



RESOLUTION REQUESTING THAT THE NORTH CAROLINA GENERAL ASSEMBLY AMMEND NC GS 14-313(E) TO ALLOW FOR FLOOR PREEMPTION AND TO RESTORE LOCAL CONTROL OVER TOBACCO POLICIES AND TOBACCO REGULATION, INCLUDING ELECTRONIC CIGARETTES, FOR COMMUNITIES THAT WANT TO ENACT MORE STRINGENT POLICIES AND REGULATIONS.

WHEREAS, the health consequences of smoking are staggering, and there is irrefutable evidence that tobacco use causes cancer, respiratory and cardiac diseases, infertility, negative birth outcomes, irritations to the eyes, nose and throat (U.S. Department of Health and Human Services, 2014); and

WHEREAS, the economic losses in health care expenditures are equally important and the use of tobacco products cost the U.S. as much as \$170 billion in health care expenditures each year (Xu, Bishop, Kennedy, Simpson, & Pechacek, 2014); and

WHEREAS, nearly 90% of all smokers begin smoking before the age of eighteen (Centers for Disease Control and Prevention , 2014); and

WHEREAS, in North Carolina, 1 in every 10 middle school students is a current tobacco user and 3 in every 10 high school students is a current tobacco user; and

WHEREAS, in North Carolina, 8,676 middle school students currently smoke cigarettes; and 55,688 high school students currently smoke cigarettes; (North Carolina Tobacco Prevention and Control Branch); and

WHEREAS, economic costs of tobacco use in Rutherford County from tobacco-caused government spending was over \$24.2 million dollars or \$888.00 per household per year for 27,214 households (Campaign for Tobacco Free Kids 2015 and US Census Bureau extrapolated figures); and

WHEREAS, economic costs of tobacco use in Polk County from tobacco-caused government spending was over \$7.8 million dollars or \$888.00 per household per year for 8,788 households (Campaign for Tobacco Free Kids 2015 and US Census Bureau extrapolated figures); and

WHEREAS, economic costs of tobacco use in McDowell County from tobacco-caused government spending was over \$15.3 million dollars or \$888.00 per household per year for 17,252 households (Campaign for Tobacco Free Kids 2015 and US Census Bureau extrapolated figures); and

WHEREAS, there is supportive evidence that increasing the minimum legal age of purchase to 21 will save more lives, reduce initiation among adolescents and young adults, and immediately improve the health of adolescents, young adults and young mothers who would be deterred from smoking, as well as their children (Institute of Medicine, 2015); and

WHEREAS, we believe in the need to educate and empower youth about the harmful effects of tobacco use and prohibit these incidences of purchase until the conscious age of 21 years; and

WHEREAS, there is supportive evidence that increasing the minimum legal age to purchase tobacco products to 21 will save more lives, reduce initiation among adolescents and young adults,

and immediately improve the health of adolescents, young adults and young mothers who would be deterred from smoking, as well as their children (Institute of Medicine, 2015); and

WHEREAS, G.S 14-313 “Youth access to tobacco products, tobacco-derived products, vapor products, and cigarette wrapping papers” set the minimum age to purchase tobacco products at 18, provided for statewide uniformity and penalties; and

WHEREAS, in recognition of the damaging effects of preemption and the importance of community tobacco control policies, both the Healthy People 2010 and the Healthy People 2020 objectives, which are developed by the Department of Health and Human Services to set the national public health agenda for each decade, include an objective calling for the elimination of all state laws that preempt local tobacco control policies (U.S. Department of Health and Human Services, 2013); and

WHEREAS, the Rutherford Polk McDowell District Board of Health requests that the North Carolina General Assembly restore local control over tobacco policies in order to allow “political subdivisions, board or agencies of the state, counties, cities, municipality, municipal corporation, town, township, village or any department or agency thereof”, including all county or district boards of health or boards of consolidated health services to be allowed to increase the minimum age to purchase tobacco products to 21 and to enact protections and provisions more stringent than G.S 14-313 regarding youth access to tobacco products, tobacco-derived products, vapor products, and cigarette wrapping papers” [to allow floor preemption] provided that all penalties included in GC 14-313 would remain the same; and

WHEREAS, the Rutherford Polk McDowell District Board of Health recommends keeping the current provisions of G.S 14-313 regarding youth access to tobacco products, tobacco-derived products, vapor products, and cigarette wrapping papers as a floor or minimum standard [floor preemption] but requests that the North Carolina General Assembly restore local control over tobacco policies in order local communities to set even higher standards to promote health and civic engagement and to protect residents from known public health threats by enacting innovative, evidence-based policies. (Grantmakers in Health, Views from the Field, “All Politics are Local: Preemption and Public Health, 1/19/2016). The lifting of the preemption provisions in NC GS 14-313(e) to this extent to allow floor preemption reinstates local capacity to develop local public policy and will revitalize community debate, education and empowerment; and

THEREFORE BE IT RESOLVED, the Rutherford Polk McDowell District Board of Health recommends keeping the current provisions of G.S 14-313 regarding youth access to tobacco products, tobacco-derived products, vapor products, and cigarette wrapping papers as a floor or minimum standard [floor preemption] but requests that the North Carolina General Assembly restore local control over tobacco policies in order local communities to set even higher standards to promote health and civic engagement and granting to Rutherford, Polk, and McDowell Counties and the Rutherford Polk McDowell District Board of Health legal authority to protect residents from known public health threats by enacting innovative, evidence-based policies such as an increase in the minimum sale age of tobacco products from 18 to 21. The lifting of the preemption provisions in NC GS 14-313(e) to this extent reinstates local capacity to develop local public policy and to revitalize community debate, education and empowerment;

THEREFORE BE IT FURTHER RESOLVED, the Rutherford Polk McDowell District Board of Health specifically requests that the North Carolina General Assembly allows for floor preemption in G.S. 14-233 and restore local control over tobacco policies so long as the minimum age to purchase tobacco products is no less than age 18 and other minimum standards in G. S. 14-233 are kept as minimum standards and allow “political subdivisions, board or agencies of the state, counties, cities, municipality, municipal corporation, town, township, village or by department or agency thereof”, including all county or district boards of health or boards of consolidated health services to increase the minimum age to purchase tobacco products up to 21 and to enact other protections and provisions more stringent than G.S 14-313 regarding youth access to tobacco products, tobacco-derived products, vapor products, and cigarette wrapping papers”; therefore, granting to Rutherford, Polk, and McDowell Counties and the Rutherford Polk McDowell District Board of Health legal authority to protect residents from known public health threats by enacting innovative, evidence-based policies such as an increase in the minimum sale age of tobacco products from 18 to 21. The lifting of the preemption provisions in NC GS 14-313(e) to this extent reinstates local capacity to develop public policy and revitalizes community debate, education and empowerment.

FURTHER BE IT RESOLVED, that we also call on other Boards of Health to request that the General Assembly grant floor preemption and to allow the restoration of local control over tobacco policies so as to better help prevent youth initiation.



Dave Odom, Chair
Rutherford Polk McDowell Health District
Board of Health



Jimmy Hines, District Health Director
Rutherford Polk McDowell
District Health Department

References

Campaign for Tobacco Free Kids 2015

Centers for Disease Control and Prevention. (2014, February 14). *Smoking and Tobacco Use* . Retrieved January 8, 2015, from Youth and Tobacco Use :
http://www.cdc.gov/tobacco/data_statistics/fact_sheets/youth_data/tobacco_use/

(Grantmakers in Health, Views from the Field, “All Politics are Local: Preemption and Public Health, 1/19/2016)

Institute of Medicine. (2015). *Public Health Implications of Raising the Minimum Age of Legal Access to Tobacco Products*. Washington, DC: The National Academies Press.

North Carolina Tobacco Prevention and Control Branch. (n.d.). *North Carolina Youth Tobacco Survey: Middle and High School Fact Sheet*.

U.S. Department of Health and Human Services. (2013, April 5). *State Preemption of Local Authority to Engage in Evidence-Based Tobacco Control Policies*. Retrieved March 17, 2015, from NC Alliance for Health:
<http://www.ncallianceforhealth.org/Media/Tobacco/North%20Carolina%20preemption%20LOE%204%2015%202013.pdf>

US Census Bureau extrapolated figures for Rutherford, Polk and McDowell Counties.

U.S. Department of Health and Human Services. (2014). *The Health Consequences of Smoking-- 50 years of Progress: A Report by the Surgeon General*. Rockville: U.S. Department of Health and Human Services.

Xu, X., Bishop, E. E., Kennedy, S. M., Simpson, S. A., & Pechacek, T. F. (2014). Annual Healthcare Spending Attributable to Cigarette Smoking. *American Journal of Preventative Medicine*, 48(3):326–33.