

8. Tobacco 21

Recently the Institute of Medicine released a report evaluating the public health impact of changing the age at which citizens can purchase tobacco. ¹ The report found that raising the age to 21 would have many health benefits. It would prevent chronic disease as well as other negative health impacts. It would also reduce medical costs, both for individuals and for public healthcare programs, since medical costs vary in proportion with the prevalence of disease. California and Hawaii have both raised the minimum age to 21. ^{2,3}

Supporters of this legislation note that the health benefits of a higher age requirement are clear. Exposure to tobacco smoke, first or second hand, is the number one cause of preventable death in the United States. ⁴ Also, the prevalence of tobacco use in the United States has been declining since the 1990s, and policies such as eliminating the selling of cigarettes in vending machines seem to be contributing to this decline. Tobacco control public health programs around the country work to reduce smoking by providing cessation programs and preventing the initiation of smoking. So if we raise the smoking age to 21, we can promote health not only by preventing people from smoking as teenagers, but also by making them less likely to pick up the habit later in life.

Critics of the legislation note that age 18 is widely accepted as an age at which citizens can make decisions for themselves. For instance, people can join the military and be tried for crimes as an adult at 18. Furthermore, the state requires citizens to sign up for selective service at 18, which means that they might have to put their lives on the line whether they like it or not. Thus, the state is allowing itself to impose health risks on its citizens without allowing them to impose other, less significant health risks on themselves. While smoking may not be a healthy choice, this does not mean that people should not be able to choose to smoke if they want to.

Supposing that we do raise the smoking age to 21, a related question is whether this law should apply to people who are currently between the ages of 18 and 21. Should they be “grandfathered” into the law by retaining the right to purchase tobacco, or should they have this right taken away, in spite of the fact that many of them are now addicted to a substance that they previously had the legal right to purchase?

Study Questions:

1. Should the state restrict people’s choices if doing so brings about good individual and public health consequences? Why or why not?
2. Should the age at which people can purchase tobacco depend on the age at which they can engage in other activities? Why or why not?
3. If the state does raise the smoking age, how should that policy affect people between 18 and 21, and why?

1. <http://www.nationalacademies.org/hmd/Reports/2015/TobaccoMinimumAgeReport.aspx>
2. <http://www.npr.org/sections/health-shots/2016/05/05/476872674/california-raises-age-of-tobacco-purchase-to-21-and-tightens-vaping-rules>
3. <http://health.hawaii.gov/tobacco/home/laws/>
4. https://www.cdc.gov/tobacco/data_statistics/fact_sheets/health_effects/tobacco_related_mortality/