

HB

84



Alaska State Legislature

HOUSE OF REPRESENTATIVES

Official Business

P.O. Box V
State Capitol
Juneau, Alaska 99811

TO: Representative David Finkelstein, Chair
House Labor and Commerce Committee

Representative Pat Parnell
Representative Ivan Ivan
Representative Dave Donley
Representative Betty Bruckman
Representative Robin Taylor
Representative Jim Zawacki

FROM: Representative Kay Brown *efm*

DATE: February 27, 1991

SUBJ: HB 84 — Youth Tobacco Addiction Prevention Act

In anticipation of the House Labor and Commerce Committee hearing tomorrow on HB 84, I wanted to take this opportunity to provide you with a brief explanation of why I feel that this legislation is so important.

Smoking is more than just a nuisance or bad habit. More Americans die each year from smoking related illness than died in all of World War II — nearly one each minute. At the same time, there is a new teenage smoker approximately every 30 seconds. Alaska has the highest age-adjusted lung cancer death rate in the Nation; close to 90% of all lung cancer deaths are caused by cigarettes. The adverse health impacts of tobacco addiction are not only tragic in terms of human lives lost, there are also substantial economic impacts. The federal Department of Health and Human Services estimates that smoking related illness costs the nation about \$52 billion per year in health treatment and other costs — about \$221 per capita.

Finally, I would like to add I do not dislike smokers. In fact, I myself am a cigarette smoker. And, as a smoker, I know how hard it is to quit (I am in the process right now of trying — once again — to quit). While respecting the rights of informed adults to make choices about their personal lives, we must also work to prevent young children from falling victim to tobacco product addiction, illness and death.

I have attached a short "quiz" on tobacco. I think you may find it interesting.

**THE FOLLOWING PAGES
WERE TREATED AS A UNIT
IN THE ORIGINAL FILE**



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HOUSE OF REPRESENTATIVES

Official Business

P.O. Box V
State Capitol
Juneau, Alaska 99811

TO: Representative Dave Donley, Chair
House Judiciary Committee

FROM: Representative Kay Brown *efw*

DATE: March 22, 1991

SUBJ: CS HB 84 (L&C) — Youth Tobacco Addiction Prevention Act

Please find attached the following materials for reference by the House Judiciary Committee during its consideration of CS HB 84 (L&C), legislation that would place restrictions on the sale of tobacco products to children.

1. Sponsor Statement
2. CS HB 84 (L&C)
3. Sectional Analysis
4. Department Fiscal Notes & Position Statements
 - Commerce and Economic Development
 - Revenue
 - Alaska Court System
5. Position Paper/Department of Health and Social Services
6. Additional Information:
 - "Ten Reasons to Ban Tobacco Vending Machines"
 - "Sullivan wants laws to cut tobacco vending"
 - Smoking Compared to Other Causes of Death (pie chart)
 - "Tobacco: A Gateway Substance to Other Drug Dependencies"
 - Tobacco as a Gateway Drug (bar graph)
 - Teenage Smoking/General Accounting Office (fetal effects)
 - "War on drugs must include battle against tobacco"
 - "Cigarette Vending Machines Sell Cigarettes To Children..."
 - "Study attributes 400,000 deaths to past smoking"
 - "Smoking's Ills: Tobacco is taking a huge financial toll"

If you have any questions concerning this legislation, please let me know or contact Eric Myers of my staff at 465-4998.

attachments

SPONSOR STATEMENT

CS HB 84 (L&C) — Youth Tobacco Addiction Prevention Act

CS HB 84 (L&C)

As part of the effort to curb illegal sales of tobacco products to children, CS HB 84 (L&C) has three basic elements:

- CS HB 84 (L&C) would prohibit the sale of tobacco products through vending machines. It is estimated that about sixty percent of current smokers started by age 14, and 90 percent by age 19. Studies have found that children routinely succeed in purchasing cigarettes through vending machines. By eliminating tobacco product vending machine sales, tobacco product sales to minors would require direct merchant supervision through over-the-counter sales.
- CS HB 84 (L&C) would require the placement of warning signs stating that it is illegal to sell tobacco sales to individuals under age 19.
- CS HB 84 (L&C) streamlines the enforcement process for illegal tobacco product sales to minors in two ways: 1) setting the fine for illegal sales at \$300 and allowing for citations to be issued for an infraction; and 2) amending the standard of liability for a violation, changing it from the current "knowing sale" to minors to a negligence standard.

Discussion

Sixty percent of current smokers started by age 14, 90 percent by age 19. Studies have found that children routinely succeed in purchasing cigarettes through vending machines. By eliminating passive sales of tobacco products through vending machines, tobacco product sales to minors would require direct merchant supervision through over-the-counter sales.

According to a research survey sponsored by the vending machine industry, it is the youngest new smokers (the 13 year olds in the survey population) who rely most heavily on vending machines as a source of tobacco products. As noted in the survey: "Teens who bought from vending machines often or occasionally found this source to be attractive because no one will stop them from buying cigarettes this way."

According to a report by the U.S. Inspector General, each day more than 3,000 minors start smoking — more than one million new teenage smokers each year, approximately *one new teenage smoker every 30 seconds*.

- Tobacco causes more premature death than AIDS, use of heroine, cocaine and alcohol, fire, automobile accidents, homicides and suicides combined — *more Americans die each year from smoking related illness than died in all of World War II.*
- No other cancer-causing drug or addictive product or drug that it is illegal for children to possess is sold through vending machines; cigarettes should not be an exception.
- Secretary of Health and Human Services Louis Sullivan and former Surgeon General Koop have called for a ban on tobacco vending machines.
- Studies have found that young children find it relatively easy to purchase cigarettes through vending machines, even those located in bars.
- More than 430,000 Americans die each year of illness and diseases caused by tobacco — *nearly one person each minute, 49 people every hour, 1,179 people each day.*
- Smoking by pregnant women has been linked to fetal and infant mortality. Low birthweight, often associated with mental retardation and other developmental and health problems, has been conclusively linked to the number of cigarettes smoked during pregnancy. Other effects include premature delivery, retardation in fetal growth, and diminished availability of oxygen to the fetus. These problems may affect a child, often severely, throughout its lifetime.
- The federal Department of Health and Human Services estimates that smoking related illness cost the nation about \$52 billion per year (about \$221 per capita) in health treatment and other costs. *In Alaska, it has been estimated that for one year (1985) direct and indirect mortality and morbidity costs were in excess of \$100 million.*
- Tobacco (nicotine) is highly addictive and recognized as a gateway drug.

While respecting the rights of adults to make informed choices about their personal lives and to bear the consequences, CS HB 84 (L&C) is needed to help prevent uninformed and impressionable children from being manipulated by sophisticated advertising practices leading to tobacco product addiction, illness and death.

Sectional Analysis

CS HB 84 (L&C) — Youth Tobacco Addiction Prevention Act

Section 1

Legislative findings.

Section 2

Amends AS 11.76.100 (a) to establish that the offense of making a sale or gift of tobacco is an offense subject to the negligence standard. Removes language referencing the sale of tobacco or tobacco products through vending machines.

Section 3

Amends AS 11.76.100(d) to establish that the sale or gift of tobacco to a minor is a violation punishable by a fine of \$300.

Section 4

Prohibits the sale of cigarettes by vending machines. Requires the court to notify the Department of Commerce and Economic Development of any person convicted under this section who holds a tobacco business license endorsement (AS 43.70.075).

Section 5

Amends AS 43.50.010(a) to remove language referencing the sale of tobacco or tobacco products through vending machines.

Section 6

Amends AS 43.50.010(b) to remove language referencing the sale of tobacco or tobacco products through vending machines.

Section 7

Amends AS 43.50.020 to remove language referencing the sale of tobacco or tobacco products through vending machines.

Section 8

Amends AS 43.50.070 to add that violation of the law regarding the criminally negligent sale or gift of tobacco to minors (AS 11.76.100) or the sale of tobacco products through vending machines (AS 11.76.107) are grounds for the suspension or revocation of a tobacco sales license under AS 43.50.010-180.

Section 9

Amends AS 43.50.075(d) to reference that a violation of AS 11.76.107 (the sale of tobacco products through a vending machine) is grounds for suspension of a tobacco license endorsement.

Section 10

Amends AS 43.50.010 to add a new subsection to require the posting of warning signs on the premises where tobacco or tobacco products are sold.

Section 11

Repeals language referencing the sale of tobacco through vending machines.

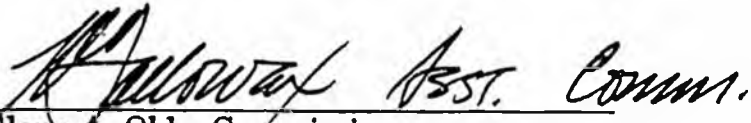
Section 12

Directs the supreme court to include on a schedule of bail amounts the fines resulting from violations of the law regarding tobacco sales or gifts to minors or through vending machines.

CSHB 84 (L&C): "An Act relating to the offense of selling or giving tobacco to a minor; prohibiting sale of tobacco products by vending machine; requiring certain retailers to post a tobacco warning sign; and relating to the suspension or revocation of a license to sell, purchase, possess, or acquire cigarettes."

The bill attempts to reduce the availability of tobacco products by prohibiting the sale of tobacco products by vending machines. The bill also requires the court to notify the business licensing section of the Department of Commerce and Economic Development of any person convicted of violating the prohibition on vending machine sales in order to facilitate suspension of the person's business license tobacco endorsement. The department must also provide a consumer warning sign to be posted by all businesses that are issued the tobacco endorsement on their business license.

CSHB 84 (L&C) will strengthen existing laws concerning the illegal sale of tobacco to minors under the age of 19 by removing the availability of tobacco vending machines and, therefore, the department supports passage of the bill.


Glenn A. Olds, Commissioner

Date: 3-22-91

House Bill No. 84

For an Act entitled: "An Act relating to the sale, exchange, or giving of tobacco and tobacco products."

Summary

This bill amends AS 11.76.100, Selling or giving tobacco to a minor and AS 43.50. Article 1, Cigarette Tax Act, Sections 10 and 20, License and Separate Licenses. The bill repeals Subsection (b) and (c) of AS 11.76.100 and subsection (c) of AS 43.50.030. These subsections refer to the offense committed through the sale of tobacco products to a minor by vending machines and the licensing of vending machine operators to sell tobacco products. Section 107 is added to AS 11.76 prohibiting the sale of tobacco products by vending machines and provides for a fine of not less than \$300.00 for those found in violation. Subsection (d) in AS 11.76.100 is amended to fine persons not less than \$300.00 who are convicted in violation of selling or giving tobacco to a minor. Section 43.50.070(1) is amended to provide for suspension or revocation of license for those found criminally negligent in violation of selling tobacco products to minors or the sale of tobacco products through vending machines.

Subsection (f) is added to AS 43.50.010 and requires persons holding a license to sell tobacco products to post an 11 by 14 inch warning sign that reads "WARNING: Tobacco products are highly addictive. The sale of tobacco products to persons under age 19 is illegal." This sign must also depict a pack of cigarettes defaced by a red diagonal diameter within a surrounding red circle.

Discussion

Only a very small percentage of smokers begin smoking as adults. Efforts at prevention must focus on children. Vending machines are the main source of cigarettes for the youngest children.

Nicotine addiction becomes quickly established in children as evidenced by studies that document the difficulty children have in quitting. Given the prevalence of smoking in the Alaska (33.8%) and the Nation (26.5%), tobacco use is the most widespread form of drug dependency. The sale of tobacco should be considered as seriously as the sale of alcohol and other

addictive drugs.

In addition, tobacco-use represents the most extensively documented cause of disease ever investigated in the history of biomedical research. There are forty-three identified carcinogens present in tobacco smoke and high concentrations of carcinogenic tobacco-specific nitrosamines found in smokeless tobacco.

Maternal smoking is associated with several complications of pregnancy in addition to a 25 to 50 percent high rate of fetal and infant death among women who smoke during pregnancy.

The economic impact of smoking in Alaska, the smoking attributable direct and indirect costs, was 82.3 million in 1985. This includes 2.4 million in pediatric deaths associated with smoking.

Alaska is among the states at highest risk for tobacco use and its devastating health consequences. Alaska has the highest age-adjusted lung cancer death rate in the Nation. Close to 90% of all lung cancer deaths are caused by cigarette smoking and 43.4% of Alaska males over 20 smoke, the highest smoking rate in the country.

Cancer was the second leading cause of death in Alaska in 1986 and 1987, accounting for 21% of all deaths, 30 percent of all cancer deaths and again, 90% of all lung cancer deaths are caused by smoking.

Recent studies by the Centers for Disease Control and the American Cancer Society rank Alaska second in the nation with deaths from oral and pharyngeal cancer and tied for third in our death rate from all cancers. Risk taking behaviors associated with oral and pharyngeal cancer are tobacco use and heavy alcohol consumption.

The elimination of vending machines will make tobacco products less available and reduce children's and adolescent's opportunity to experiment with tobacco products and lessen the likelihood that children will develop a regular pattern of use.

Studies have shown that children and adolescents who start to smoke do not understand the nature of tobacco addiction and are unaware of or underestimate important health consequences of smoking. Children and adolescents decision to smoke is therefore not a fully informed choice.

Studies by states and voluntary health organizations have shown that merchant compliance with tobacco access laws is

low. A recent study reported that 80 percent of the retailers in five states were violating the law and selling to minors.

However, compliance with the law was six times greater in stores where signs were posted compared to stores without signs. The posting of the sign as required by this bill, will increase the difficulty a minor has in obtaining tobacco products through a higher merchant compliance with the law.

The initiatives contained in this bill are becoming more widespread. Legislation restricting the sale of tobacco products through vending machines exists in nine states with Colorado banning the sale of smokeless tobacco products through vending machines.

There are currently 22 cities and/or counties in the U.S. that have a total ban on vending machine sales of tobacco products. In addition, there are 14 states that require the posting of signs relating to prohibiting the sale of tobacco products to minors.

In addition, the 100th Congress introduced legislation, (H.R. 3658), that included the limiting of sales of tobacco products to over-the-counter (prohibiting vending machine sales) and requiring every retail establishment selling tobacco products to post a sign stating "The sale of cigarettes to minors is strictly prohibited".

Given both the highly addictive nature of tobacco use and its adverse health consequences, it is important to protect children and adolescents from using tobacco until they are capable of making a mature and informed decision.

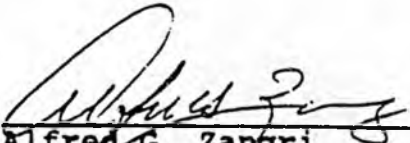
This bill would compliment the laws already in place that are known to reduce the availability of tobacco products to children 1) restricting the sale of tobacco products to minors; 2) banning the use or possession of tobacco by minors; 3) banning vending machines and 4) the posting of signs at the point-of-purchase. Banning the free distribution of tobacco product samples is the fifth policy shown to be effective in preventing initiation of tobacco addiction.

Although addiction is one of the health consequences of the use of tobacco products, the Department recommends strengthening the message on the sign; for example "WARNING: Tobacco products are highly addictive, hazardous to your health and may cause complications during pregnancy. The sale of tobacco products to persons under age 19 is illegal." Stronger language may be substituted such as "a cause of lung disease and cancer".

Recommendation


The Department strongly supports this bill which will help prevent the initiation of smoking among young children and adolescents.

Recommended: _____


Alfred G. Zangri
Acting Director
Division of Public Health

Date: _____

Approved: _____


Theodore Mala, M.D., M.P.H.
Commissioner
Department of Health
and Social Services

Date: _____

2/25/91

10 Reasons to Eliminate Tobacco Vending Machines

1. Cancer-causing, addictive drugs should not be sold as if they were candy or sodapop.
2. No other dangerous, cancer-causing, addictive product or drug that is illegal for children to own is sold through vending machines. Cigarettes should not be the exception.
3. Each day more than 3,000 minors start smoking — approximately one new teenage smoker every 30 seconds — more than one million new teenage smokers each year.
4. According to a survey of high school seniors, the average age for the first use of cigarettes is 13 years. Vending machines are an especially significant source for these youngest of new smokers.
5. Industry sponsored research has documented that teens who illegally buy cigarettes from vending machines find vending machines to be attractive because no one will stop them from buying cigarettes this way.
6. A survey of high school seniors found a strong correlation between those who were cigarette smokers and those who had used harder drugs. Non-smokers were found to be less likely to have used harder drugs.
7. Secretary of Health and Human Services Louis Sullivan and former Surgeon General Koop have called for total ban on cigarette vending machines.
8. The federal Department of Health and Human Services estimates that smoking related illness cost the nation about \$52 billion per year (about \$221 per capita) in health treatment and other costs.
9. In Alaska, it has been estimated that for one year (1985) there were 261 smoking-attributable deaths in Alaskans over age 20 representing 1,363 person-years of potential life lost *direct* costs of \$52.8 million (hospital care, physician services, medication, etc.) and *indirect* morbidity and mortality costs of \$47.7 million — for just one year then, *total costs in excess of \$100 million.*
10. More than twenty local governments in Minnesota have passed total bans on cigarette vending machines.

Sullivan wants laws to cut tobacco vending

WASHINGTON (AP) — The Bush administration on Thursday called on states to help stop children and teen-agers from smoking by banning cigarette vending machines and licensing tobacco retailers.

"We must put an end to the time when any child with a handful of change can commence the slow-motion suicide that is taking the lives of millions of Americans," Health and Human Services Secretary Louis Sullivan told senators.

Sullivan proposed the model federal legislation to guide state lawmakers in creating a licensing system similar to that used for alcoholic beverages and in outlawing cigarette vending machines.

"You can't buy beer from a vending machine," he said in testimony prepared for the Senate Finance Committee, "why should you be able to purchase cigarettes there?"

Also, signs would be required at all points of sale warning that cigarette sales to minors is illegal.

The plan would punish violators with fines and license suspensions.

Forty-four states and the District of Columbia have laws prohibiting the sale of cigarettes to minors. But "these laws are being blatantly ignored," the secretary said.

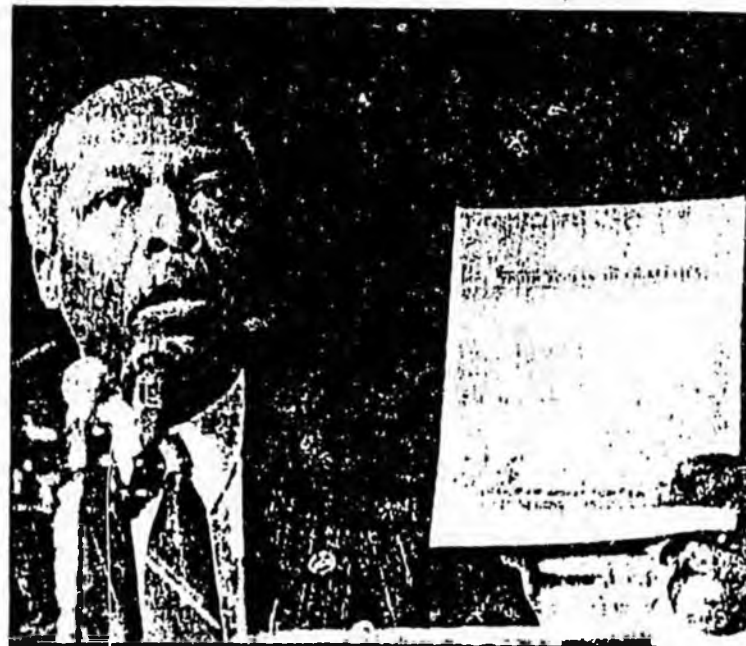
The states that do not have laws are: Kentucky, Louisiana, Missouri, Montana, New Mexico and Wyoming.

Sullivan, who has become the federal government's crusader against smoking, released a report by the Inspector general of the Department of Health and Human Services documenting the widespread lack of enforcement of the state laws.

The few communities that have successfully enforced the laws have done so by licensing tobacco vendors, suspending and revoking licenses, banning or restricting vending machines and using "stings" to identify illegal sales, the report said.

Vending machines account for 16 percent of the cigarettes sold to minors, according to the report.

But the Amusement & Music Operators Association, which represents the vending industry, said only about 9 percent of minors who smoke get their ciga-



ASSOCIATED PRESS

Health and Human Services Secretary Dr. Louis Sullivan holds a report concerning youth access to cigarettes Thursday at a Capitol Hill hearing before the Senate Finance Committee.

rettes from vending machines.

Also, 89 percent of the 375,000 cigarette vending machines are in places where minors are prohibited or are unlikely to frequent.

Sullivan said 90 percent of adult smokers picked up the habit as children or adolescents.

"These young smokers account for almost all of our future problems," he said. "As long as a

significant proportion of teens view smoking as a desirable, adult pleasure, and become addicted before they can make a mature judgment, we will never succeed in eradicating smoking."

Sullivan said it is "more appropriate" to build on the legislation already on the books in 44 states than to have a federal ban on vending machines

Smoking Kills More Americans Each Year Than Alcohol, Cocaine, Crack Heroin, Homicide, Suicide, Car Accidents, Fires, and AIDS combined.

Approximate Number of Deaths:

Smoking.....	390,000 ¹
Alcohol (including drunk driving).....	125,000 ²
Car Accidents (including drunk driving).....	47,000 ³
Fires.....	4,000 ³
AIDS.....	23,000 ⁴
Heroin and Morphine.....	2,400 ⁵
Suicide.....	31,000 ⁵
Homicide.....	21,000 ⁵
Cocaine and Crack.....	3,300 ⁵

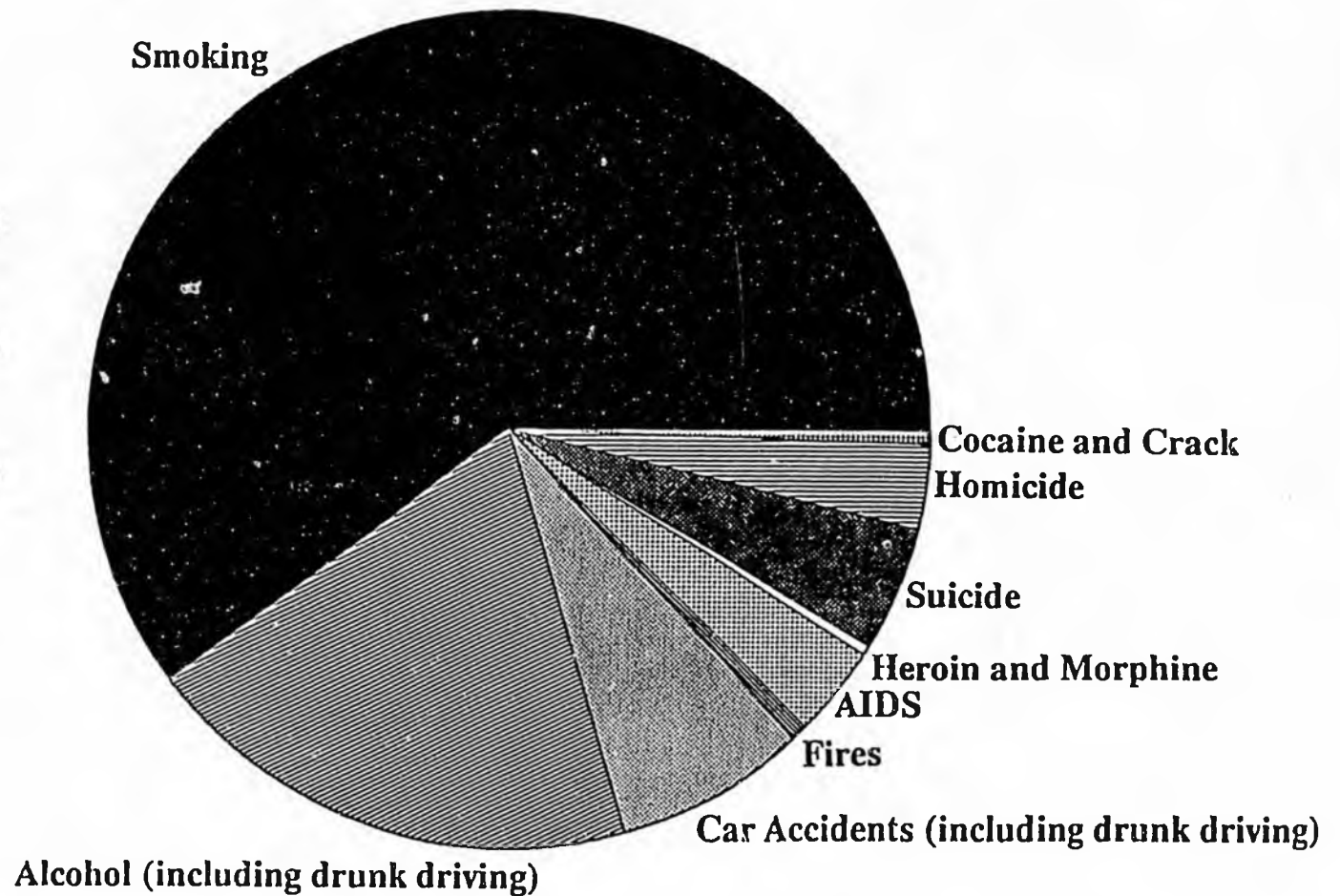
¹1989 Surgeon General's Report, 1985 data

²Surgeon General's Office, 1985 data

³National Safety Council, 1989 data

⁴Center For Disease Control, 1989 data

⁵National Center For Health Statistics, 1987 data



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Tobacco: A Gateway Substance To Other Drug Dependencies

BALTIMORE — Tobacco holds a special status as a "gateway" substance in the development of other drug dependencies, say Jack E. Henningfield, Ph.D., of the National Institute on Drug Abuse Addiction Research Center, and his associates.

The results of studies have shown that the great majority of people who have ever used such illicit drugs as marijuana and cocaine had previously used cigarettes and alcohol. Conversely, people who have never used tobacco are less likely to abuse illicit drugs or alcohol.

The relationship between cigarette

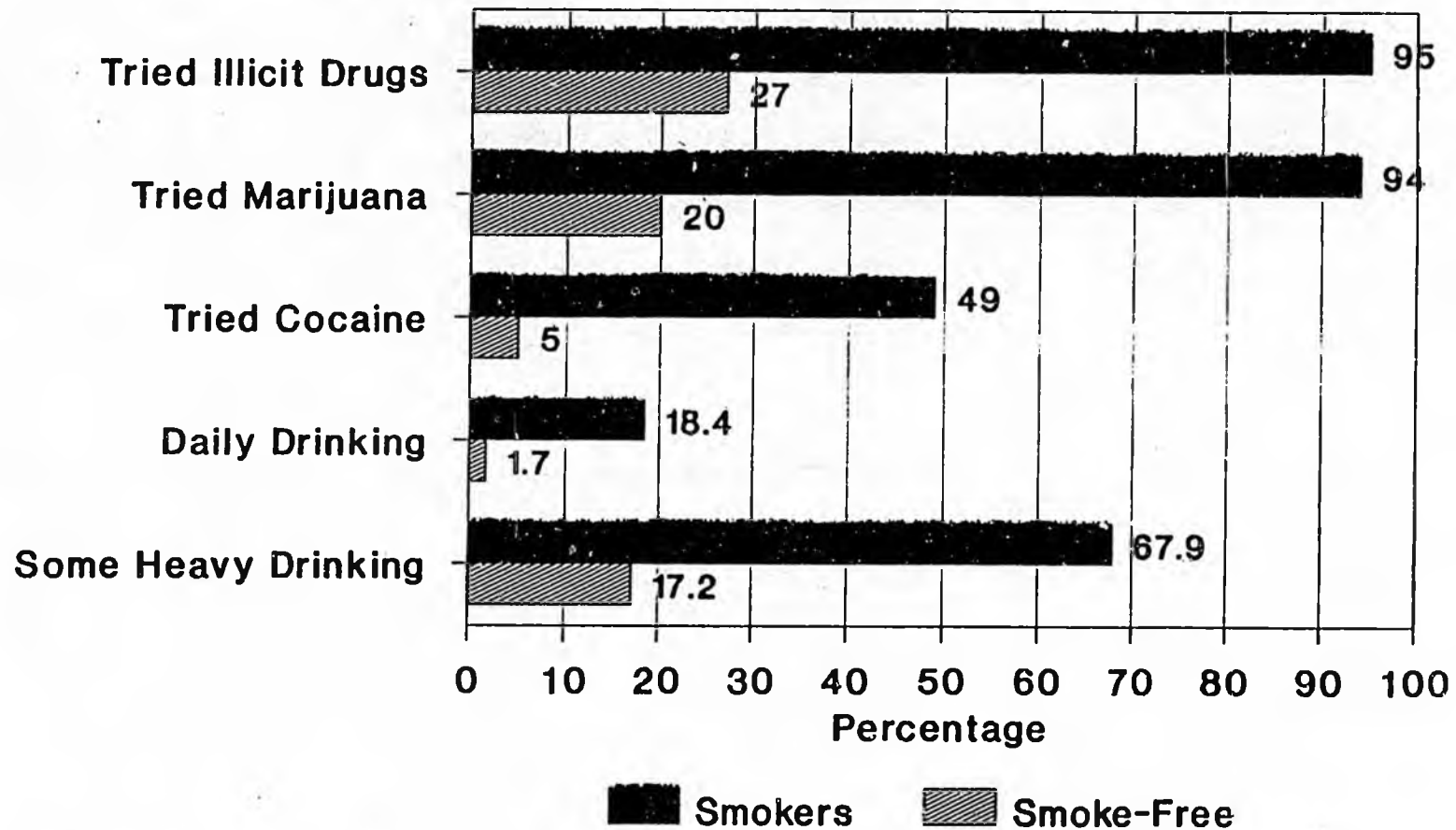
smoking and the extent of use of other psychoactive drugs has been shown to be strongest among individuals who began smoking before age 17, the investigators say (Br. J. of Addict. 85: 279-92, 1990).

Investigations of the pattern of nicotine addiction, including the factors associated with beginning, quitting, and returning to drug use, could provide perspectives for the understanding and treatment of other chemical dependencies.

Conducting such investigations would be facilitated by the large number of and ready access to individuals who smoke cigarettes or use smokeless tobacco, Dr. Henningfield and his associates say.

TOBACCO AS A GATEWAY DRUG

Percentage of High School Seniors Who
Have Tried Illicit Drugs and Alcohol
Smokers vs. Smoke-Free



Source: U.S. National Institute on Drug Abuse:
National Trends in Drug Use and Related Factors Among
American High School Students and Young Adults 1975-86

Smokefree Educational Services, New York City

Appendix I
The Extent and Consequences of
Teenage Smoking

Teenagers who are unaware of the addictive nature of cigarettes or who underestimate the strength of a tobacco addiction may tend to experiment with smoking initially but, to their surprise, later become addicted. The 1974 and 1979 Teenage Smoking Surveys by the Department of Health, Education, and Welfare (predecessor of the Department of Health and Human Services) asked teenagers what the possibility was of them being cigarette smokers in 5 years; half of the regular smokers answered "definitely not" or "probably not." Surveys of young adult smokers suggest that, unfortunately, the teenagers' optimistic predictions tend to be wrong.

The linkage in the scientific literature of cigarette smoking to numerous illnesses and premature death has received wide publicity in the past two decades. The 1989 Surgeon General's Report states that about 390,000 deaths in 1985 were attributable to smoking. Smoking is considered to be the major cause of lung cancer—the leading cause of cancer death in men since the 1950s. Numerous other types of cancer are also attributed, at least in part, to cigarette smoking. In addition, smoking is a cause of coronary heart disease, cerebrovascular disease (stroke), chronic obstructive pulmonary disease (the permanent airflow blockage that smokers develop) and many other diseases. Finally, given the fact that cigarette smoking is associated with alcohol use by teenagers, it is significant that recent research suggests that cigarette smoking combined with the ingestion of alcohol may further increase the risk of cancer.

Smokers Harm
Nonsmokers' Health and
Economic Well-Being

Most of the severe health risks generated by smoking affect teenagers directly, but are usually manifested only in adulthood. Some of the health risks caused by teenagers smoking are borne, though, by nonsmokers. In particular, when teenagers who are parents smoke, they put their infants at greater risk. The prevalence of teenage pregnancy and teenagers as parents makes this a widespread problem.

Smoking by the mother during pregnancy has been linked to fetal and infant mortality. Low birthweight, often associated with mental retardation and other developmental and health problems, has been conclusively linked to the number of cigarettes smoked during pregnancy. Premature delivery, retardation in fetal growth, and diminished availability of oxygen to the fetus are also effects of smoking during pregnancy. The consequences of these problems may affect the child, often severely, throughout its lifetime. In addition, after a child is born, smoking by family members is likely to be harmful to the child. For example,

FORUM

War on drugs must include battle against tobacco

By REP. KAY BROWN

Any meaningful discussion about the threat of drugs should start with the one drug that is clearly the most serious threat to our youth — tobacco.

While a great deal of media and popular press attention is focused on the so-called "hard" drugs like cocaine and crack, tobacco is clearly and without serious question the most substantial drug threat when measured objectively:

- 390,000 Americans die each year of diseases caused by cigarettes — approximately one person each minute, 44 people every hour, 1,068 each day.

- Tobacco causes more premature death than AIDS, use of heroin, cocaine and alcohol, fire, automobile accidents, homicides and suicides combined — more Americans die each year from smoking-related illness than died in all of World War II.

- Smoking by pregnant women has been linked to

fetal and infant mortality. Low birth weight (associated with mental retardation and other developmental and health problems) has been conclusively linked to the number of cigarettes smoked during pregnancy.

While respecting the rights of informed adults to make choices about their personal lives, we must also work to prevent young children from falling victim to tobacco addiction, illness and death.

Tobacco Products and Minors

Tobacco (nicotine) is highly addictive. In fact, studies document that the success rate for quitting smoking is lower than the success rate of programs to stop using heroin. Phillip Morris is far more of a threat to children in this country than Manuel Noriega ever was, even on his best day.

Hooking kids on tobacco is big business. Sixty percent of current smokers started by age 14; 90 percent



Rep. Kay Brown

by age 19. The tobacco industry makes \$250 million a year from the direct sales of cigarettes to children.

We must increase efforts to prevent youth from being seduced by subtle and sophisticated advertising campaigns.

Young, impressionable

adolescents are precisely the market segment most easily influenced by advertising. Each child who becomes addicted to cigarettes as a minor is, in effect, an "investment" for the tobacco industry that will pay dividends (tobacco purchases) into the future.

While strongly supporting the right of adults to make informed choices on their own, we must prevent profiteering premised on the addiction of children to substances that will injure and kill them. An estimated 1 billion packs of cigarettes are sold to children in this country each year, and trials observing minors attempting to purchase cigarettes have found that minors are able to illegally purchase tobacco products more than 70 percent of the time.

Tougher Laws Needed to Protect Children
Last session the state legislature took steps to curtail the illegal sales of tobacco to children. HB 141 established a requirement that busi-

nesses selling tobacco products obtain a specific "license endorsement." The state Department of Commerce and Economic Development can suspend the license endorsement for illegal sales to minors.

We hear a lot about the "war on drugs." Yet, there are roughly 170 tobacco-related deaths for every one attributed to cocaine. Tobacco-related illness and death costs the nation about \$52 billion annually.

Still, in the face of incontrovertible evidence that tobacco is the most deadly of all drugs, our society has a generally passive attitude toward the enforcement of tobacco laws. It is grossly inconsistent to largely ignore illegal tobacco sales that result in the addiction, disability and eventual death of children while trying to maintain support for the "war on drugs."

And it sends the wrong message to children. The failure to aggressively en-

force tobacco laws undermines the credibility of all efforts to combat drug abuse.

While the tobacco industry recently pledged to do a better job educating children about the dangers of tobacco products, it is clearly not enough. The tobacco industry's very economic existence is based on recruiting future smokers. The industry cannot be trusted with the task of self-regulation.

Stronger prevention and law enforcement efforts are needed. Prevention and enforcement efforts to curb illegal tobacco sales to minors not only will help reduce the nation's leading cause of preventable death, it will also, perhaps most importantly, send a consistent message to minors about the "war on drugs" and the dangers of drug abuse.

□ Rep. Kay Brown is a state legislator representing downtown Anchorage.



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**CIGARETTE VENDING MACHINES SELL CIGARETTES
TO CHILDREN, 11-15 YEARS OLD, 100% OF THE TIME**

Six children, ages 11-15, were able to buy cigarettes from 35 of 35 cigarette vending machines tested in Manhattan, Brooklyn, Queens, Staten Island, and the Bronx.

Over 25% of these vending machines were located in bars. Eleven and twelve year olds had no more difficulty buying cigarettes from vending machines in bars than they had buying cigarettes from vending machines in restaurants, pizza parlors, or video arcades. In all instances, the barman and/or patrons watched but did not intervene.

The 35 cigarette vending machines were located in the following establishments:

Restaurants	11	Hotel	1
Bars	8	Video Arcade	1
Pizza Parlors	5	Ice Cream Parlor	1
Supermarkets	4	Other	2
Bowling Alleys	2	Total	35

In one case, a restaurant employee ran after an 11 year old to tell him that he forgot his change. In another case, a gas station attendant told an 11 year old that they did not have a cigarette vending machine, but would have one next week. In almost all cases, adults watched but did not care.

No other dangerous product or drug, addictive product or drug, or cancer-causing product or drug is sold through vending machines. No other product or drug which is illegal to sell to children is sold through vending machines. Dangerous, addictive, cancer-causing drugs should not be sold like candy and soda pop. Cigarettes should not be sold in vending machines.

Study attributes 400,000 deaths to past smoking

By ROBERT BYRD
The Associated Press

ATLANTA — More Americans are quitting smoking, and more are dying — now more than 400,000 a year — as the habits of the 1950s and '60s take an increasing toll, federal health officials said Thursday.

The national Centers for Disease Control reported that 434,175 Americans died from smoking in 1988, up 11 percent from the 390,000 deaths attributed to smoking in a 1985 study.

Those numbers reflect a steady, deadly trend, CDC researchers said. Back in 1965, the calculated toll from smoking deaths was 188,000.

"The problem is, we are now paying for what happened 20, 30 years ago, when large numbers of people smoked in large amounts," said Dr. William Roper, director of the Atlanta-based CDC.

"Even though the percentage of Americans now smoking is lower than in the past, the burden of the past practice is coming clear."

That burden includes more than 100,000 annual deaths from lung cancer, the leading cause of smoking-related deaths, Roper noted. The CDC reported 111,985 smoking-related lung cancer deaths for 1988, up from 106,000 in 1985 and 38,100 in 1965.

"It takes 10, 20 years for the cancer caused by smoking to result," he said.

Smoking also resulted in 48,896 other cancer deaths,

such as mouth cancers and pancreatic cancer, in 1988; 201,002 deaths from cardiovascular diseases such as heart disease and arterial disease; and 82,857 deaths from respiratory diseases such as bronchitis and emphysema, among other causes.

The CDC also said 3,825 Americans' died from lung cancer caused by others' smoking, or passive smoke. But the CDC's statistical formulas do not yet include passive smoking deaths from heart diseases, which a recent study estimated at 37,000 a year.

Roper said health officials hope the increasing death toll from smoking will turn around, given recent trends toward stopping smoking.

CDC researchers estimate that about 29 percent of Americans smoke, down from 30 percent in 1985 and 40 percent in 1964, the year of the landmark surgeon general's warning against smoking.

"We've seen a reduction in smoking percentages for several years now, and I hope that by the year 2000 ... we're going to begin to see a decline in actual numbers of smoking-attributable illnesses and deaths," Roper said.

"But that's heavily dependent on behavior patterns right now, and we're anxious to get the message especially to young people, young women, who tend to be the largest percentage smokers."

Anchorage Daily News

Gerald E. Grilly
Publisher



Howard Weaver
Managing Editor

Michael Carey, Editorial Page Editor

Katherine Fenning, Editor and Publisher 1971 to 1983
Lawrence Fenning, Editor and Publisher 1967 to 1971

Founded in 1946 by Norman C. Brown

Smoking's ills

Tobacco is taking a huge financial toll

There's more to the cost of smoking than the price of a pack of cigarettes. A new government study reports that while less than one-third of the American population is still smoking, smokers cost the nation more than \$52 billion a year.



Predictably, most of the costs are for health care. The cancers and respiratory ills linked to smoking are among the costliest diseases known. On top of the price tag documented in the Department of Health and Human Services study, treating smoking's victims also has a more subtle effect: It monopolizes health-care professionals' time and equipment.

One of the worst aspects of the cost of smoking is that non-smokers bear such a huge part of it. Smokers' illnesses boost health-care costs and insurance for everybody, smoker and non-smoker. And illnesses resulting from second-hand smoke have been well-documented.

The Health and Human Services study noted that the \$52 billion averages out to \$221 per capita, every dime of which, when borne by a non-smoker, is unfair and unjustified. Ideally, the new study — added to the weight of dozens of others on the societal damage of tobacco — will help forge a change in cigarette advertising. Regretably, it probably won't. Cigarette manufacturers, in fact, have initiated a series of new ad campaigns, which try to lure specific groups — women, minorities and young people — into the smoking fold.

Anti-smoking efforts have picked up in recent years. And the new study demonstrates that these campaigns are justified. The cost of smoking has reached intolerable levels and must be curbed.

**THE PRECEDING PAGES
WERE TREATED AS A UNIT
IN THE ORIGINAL FILE**

Tobacco Quiz

True or False

1. More Americans die each year from smoking related causes than died in all of World War II.

True False

2. The use of cigarettes in America causes more premature death than AIDS, use of heroine, cocaine, alcohol, fire, automobile accidents, homicides and suicides combined.

True False

3. Low birth weight, often associated with mental retardation and other developmental and health problems has been conclusively linked to the number of cigarettes smoked during pregnancy.

True False

4. The success rate of efforts to quit smoking is lower than the success rate of efforts to stop using heroine.

True False

Multiple Choice

5. Passive smoke (ie, environmental tobacco smoke from others smoking) is responsible for how many deaths each year?

a) 5,000 b) 12,000 c) 22,000 d) 53,000

6. How many chemicals in tobacco smoke have been confirmed as carcinogenic?

a) 1 b) 12 c) 43 d) none

7. Trials observing minors attempting to purchase cigarettes have found that minor succeed what percent of the time?

a) 10% b) 25% c) 50% d) 70%

8. Smoking related illness costs the nation how much each year?

a) \$25 million b) \$100 million c) \$10 billion d) \$52 billion

9. What is the rate of tobacco related deaths in America?

a) 1 per hour b) 10 per hour c) 20 per hour d) 49 per hour

The Tobacco Institute

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FOR RELEASE:
December 11, 1990
9:00 a.m.

CONTACT:
TI Media Relations
202/457-9387

**MAJOR NEW INITIATIVES TO DISCOURAGE
YOUTH SMOKING ANNOUNCED**

Efforts focus on access, marketing and education

WASHINGTON, D.C. -- A broad-based series of new initiatives to discourage youth smoking and address recent concerns about cigarette marketing were announced today by The Tobacco Institute. The five new initiatives that expand and reaffirm the industry's longstanding commitment and positive actions against youth smoking are:

- o A national program to help retailers observe and enforce state laws prohibiting tobacco sales to youth. The store signage and education campaign's theme is "It's the Law."
- o Industry support for passage of new state laws setting a minimum age of 18 for cigarette sales in those states without a minimum age law or one lower than 18.
- o Industry support for new state laws requiring supervision of cigarette vending machines located in places frequented by minors.
- o Sharp new limitations on the distribution of product samples and premiums, requirements that billboard advertisements for cigarettes be located away from areas near schools and playgrounds, and other strong new industry guidelines that supplement current industry codes.
- o Direct assistance to parents to help them assist their children in resisting peer pressure to smoke with new, tobacco-specific educational materials to be promoted through a multi-million dollar advertising campaign.

NEWS RELEASE

"Reducing youth smoking cannot be accomplished by a single action. That's why the tobacco industry is tackling this problem on many fronts," said Brennan Dawson, Vice President of The Tobacco Institute. "Since it is widely recognized that young people smoke primarily because of peer pressure, we are addressing this directly with a major program to assist parents in reducing that peer pressure. At the same time, we are setting into motion measures to help curb youth access to cigarettes through aggressive work with the retail community and by supporting new state laws," she added.

"We also were determined to address substantively concerns about cigarette marketing. And so we reviewed our practices to find what more we could do. While the controversy will surely remain and some will continue to seek censorship, we are taking further steps to address concerns," Dawson said.

A National Program for Retailers:

The Tobacco Institute program for the retail industry is designed to encourage strict adherence to state laws prohibiting the sale of cigarettes to minors. With the active involvement of retail organizations throughout the country, The Institute will further spread the word that tobacco products, in accordance with most state laws, should only be sold to those 18 years of age or older.

The theme of the campaign -- **IT'S THE LAW: WE DO NOT SELL TOBACCO PRODUCTS TO PERSONS UNDER 18** -- is incorporated into all program point-of-purchase materials, including signs, decals, stickers and lapel buttons. In three states, the materials will indicate that the law sets 19 as the minimum age for the sale of cigarettes.

The program materials also include tips for retail employees on complying with the laws. Materials will be made available free of charge to retail outlets and will be promoted through advertisements in national and state retail publications.

New State Laws:

The tobacco industry supports passage of legislation establishing 18 as the minimum age for sale of cigarettes in those eleven states and the District of Columbia that have no age limit or one lower than 18. Thirty-nine states currently have legislation setting a minimum age of 18 or 19 for the sale of cigarettes.

The industry also will support state legislation to require supervision of cigarette vending machines located in places frequented by minors. While cigarette vending machines are not a popular source for cigarette purchases by young people, the industry will support legislation prohibiting unsupervised machines in places frequented by minors.

Additional Youth Guidelines:

New youth guidelines supplement those already adhered to by the industry. In the past, the tobacco industry's efforts have included an offer to Congress -- made in 1969 and subsequently passed into law -- voluntarily to remove cigarette advertising from radio and television. Additionally, for example, the manufacturers do not advertise in publications directed primarily to persons under 21.

New guidelines include restrictions on product sampling. Cigarette product samples will not be distributed in or on public streets, sidewalks or parks, except in places that are open only to persons to whom cigarettes lawfully may be sold. Cigarette samples will be distributed in such places only to persons 21 or older. No mail distribution of cigarette product samples will be made without a written, signed certification that the addressee is 21 or older, a smoker and wishes to receive a product sample.

The new guidelines also require cigarette advertising on billboards to be no less than 500 feet from any elementary, junior or senior high school or any children's playground.

The distribution of nontobacco premium items bearing cigarette brand names, logos, etc., also will be limited. Mail distribution of premium items will require a written, signed certification that the addressee is 21 or older, a smoker and wishes to receive the premium. Other distribution of nontobacco premium items will only take place to persons 21 or older, or with the purchase of a package or carton of cigarettes. Clothing bearing cigarette brand names, logos, etc., will be in adult sizes only. Paid product placements in movies have been formally eliminated.

Materials to Assist Families:

In a widely promoted program, the industry will provide direct assistance to parents to help their children resist peer pressure to smoke. The third in a series, "Tobacco: Helping Youth Say No" specifically addresses the problems children and parents face on the issue of youth smoking. The booklet is an extension of the industry's popular Responsible Living Program, whose materials have already been distributed to more than 700,000 families.

The availability of the free materials will be promoted through a multi-million dollar advertising campaign in major publications, including Family Circle, Parade, Ebony, People, TV Guide, and others.

#

... ON YOUTH SMOKING

TOBACCO INDUSTRY INITIATIVES

The tobacco industry has long taken the position that smoking is an adult practice to be considered solely by mature, informed persons. For this reason, the industry has taken strict measures to address youth smoking. For example:

- o The tobacco industry ended advertising and promotion in school and college publications and on campuses in 1963.
- o In 1964, the industry adopted a code prohibiting advertising and promotion in publications directed primarily to persons under 21. The code also forbids the use of endorsements by noted sports figures and other celebrities with appeal to youth in advertising. It also requires that any models in ads must be, and appear to be, at least 25 years old.
- o The tobacco industry offered voluntarily to end commercials on radio and television in 1969. Cigarette ads left the air in early 1971 as a result of Congressional action passed the industry's offer into law.
- o A code of cigarette sampling practices was adopted in 1981. The cigarette industry's code of sampling practices is brief and to the point. People who engage in sampling are instructed to refuse to give a sample to anyone whom they know to be under 21 years of age or who, without reasonable identification to the contrary, appears to be less than 21 years of age.

No sampling activity is done in any public place within two blocks of youth activity centers such as playgrounds or schools. If an adult declines or refuses to accept a sample pack, he or she will not be urged to accept it. All of the independent sampling firms sign a contract which sets forth standards that are at least as strict as the ones in this code. All of the sampling personnel must be advised, orally and in writing, of the sampling rules. All of the sampling activities are monitored to ensure compliance with the code. Any individual who violates the articles of the sampling code is subject to disciplinary action.

- o In 1982, on the industry's behalf, The Tobacco Institute conducted a nationwide advertising campaign which reached 110 million Americans with the message, "Do tobacco companies want kids to smoke? No. As a matter of policy. No. As a matter of practice. No. As a matter of fact. No."

Youth Smoking Initiatives

page 2

- o In 1984, The Institute launched its "Responsible Living" program, offering a free parental guidebook, "Helping Youth Decide." Another booklet, "Helping Youth Say No," followed. Both provide guidance on family communication to enable parents to help youngsters develop decision-making skills needed to deal wisely with everyday choices and with lifestyle decisions such as smoking.
- o The Institute expanded the "Responsible Living" program in 1986 by providing unrestricted grants to fund Community Alliance Programs (CAPs) at the rate of ten a year. Towns and cities throughout the U.S. were invited to apply for the grants, which provide the impetus for a broad community-based effort to improve parent-youth interaction, using "Helping Youth Decide" and "Helping Youth Say No" booklets.

More than 700,000 booklets have been distributed nationwide, and demand continues to be high among parents and community organizations.

The most recent Surgeon General's Report states that the prevalence of daily smoking among high school seniors dropped from 29% to 20% between 1976 and 1983, fluctuating between 18% and 19% ever since.

Daily smoking among black high school seniors fell from 26% in 1976 to 8% in 1987. Among white high school seniors, smoking declined from 29% to 20% during the same period.

... ON YOUTH SMOKING

TOBACCO ADVERTISING ... AND WHY KIDS SMOKE

As anti-smoking advocates themselves have long acknowledged, and experience from around the world has confirmed, cigarette advertising has no significant effect on the prevalence of smoking by young people and banning cigarette advertising will not directly reduce youth smoking.

A number of experts have explained in Congressional testimony that the purpose and function of advertising for any "mature" product like cigarettes is not to stimulate overall demand for the product category, but to (1) increase the market share of a particular brand at the expense of competing brands and (2) retain brand loyalty against other brands.

- o The President's Council of Economic Advisors said that tobacco product advertising "mainly shifts consumers among brands."
- o A study by researchers for the World Health Organization reported "no systematic differences" between the smoking behavior of young people in countries where tobacco advertising is completely banned and in countries where it is not.
 - In Finland, where tobacco product advertising has been banned completely since 1978, University of Helsinki researchers discovered that smoking among minors, which had been declining sharply before the ban was imposed, increased after the imposition of the ban -- especially among teenage girls.
 - In Sweden, where tobacco product advertising on billboards and in most other media was banned in 1979, smoking is on the rise among teenagers and their use of smokeless tobacco has nearly quadrupled since 1976.
- o Even Surgeon General C. Everett Koop, in his 25th anniversary report on smoking, acknowledged there was no proven link between smoking and advertising.

The Surgeon General stated that there is "no scientifically rigorous study available to the public that provides a definitive answer to the basic question of whether advertising and promotion increase the level of tobacco consumption."

The principal factors that impact youth smoking are peer pressure and parental/sibling influence.

Advertising and Youth
page 2

- o In 1987, The President's Council of Economic Advisors made that point clear in its Annual Report to the President: "Studies of why people start smoking identify the influences of parents, siblings and friends as the most important factors."
- o The director of the National Institute of Child Health and Human Development told Congress in 1983 that, "The most forceful determinants of smoking [by young people] are parents, peers and older siblings."

For years, vigorous efforts have been made by the tobacco industry, government and other public and private organizations to discourage youth smoking. The 1989 Surgeon General's report states that the prevalence of daily smoking among high school seniors dropped from 29% to 20% between 1976 and 1983, and has fluctuated between 18% and 19% ever since.

- o The U.S. Surgeon General has frequently noted the close association between underage smoking and peer pressure. In 1987, for example, he said, "A variety of psychological influences may interact to influence some children to begin smoking."

Yet foes of the tobacco industry -- to support their calls for a ban on tobacco advertising -- charge that tobacco advertising "causes" young people to start smoking. Prominent marketing experts are quick to dispute that claim.

- o Dr. Scott Ward, professor of marketing at the Wharton School of Business, told Congress recently, "The available evidence indicates that advertising is among the least influential factors involved in youth smoking."
- o In 1989, Jean Boddewyn, professor of marketing at Baruch College (City University of New York), edited an international survey on juvenile smoking conducted by The Children's Research Unit in London, England. He concluded, "[The study] provides strong evidence that advertising plays a minuscule role in the initiation of smoking by the young...family and peer influences appear to be the determining factors in juvenile smoking initiation."
- o Former Federal Trade Commission Chairman Michael Pertschuk--who as head of The Advocacy Institute is one of America's most prominent anti-smoking activists -- said in 1983, "No one really pretends that advertising is a major determinant of smoking in this country or any other."

... ON YOUTH SMOKING

REDUCING ACCESS

Health and Human Services Secretary Louis Sullivan has proposed measures whereby states would take new legislative action on proposals such as licensing tobacco retailers and banning vending machines.

Such measures are misdirected. The National Automatic Merchandising Association, the national trade association of the vending industry, indicates that nearly 80 percent of all cigarette vending machines are located where persons under the age of 18 are not allowed access or rarely frequent.

- o Almost a third of all cigarette vending machines are located in bars and cocktail lounges. Nearly 40 percent are found in industrial plants and offices, and almost 8 percent are found in hotels, motels and other generally adult settings. Thus, a ban on cigarette vending machines would primarily remove adult -- not youth -- access.

Those few vending machines that are located in places where youth may frequent should be supervised. The tobacco industry will support legislation in the states to accomplish this goal. This action -- not a ban on vending machines in workplaces or bars -- will help reduce youth access.

Licensing of tobacco retailers is also suggested as a regulatory approach to reducing purchase of cigarettes by young people. However, the logic used -- that tobacco should be sold in the same restrictive manner as alcohol -- also argues against this as an effective solution.

- o A 1989 Health and Human Services report tells us that "despite the fact that it is illegal for virtually all high school students and most college students to purchase alcoholic beverages, experience with alcohol is almost universal among them and active use is widespread." The report indicates that two of every three high school seniors report alcohol use in the last month.

Right now, it is illegal for cigarettes to be sold to minors in almost every state in the country. Laws are already in place. Enforcement of these laws is the best way to keep adult products, like cigarettes, from being sold to young people.

In the past -- and for the future -- the tobacco industry has maintained responsible positions on the issue of smoking by young people. The longstanding policy of cigarette manufacturers is that the choice to smoke or not to smoke is to be made by informed adults.

... ON YOUTH SMOKING

TOBACCO INDUSTRY GUIDELINES

Long holding the view that smoking is for adults who choose to smoke -- and an activity that should not be engaged in by youth -- the tobacco industry has taken measures to address public concerns about youth smoking. For example, cigarette manufacturers:

- o do not advertise in publications directed primarily to persons under 21;
- o do not use models in cigarette advertisements who are, or appear to be, under 25;
- o do not distribute cigarette samples to persons under age 21; and
- o do not distribute cigarette samples within two blocks of any centers of youth activity, such as playgrounds and schools.

NEW, ADDITIONAL INDUSTRY GUIDELINES FOR YOUTH

To supplement these steps, the industry will:

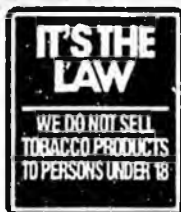
- o not advertise cigarettes on billboards within 500 feet of schools and playgrounds;
- o conduct no mail distribution of cigarette product samples without written, signed certification that the addressee is 21 or older, a smoker and wishes to receive a product sample;
- o not distribute cigarette product samples in or on public streets, sidewalks or parks, except in places that are open only to persons to whom cigarettes lawfully may be sold. Samples will be distributed in such places only to persons 21 or older;
- o not distribute cigarette samples in direct response to requests by telephone;
- o conduct no mail distribution of nontobacco premium items bearing cigarette brand names, logos, etc., without written, signed certification that the addressee is 21 or older, a smoker and wishes to receive the premium;
- o conduct no other distribution of nontobacco premium items bearing the cigarette brand names, logos, etc., except with the purchase of a package or carton of cigarettes or to persons 21 or older;
- o distribute clothing bearing cigarette brand names, logos, etc., in adult sizes only; and
- o ~~not engage in paid movie product or cigarette advertising placements.~~

The Tobacco Institute

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MINIMUM AGE LAWS FOR SALE OF CIGARETTES

<u>State</u>	<u>Minimum Age</u>	<u>State</u>	<u>Minimum Age</u>
Alabama	19 years	Missouri	local option
Alaska	19	Montana	none
Arizona	18	Nebraska	18
Arkansas	18	Nevada	18
California	18	New Hampshire	18
Colorado	18	New Jersey	18
Connecticut	18	New Mexico	none
Delaware	17	New York	18
District of Columbia	16	North Carolina	17
Florida	18	North Dakota	18
Georgia	17	Ohio	18
Hawaii	18	Oklahoma	18
Idaho	18	Oregon	18
Illinois	18	Pennsylvania	18
Indiana	18	Rhode Island	18
Iowa	18	South Carolina	18
Kansas	18	South Dakota	18
Kentucky	16	Tennessee	18
Louisiana	none	Texas	18
Maine	18	Utah	19
Maryland	18	Vermont	17
Massachusetts	18	Virginia	16
Michigan	18	Washington	18
Minnesota	18	West Virginia	18
Mississippi	18	Wisconsin	18
		Wyoming	none



PROGRAM SUMMARY:

A Tobacco Product Retailing Program for Retail/Vending Industries

Objectives

- To continue to discourage those who are underage from purchasing tobacco products.
- To reaffirm that the tobacco industry does not want young people to use tobacco products -- and continues to take affirmative steps to reinforce this position.

Background

In the face of growing concerns about smoking by those who are underage, the tobacco industry is calling upon the retailers and vending machine operators who sell tobacco products to visibly demonstrate adherence to both state laws and our own conviction that the use of tobacco products is an adult decision.

The issue of smoking by those who are underage is attracting increased attention around the country. In some localities, "sting" operations designed to trap retailers selling tobacco products to those who are underage have been staged. Violators are being prosecuted. The penalties, which vary among localities, may include stiff fines and jail terms. Those who have a retail tobacco license may face the loss of that license.

This program is designed to assist the retailing and vending machine industries, and to enlist their support and cooperation in discouraging the sale of tobacco products to those who are underage.

Participants

The primary audiences for this tobacco retailing program include:

- Convenience stores
- Grocery stores
- Drug stores
- Discount stores
- Small independent businesses (e.g., "mom and pop stores")
- Gas stations
- Vending machine industry
- Other retail outlets (e.g., truck stops, etc.)

Messages

This program is designed to convey several messages, including:

- Smoking is an adult custom based on informed choice.

(over please)

- It is against the law in most states to sell tobacco products to those who are underage. Due to growing anti-tobacco activities and the focus on sales to youth, the law can and should be enforced. Retailers are therefore urged to participate in the program.
- Publicly participating in a program such as this can enhance and improve the retailer's image in the community, and help ensure that store owners and employees comply with the law.
- Non-compliance by retailers and the vending machine industry with current laws could lead to tighter restrictions on tobacco sales, including outright bans.

Theme

The theme of the campaign, which will be incorporated into all program materials, is as follows:

**IT'S THE LAW;
WE DO NOT SELL TOBACCO PRODUCTS
TO PERSONS UNDER 18**

(OR 19, IF THE STATE LAW DESIGNATES 19 AS THE MINIMUM AGE)

Program Materials

We have designed a package of print and display materials for use by the tobacco product retailer. Materials include:

- A state specific brochure describing the program and applicable laws. The brochure, in addition to detailing minimum age laws for a state and penalties for violation, provides tips to the retailer and the employee on verification of age, acceptable forms of identification, and how to deal with a customer who becomes upset when asked for identification.
- A tip sheet on how to verify age, for display at the cash register as a reminder when employees prepare to ring up a sale.
- Store front and window display signs and point-of-purchase materials, all bearing the program theme: "It's the law: We do not sell tobacco products to persons under 18." These colorful blue, orange and white signs and decals will assist store owners in reminding employees and customers of the state law and their compliance with it.
- Lapel buttons, also using the blue-orange-white colors and the program theme, for store employees to wear while on duty.
- Employee Acknowledgement Form.

Materials are available only in states whose minimum age for purchase of cigarettes is 18 or 19.

Distribution

Distribution will be through the membership of the co-sponsoring organizations. The Tobacco Institute will provide promotional kits in numbers requested by the sponsoring organization. All program materials will be provided at no cost to the co-sponsoring organization and its members.

SMOKING AND PREGNANCY
Legislative Hearing - Feb 28, 1991

My name is Dr. Kenneth Kesler. Address 3340 Providence Dr. Ste 366, Anchorage, AK. I am a Neonatologist which is a Pediatrician trained to deal with sick or prematurely born infants. I have reviewed medical literature regarding the effects of cigarette smoking on both the mother and fetus during pregnancy and have lectured for the Alaska Lung Association on this topic.

The number of women in the reproductive ages who smoke has increased from 5% in 1920 to nearly 40% today. There is great interest in the effects of smoking on pregnancy and since 1966 over 2000 articles have been written on this subject, most of which have demonstrated adverse effects of smoking on the mother and fetus. I will try to briefly describe 12 of those effects to you.

1. Two major components of cigarette smoke are carbon monoxide and nicotine, both of which cross the placenta and invade the fetus when the mother smokes. Increased carbon monoxide levels in the fetus and mother decreases the amount of oxygen delivered to the fetus. If a woman is a moderate smoker the effect on the fetus is similar to decreasing 40% of the fetal blood flow.

Nicotine accumulates to high levels in the fetus and results in decreased blood flow to the fetus. This effect of nicotine on the placenta is very similar to effect of cocaine.
2. Increased number of cleft lips, heart defects and severe brain abnormalities have been reported among infants born to women who smoke.
3. Spontaneous abortions are more frequent among women who smoke.
4. There is an increase in the number of pregnancies complicated by placenta problems such as separation of the placenta from the uterine wall which may result in fetal distress or death.
5. The incidence of premature rupture of membranes is doubled in women who smoke.
6. There is a higher rate of stillbirths and neonatal deaths among women who smoke. Some have estimated that maternal smoking is strongly associated with 4600 infant deaths in the United States per year.
7. There are over 50 studies confirming the trend that women who smoke have babies of lower birth weight. Dr. Michael Kramer in association with the World Health Organization demonstrated that "In the developed country, the most important single factor, by far, is cigarette smoking" accounting for nearly one third of all low birth weight infants (meaning infants who weigh

less than 5 1/2 pounds).

Limited information is available on smoking during pregnancy in Alaska. I reviewed the information for a recent 3 years period in the Newborn Intensive Care Unit at Providence Hospital. Of the nearly 900 admission 28 % of the mothers admitted to smoking during pregnancy. The number increased to 32% of mothers whose infants weighed less than 5 1/2 pounds which suggests that here in Alaska among women with high risk pregnancies the effect of smoking on birthweight is similar to studies elsewhere in the US. (These numbers are probably artificially low because they are based on self reporting.)

8. The risk of delivering a baby prematurely (by 6 weeks) may be nearly 2 times higher among smoking mothers. The costs of caring for premature infants is extremely high. In 1983 it was estimated that over 3 billion dollars was spend on infants admitted to Intensive Care Nurseries in the United States per year.
9. Breast milk contains nicotine and may produce mild to severe symptions in the newborn and so0me cases of nicotine poisoning has occurred in babies breastfed by mothers who smoked heavily.
10. Some preliminary evidence suggest that children born to women who smoke are at higher risk for various cancers when they are adults. This effect of smoking during pregnancy will probably not be scientifically proven for many years because of problems related to designing an adequate study.
11. Some studies have demonstrated various deficiencies in school performance among children born to mothers who smoke. (independent of confounding variables)
12. Nicotine is transferred to growing children in households where smoking occurs. This results in a two fold increase in the rate of Sudden Infant Death Syndrome. Also the incidence of pneumonia and bronchitis are increased in children where the parents smoke.

I have not had time to site the references for the above information. I have made a list of some of these references from journals such as the New England Journal of Medicine, the American Journal of Obstetrics and Gynecology, Pediatrics, and The British Medical Journal, which I would be glad to share with the committee.

No one should leave here with a misunderstanding of the impact of smoking on the fetus and newborn infant. The effects are not trivial. They are significant and may be severe even lethal to the fetus.

This amendment should be considered carefully. If we are to have an impact on

the wellbeing of the unborn, society must address the human behaviors which can adversely affect the fetus and seek methods to alter those behaviors. Smoking and its effect on the fetus is perhaps one of the best documented and easily targeted of these behaviors.

I urge you to give serious consideration to this amendment.

Rand K. Kish

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18. Naeye RL; Abruptio placentae and placenta praevia: frequency, perinatal mortality, and cigarette smoking, *Obstetrics and Gynecology* 55:701, 1980

Members of the committee:

My name is Jim Pate. I am a student at Bartlett High School and President of the Sophomore Class. I am involved in student government at Bartlett as President of the Spanish Club. I also serve Chair of the Anchorage School District's Foreign Language Council. My number one task in these positions is to motivate students to get them involved in issues outside themselves. It is not an easy task. I believe I have helped accomplish some very positive results, but it has been a real struggle. The reason I share this information is to *let* you know who I am and where I am coming from. The point: youth today are under tremendous pressure from a host of negative influences that undercut and challenge the kind of positive and responsible behavior that I would like to see and that our society desires.

The sale and use of tobacco products is a prime example. Young people are having the message presented to them that they are independent, in control, and have an exciting, macho lifestyle if they smoke. Joe Camel is a smooth character and we can be too.

The tobacco industry spends some \$3 Billion per year on advertising -- a great deal on rock concerts, sporting events (like stock car races), and give-away T-shirts, posters and accessory items that are clearly aimed at young people.

The sad fact is that over 3,000 teenagers start smoking every day. In our nation over three million children under 18 use tobacco products. Here are the facts:

Today, 60 per cent of smokers start by the age of 14 and 90% by the the age of 19. Very few people begin to smoke after the age of 21. The younger one starts to smoke, the more likely one will:

- . remain a smoker;
- . smoke heavily, and
- . die prematurely

The tobacco industry is very seductive. They may say that they promote smoking as an adult choice or "adult custom". I'm only 17 years old but it doesn't take a rocket scientist to see through their smoke-screen. The issue is money. The name of the game is marketing. You don't spend \$3 Billion per year to attract and keep the 10% of the population that starts smoking after the legal age of 19. The industry makes \$250 million a year off the cigarettes they sell to children. Youth don't get out of bed on their 19th birthday and say "Well, I'm an adult now -- all grown up; I think I'll be a pack a day smoker". It is a gradual and addictive process. Most kids start experimenting with cigarettes at about age 11.

The tobacco industry advertising plays to the emotions with sex, scenery and excitement. The beautiful, tanned, young woman in the bikini and the bulk of the ads project a fantasy world. "Have a girl like this, a car like this, an exciting life like this when you smoke".

As you can tell, I am speaking in favor of House Bill 84 that would limit access of youth to tobacco by banning vending machines and setting tough standards for retailers who sell tobacco products and fines for those

who are negligent by selling tobacco products to minors.

I do not buy for one minute the slick new advertising campaign of the Tobacco Institute "Tobacco: Helping Youth Say No". To believe that retailers will take strong voluntary action to stop youth purchases and that the Marketing monster -- we know as the Tobacco Industry -- will be involved in strict self-regulation without the need for strong local and state laws to regulate tobacco products is like letting the fox guard the henhouse.

We put strict laws on the books controlling the access of youth to Alcohol and we have inspectors. It's a bitter irony that we are so casual about tobacco when every year it causes more premature deaths than the use of heroin, cocaine, alcohol, AIDS, fire and auto accidents, homicides and suicides combined.

The simple fact is that youth -- both junior high and senior high -- can easily get cigarettes. At Barlett High we have "a smoking section"; 50 kids a day (all under 19) gather outside on their lunch break to smoke. Where do they get their smokes? Are they put in the brown bag by their parents when they pack their lunch? No Way. They buy cigarettes at the convenience store or vending machine of their choice with little or no hassle. (Trials in Anchorage have demonstrated that youth as young as 13 are able to purchase cigarettes at these locations at least 70% of the time.)

My observation is that youth who smoke in schools are losers. They have poor grades, low self-esteem and often have family problems. Smoking is a crutch and a deadly, addictive escape that helps keep them from dealing with the important issues they face.

Let me share one other important fact about myself. I am one of 6,000 young people in Alaska with Asthma. This pulmonary disease can be life threatening. I have learned to cope with my asthma and manage it effectively. For the past several years I have served as a volunteer teacher at both summer camps and Saturday workshops teaching younger children to understand and manage their asthma effectively. It has given me great satisfaction to work with these kids as a teacher and role model. You can bet that we teach that cigarette smoking is absolutely deadly to the person with asthma. (In the spring of 1990 I received the First Lady Award for voluntary service from Michael Cowper in recognition of my volunteer teaching; I understand that I am the youngest person in Alaska ever to receive this award.)

I'm proud to be a member of the class of '93 but in many ways I'd like to be a part of the Class of 2000. Why? Not because it will be the start of a new century but because that class (today's third graders) in response to the challenge of our former Surgeon General C. Everett Koop has a chance to graduate as the "Smoke Free Class of 2000". That movement is underway across the nation and you are well aware that we are moving toward a smoke free society.

Young people need proper, factual information about the deadly health risks of tobacco use and nicotine addiction. They also need strong laws to protect them, as a very vulnerable public, from easy access and illegal sale of tobacco products.

As one spokesperson for Alaska's youth, I look to your committee for leadership and decisive action. I urge passage of House Bill 870.

Vim Pate
2311 Oklahoma St
Anchorage, AK 99504
(907) 333-8333

HB 84

AMERICAN LUNG ASSOCIATION of ALASKA

Members of the Labor and Commerce Committee:

My name is Anne Morris. I am a physician in private practice in Anchorage. I am the current President of the Alaska Thoracic Society, the medical arm of the American Lung Association of Alaska. I serve on the board of the Alaska Association, am the Alaska representative to the American Thoracic Society and have been a member of the national board of the American Lung Association.

I am here to support HB 84 as amended as one who sees daily patients whose life, health and happiness have been ruined by years of smoking and the deadly toll of nicotine addiction.

I want to urge your support for the required warning signs that would not only state that purchase by those under 19 is illegal but affirm that tobacco products are highly addictive, a cause of lung disease and a severe health threat to pregnant women.

Let me share with you the summary findings from the 1990 Report of the Surgeon General (The Health Benefits of Smoking Cessation). These are findings from the chapter on Smoking Cessation and Reproduction - the section on Benefits For the Fetus. I quote from the summary of the report.

"Smoking is probably the most important modifiable cause of poor pregnancy outcome among women in the United States ... the elimination of smoking during pregnancy could prevent about 5% of perinatal deaths, about 20% of low birthweight births, and about 8% of preterm deliveries in the United States.

In groups with with a high prevalence of smoking (e.g. women who have not completed high school), the elimination of smoking during pregnancy could prevent about 10% of perinatal deaths, about 35% of low birthweight births, and about 15% of preterm deliveries." (I have appended a copy of the five paragraph summary on this subject to these written remarks. I also want to stress that these are not casual assumptions but findings based on hard scientific data. A primary source for these statistics is a article "The Association of Maternal Smoking With Age and Cause of Infant Death" by Malloy, Kleinman, Land & Schramm found in the American Journal of Epidemiology (Vol 128, # 1, Pages 46-55, 1988); this prestigious journal is published by the John Hopkins University School of Hygiene and Public Health.)

Some of the most gratifying work we do at the American Lung Association is with our "Smoke Free Family" program when we are able to help pregnant women overcome nicotine addiction for their own health and benefit and the welfare of their unborn child.

To this end our Association has asked Senator Arliss Sturgulweski and the Senate HESS committee to introduce legislation that would amend existing state law to include language about the dangers of smoking during pregnancy on the signs that are required in locations that sell alcoholic beverages. The amended sign would read: "Warning: Drinking distilled spirits, beer wine, coolers, and other alcoholic beverages or smoking cigarettes during pregnancy may cause birth defects." This request is modeled on action

that was taken by King County (Washington) by rule in December of 1988 and the City of Seattle by ordinance in July of 1989. Thier actions was based on similar action that was taken in San Mateo County (CA) some months before. Recent contact with leadership of the King County Health Department ^{Reports} very positive acceptance of these pro-health decisions.

In a like manner a warning regarding the dangers of smoking and pregnancy on the signage that must be required in outlets that sell tobacco is another positive, pro-health, pro-family step in the right direction. Alaska has the opportunity to be one of the first states in the nation to pass such positive model legislation.

(I have included copies of the Seattle and King County action with my written testimony for your information.)

My understanding of public office is that your are custodians of our great state on behalf of its people. As elected officials, you are charged to keep the public trust and the serve the public good -- that certainly includes the public health.

At his swearing-in ceremony Gov. Walter Hickel spoke of Alaska's children as our greatest wealth. I urge you to conserve and protect that precious wealth by the prompt passage of HB 84 with this important ammendment.

smoking. Smoking cessation reduces the risk of respiratory infections such as pneumonia, which are often the immediate causes of death in patients with an underlying chronic disease.

The important role of health care providers in counseling patients to quit smoking is well recognized. Health care providers should give smoking cessation advice and assistance to all patients who smoke, including those with existing illness.

Benefits for the Fetus

Maternal smoking is associated with several complications of pregnancy including abruptio placentae, placenta previa, bleeding during pregnancy, premature and prolonged rupture of the membranes, and preterm delivery. Maternal smoking retards fetal growth, causes an average reduction in birthweight of 200 g, and doubles the risk of having a low birthweight baby. Studies have shown a 25- to 50-percent higher rate of fetal and infant deaths among women who smoke during pregnancy compared with those who do not.

Women who stop smoking before becoming pregnant have infants of the same birthweight as those born to women who have never smoked. The same benefit accrues to women who quit smoking in the first 3 to 4 months of pregnancy and who remain abstinent throughout the remainder of pregnancy. Women who quit smoking at later stages of pregnancy, up to the 30th week of gestation, have infants with higher birthweight than do women who smoke throughout pregnancy.

Smoking is probably the most important modifiable cause of poor pregnancy outcome among women in the United States. Recent estimates suggest that the elimination of smoking during pregnancy could prevent about 5 percent of perinatal deaths, about 20 percent of low birthweight births, and about 8 percent of preterm deliveries in the United States. In groups with a high prevalence of smoking (e.g., women who have not completed high school), the elimination of smoking during pregnancy could prevent about 10 percent of perinatal deaths, about 35 percent of low birthweight births, and about 15 percent of preterm deliveries.

The prevalence of smoking during pregnancy has declined over time but remains unacceptably high. Approximately 30 percent of U.S. women who are cigarette smokers quit after recognition of pregnancy, and others quit later in pregnancy. However, about 25 percent of pregnant women in the United States smoke throughout pregnancy. A shocking statistic is that half of pregnant women who have not completed high school smoke throughout pregnancy. Many women who do not quit smoking during pregnancy reduce their daily cigarette consumption. However, reduced consumption without quitting may have little or no benefit for birthweight. Of the women who quit smoking during pregnancy, 70 percent resume smoking within 1 year of delivery.

Initiatives have been launched in the public and private sectors to reduce smoking during pregnancy. These programs should be expanded, and less educated pregnant women should be a special target of these efforts. Strategies need to be developed to address the problem of relapse after delivery.

The Health Benefits of SMOKING CESSATION

*a report of the
Surgeon General*

1990

Executive Summary



U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES
Public Health Service
Centers for Disease Control
Center for Chronic Disease Prevention and Health Promotion
Office on Smoking and Health
Rockville, Maryland 20857

CDC
CENTERS FOR DISEASE CONTROL

AMERICAN  LUNG ASSOCIATION of ALASKA

December 10, 1990

Dedicated to the prevention and control of lung disease

Senator Arliss Sturgulewski, Chair
HESS Committee, Alaska State Senate

Representative Patrick Carney, Chair
HESS Committee, Alaska State House

Dear Friends:

We are writing to seek your good offices in introducing concurrent legislation in your respective committees to amend existing state law to warn women about the dangers of smoking during pregnancy.

Enclosed you will find copies of a city ordinance (Seattle) and county rule and regulation (King) that have been in effect for over a year and one-half in the State of Washington.

There is conclusive medical evidence that drinking during pregnancy is dangerous; smoking is also highly toxic on the fetus. The combined impact of smoking and drinking places the pregnant woman and her unborn child in double jeopardy. In fact the medical evidence is even stronger since the passage of the above ordinance and regulation. Note the highlighted fact from the enclosed summary document (based on "The Health Benefits Of Smoking Cessation: A Report of the Surgeon General, 1990) ... "if all women quit smoking during pregnancy, about 5% of deaths among new born infants could be prevented".

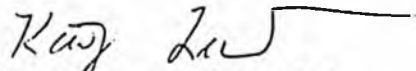
By copy of this letter we are also asking Heather Flynn to consider introducing this expanded warning signage as an ordinance for consideration by the Anchorage Municipal Assembly.

We have advised Mr. Patrick Sharrock of the Alcohol Beverage Control Board of our decision to ask that this legislation be introduced. Further, we are prepared to bring expert medical opinion and nationally validated medical research findings to public hearings that may be held in conjunction with this proposed legislation.

Feel free to call on our Association as you consider this matter.



Walter L. Hays
Executive Director



Kitty Lew (Volunteer)
Legislative Issues Coordinator

CC: Heather Flynn

Warning:

Drinking distilled spirits, beer, wine, coolers and other alcoholic beverages or smoking cigarettes during pregnancy may cause birth defects.

• King County Board of Health Rule & Regulation 42

• Seattle City Ordinance 114582

Before the Board of Health of King County, Washington:

RULE AND REGULATION NO. 42

Amendment to King County Code of the Board of Health, Title 5 (Rule and Regulation No. 2), adding a new section relating to posting warning signs, Section 5.60.060.

BE IT ORDAINED BY THE BOARD OF HEALTH OF KING COUNTY:

SECTION 1. Purpose. The Surgeon General of the United States has advised women who are pregnant, or considering pregnancy, not to drink alcoholic beverages or smoke cigarettes. Recent research indicates that alcohol consumption during pregnancy, especially in the early months, can harm the fetus, and result in birth defects including mental retardation, facial abnormalities and other defects involving heart and bone structure. In addition, research indicates that maternal cigarette smoking during pregnancy slows fetal growth, lowers birth weight and increases the risk of stillbirths. The King County Board of Health finds that strategically located warnings to deter consumption of alcohol and cigarettes by pregnant woman will reduce the incidence of these health effects. The King County Board of Health supports these findings and seeks to educate the public of this health problem.

SECTION 2. Section 5.60.060 (Part 69 of Rule and Regulation 2) of the King County Code of the Board of Health is hereby added as follows:

SECTION 5.60.060. WARNING SIGNS.

A. After February 1, 1989, signs, warning of the effects of alcoholic consumption and cigarette smoking during pregnancy, shall be posted in all establishments serving alcoholic beverages for consumption on premises. Alcoholic beverages shall include wine, beer, malt beverages and distilled spirits.

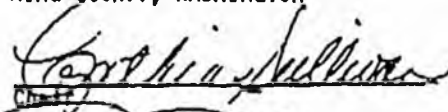
B. The sign or notice shall read as follows: "WARNING: DRINKING DISTILLED SPIRITS, BEER, WINE, COOLERS AND OTHER ALCOHOLIC BEVERAGES OR SMOKING CIGARETTES DURING PREGNANCY MAY CAUSE BIRTH DEFECTS."

C. Signs shall be either menu notations at least two inches high, table placards at least three by three inches or signs at least eight and one half inches by eleven inches and posted conspicuously at the bar or point of sale.

SECTION 3. Effective date. This chapter shall take effect on February 2, 1989.

Passed this 15th day of December, 19 88.

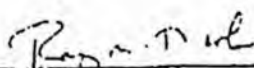
KING COUNTY BOARD OF HEALTH
KING COUNTY, WASHINGTON



Member

Member

ATTEST:



Secretary

GBD:bjw
4/25/89

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ORDINANCE 114582

AN ORDINANCE relating to the Seattle Food Code, amending SMC Chapter 10.11 by the addition of Section 10.11.696 requiring the posting of warning signs or notices in establishments serving alcoholic beverages.

WHEREAS, the Surgeon General of the United States has advised women who are pregnant, or considering pregnancy, not to drink alcoholic beverages or smoke cigarettes; and

WHEREAS, recent research indicates that alcohol consumption during pregnancy, especially in the early months, can harm the fetus, and result in birth defects including mental retardation, facial abnormalities and other defects involving heart and bone structure; and

WHEREAS, research indicates that maternal cigarette smoking during pregnancy slows fetal growth, lowers birth weight and increases the risk of stillbirths; and

WHEREAS, The City of Seattle finds that strategically located warnings to deter consumption of alcohol and cigarette smoking by pregnant women will reduce the incidence of these health effects and seeks to educate the public of this health problem; Now, Therefore,

BE IT ORDAINED BY THE CITY OF SEATTLE AS FOLLOWS:

Section 1. The Seattle Food Code (Seattle Municipal Code Chapter 10.11) is amended by adding thereto new section 10.11.696, as follows:

10.11.696. WARNING SIGNS OR NOTICES

A. Signs or notices, warning of the effects of alcohol consumption and cigarette smoking during pregnancy, shall be posted in all food service establishments serving any alcoholic beverage for consumption on premises. For the purpose of this section, the term "alcoholic beverage" means and includes wine, beer, malt beverage, liquor, and distilled spirits, each as defined in RCW Ch. 66.04.

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B. Each such sign or notice shall read as follows:
"WARNING: DRINKING DISTILLED SPIRITS, BEER, WINE, COOLERS AND
OTHER ALCOHOLIC BEVERAGES OR SMOKING CIGARETTES DURING
PREGNANCY MAY CAUSE BIRTH DEFECTS."

C. Each such sign or notice shall be of the following
size: at least two inches (2") high if printed or included in
a menu; at least three inches by three inches (3" x 3") per
side if set forth on a single, double, or multi-sided placard
or display "tent" on any table provided for the
establishment's customers; and not less than eight and
one-half inches by eleven inches (8 1/2" x 11") if included on a
sign that is posted conspicuously at a bar or other point of
sale that is clearly visible to the public.

Section 2... This ordinance shall take effect and be in force thirty days from and after its passage and approval, if approved by the Mayor; otherwise it shall take effect at the time it shall become a law under the provisions of the city charter.

Passed by the City Council the 3rd day of July 1989,
and signed by me in open session in authentication of its passage this 3rd day of July 1989.

[Signature]
President of the City Council.

Approved by me this 13th day of July 1989.
[Signature]
Mayor.

Filed by me this 13th day of July 1989.

[Signature]
Attest: City Comptroller and City Clerk.

(SEAL)

Published *[Signature]*
Deputy Clerk.

HOUSE COMMITTEE REPORT

(7)

Date Referred: January 30, 1991

FURTHER REFERRALS:

Judiciary
Finance

Date of Committee Action: 2-28-91

The LABOR AND COMMERCE Committee considered:

HB 84

HOUSE BILL NO. 84

BAN SALE OF TOBACCO IN VENDING MACHINES

"An Act relating to the sale, exchange, or giving of tobacco and tobacco products."

RECOMMENDATIONS:

be replaced with CS HB 84 (LTC) the same title

a new title

have attached amendments(s)

do pass

do not pass

no recommendations

individual recommendations

additional referral to the _____ Committee

ADOPTS: _____ letter of Intent

ATTACHES NEW FISCAL NOTE(S): (Dept)

APPROVES PREVIOUS: (Dept/Date)

fiscal impact Dept. of Revenue

fiscal note(s) _____

zero fiscal note Dept of Commerce And Courts zero fiscal note(s) _____

SIGNING DO PASS:

SIGNING OTHER RECOMMENDATIONS:

	Check appropriate column:	Do Not	No Rec	Amend
		Pass		
<i>Kevin P. ...</i>				
<i>...</i>				
<i>...</i>	<i>Jim ...</i>	<input checked="" type="checkbox"/>		
<i>...</i>	<i>...</i>		<input checked="" type="checkbox"/>	

[Signature]
Chairman's Signature



Alaska State Legislature

Please enter into the record my testimony to the House Labor & Commerce committee name

committee on H.B. 84, dated 2-28-91
bill/subject

I am listening to the testimony on H.B. 84 but cannot stay to testify. I agree with Rep Robin Taylor.

Another point is that the drug alcohol is not provided to people under 21 because drugs affect the growing body in a more destructive manner... but we allow ~~the~~ ^{people} under 21 to use tobacco, which is the same kind of unhealthy affects as alcohol.

Also please keep in mind that nicotine is a mind altering addictive drug. If we want to eliminate the sickness of drug addiction lets continue restrict the sale of nicotine. H.B. 84 is a good avenue of continuing the war on Drugs.

Signed: Lawrence Young
Testifier

I am a member of Al. In. Assoc. Inc. Anch.
Representing (Optional) but I am just speaking for myself

537 Tamm Rd.
Address

907-225-3528
Phone No.



Alaska State Legislature

Please enter into the record my testimony to the House
LABOR & COMMERCE
 committee name

committee on HB 84 - BAN OF SALE IN VENDING dated 2-28-91
 bill/subject MACHINE

I urge passage of this bill as a youth-health measure.

① As a parent of 3 school-aged children, I would be infuriated if alcohol products were sold through vending machines.

Tobacco is more addictive than alcohol and the sale of tobacco in vending machines is equally as infuriating.

② Almost every young person who uses alcohol or other drugs began their addictive behavior by smoking Cigarettes.

*③ The vending machine industry needs to realize that occupations change as civilization progresses. We have very few people who make their living shoeing horses these days. Typewriter manufacturers have declined as computer sales have increased. Tobacco sales thru vending machines are no longer acceptable in our society which is enlightened about the risks of tobacco to health.

Signed: Kate Berntson (Kathleen A. Berntson)
 Testifier

Representing (Optional)

1260 Sayles Street, Ketchikan 99901

Address

907-225-2944

Phone No.

Alaska Federation of Natives, Inc.

February 27, 1991

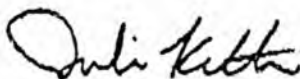
Rep. David Finkelstein, Chairman
House Labor & Commerce Committee
ALASKA STATE LEGISLATURE
P.O. Box V
Juneau, AK 99811

Dear Rep. Finkelstein:

In October of 1990, delegates to the Alaska Federation of Natives' Annual Convention unanimously passed Resolution 90-13, supporting the inclusion of tobacco in mandates for state and federal drug abuse agencies. This action was taken in recognition of the growing health threat posed by tobacco products to Alaska Natives, especially Alaska Native youth.

As you are aware, House Bill 84, sponsored by Rep. Kay Brown, is pending before your Committee. I am writing to convey the support of AFN for this measure. While we recognize there may be economic costs to some businesses as a result of this legislation, we believe that the resultant health benefits far outweigh any financial loss. Once again, AFN supports the intent of HB84. Thank you for your time.

Sincerely,



Julie Kitka
President

cc: Rep. Kay Brown
Anne Walker, ANHB

FISCAL NOTE

STATE OF ALASKA
1991 LEGISLATIVE SESSION

Bill No. HB 84

Revision Date: _____ Department Affected: Alaska Court System
 Title: An Act relating to the sale, exchange, BRU: Trial Courts
or giving of tobacco and tobacco products Components: _____
 Sponsor: Brown
 Requestor: Labor & Commerce COMPONENT SERIAL NO.

000 000	000 768
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EXPENDITURES/REVENUES: (Thousands of Dollars)

OPERATING	FY 92	FY 93	FY 94	FY 95	FY 96	FY 97
PERSONAL SERVICES						
TRAVEL						
CONTRACTUAL						
SUPPLIES						
EQUIPMENT						
LAND & STRUCTURES						
GRANTS & CLAIMS						
TOTAL OPERATING	0.0	0.0	0.0	0.0	0.0	0.0

CAPITAL						
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REVENUE						
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FUNDING: (Thousands of Dollars)

GENERAL FUNDS	0.0	0.0	0.0	0.0	0.0	0.0
FEDERAL FUNDS						
OTHER						
TOTAL	0.0	0.0	0.0	0.0	0.0	0.0

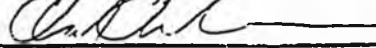
POSITIONS:

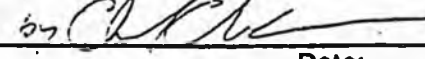
FULL-TIME						
PART-TIME						
TEMPORARY						

Estimate of current year impact: None

ANALYSIS: (Attach a separate page if necessary)

No fiscal impact.

Prepared by: C. S. Christensen III, Staff Counsel  Phone: 264-8228
 Division: Alaska Court System Date: 02/28/91

Approved by: Arthur H. Snowden, II, Administrative Director  Date: 02/28/91
 Agency: Alaska Court System

Distribution (by preparer): Legislative Finance, Legislative Sponsor, Requestor, OMB, & Impacted Agency(ies).

FISCAL NOTE

STATE OF ALASKA
1991 LEGISLATIVE SESSION

BILL NO. CSHB 84 (L&C)

Revision Date: _____ Department Affected: Commerce & Economic Dev.

Title: An Act relating to the offense BRU: Occupational Licensing

of selling or giving tobacco.... Component: Administration

Sponsor: Reps. Brown and Ellis

Requestor: Rep. Brown COMPONENT SERIAL NO.

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Expenditures/Revenues: (Thousands of Dollars)

OPERATING	FY 92	FY 93	FY 94	FY 95	FY 96	FY 97
PERSONAL SERVICES						
TRAVEL						
CONTRACTUAL	2.0	2.0	2.0	2.0	2.0	2.0
SUPPLIES						
EQUIPMENT						
LAND & STRUCTURES						
GRANTS, CLAIMS						
MISCELLANEOUS						
TOTAL OPERATING	2.0	2.0	2.0	2.0	2.0	2.0

CAPITAL						
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REVENUE	0	0	0	0	0	0
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FUNDING: (Thousands of Dollars)

GENERAL FUND						
FEDERAL FUNDS						
OTHER (GF/PR)	2.0	2.0	2.0	2.0	2.0	2.0
TOTAL	2.0	2.0	2.0	2.0	2.0	2.0

POSITIONS:

FULL-TIME	0	0	0	0	0	0
PART-TIME	0	0	0	0	0	0
TEMPORARY	0	0	0	0	0	0

Estimate of current year impact: None

ANALYSIS: (Attach a separate page if necessary.)

The expenditure identified in the fiscal note result from Section 10 of the bill which requires making a consumer warning sign available to businesses that obtain the tobacco endorsement on their business license. An authorization from program receipts collected in the business licensing program is requested.

Prepared By: Jennifer Strickler, Administrative Officer Phone: 465-2144

Division: Occupational Licensing Date: March 22, 1991

Approved by Commissioner: Glenn A. Olds *[Signature]* Asst. Comm.

Agency: Commerce and Economic Development Date: 3-22-91

Distribution (by preparer): Legislative Finance, Legislative Sponsor, Requestor, OMB, & Impacted Agency(ies).

FISCAL NOTE

No. 1

Bill Version: CSHB 84(L&C)

(H) Publish Date: 3/1/91

STATE OF ALASKA
1991 LEGISLATIVE SESSION

Revision Date: Original
Title: Sale, exchange or giving of tobacco
Sponsor: Brown, Ellis
Requestor: _____

Department Affected: Department of Revenue
BRU: Revenue Operations
Component: Income and Excise Audit

COMPONENT SERIAL NO. | 1 | 1 | 3 |

EXPENDITURES/REVENUES: (Thousands of Dollars)

OPERATING	FY 92	FY 93	FY 94	FY 95	FY 96	FY 97
PERSONAL SERVICES	0.0					
TRAVEL	0.0					
CONTRACTUAL	1.0					
SUPPLIES	0.0					
EQUIPMENT	0.0					
LANDS & STRUCTURES	0.0					
GRANTS, CLAIMS	0.0					
MISCELLANEOUS	0.0					
TOTAL OPERATING	1.0					
CAPITAL	0.0					
REVENUE	0.0					

FUNDING: (Thousands of Dollars)

GENERAL FUND	1.0					
FEDERAL FUNDS	0.0					
OTHER	0.0					
TOTAL	1.0					

POSITIONS:

FULL-TIME	0.0					
PART-TIME	0.0					
TEMPORARY	0.0					

Estimate of current year impact: \$0.0

ANALYSIS: Attach a separate page for analysis.

Prepared By: Carl Meyer *Carl Meyer* Phone: (907) 465-2320
Division: Income and Excise Audit Division Date: February 20, 1991

Approved by Commissioner: Lee E. Fisher *Lee E. Fisher*
Agency: Department of Revenue Date: _____

Distribution (by preparer): Legislative Finance, Legislative Sponsor, Requestor, OMB, & Impacted Agency(ies).

FISCAL NOTE

.o. 2

Bill Version: CSHB 84(L&C)

(H) Publish Date: 3/1/91

STATE OF ALASKA
1991 LEGISLATIVE SESSION

Revision Date: _____ Department Affected: Commerce & Economic Dev.

Title: An Act relating to the sale, exchange, or giving of tobacco products BRU: Occupational Licensing

Sponsor: Representatives Brown and Ellis Component: _____

Requestor: House L&C, Judiciary, Finance COMPONENT SERIAL NO.

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Expenditures/Revenues: (Thousands of Dollars)

OPERATING	FY 92	FY 93	FY 94	FY 95	FY 96	FY 97
PERSONAL SERVICES						
TRAVEL						
CONTRACTUAL						
SUPPLIES						
EQUIPMENT						
LAND & STRUCTURES						
GRANTS, CLAIMS						
MISCELLANEOUS						
TOTAL OPERATING	0	0	0	0	0	0

CAPITAL	0	0	0	0	0	0
---------	---	---	---	---	---	---

REVENUE	0	0	0	0	0	0
---------	---	---	---	---	---	---

FUNDING: (Thousands of Dollars)

GENERAL FUND						
FEDERAL FUNDS						
OTHER						
TOTAL	0	0	0	0	0	0

POSITIONS:

FULL-TIME	0	0	0	0	0	0
PART-TIME						
TEMPORARY						

Estimate of current year impact: None

ANALYSIS: (Attach a separate page if necessary.)

HB 84 prohibits the sale of tobacco products by vending machine, provides for the suspension of business license tobacco endorsements, requires posting of warning signs. New funds are not required to implement this bill.

Prepared By: Kevin Henderson, Regulations Specialist Phone: 465-2537

Division: Occupational Licensing Date: February 14, 1991

Approved by Commissioner: Glenn A. Olds *[Signature]* Steve Best

Agency: Department of Commerce & Economic Development Date: February 14, 1991

Distribution (by preparer): Legislative Finance, Legislative Sponsor, Requestor, OMB, & Impacted Agency(ies).

COMMITTEE COPY

FISCAL NOTE

STATE OF ALASKA
1991 LEGISLATIVE SESSION

Bill No. HB 84

Revision Date: _____ Department Affected: Alaska Court System
 Title: An Act relating to the sale, exchange, BRU: Trial Courts
or giving of tobacco and tobacco products Components: _____
 Sponsor: Brown
 Requestor: Labor & Commerce COMPONENT SERIAL NO.

000 000	000 768
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EXPENDITURES/REVENUES: (Thousands of Dollars)

OPERATING	FY 92	FY 93	FY 94	FY 95	FY 96	FY 97
PERSONAL SERVICES						
TRAVEL						
CONTRACTUAL						
SUPPLIES						
EQUIPMENT						
LAND & STRUCTURES						
GRANTS & CLAIMS						
TOTAL OPERATING	0.0	0.0	0.0	0.0	0.0	0.0

CAPITAL						
---------	--	--	--	--	--	--

REVENUE						
---------	--	--	--	--	--	--

FUNDING: (Thousands of Dollars)

GENERAL FUNDS	0.0	0.0	0.0	0.0	0.0	0.0
FEDERAL FUNDS						
OTHER						
TOTAL	0.0	0.0	0.0	0.0	0.0	0.0

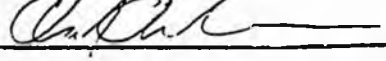
POSITIONS:

FULL-TIME						
PART-TIME						
TEMPORARY						

Estimate of current year impact: None

ANALYSIS: (Attach a separate page if necessary)

No fiscal impact.

Prepared by: C. S. Christensen III, Staff Counsel  Phone: 264-8228
 Division: Alaska Court System Date: 02/28/91

Approved by: Arthur H. Snowden, II, Administrative Director  Date: 02/28/91
 Agency: Alaska Court System

Distribution (by preparer): Legislative Finance, Legislative Sponsor, Requestor, OMB, & Impacted Agency(ies).

FISCAL NOTE

No. 3

Bill Version: CSHB 84(L&C)

(H) Publish Date: 3/1/91

**STATE OF ALASKA
1991 LEGISLATIVE SESSION**

Revision Date: _____ Department Affected: Alaska Court System
 Title: An Act relating to the sale, exchange, BRU: Trial Courts
or giving of tobacco and tobacco products Components: _____
 Sponsor: Brown
 Requestor: Labor & Commerce COMPONENT SERIAL NO.

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EXPENDITURES/REVENUES: (Thousands of Dollars)

OPERATING	FY 92	FY 93	FY 94	FY 95	FY 96	FY 97
PERSONAL SERVICES						
TRAVEL						
CONTRACTUAL						
SUPPLIES						
EQUIPMENT						
LAND & STRUCTURES						
GRANTS & CLAIMS						
TOTAL OPERATING	0.0	0.0	0.0	0.0	0.0	0.0

CAPITAL						
---------	--	--	--	--	--	--

REVENUE						
---------	--	--	--	--	--	--

FUNDING: (Thousands of Dollars)

GENERAL FUNDS	0.0	0.0	0.0	0.0	0.0	0.0
FEDERAL FUNDS						
OTHER						
TOTAL	0.0	0.0	0.0	0.0	0.0	0.0


POSITIONS:

FULL-TIME						
PART-TIME						
TEMPORARY						

Estimate of current year impact: None

ANALYSIS: (Attach a separate page if necessary)

No fiscal impact.

Prepared by: C. S. Christensen III, Staff Counsel  Phone: 264-8228
 Division: Alaska Court System Date: 02/28/91

Approved by: Arthur H. Snowden, II, Administrative Director  Date: 02/28/91
 Agency: Alaska Court System

Distribution (by preparer): Legislative Finance, Legislative Sponsor, Requestor, OMB, & Impacted Agency(ies).

FISCAL NOTE

STATE OF ALASKA
1991 LEGISLATIVE SESSION

BILL NO. CSHB84

Revision Date: March 5, 1991
Title: Prohibiting sale of tobacco products by vending machine
Sponsor: Rep. Brown and Rep. Ellis
Requestor: _____

Department Affected: Department of Revenue
BRU: Revenue Operations
Component: Income and Excise Audit

COMPONENT SERIAL NO. | 1 | 1 | 3 |

EXPENDITURES/REVENUES: (Thousands of Dollars)

OPERATING	FY 92	FY 93	FY 94	FY 95	FY 96	FY 97
PERSONAL SERVICES						
TRAVEL						
CONTRACTUAL						
SUPPLIES						
EQUIPMENT						
LANDS & STRUCTURES						
GRANTS, CLAIMS						
MISCELLANEOUS						
TOTAL OPERATING	0.0	0.0	0.0	0.0	0.0	0.0
CAPITAL	0.0	0.0	0.0	0.0	0.0	0.0
REVENUE	0.0	0.0	0.0	0.0	0.0	0.0

FUNDING: (Thousands of Dollars)

GENERAL FUND						
FEDERAL FUNDS						
OTHER						
TOTAL	0.0	0.0	0.0	0.0	0.0	0.0

POSITIONS:

FULL-TIME						
PART-TIME						
TEMPORARY						

Estimate of current year impact: 0.0

ANALYSIS:

This fiscal note reflects the fact that there is no longer a fiscal cost to Revenue because the committee substitute deleted the requirement for the Department of Revenue to provide warning signs to licensees under AS 43.50.

Prepared By: Carl Meyer *Carl Meyer* Phone: (907) 465-2320
Division: Income and Excise Audit Division Date: March 5, 1991

Approved by Commissioner: Lee E. Fisher *Lee E. Fisher*
Agency: Department of Revenue Date: 3/6/91

Distribution (by preparer): Legislative Finance, Legislative Sponsor, Requestor, OMB, & Impacted Agency(ies).

HOUSE COMMITTEE REPORT

(7)

Date Referred: March 1, 1991

FURTHER REFERRALS:

Finance

Date of Committee Action: 3-26-91

The JUDICIARY Committee considered:

HB 84

HOUSE BILL NO. 84

BAN SALE OF TOBACCO IN VENDING MACHINES

"An Act relating to the sale, exchange, or giving of tobacco and tobacco products."

RECOMMENDATIONS:

be replaced with _____

CSHB84 (JUD)

the same title
 a new title

have attached amendments(s)

do pass

do not pass

no recommendations

individual recommendations

additional referral to the _____ Committee

ADOPTS: _____ letter of Intent

ATTACHES NEW FISCAL NOTE(S): (Dept)

APPROVES PREVIOUS: (Dept/Date)

fiscal impact _____

fiscal note(s) _____

zero fiscal note _____

zero fiscal note(s) Dept. of Rev 3-1-91, Comm. 3-1-91, Court System 3-1-91

SIGNING DO PASS	DP	OTHER RECOMMENDATIONS	DNP	NR	AM
<i>Dave Douley</i>	✓				
		<i>Mark Stanley</i>		X	
		<i>Terry Martin</i>	X	X	
		<i>Mitch Miller</i>	X	X	
<i>Kevin P. Parnell</i>	✓				
<i>H. Ellis</i>	✓				
<i>Bob G... ..</i>	-				

Dave Douley
 CHAIRMAN'S SIGNATURE