

2016

# Limiting Youth Access to Tobacco Products

## Summary

The earlier young people begin using tobacco products, the more likely they are to use them as adults and the longer they remain users (Institute of Medicine, 2015). The Wyoming Tobacco Prevention and Control Program (TPCP) shares two key goals with the federal tobacco prevention and control program: reduce youth initiation of tobacco use (Centers for Disease Control and Prevention [CDC], 2014) and (b) increase tobacco quit attempts and successes (CDC, 2015). Limiting youth access to tobacco products may help reduce youth initiation of tobacco use (CDC, 2014).

Tobacco retailers in Wyoming generally comply with Wyoming law regarding the sale of tobacco to minors (Wyoming Statute 14 Article 3, 2015; WYSAC, 2015a; WYSAC, 2015b). Continued educational and enforcement efforts will likely maintain this success.

Still, most students perceive access to cigarettes as easy (Prevention Needs Assessment [PNA], 2014), suggesting that minors in Wyoming may identify stores where they are likely to make successful purchase attempts or can rely on other ways of obtaining cigarettes, such as getting them from relatives.

Approximately half of Wyoming schools have comprehensive tobacco-free policies that prohibit all tobacco use at all times in all locations (Demissie et al., 2015). Efforts to encourage schools to implement and enforce comprehensive tobacco-free policies could further reduce youth tobacco use in Wyoming.

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## Preventing Youth Access in Wyoming

One important piece of legislation regarding youth access is the 1992 Synar Amendment (Section 1926 of Title XIX, Federal Public Health Service Act). In accordance with the Synar Amendment, Wyoming's current youth access law (comprised of the eight sections of Wyoming Statute 14 Article 3, 2015) prohibits individuals from selling or delivering tobacco products to minors (youth under the age of 18) and prohibits minors from purchasing, possessing, or using tobacco, including electronic nicotine delivery systems (ENDS; also known as e-cigarettes). In 2000, Wyoming implemented a three-pronged approach to reduce youth access to tobacco products (Wyoming Department of Health, Public Health Division, 2014). This approach currently is comprised of the following:

*Education through the Got ID? program.* The Wyoming Association of Sheriffs and Chiefs of Police (WASCOP), working with local community members, provides packets to tobacco retailers that educate the retailers about restricting sales of tobacco products to minors.

*Synar inspections to monitor compliance without penalties for violations.* During Synar inspections, trained 16- and 17-year old inspectors use standardized protocols to attempt to purchase cigarettes or smokeless tobacco from a sample of Wyoming tobacco retailers accessible to minors.

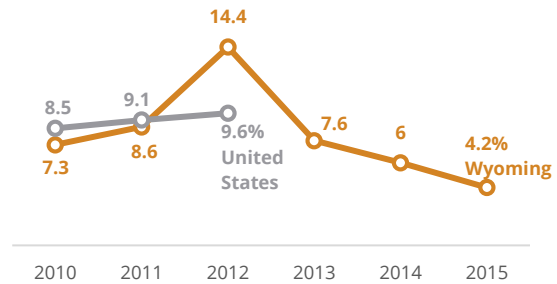
*Law enforcement inspections.* WASCOP conducts compliance inspections in addition to the Synar inspections. During WASCOP inspections, trained adolescent inspectors attempt to purchase cigarettes from Wyoming tobacco retailers. Unlike Synar inspections, these compliance checks allow law enforcement officers to issue citations to merchants who sell to minors.

## Synar Compliance Checks Results

The Substance Abuse and Mental Health Services Administration (SAMHSA) requires states to have a Synar noncompliance rate less than 20%. Despite changes to inspection methods over time (e.g., adding smokeless tobacco inspections in 2010), the Wyoming Synar noncompliance rate has generally been between 6% and 10% since 2000. The one exception was a 14% noncompliance rate in 2012 that was heavily influenced by one inspection trip with a high noncompliance rate. In 2015, Wyoming's noncompliance rate was 4.2% (Figure 1). Clerks asking inspectors for identification has consistently been the strongest predictor of violations; clerks who ask for an ID are unlikely to sell tobacco to a minor (see Figure 2 for the 2015 data; WYSAC, 2015b).

**Figure 2: Wyoming Compliance Rate Generally Near National Rate**

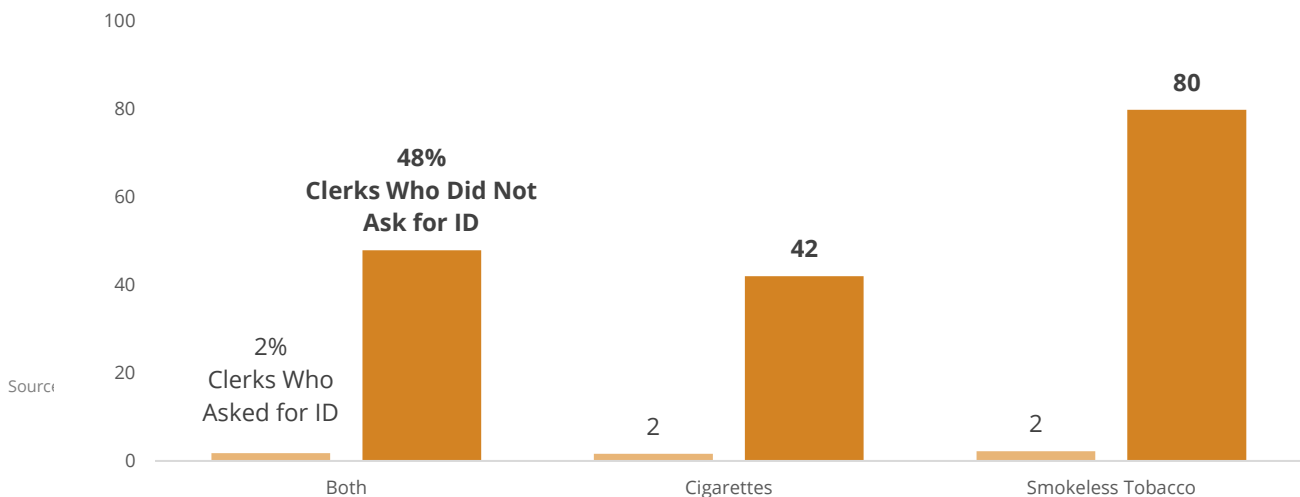
*Wyoming and U.S. RVRs since 2010*



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**Figure 1: Clerks Who Do Not Ask for Identification Least Likely Willing to Sell**

*Violation rate by asking for identification and tobacco type, 2015*



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Since WYSAC first included smokeless tobacco inspections, results comparing noncompliance rates for cigarettes and smokeless tobacco have been inconsistent. The noncompliance rates for smokeless tobacco were statistically significantly higher than for cigarettes in 2011 and 2013, but not in the other years (WYSAC, 2015b).

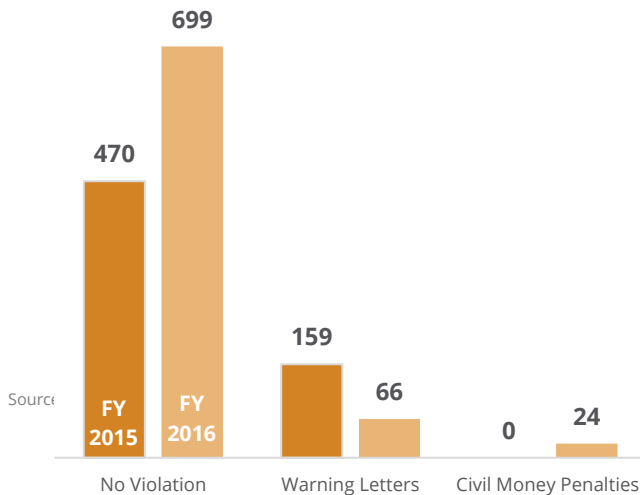
## WASCOP Compliance Check Results

Table 1 shows the number and overall results of WASCOP compliance checks (WYSAC, 2015a). Noncompliance rates measured by the WASCOP inspections have been lower than 20% since 2007.

Source: WYSAC, 2015a.

## Figure 3: Retailer Compliance Is the Most Common Outcome of Federal Inspections

*FDA retailer compliance check outcomes*



## Table 1: No Significant Decline in Wyoming's WASCOP Noncompliance Rates

*WASCOP noncompliance rates, 2003-2015*

| Year | Number of Retailers Checked | Noncompliance Rate |
|------|-----------------------------|--------------------|
| 2007 | 756                         | 13%                |
| 2008 | 819                         | 17%                |
| 2009 | 734                         | 16%                |
| 2010 | 652                         | 10%                |
| 2011 | 744                         | 13%                |
| 2012 | 911                         | 7%                 |
| 2013 | 781                         | 11%                |
| 2014 | 748                         | 12%                |
| 2015 | 701                         | 10%                |

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## FDA Inspection Results

The Family Smoking Prevention and Tobacco Control Act authorized the Food and Drug Administration (FDA) to regulate tobacco<sup>1</sup> and includes federal regulations to reduce youth access to tobacco products (FDA, 2015). In Wyoming fiscal year 2015 (July 2014 to June 2015) the FDA conducted 629 inspections with youth attempting purchases in Wyoming, including revisiting retailers found to be in violation. In fiscal year 2016, the FDA conducted 789 additional inspections. Most inspections found no violations, but the FDA has issued warning letters and civil money penalties (Figure 3; FDA, 2016).

<sup>1</sup> Originally, the FDA definition of tobacco products included cigarettes, roll-your-own tobacco, and smokeless tobacco. In 2016, FDA expanded the definition to include ENDS, cigars, hookah tobacco, and other products derived from tobacco (FDA, 2016b).

## Cigarette Purchases by Youth

In 2015, 7% of Wyoming high school smokers younger than 18 years of age reported that they usually got their own cigarettes by buying them in a store or gas station (Figure 4; WY YRBS, 2015). This percentage has been somewhat erratic since 2001 in both Wyoming and the United States (national data from the Youth Risk Behavior Surveillance System [YRBSS], 2015).

## Youth Perceived Access to Cigarettes

In 2014, 27% of Wyoming middle school students and 65% of Wyoming high school students under the age of 18 said it would be easy (either sort of easy or very easy) to “get some cigarettes.” The perceived ease of access to cigarettes varied by students’ grade level. In general, students in higher grades perceived access to cigarettes as easier than students in lower grades (Figure 5; PNA, 2014). Additionally, Synar results have shown that older youth inspectors or those who look 18 or older are generally more likely to find clerks willing to sell them tobacco products (WYSAC, 2015b). Together, these findings suggest that it may be easier for youth to purchase or otherwise access cigarettes as they approach the age of 18.

Overall, results indicate that limiting retail availability of cigarettes for youth is only part of restricting youth access to cigarettes. The development and implementation of programs to limit youth access to tobacco through means other than direct purchases

## Figure 4: Minors Continue to Purchase Their Own Cigarettes

Percentage of smokers\* buying their own cigarettes during the past 30 days, 2001-2015



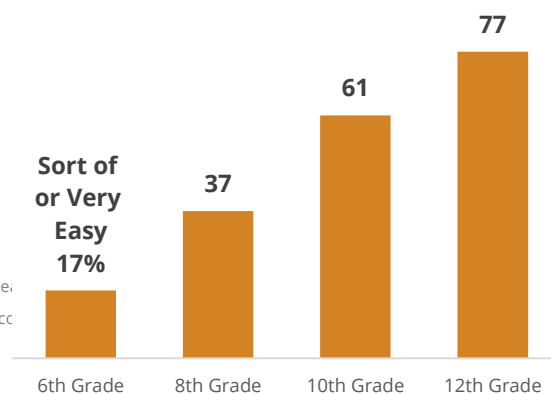
Note: \*Of students younger than 18 years of age who reported cigarette use.

Source: WY YRBS, 2015; YRBSS, 2015.

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## Figure 5: Access to Cigarettes Easier for Older High School Students

Percentage of students\* who perceive that access to cigarettes is easy+, by grade, 2014



Note: \*Younger than 18 years. + sort of easy or very easy cc

Source: PNA, 2014.

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could further reduce youth initiation and consumption of tobacco. For example, a media campaign could include messages advising adults of the consequences of providing tobacco products to minors.

## Youth Access to Smokeless Tobacco

Youth access smokeless tobacco from a variety of sources (Figure 6). Youth often obtain smokeless tobacco from non-relative adults or minors. In 2014, 5% of Wyoming middle school students and 19% of high school students (younger than 18 years of age) who used smokeless tobacco reported they purchased their own tobacco from a store (PNA, 2014).

Source of smokeless tobacco varied by grade (Figure 6).

Results for middle school smokeless tobacco users did

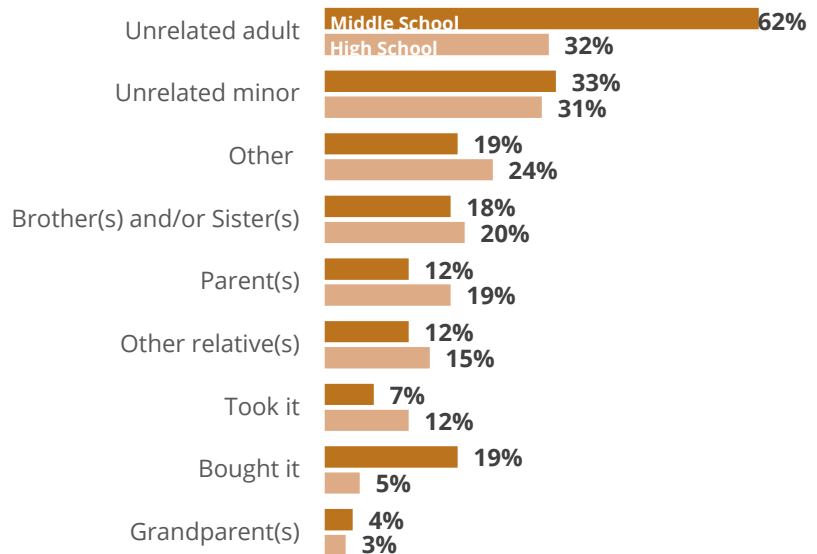
not reveal a clear primary source of smokeless tobacco.

Among high school smokeless tobacco users younger than 18, the primary source of smokeless tobacco is an unrelated adult. These could include adult friends or strangers who purchase tobacco at the teens' request.

Large proportions of high school smokeless tobacco users also obtained their tobacco from an unrelated minor (PNA, 2014).

**Figure 6: Unrelated Adults are Primary Source of Smokeless Tobacco for High School Students**

*Sources of smokeless tobacco by school level\*, 2014*



\*Note: The percentage more than one respondent younger than 18 years of age.  
Source: PNA, 2014.

## Tobacco Restrictions at School

Implementing comprehensive tobacco-free policies on school property will likely reduce susceptibility to experiment with tobacco products, youth initiation of tobacco products, and overall youth use of tobacco (CDC, 2014).

Implementing comprehensive tobacco-free policies in schools is part of a comprehensive tobacco control program (CDC, 2014) and makes it more difficult for youth to use tobacco products during much of the day. A school is considered tobacco-free when there is a policy that specifically prohibits the use of all types

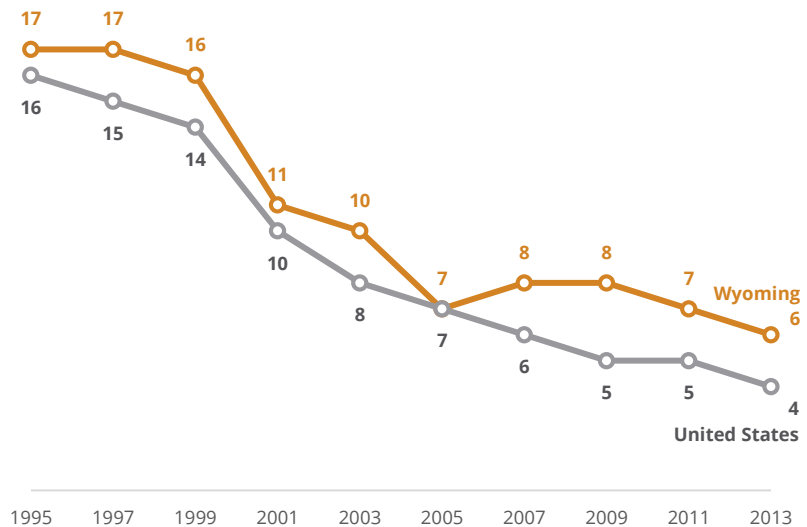
of tobacco (including cigarettes, smokeless tobacco, cigars, and pipes, but not necessarily ENDS) by all people (all students, faculty/staff, and visitors) at all times (including during non-school hours) and in all places (including school-sponsored events held off campus). In 2014, 50% of Wyoming schools were smokefree (Demissie et al., 2015).

## Students Smoking on School Property

The percentage of students reporting cigarette use on school property has declined since 1995 in both Wyoming and the United States (Figure 7; WY YRBS, 2013; YRBSS, 2013). The Wyoming and U.S. rates have been similar.

### Figure 7: Cigarette Use on School Property Declines

Percentage of high school students who had used cigarettes on school property in the past 30 days, 1995-2013



Notes: This survey question was not asked in 2015.

Source: WY YRBS, 2013; YRBSS, 2013.

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