HEALTH COMMISSION
RESOLUTION NO. 17-05

IN SUPPORT OF PROPOSED BOARD OF SUPERVISORS ORDINANCE PROHIBITING THE SALE OF MENTHOL AND OTHER FLAVORED TOBACCO PRODUCTS IN SAN FRANCISCO

WHEREAS, the San Francisco Health Commission adopted a resolution in 2011 asking the US Food and Drug Administration to take action to address menthol cigarettes as a starter product and intentional targeting by the industry of African-American and other communities, leading to devastating health impacts over recent decades; and

WHEREAS, the US Food and Drug Administration has not taken action on the menthol cigarette issue after considerable deliberation; and

WHEREAS, the federal Family Smoking Prevention and Tobacco Control Act (FSPTCA), enacted in 2009, prohibited candy- and fruit-flavored cigarettes, largely because these flavored products were marketed to youth and young adults, and younger smokers were more likely to have tried these products than older smokers; and

WHEREAS, since the passage of the FSPTCA in 2009, a new class of flavored products been developed and has replaced prohibited flavored cigarettes, including myriad flavors of e-cigarettes and little cigars, which grow in popularity every year, especially among youth and communities of color; and

WHEREAS, the U.S. Surgeon General and Food and Drug Administration have stated that mentholated and flavored products have been shown to be “starter” products for youth who begin using tobacco and that these products help establish tobacco habits that can lead to long-term addiction; and

WHEREAS, tobacco companies have used flavorings such as mint and wintergreen in smokeless tobacco products as part of a “graduation strategy” to encourage new users to start with products with lower levels of nicotine and progress to products with higher levels of nicotine; and

WHEREAS, adding flavorings to tobacco products such as little cigars, cigarillos, and smokeless tobacco can mask the natural harshness and taste of tobacco, making these products easier to use and increasing their appeal among youth; and
WHEREAS, the tobacco industry has been manipulating the dose of menthol in cigarettes to ensure the uptake and continued use of tobacco, especially by young people and other vulnerable populations for many years; and

WHEREAS, young people are much more likely to use candy- and fruit-flavored tobacco products, including cigars, cigarillos, and hookah tobacco, than adults; and

WHEREAS, in California, 64 percent of smokers start smoking by age 18, and 96 percent start smoking by age 26. Further, young adults ages 18 to 24 have the highest smoking prevalence of any age group in the state.

WHEREAS, a survey conducted by the San Francisco Unified School District found that 10% of middle school and 17% of high school students have tried e-cigarettes, while 7.5% of high school students have used cigarettes in the last 30 days; and

WHEREAS, the U.S. Centers for Disease Control and Prevention has reported a more than 800% increase in electronic cigarette use among middle and high school students between 2011 and 2015; and

WHEREAS, the California Attorney General has stated that electronic cigarette companies have targeted minors with fruit-flavored products; and

WHEREAS, 70% of tobacco retailers within 1,000 feet of San Francisco schools sell flavored tobacco products (and nearly all sell mentholated cigarettes); and

WHEREAS, the consumption of flavored tobacco has grown in recent years. From 1995 to 2008, sales of little cigars increased by 316 percent. Flavored brands (including youth-appealing types such as apple, cherry, chocolate, grape, peach, strawberry, and vanilla) make up nearly four-fifths of the little cigar market share.

WHEREAS, data from the National Youth Tobacco Survey indicate that more than two-fifths of U.S. middle and high school smokers report using flavored little cigars or flavored cigarettes; and

WHEREAS, smoking mentholated cigarettes reduces the likelihood of successfully quitting smoking; and
WHEREAS, the tobacco industry has a well-documented history of developing and marketing mentholated brands to communities of color and youth; and

WHEREAS, between 2004 and 2014 use of non-menthol cigarettes decreased among all populations, but overall use of menthol cigarettes increased among young adults (ages 18-25) and adults (ages 26+); and

WHEREAS, people aged 12 and above from communities of color are more likely to smoke mentholated cigarettes, as evidenced by the percentage of people who smoke that reported smoking mentholated cigarettes in the last month including:

- 82.6% of Black or African Americans who smoke cigarettes;
- 53.2% of Native Hawaiians or Other Pacific Islanders who smoke cigarettes;
- 36.9% of individuals with multiracial backgrounds who smoke cigarettes;
- 32.3% of Hispanic or Latinos who smoke cigarettes;
- 31.2% of Asians who smoke cigarettes;
- 24.8% of American Indian or Alaska Natives who smoke cigarettes; and
- 23.8% of White or Caucasians who smoke cigarettes; and

WHEREAS, a review of advertising, promotions, and pack prices near California high schools found that for each 10 percentage point increase in the proportion of Black students, the proportion of menthol advertising increased by 5.9%, the odds of a Newport (a leading brand of mentholated cigarettes) promotion were 50% higher, and the cost of Newport was 12 cents lower. There was no such association found for non-mentholated cigarettes; and

WHEREAS, a New York study found that price reduction promotions for menthol cigarettes are disproportionately targeted to youth markets; and

WHEREAS, both scientific reviews by Tobacco Products Scientific Advisory Committee (TPSAC) and the FDA found marketing of menthol cigarettes likely increases the prevalence of smoking for the entire population and especially among youth, African Americans, and possibly for Hispanic/Latinos; and

WHEREAS, scientific studies on the impact of a national ban of menthol in cigarettes found 36.5% of menthol cigarette users try to quit smoking if menthol was banned and between 300,000 and 600,000 lives would be saved by 2050; and
WHEREAS, San Francisco spends over $380 million a year on tobacco-related costs, including medical expenses, loss of productivity, and secondhand smoke exposure; just one measure of the massive human toll of tobacco use in the community.

RESOLVED, That the San Francisco Health Commission fully supports the prohibition of menthol and other flavored tobacco product sales in San Francisco with the aim of discouraging youth use and protecting the most vulnerable communities from these products; and

FURTHER RESOLVED, That the San Francisco Health Commission encourages the Board of Supervisors to extend protections to all San Franciscans that were intended in the 2009 Federal law that prohibited most flavored cigarettes with the omission of menthol cigarettes; and

FURTHER RESOLVED, That the San Francisco Health Commission supports local action to protect public health and encourages long term strategy that protects the health of San Franciscans.

I hereby certify that the San Francisco Health Commission at its meeting of June 6, 2017 date adopted the foregoing resolution.

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Mark Morewitz
Health Commission Executive Secretary
1 U.S.C. § 387g.


13 San Francisco Unified School District. 2014.


