 - METAL CENTER CONSOLES
		2 - FORD CROWN VICTORAI TRUNK TRAYS
992-74342382	ZENITH	TELEVISION
HSTNN-EOSC	HEWLETT-PACKARD	LAPTOP

SOFT BODY ARMOR VESTS	
PROTECTIVE PRODUCTS	31 VESTS
GH ARMOR SYSTEMS	5 VESTS
POINT BLANK	3 VESTS
DIAMOND BACK	3 VEST
2ND CHANCE	2 VESTS
TOTAL	44 VESTS

CITY OF WEST CHICAGO

PUBLIC AFFAIRS COMMITTEE
AGENDA ITEM SUMMARY

ITEM TITLE:

Resolution No. 18-R-0028 – Contract Award - Signarama West Chicago (JRC Enterprises, LLC) for Fabrication and Installation of Entrance Signs for City Hall, Police Station, Water Treatment Plant, and the Regional Wastewater Treatment Plant

AGENDA ITEM NUMBER: 4.D.

COMMITTEE AGENDA DATE: April 23, 2018
COUNCIL AGENDA DATE: May 7, 2018

STAFF REVIEW: Tim Wilcox, Assistant Director of Public Works **SIGNATURE**_____

APPROVED BY CITY ADMINISTRATOR: Michael L. Guttman **SIGNATURE**_____

ITEM SUMMARY:

At the February 26, 2018 Public Affairs Committee meeting, staff sought direction for the selection of entrance signs to purchase and have placed at City Hall and the Police Station. Staff provided the Committee with three options and pricing from DeSign Group Signage Corporation for signs made or retrofitted using the same design and materials as the existing gateway signs. Staff also provided information about synthetic stucco monument signs which can be custom made to resemble the existing gateway signs. Staff also listed some additional options in the February 26, 2018 agenda summary such as sandblasted wood, signs to include an LED message board, or some other variation of material and design (these other options were not considered).

The Committee directed staff to pursue the purchase and installation of new smaller (5'6" X 8') synthetic stucco monument signs (faux stone columns) in the same style and appearance as the gateway signs for City Hall and the Police Station.

Staff prepared Request For Proposal (RFP) documents, drawings, and included photos of an existing gateway sign. The RFP document was sent to four sign companies, Aubrey Sign Company from Batavia, Signarama West Chicago (JRC Enterprises, LLC) from West Chicago, Parvin-Claus Sign Company from Carol Stream, and DeSign Group Signage Corporation, from Des Plaines. Staff also requested pricing for an optional City logo plaque to be placed on the front left column of each monument sign, similar to the ones placed on the message board monument sign at Main Street and Neltnor Boulevard. To determine if lower unit prices could be realized by ordering additional signs, staff requested alternate pricing for the purchase and installation of two more: one for the City's Water Treatment Plant and another for the Regional Wastewater Treatment Plant. Currently there is no sign at the City's Water Treatment Plant and an older sign, similar to the one at the Police Station, exists at the entrance to the Wastewater Treatment Plant.

Staff received written quotes back from all four vendors. Signarama West Chicago submitted the lowest price quotes for all of the requested sign options; $15,794.80 for two signs including the City logo plaque, or $30,164.00 for all four signs including the City logo plaque. The total savings to purchase all four signs in one order will be $1,425.60 (price summary and sign specifications attached).

There is currently $35,000 budget in the Capital Projects Fund for installation of entrance signage. It is staff's recommendation that a contract be awarded to Signarama West Chicago (JRC Enterprises, LLC) for fabrication and installation of four synthetic stucco monument signs with additional City Logo plaque for City Hall, Police Station, Water Treatment Plant, and the Regional Wastewater Treatment Plant for an amount not to exceed $30,164.00.

CITY OF WEST CHICAGO

ACTIONS PROPOSED:

Approve Resolution No. 18-R-0028 authorizing the Mayor to execute a contract with Signarama West Chicago (JRC Enterprises, LLC), for an amount not to exceed $30,164.00, for the fabrication and installation of four synthetic stucco monument signs with additional City Logo plaque for City Hall, Police Station, Water Treatment Plant, and the Regional Wastewater Treatment Plant.

COMMITTEE RECOMMENDATION:

RESOLUTION NO. 18-R-0028

A RESOLUTION AUTHORIZING THE MAYOR TO EXECUTE A CONTRACT AGREEMENT WITH SIGNARAMA WEST CHICAGO (JRC ENTERPRISES, LLC). FOR PROFESSIONAL SERVICES RELATED TO THE FABRICATION AND INSTALLATION OF ENTRANCE SIGNS FOR CITY HALL, POLICE STATION, WATER TREATMENT PLANT, AND THE REGIONAL WASTEWATER TREATMENT PLANT

BE IT RESOLVED by the City Council of the City of West Chicago, in regular session assembled, that the Mayor is hereby authorized to execute a Contract Agreement for Professional Services related to the Fabrication and Installation of Entrance Signs for City Hall, Police Station, Water Treatment Plant, and the Regional Wastewater Treatment Plant between the City of West Chicago and Signarama West Chicago (JRC Enterprises, LLC), for an amount not to exceed $30,164.00 in substantially the form attached hereto and incorporated herein as Exhibit "A".

APPROVED this 7th day of May, 2018.

AYES: _____

NAYES: _____

ABSTAIN: _____

ABSENT: _____

_____
Mayor Ruben Pineda

ATTEST:

_____
City Clerk Nancy M. Smith

Editorial: Raise the tobacco-buying age to 21

Cigarettes for sale at Walgreens at State and Randolph streets in Chicago in August 2014. (Nancy Stone / Chicago Tribune)

By **Editorial Board**

FEBRUARY 2, 2018, 12:20 PM

Few 20-somethings or older adults take up cigarette smoking. They understand that the health risks are inevitable and often lethal. Put another way: If people don't get hooked on cigarettes at a young age, they generally don't start to smoke.

How to steer young people away from an addiction that will wreck their health? One way is for Illinois lawmakers to raise to 21 from 18 the legal age to buy tobacco products. That would limit access to cigarettes, and not only for 18-, 19- and 20-year-olds. That's because younger adolescents who smoke need someone to buy, or give them, cigarettes. They're more likely to know an 18-year-old who will do that — often a fellow high school student — than they are to have a 21-year-old running illicit errands for them.

Chicago hiked the tobacco-buying age in July 2016. Early indications suggest a powerful effect. The percentage of Chicagoans 18 to 20 who reported using cigarettes or e-cigarettes fell from 15.2 percent in 2015 to 9.7 percent in 2016, City Hall reports. Dr. Julie Morita, head of the Chicago Department of Public Health, credits much of that drop to the law change. "We were surprised" at the steep decline, she told us.

Now there's a push by state Rep. Camille Lilly, D-Chicago, and state Sen. Julie Morrison, D-Deerfield, to raise the state tobacco-buying age to 21. Count us in.

We don't recommend this change lightly. This page long has opposed Nanny State decrees about what adults may eat, or drink, or (legally) smoke. We've spilled thousands of gallons of ink inviting the government to butt out of those personal choices. We don't want a city where people can't have a mega-huge-gulp soda if they want one. Better information (posted calorie counts, for instance) and more education should suffice to help people make healthier choices on their own.

Those who oppose this change point out, rightly, that age 18 brings many adult obligations and privileges. So why not the ability to buy smokes?

Here's why we say no. The legal age for buying alcohol is still 21 in the U.S. for the same reason that the tobacco age should be: protecting the health of young people and helping them avoid terrible decisions that they and their families will regret for decades to come.

We used similar reasoning to support the statewide ban on smoking in public places a decade ago. Restaurateurs and retailers grumbled about losing customers, as retailers near the state line do when proposals to raise the tobacco age surface. But for us, the overwhelming potential public health benefit tipped the scales.

Think back to 2008. That's when Illinois followed Chicago and imposed a ban on indoor public smoking. Opponents hyperventilated over the possible impact on restaurants and other businesses. But have you heard anyone reminisce about smoke-choked restaurants, offices, bars? Neither have we. Which employees yearn for the days when they choked on secondhand smoke in their jobs? Many smokers admit that even they prefer smoke-free venues.

Three out of 4 American adults — including 7 in 10 cigarette smokers — favor hiking the minimum age to 21, according to the federal Centers for Disease Control and Prevention. California, New Jersey, Oregon, Hawaii and Maine already have hiked the tobacco-buying age. Nearly 300 cities have, too.

That's not the Nanny State forcing an unpopular change on people. That's lawmakers responding to what citizens want.

Join the discussion on Twitter @Trib_Ed_Board and on Facebook.

This article is related to: Camille Y. Lilly

Healthy Chicago Data Brief
2017 Youth Tobacco Use

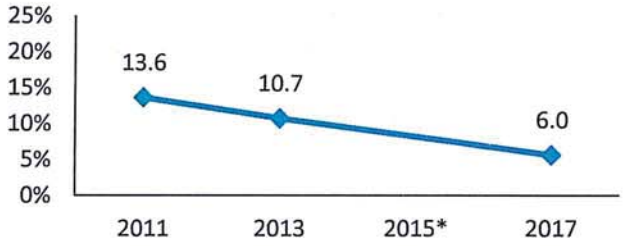
HEALTHY CHICAGO
CHICAGO DEPARTMENT OF PUBLIC HEALTH

Tobacco use is the leading preventable cause of disease and death. Almost all tobacco use begins during youth and young adulthood. **Chicago has made historic progress in our fight to reduce smoking among youth and young adults**, but we have more work to do to ensure the next generation is tobacco-free.

Cigarette Use

Youth cigarette use in Chicago is at an all-time low. According to new data from the Centers for Disease Control and Prevention (CDC), **only 6% of Chicago high school students reported current cigarette smoking** in 2017. This represents a 59% decrease in cigarette smoking among youth since 2011. In 2001, 1 in 4 high schoolers in Chicago smoked cigarettes. Today that number had fallen to less than 1 in 16 high school students (Figure 1).

Figure 1. % High School Students Who Currently Smoke Cigarettes – Chicago, 2011-2017



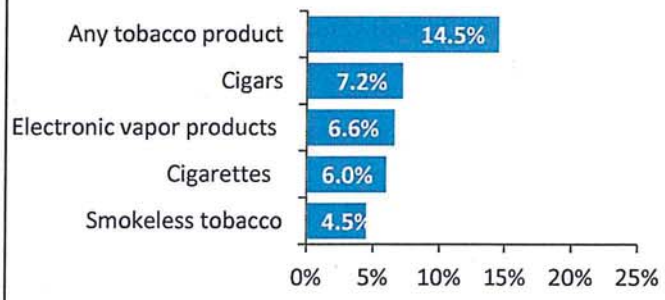
Data Source: Youth Risk Behavior Survey (YRBS), Centers for Disease Control and Prevention
* YRBS data for the City of Chicago was unavailable in 2015

Other Tobacco Use

Even with this historic progress, continued work is needed to prevent the use of other tobacco products, including cigars, electronic cigarettes and smokeless tobacco, among youth and young adults. Tobacco use in any form by youth can be harmful and lead to nicotine addiction among other serious health consequences.

In 2017, **14.5% of Chicago high school students reported current use of any tobacco product**, 7.2% reported current cigar use and 6.6% reported use of electronic vapor products, including e-cigarettes. This is the first time data on e-cigarette use by Chicago teens has been available (Figure 2).

Figure 2. Tobacco Product Use Among High School Students – Chicago, 2017

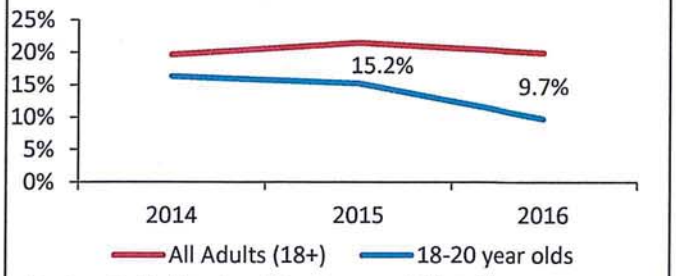


Data Source: Youth Risk Behavior Survey (YRBS), Centers for Disease Control and Prevention

Young Adults and Tobacco 21

In 2015, Mayor Rahm Emanuel and the Chicago City Council raised the minimum legal purchasing age for tobacco to 21. Immediately after this new law was implemented, data from the Chicago Department of Public Health's 2016 Healthy Chicago Survey revealed a dramatic decline in the rate of cigarette and e-cigarette use among residents 18-20 years-old, indicating the impact public policies have on tobacco use. In 2016, 9.7% of residents between 18-20 years-old reported use of cigarettes or e-cigarettes versus 15.2% one year earlier representing a 36% decrease (Figure 3).

Figure 3. % Adults Who Currently Smoke Cigarettes or E-Cigarettes, by Age Group – Chicago 2014-2016



Data Source: Healthy Chicago Survey, Chicago Department of Public Health

Improving Healthy Equity

The Chicago Department of Public Health (CDPH) is committed to achieving health equity, ensuring every resident has the opportunity and resources they need to get and stay healthy.

Tobacco use disproportionately affects people who live in communities that experience high economic hardship, as well as racial and ethnic minorities and lesbian, gay, bisexual, transgender and queer (LGBTQ) people. According to the CDC, a mix of factors including social determinants of health, tobacco industry influence and inconsistent implementation of tobacco control policies contribute to these disparities. Population-based tobacco control efforts, including those being implemented by CDPH, are effective at reducing tobacco use overall. Additional strategies designed to reach populations facing the greatest burden of tobacco use are needed to continue to improve health equity.

How do you prevent tobacco use among youth and young adults?

The most effective tobacco control efforts contain several strategies working together to **make tobacco use less accessible, affordable and attractive**. These include policy changes such as higher tobacco prices, youth access restrictions, and smoke-free laws; mass media campaigns; and other sustained community efforts.

What is Chicago doing to prevent and reduce tobacco use?

Under Mayor Emanuel's leadership, Chicago has become a national leader in tobacco control, by:

- Prohibiting the sale of tobacco products to people under age 21.
- Prohibiting price discounting and coupon redemption for tobacco products by retailers.
- Regulating the sale of flavored tobacco products, including menthol, within 500 feet of high schools.
- Regulating e-cigarettes, including prohibiting their sale to minors, moving them behind the counter in stores, prohibiting e-cigarettes wherever cigarettes are banned and requiring dealers to be licensed.
- Prohibiting the use of smokeless tobacco at baseball stadiums.
- Increasing the cost by raising the cigarette tax by 50 cents and establishing a tax on e-cigarette liquid.
- Doubling fines for illegal tobacco sales to those who sell untaxed cigarettes or tobacco products to minors.
- Expanding Chicago's smoke-free environments to include all parks, beaches and numerous college campuses.
- Launching a series of public education campaigns focused on the products and marketing tactics that the tobacco industry uses to hook young people, which have featured menthol, flavored tobacco and e-cigarettes.
- Investing in local cessation resources to help young adults and others who want to quit.

Additional Resources:

Centers for Disease Control and Prevention (CDC): www.cdc.gov/tobacco/about/osh/
U.S. Federal Drug Administration (FDA): www.fda.gov/TobaccoProducts/AboutCTP/ucm383225
The Truth Initiative: truthinitiative.org
Quit smoking: Call 1-800-QUIT-NOW | www.smokefree.gov | www.becomeanex.org

ChicagoHealthAtlas.org

The Chicago Health Atlas is a website developed by the Chicago Department of Public Health and the City Tech Collaborative to allow users to easily explore, analyze and download health-related data for the city of Chicago. Users can view data on their desktop or mobile device for more than 160 data indicators to explore the demographics, health outcomes, behaviors and social characteristics of Chicago residents and their neighborhoods.

E-Cigs Breed More Smokers Than They Stop

While the device helps some adults quit the habit for good, research suggests nicotine vaping leads to many more tobacco users.

By **Janine Wolf**
March 14, 2018, 1:00 PM CDT

A smoke shop employee uses an e-cigarette. *Photographer: Chris Ratcliffe/Bloomberg*

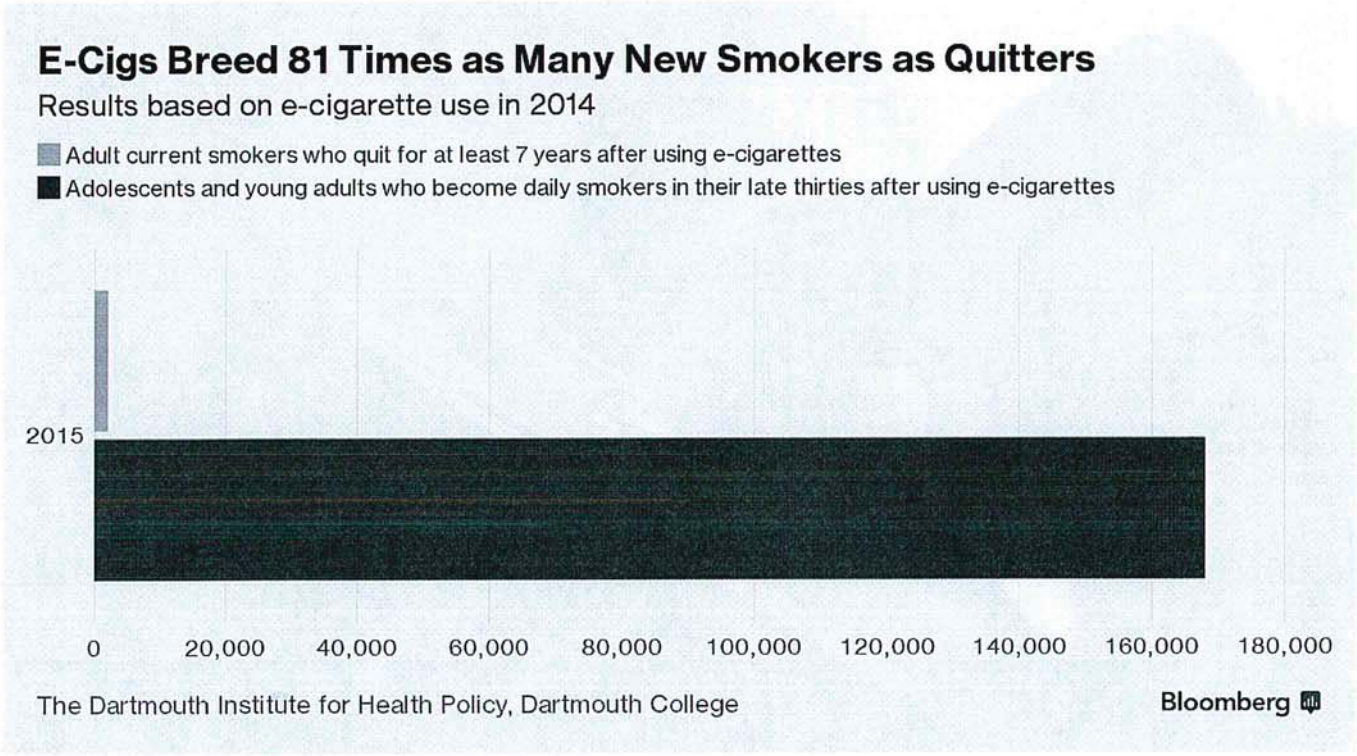
Electronic cigarettes have long been touted not only as a safer alternative to cigarettes but as a potential avenue by which existing smokers might quit. The industry, now worth $11.4 billion <https://bisresearch.com/industry-report/global-e-cigarette-t-vapor-market-2025.html>, hasn't been hurt by this one-two pitch of safety and good public policy.

New research shows, however, that e-cigarettes are hurting a lot more than they help.

Researchers at Dartmouth College's Norris Cotton Cancer Center said vaping has led more people to start a real smoking habit, rather than avoid tobacco or quit in favor of e-cigarettes, according to a study <http://journals.plos.org/plosone/article?id=10.1371/journal.pone.0193328> published Wednesday.

Using 2014 census data, published literature and surveys on e-cigarette usage to build a model, the scientists were able to estimate that about 2,070 cigarette-smoking adults in America quit in 2015 with the help of the electronic devices. However—and perhaps more alarming—the model estimated that, at the same time, an additional 168,000 adolescents and young adults who had never smoked cigarettes began smoking and eventually became daily cigarette smokers after first using e-cigarettes.

The model estimates that e-cigarette use in 2014 would eventually lead to about 1,510,000 years of life lost—a figure based on an optimistic 95 percent relative harm reduction of using e-cigarettes compared to traditional cigarettes.



The Dartmouth Institute for Health Policy, Dartmouth College

Samir Soneji, an associate professor of health policy at Dartmouth's Geisel School of Medicine and the paper's lead author, said that advertising e-cigarettes as a means to quit or reduce smoking has done damage, mostly to young people. E-cigarettes use cartridges of chemicals, including nicotine, that are transformed into vapor. Despite a federal requirement that purchasers be at least 18 years of age, use of the product in popular culture, combined with its fruity flavors, have proved a strong draw to younger, would-be vapers. These characteristics have been at the core of keeping youths interested in the devices, Soneji said, and should be the focus of restriction efforts by the U.S. Food and Drug Administration.

"The harms of e-cigarette use among adolescents and young adults are serious," he said. "Kids who vape are more likely to start smoking cigarettes—notably kids who were otherwise not at a high risk of starting to smoke." Currently, Soneji said, the risk of initiating cigarette smoking is three times as high for adolescents who vape than for those who do not.

In 2015, 68 percent of Americans who smoked wanted to quit, with about 55.4 percent <https://www.cdc.gov/mmwr/volumes/65/wr/mm6552a1.htm?s_cid=mm6552a1_w%20> of them doing so successfully for at least one day, according to the Centers for Disease Control and Prevention. That same year, 45.5 percent <https://www.cdc.gov/healthyyouth/data/yrbs/pdf/2015/ss6506_updated.pdf> of high school-aged cigarette smokers said they had tried to stop smoking over the previous 12 months. After first regulating <https://www.bloomberg.com/news/articles/2016-05-05/e-cigarettes-tobacco-vapor-devices-to-come-under-fda-oversight> the devices in 2016, the FDA embraced vaping as a way for smokers to quit.

Last July, a study <http://www.bmj.com/content/358/bmj.j3262> published in the British Medical Journal found that e-cigarette users were indeed more likely than non-users to attempt to quit smoking—and be more successful at doing so. However, at around the same time the survey was conducted, e-cigarette use among high school students was jumping from 1.5 percent in 2011 to 16 percent in 2015, making the products the most commonly <https://e-cigarettes.surgeongeneral.gov/documents/2016_sgr_full_report_non-508.pdf> used tobacco product by young people in the U.S.

Current research already points toward e-cigarettes being a public health risk because of the chemicals they use, making the new research even more problematic for the industry. However, the Dartmouth researchers point out that a future in which e-cigarettes do help people quit isn't impossible—as long as they're kept out of the hands of young people.

"E-cigarettes could indeed provide more population benefit if they were more effective as a cessation tool," Soneji said. "For example, if smokers who used e-cigarettes to help quit were twice as likely to actually quit compared to smokers who used nicotine-replacement therapy, then the benefits of e-cigarette use would approximately balance the harms of e-cigarette use."

Representatives from Reynolds American Inc., which owns market-leading e-cigarette Vuse, and competitor Altria Group Inc., maker of MarkTen and APEX, didn't immediately respond to requests for comment.

Alex Clark, executive director of Consumer Advocates for Smoke-Free Alternatives Association, an e-cigarette industry lobby group, called the study's results "surprising," given government studies showing an overall decline in smoking. (A recent CDC study shows that while smoking has declined, vaping has increased <https://www.cdc.gov/tobacco/data_statistics/fact_sheets/youth_data/tobacco_use/index.htm> .) Clark said his organization prefers that e-cigarette makers be truthful in advertisements by marketing products as "less risky alternatives" to smoking that have the ability to help smokers quit.

The government has made some effort to dissuade young adopters, with a new requirement for product warnings set to take effect this summer. In October, the FDA addressed youth use of e-cigarettes and other electronic nicotine-delivery systems (ENDS) through its "The Real Cost" campaign. Commissioner Scott Gottlieb said in a statement <https://www.fda.gov/NewsEvents/Newsroom/FDAInBrief/ucm581312.htm> that vaping devices are by far the most common source of experimentation with tobacco products among children.

"While we continue to encourage innovation of potentially less harmful forms of nicotine delivery for currently addicted adult smokers, we can all agree no child should be using any nicotine-containing product," he said.

Michael Bloomberg, the majority owner of Bloomberg LP, parent of Bloomberg News, provides philanthropic support to anti-smoking campaigns and other health initiatives.

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truth initiative
INSPIRING TOBACCO-FREE LIVES

Where we stand: Raising the tobacco age to 21

OCTOBER 2017

Truth Initiative® strongly supports raising the minimum age of sale for all tobacco products to 21 as part of a strong tobacco control policy program. Tobacco remains the number one cause of preventable death and disease in this country, with nearly 500,000 premature deaths a year due to tobacco use.[1] In 2014, the Surgeon General estimated that if tobacco use trends remain on this path, 5.6 million U.S. youth will die prematurely due to smoking.[1] Truth Initiative is committed to creating a world where tobacco is a thing of the past and achieving a culture where youth and young adults reject tobacco. Because most tobacco users start before age 18, and nearly all start before 26,[1] reducing youth access to tobacco is a key tool in accomplishing our mission. For that reason, we support raising the minimum age of sale for all tobacco products to 21.

RATIONALE

Tobacco use among youth has long been a concern because of the harms inherently associated with tobacco use. Evidence suggests that nicotine use during adolescence and young adulthood has long term impacts on brain development,[2] and may make it more difficult to quit using tobacco later.[3] While we have made great strides in reducing both youth and young adult cigarette smoking nationwide, every day more than 3,200 youth smoke their first cigarette and another 2,100 youth and young adult occasional smokers become daily smokers.[1] Young adulthood is also a critical time of development and experimentation. In fact, surveys show that the age of initiation is increasing. So much, in fact, that Truth Initiative shifted the focus of its **truth**® tobacco prevention campaign from 12-17-year-olds to 15-21-year-olds. Additionally, for nearly one third of young smokers, the transition to daily smoking will not occur until after age

18 and young adults have the highest prevalence of current cigarette smoking of any age group.[1] Further, one study showed that half of people who try cigarettes in college still smoke four years later, despite their predictions that they would quit.[4] Clearly, more needs to be done to end this epidemic.

The Family Smoking Prevention and Tobacco Control Act and the recent "deeming regulation" bringing all tobacco products under the jurisdiction of the Food and Drug Administration sets the minimum age for sale of all tobacco products at 18.[5,6] At the same time, the Tobacco Control Act prohibits the FDA from further raising the minimum legal age of sale.[5] States and some localities, however, have the authority to set the minimum age of sale for tobacco products and can raise the age beyond the federal requirement. The first community to raise the age to purchase tobacco to 21 was Needham, Massachusetts, in 2005. Studies conducted in that community showed that past 30-day cigarette smoking among youth was cut almost in half, and frequent smoking in youth dropped by 62 percent. These decreases were significantly larger than those experienced in communities in Massachusetts that did not pass this ordinance.[7] Slowly, over the years, more and more towns and villages passed such laws. New York City was the first large city to make this move in 2013.[8] Currently, most states have a minimum age of sale for tobacco products of 18, but three states have an age of 19 (Alabama, Alaska and Utah),[9] and five states (Hawaii, California, New Jersey, Maine and Oregon) set a minimum age of 21.[10] There are approximately 270 localities that have raised the minimum age of tobacco sales to 21.[10]

THE NATIONAL ACADEMY OF MEDICINE CONCLUDED THAT INCREASING THE AGE OF SALE TO 21 IS LIKELY TO DELAY INITIATION AND REDUCE TOBACCO USE

A 2015 National Academy of Medicine (formerly the Institute of Medicine) report, commissioned by the FDA and required by the Tobacco Control Act, concluded that increasing the age of purchase of tobacco products to 21 could decrease initiation rates among youth and young adults. The impact was greatest among 15-17-year-olds — with an approximate 25 percent decrease in initiation — a substantial decrease — but there was also a strong impact among 18- and 19-20-year-olds — with a nearly 15 percent decrease in initiation rate in both age groups. This reduction or delay in initiation rates, in turn, has an impact on overall smoking prevalence, as well as on the prevalence of other tobacco products. This improves overall health, in both the short and long term, by reducing smoking and other tobacco product-related health effects.

Further, it will reduce secondhand smoke exposure. In addition, the National Academy of Medicine found in its modeling that increasing the age of tobacco purchase, and the subsequent reduction in maternal and paternal smoking, will likely improve maternal, fetal and infant health outcomes.[9]

Tobacco is not the first product to be restricted to age 21. The sale of alcohol has been restricted, in most states, to those over 21 since the 1980s.[11] Several studies have shown that the restriction on alcohol sales to those 21 and older has been successful in reducing drunk driving incidents, as well as contributing to significant decreases in alcohol use and binge drinking among highschoolers.[12] In its report, the NAM determined that "the experience with raising the [minimum legal drinking age] for alcohol is highly suggestive with respect to the prospects that raising the [minimum legal age] for tobacco will appreciably reduce smoking rates."[13]

Indeed, one study estimated that raising the age of purchase of tobacco products to 21 could help reduce youth tobacco use prevalence.[14] Another modeling study determined that increasing the age of purchase to 21 would cause a significant drop in youth smoking in seven years. The study concluded that increasing the age of purchase reduced youth smoking rates more than a 100 percent tax increase.[15]

POLICIES TO INCREASE THE MINIMUM AGE OF SALE TO 21 MUST APPLY TO ALL TOBACCO PRODUCTS

Truth Initiative supports raising the age to purchase tobacco to 21 for all tobacco products — not just cigarettes. As stated earlier, evidence suggests that nicotine can have long-term effects on the developing adolescent brain; the brain develops until age 25.[2] Further, while cigarette use among adolescents has decreased, all tobacco use has remained flat over the last five years. What's more, the rate of high school students using more than one tobacco product has increased over the last five years. While some tobacco products, like cigars and smokeless tobacco, have seen some decrease over the last five years, it has not been as steep a decrease as in cigarettes, particularly in the last two years. For some products, such as hookah and electronic nicotine delivery systems (ENDS), we have seen use among high school students remain disturbingly high.[16]

RETAILERS MUST BEAR THE RESPONSIBILITY FOR ENFORCING LAWS INCREASING THE MINIMUM AGE OF SALE TO 21; THE BURDEN SHOULD NOT BE ON THE PURCHASER

Truth Initiative supports policies that put the burden of enforcement of this policy on retailers, rather than on youth. Youth should not bear the burden of purchase, use or possession laws, which do not take into account the acts of irresponsible retailers and industry marketing. The responsibility for minimum age of sale laws lies squarely on the retailer.

The tobacco industry has disproportionately targeted communities of color.[17] As a result, populations in some communities use tobacco at higher rates than others in the general population. Further, a huge body of research exists showing the impact of tobacco industry marketing on youth and young adult initiation. What is more, studies show that purchase, use or possession laws are ineffective[18] and poorly enforced.[19] Further, these laws have been found to disproportionately impact African-American and Hispanic students.[20]

Unfortunately, most states have purchase, use or possession laws.[9] Increasing the minimum age of sale of tobacco products to 21 could create an opportunity to change those laws. Indeed, Chicago, Illinois, and Cleveland, Ohio, both included language in their laws to eliminate or ensure there were no penalties for purchase, use or possession.[21,22]

INCREASING THE MINIMUM AGE OF SALE TO 21 IS ONE OF MANY TOOLS TO REDUCE TOBACCO USE AMONG YOUTH AND YOUNG ADULTS

Truth Initiative strongly supports increasing the minimum age to 21, however, we do not believe this is the only way to reduce youth tobacco initiation and use. There are many evidence-based measures to decrease tobacco use among youth and in the general population. The key policies and programs include:

- **Increasing the price of tobacco products**
  Most communities do this through tobacco taxes. Studies show that every 10 percent increase in tobacco tax reduces youth tobacco use by 7 percent and decreases tobacco consumption by 4 percent.[23] Other options to increase the price of tobacco products include bans on coupon redemption and minimum price floors for tobacco products.

- **Establishing smoke- and tobacco-free environments**
  These policies reduce secondhand smoke exposure and contribute to those working in tobacco-free environments smoking fewer cigarettes.[1]
- **Fully funding tobacco control programs at the state and local level**
  This helps provide for more quit-smoking services to those who want to quit, as well as programs to help prevent youth and young adults from starting smoking in the first place.
- **Mass media campaigns to prevent youth from starting smoking as well as encouraging current tobacco users to quit**
- **Policies to reduce access to tobacco products (e.g., establishing a minimum age of sale, keeping products behind the counter, prohibiting vending machine sales)**
- **Denormalization strategies, including decreasing youth exposure to tobacco use in movies and other media**
  The less smoking youth see in the media they consume, the less likely they are to initiate tobacco use.

Increasing the age of sale for tobacco to 21 can help reduce youth tobacco use, especially when combined with these other policies. Truth Initiative encourages communities to adopt all of these policies — including increasing the minimum age of sale to 21.

CONCLUSION

Truth Initiative finds the NAM report, and the experiences of those communities and states that have already established a minimum age of sale of 21 for tobacco products, compelling. Truth Initiative is dedicated to finishing tobacco and supports policies that contribute to that goal. Raising the age of sale for tobacco to 21 has the potential to help end tobacco use once and for all.

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INCREASING THE MINIMUM LEGAL SALE AGE FOR TOBACCO PRODUCTS TO 21

"Raising the legal minimum age for cigarette purchaser to 21 could gut our key young adult market (17-20) where we sell about 25 billion cigarettes and enjoy a 70 percent market share."[1]
— Philip Morris report, January 21, 1986

Tobacco use remains the leading cause of preventable death in the United States, killing more than 480,000 people each year.[2] It is known to cause cancer, heart disease and respiratory diseases, among other health disorders, and costs the U.S. as much as $170 billion in health care expenditures each year.[3] Each day, 350 kids under the age of 18 become regular, daily smokers; and almost one-third will eventually die from smoking.[4] If current trends continue, 5.6 million of today's youth will die prematurely from a smoking-related illness.[5]

High tobacco taxes, comprehensive smoke-free laws and comprehensive tobacco prevention and cessation programs are proven strategies to reduce tobacco use and save lives. Increasing the minimum legal sale age (MLSA) for tobacco products to 21 complements these approaches to reduce youth tobacco use and to help users quit.

Five states – California, New Jersey, Oregon, Hawaii and Maine – have raised the tobacco age to 21, along with at least 285 localities, including New York City, Chicago, San Antonio, Boston, Cleveland and both Kansas Cities.[6]

Raising the legal sale age is popular with the public, including smokers. A July 2015 CDC report found that three quarters of adults favor raising the tobacco age to 21, including seven in 10 smokers. The idea has broad-based support across the country, including support among men and women, and Americans of all income, education, race/ethnicity and age groups."[7]

Because it is a relatively new strategy, direct research on the impact of increasing the MLSA to 21 is somewhat limited; but, the data that are available provide strong reason to believe that it will contribute to reductions in youth tobacco use. Central to the MLSA strategy are the facts that many smokers transition to regular, daily use between the ages of 18 and 21; many young adult smokers serve as a social source of tobacco products for youth; and tobacco companies have long viewed young adults ages 18 to 21 as a target market group.

The IOM Predicts MLSA 21 Will Reduce Smoking and Save Lives

A March 2015 report by the Institute of Medicine (IOM), one of the most prestigious scientific authorities in the United States, strongly concluded that raising the tobacco sale age to 21 will have a substantial positive impact on public health and save lives.[8] Based on a review of the literature and predictive modelling, it finds that raising the tobacco sale age will significantly reduce the number of adolescents and young adults who start smoking; reduce smoking-caused deaths; and immediately improve the health of adolescents, young adults and young mothers who would be deterred from smoking, as well as their children. Specifically, the report predicts that raising the minimum age for the sale of tobacco products to 21 will, over time, reduce the smoking rate by about 12 percent and smoking-related deaths by 10 percent, which translates into 223,000 fewer premature deaths, 50,000 fewer deaths from lung cancer, and 4.2 million fewer years of life lost.

Most Adult Smokers Start Smoking Before Age 21

National data show that about 95 percent of adult smokers begin smoking before they turn 21, and a substantial number of smokers start even younger— about 80 percent of adult smokers first try smoking before age 18.[9] While less than half (47%) of adult smokers become regular, daily smokers before age 18, four out of five become regular, daily smokers before they turn 21.[10] This means the 18 to 21 age range is a time when many smokers transition to regular use of cigarettes.[11] According to one national survey, 18-20 year olds are twice as likely as 16-17 year olds to be current smokers (27.1% vs. 11.4%, respectively).[12]

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Tobacco companies have admitted in their own internal documents that, if they don't capture new users by their early 20's, it is very unlikely that they ever will. In 1982, one RJ Reynolds researcher stated:

> *"If a man has never smoked by age 18, the odds are three-to-one he never will. By age 24, the odds are twenty-to-one."*[13]

Delaying the age when young people first experiment or begin using tobacco can reduce the risk that they transition to regular or daily tobacco use and increase their chances of successfully quitting, if they do become regular users.[14] The IOM report notes that the age of initiation is critical and predicts that "Increasing the minimum age of legal access to tobacco products will likely prevent or delay initiation of tobacco use by adolescents and young adults."[15]

Adolescents are particularly vulnerable to the addictive effects of nicotine. The IOM report found that "The parts of the brain most responsible for decision making, impulse control, sensation seeking, and susceptibility to peer pressure continue to develop and change through young adulthood, and adolescent brains are uniquely vulnerable to the effects of nicotine and nicotine addiction."[16] The U.S. Surgeon General has stated that "the potential long-term cognitive effects of exposure to nicotine in this age group are of great concern."[17] Because adolescence and young adulthood are critical periods of growth and development, exposure to nicotine may have lasting, adverse consequences on brain development. The IOM report's review of the literature on the developmental context of youth tobacco use emphasizes that the brain continues to develop "until about age 25."[18] As reported by the U.S. Surgeon General:

> *"This earlier age of onset of smoking marks the beginning of the exposure to the many harmful components of smoking. This is during an age range when growth is not complete and susceptibility to the damaging effects of tobacco smoke may be enhanced. In addition, an earlier age of initiation extends the potential duration of smoking throughout the lifespan. For the major chronic diseases caused by smoking, the epidemiologic evidence indicates that risk rises progressively with increasing duration of smoking; indeed, for lung cancer, the risk rises more steeply with duration of smoking than with number of cigarettes smoked per day."*[19]

Adding to the concern is the fact that young people can often feel dependent earlier than adults.[20] Though there is considerable variation in the amount of time young people report it takes to become addicted to using tobacco, key symptoms of dependence—withdrawal and tolerance—can be apparent after just minimal exposure to nicotine.[21] According to the 2014 Report of the Surgeon General, "the addiction caused by the nicotine in tobacco smoke is critical in the transition of smokers from experimentation to sustained smoking and, subsequently, in the maintenance of smoking for the majority of smokers who want to quit."[22] IOM's recent review summed up the evidence:

> *"It is clear that the juxtaposition of numerous risk factors during the adolescent and young adult years is likely to increase the probability that first trials of tobacco use will turn into persistent use. These factors include the sequence of neurodevelopment in the adolescent years, the unique sensitivity of the adolescent brain to the rewarding properties of nicotine, the early development of symptoms of dependence in an adolescent's smoking experience (well before reaching the 100-cigarette lifetime threshold), and the difficulties that adolescents have in stopping smoking."*[23]

As a result of nicotine addiction, about three out of four teen smokers end up smoking into adulthood, even if they intend to quit after a few years.[24] As noted above, smoking-related health problems are influenced by both the duration (years) and intensity (amount) of use. Unfortunately, individuals who start smoking at younger ages are more likely to smoke as adults, and they also are among the heaviest users.[25] In addition to longer-term health risks such as cancer and heart disease, young people who smoke are at risk for more immediate health harms, like increased blood pressure, asthma and reduced lung growth.[26]

Nationally, 15.7 percent of high school students and 18.7 percent of young adults ages 18 to 24 currently smoke.[27] According to one national survey, 27.1 percent of 18 to 20 year olds currently smoke.[28]

Older Adolescents and Young Adults Are a Source of Cigarettes for Youth

According to the 2016 Monitoring the Future Survey, more than 60% of 10th grade students and nearly half (46.0%) of 8th grade students say it is easy to get cigarettes.[29] This perception that getting cigarettes is easy exists despite the fact that fewer retailers are selling tobacco to underage youth than before. In 2014 (federal fiscal year), the national retailer violation rate was 9.8 percent.[30] This suggests that youth are obtaining cigarettes from sources other than direct store purchases.

Research shows that youth smokers identify social sources, such as friends and classmates, as a common source of cigarettes. Although older and more established youth smokers are more likely to attempt to purchase their cigarettes directly than kids who smoke less frequently or are only "experimenting," they are also major suppliers for kids who do not purchase their own cigarettes but instead rely on getting them from others.[31] And with more 18- and 19-year olds in high school now than in previous years, younger adolescents have daily contact with students who can legally purchase tobacco for them.[32]

A 2005 study based on the California Tobacco Survey found that 82 percent of adolescent ever smokers obtained their cigarettes from others, most of whom were friends. A substantial percentage (40.9%) of the people buying or giving the cigarettes were of legal age (18 years or older) to purchase them, with most (31.3%) being between 18 and 20 years of age. 16- to 17-year-olds were more likely to get their cigarettes from 18- to 20-year olds than were younger adolescents.[33] Another study found that smokers aged 18 and 19 years were most likely to have been asked to provide tobacco to a minor, followed by smokers aged 20 to 24 years and nonsmokers aged 18 and 19 years, respectively.[34]

National studies find that underage youth commonly obtain cigarettes from social networks. The Population Assessment of Tobacco and Health study found that 75% of 15-17 year old current smokers obtained cigarettes from social sources.[35] Data from the National Survey on Drug Use and Health (NSDUH) show that nearly two-thirds (63.3%) of 12- to 17-year olds who had smoked in the last month had given money to others to buy cigarettes for them. One-third (30.5%) had purchased cigarettes from a friend, family member or someone at school. In addition, six out of ten (62%) had "bummed" cigarettes from others.[36]

Raising the sale age of tobacco to 21 is likely to make both direct retail purchase and social source acquisition more difficult for underage youth, especially for 15-,16-, and 17- year olds, "who are most likely to get tobacco from social sources, including from students and co-workers above the [minimum legal age of access] MLA."[37] With the minimum legal sale age set at 21 instead of 18, legal purchasers would be less likely to be in the same social networks as high school students and therefore less able to sell or give cigarettes to them.

Tobacco Companies Target Young Adults Ages 18 to 21

Tobacco industry advertising and promotional activities cause youth and young adults to start smoking, and nicotine addiction keeps people smoking past those ages.[38] Tobacco companies heavily target young adults ages 18 to 21 through a variety of marketing activities—such as music and sporting events, bar promotions, college marketing programs, college scholarships and parties—because they know it is a critical time period for solidifying tobacco addiction.[39] It is also a time when the industry tries to deter cessation and recapture recent quitters.[40]

Tobacco companies realize that the transition into regular smoking that occurs during young adulthood is accompanied by an increase in consumption, partly because the stresses of life transitions during that time—going to college, leaving home, starting a new job, joining the military, etc.—invite the use of cigarettes for the effects of nicotine.[41] Statements obtained from the tobacco industry's internal documents emphasize the importance of increasing consumption within this target market in order to maintain a profitable business:

"...eighteen to twenty-four year olds will be "[c]ritical to long term brand vitality as consumption increases with age."[42]

"...[t]he number one priority for 1990 is to obtain younger adult smoker trial and grow younger adult smoker share of market."[43]

"To stabilize RJR's share of total smokers, it must raise share among 18-20 from 13.8% to 40%...ASAP."[44]

"Our aggressive Plan calls for gains of about 5.5 share points of smokers 18-20 per year, 1990-93 (about 120,000 smokers per year). Achieving this goal would produce an incremental cash contribution of only about $442MM during the Plan period (excluding promotion response in other age groups and other side benefits). However, if we hold these YAS [young adult smokers] for the market average of 7 years, they would be worth ***over $2.1 billion in aggregate incremental profit.*** *I certainly agree with you that this payout should be worth a decent sized investment." [emphasis in original]*[45]

In 2006, after reviewing the evidence against the tobacco companies in a civil racketeering case brought forth by the U.S. Department of Justice, U.S. District Court Judge Gladys Kessler made this conclusion about the industry's marketing practices:

"From the 1950s to the Present, Different Defendants, at Different Times and Using Different Methods, Have Intentionally Marketed to Young People Under the Age of Twenty-one in Order to Recruit 'Replacement Smokers' to Ensure the Economic Future of the Tobacco Industry."[46]

And in 2014, the U.S. Surgeon General eliminated all doubt regarding the industry's role in perpetuating our nation's tobacco epidemic. He stated:

"...the root cause of the smoking epidemic is also evident: the tobacco industry aggressively markets and promotes lethal and addictive products, and continues to recruit youth and young adults as new consumers of these products."[47]

Increasing the Minimum Drinking Age Law to 21 Reduced Youth Drinking and Fatalities

The public health benefits and lessons learned from increasing the minimum drinking age to 21 offer additional support for pursuing a higher MLSA for tobacco products. In the early 1980's, many states raised the legal drinking age to 21. By 1988, all states had minimum drinking age laws of 21.[48] Data from the Monitoring the Future Survey show that past month and binge drinking among high school seniors decreased by 22 percent between 1982 and 1998, while youth drinking driver involvement in fatal crashes decreased by 61 percent over this same time period. The decrease in drinking may account for some of the decrease in drinking and driving.[49]

Subsequent research suggests that raising the minimum drinking age to 21 is associated with reduced alcohol consumption among youth and young adults and fewer alcohol-related crashes.[50] In fact, the National Highway Traffic Safety Administration reports that, since 1975, increasing the minimum drinking age has saved more than 21,000 lives.[51] Moreover, research shows that, when the drinking age is 21, individuals under 21 drink less and continue to drink less through their early twenties.[52] With increased enforcement of the law, these impacts could be even greater.[53]

The IOM concluded in its review that "raising the minimum legal drinking age for alcohol coupled with rigorous enforcement and penalties for violations has been associated with lowered rates of alcohol consumption among adolescents and adults as well as with reduced rates of alcohol-related adverse events (e. g. traffic crashes and hospitalizations)."[54]

Benefits of Raising the MLSA to 21

Comprehensive approaches to addressing public health problems work. Much like increasing the minimum drinking age has not eliminated underage drinking, a higher MLSA is not likely to eliminate underage tobacco use. Rather, it is one more part of a comprehensive tobacco control effort that offers several benefits that could help reduce youth tobacco use and increase the likelihood that youth will grow up to be tobacco-free:

- Delaying the age when young people first begin using tobacco would reduce the risk that they will transition to regular or daily tobacco use and increase their chances of quitting, if they become regular users.[55]
- Raising the MLSA to 21 would increase the age gap between adolescents initiating tobacco use and those who can legally provide them with tobacco products by helping to keep tobacco out of schools.[56]
- Younger adolescents would also have a harder time passing themselves off as 21-year-olds than they would 18-year-olds, which could reduce underage sales.[57]
- MLSA of 21 may simplify identification checks for retailers, since many state drivers' licenses indicate that a driver is under the age of 21 (e.g. license format, color or photo placement).[58]

Campaign for Tobacco-Free Kids, January 11, 2018/Becca Knox

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Raising the Minimum Legal Sales Age for Tobacco and Related Products

The Tobacco Control Legal Consortium has created this series of legal technical assistance guides to serve as a starting point for organizations interested in implementing certain tobacco control measures. We encourage you to consult with local legal counsel before attempting to implement these measures.[1] For more details about these policy considerations, please contact the Consortium.

Background

All states in the U.S. have laws prohibiting retailers from selling tobacco products to minors. In most states, the minimum legal sales age (MLSA) for tobacco products is 18, but a few states have raised it to 19. Recently, Hawaii became the first state to raise the MLSA to 21.[2] As of September 2015, over 90 localities in eight states have raised the MLSA to 21[3]– including New York City, which in November 2013 became the first major city in the U.S. to raise its tobacco sales age to 21.[4]

In 2015, the Institute of Medicine released a report containing compelling evidence of the significant public health benefits of raising the tobacco sales age.[5] The Institute conducted an exhaustive study of existing literature on tobacco use patterns, developmental biology and psychology, health effects of tobacco use, and national youth access laws, and mathematical modeling to predict the likely public health outcomes of raising the minimum legal sales age for tobacco products to 19, 21 and 25 years. The report found that an increased tobacco sales age helps delay smoking initiation among youth, which leads to lower smoking prevalence rates, saving millions of dollars in health care costs as well as significantly increasing not just the length, but also the quality of life, across populations. The Institute concluded that raising the minimum sales age today to 21 would result in a 12 percent decrease in tobacco use, approximately 223,000 fewer premature deaths, 50,000 fewer deaths from lung cancer, and 4.2 million fewer years of life lost for those born between 2000 and 2019.[6] However, as discussed below, these types of laws have been controversial, particularly when they go beyond prohibiting illegal sales by retailers and impose penalties on underage persons for possession, use, or purchase of tobacco and related products.[7]

In 1992, Congress passed a law (known as the Synar Amendment[8]) which conditioned state eligibility for substance abuse prevention and treatment block grants on the state setting its

MLSA for tobacco products no lower than 18 years old. Later that decade, the U.S. Food and Drug Administration (FDA) issued a regulation that established a federal MLSA of 18 years old and required state and local governments to request a waiver to increase the MLSA in their jurisdictions. However, the FDA regulation was invalidated by the U.S. Supreme Court's decision *FDA v. Brown & Williamson Tobacco Corp.*[9] In that case, the Court held that the FDA did not have authority to regulate tobacco products. In 2009, Congress passed the Family Smoking Prevention and Tobacco Control Act,[10] which expressly gave the FDA authority to regulate tobacco products while also delineating the areas where states retained their authority to regulate these products. This 2009 law actually *prohibits* the FDA from establishing a MLSA higher than 18 years old.[11] However, it also requires the FDA to convene an expert panel to study the public health implications of raising the MLSA and report its findings to Congress by 2014.[12] Regardless of these current limitations on the FDA, state and local governments continue to have authority to increase the MLSA for tobacco products.

This guide provides information for state and local policymakers, advocates, and others who are considering raising the MLSA for tobacco and related products as a tobacco control strategy.

Policy Benefits

- **Raising the MLSA would likely lower overall tobacco use rates by reducing and delaying the onset of tobacco use:** Increasing the MLSA for tobacco and related products could promote tobacco control efforts by helping to reduce the number of young people who start using tobacco, as well as by delaying the potential onset of tobacco use by many youth and young adults. Delaying the onset of tobacco use is associated with several long-term health benefits. Not only does it reduce the number of life-years available for tobacco use (and of course, the longer a person uses tobacco, the higher the risk of developing severe health consequences), but delays in onset are also associated with a higher probability of successful cessation efforts later.[13] Raising the MLSA also has been linked to reduced smoking prevalence rates, especially among older youth. For example, after Needham, Massachusetts increased its tobacco sales age to 21 in 2005, tobacco use among high school students dropped nearly in half, and the rate of frequent tobacco use fell by 62 percent.[14] (While the 21 year age restriction may have contributed to this decline, the evaluation results are limited and there are confounding factors that may have also contributed to this decline.[15]) Also, studies of England's experience when it raised the MLSA for cigarettes from 16 to 18 years of age in late 2007 have shown that this increase was associated with rapid and significant drops in smoking prevalence among 16 and 17 year olds regardless of socioeconomic status, even though *smoking by* (as opposed to *sales to*) this age group was not made illegal.[16]

- **Reducing youth access and usage in particular:** High school-aged youth are an important group, which has experienced relatively small declines in tobacco use rates during the past decade.[17] Based on studies showing the effectiveness of youth access laws when they are enforced,[18] increasing the MLSA is likely to be particularly effective in reducing tobacco usage among high school-aged youth by reducing their access to