

HOW PARENTS CAN PROTECT THEIR KIDS FROM BECOMING ADDICTED SMOKERS

The vast majority of parents do not want their kids to smoke, for obvious reasons. Smoking causes a wide range of serious health problems – including lung cancer, heart disease, and strokes – and frequently results in premature disability and death. To make matters worse, kids can start becoming seriously addicted to smoking very quickly, just weeks or even days after first "experimenting" with cigarettes.¹ What's more, smoking can harm kids well before they reach adulthood by causing a number of immediate, sometimes irreversible, health risks and problems.² Right now, one in five high school students smoke, while experimentation can start as early as fourth grade.^{3 4} Each day, about 3,500 kids try their first cigarette; and each day about 1,000 other kids, under 18 years of age, become new regular, daily smokers.⁵ That is more than 400,000 new underage daily smokers each year – and roughly one-third of them will eventually die prematurely from smoking-caused disease.⁶

Fortunately, parents can take a number of effective actions to protect their kids from starting to smoke or becoming another one of the tobacco industry's addicted customers and victims. Being good parents and role models is important, but it takes much more to prevent kids from smoking. Parents must also work against pro-smoking influences outside the home, including efforts to ensure that schools are doing their best to prevent and reduce youth smoking and to reduce cigarette-company marketing that reaches and influences kids. The U.S. cigarette companies spend almost \$36 million per day marketing their products, and they rely on youth smokers to replace their adult customers who quit or die.⁷ As one cigarette company executive put it, "the base of our business is the high school student."⁸

Parents as Anti-Smoking Role Models (Whether They Smoke or Not)

What parents say, how they act, and the values they communicate through their words and deeds has an enormous influence on children; and that applies to tobacco use, as well. Studies have found that parental actions, attitudes, and opinions about smoking have a great deal of influence on whether or not kids smoke.⁹ A recent study found that parental antismoking actions such as having restrictions about smoking in the home in place or sitting in non-smoking sections of restaurants are associated with reductions in children's smoking.¹⁰ Specifically, parents can take the following actions to help ensure that their children remain (or become) tobacco-free:

- If you don't smoke, don't start! If you do smoke, quit!^{*} Research shows that children who have a parent who smokes are more likely to smoke and to be heavier smokers at young ages.¹¹ When parents quit smoking, their children become less likely to start smoking and more likely to quit if they already smoke.¹²
- If you smoke, share your struggles to quit with your children. Kids greatly underestimate how difficult it is to quit smoking.¹³ Showing how hard it is to quit (and making sure quitting doesn't look easy) can help eliminate this misperception.¹⁴ Continuing to try to quit, despite the difficulties, also sends a strong anti-smoking message.
- **Maintain a smoke-free home.** A smoke-free home makes children less likely to smoke, even if their parents smoke.¹⁵ By not allowing <u>anyone</u> to smoke in their homes, parents not only make smoking less convenient for their kids but also make a powerful statement that they believe smoking is undesirable.
- **Tell your kids that you don't want them to smoke and will be disappointed if they do.** Parental attitudes, opinions, and feelings about their kids' smoking status greatly influence whether or not kids will smoke, even when the parents smoke.¹⁶

^{*} For help quitting, go to http://tobaccofreekids.org/research/webresources/quitting.shtml.

- **Make sure your kids have the facts they need.** By making sure that their kids know how harmful smoking is, parents can help their kids to develop a firm, negative perception or attitude about smoking practices and their consequences, and kids with such negative perceptions or attitudes are less likely to smoke.¹⁷
- Emphasize the <u>immediate</u> health effects. Most teenagers wrongly believe that smoking will have no direct effect on their health until they reach middle age.¹⁸ But smoking causes many immediate or near-term effects on health, including persistent coughs, respiratory problems, a greater susceptibility to illness, and decreased physical performance.¹⁹
- Emphasize the effects of smoking on physical appearance. Cigarette ads create the image that smoking is sexy and attractive; and kids identify improving self-image as a reason for smoking.²⁰ But smoking actually causes yellow teeth, bad breath, smelly clothes, and more severe and early facial wrinkles.²¹
- Destroy the myth that everybody smokes. Many kids overestimate the amount of smoking among their peers and such overestimation is among the strongest predictors of smoking initiation.²² For example, teens believe that 67 percent of adults smoke and that 54 percent of teens are current smokers, but less than 25 percent of adults and 17 percent of all teens actually do.²³

Parents can also help to keep their kids from smoking by following basic good-parenting practices. For example, kids who do well in school and participate in structured, extra-curricular activities are less likely to be susceptible to smoking – and parents can encourage and support both.²⁴ As an added bonus, by setting and <u>consistently</u> enforcing realistic rules, talking to their children, paying attention to the kinds of friends their kids are associating with, and generally staying interested and involved in their children's lives, parents can not only reduce the risk that their children will smoke but also reduce the chances that they will become involved in other risky behaviors, such as alcohol and other drug use, early sexual involvement, and the like.²⁵

Good Parenting is NOT Enough!

While parents can play an important role in youth smoking prevention, kids are subject to other powerful influences outside their homes that can play a critical role in whether they smoke or not. Most notably, the cigarette companies spend more than \$13.1 billion per year to market and promote their products, and most of these marketing efforts reach kids.²⁶ In fact, research studies have found that kids are three times as sensitive to tobacco advertising than adults, are more likely to be influenced to smoke by cigarette marketing than by peer pressure, and that one third of underage experimentation with smoking is attributable to tobacco company advertising and promotion.²⁷

More generally, the big cigarette companies have been trying to shift attention and support away from establishing effective new laws or policies to prevent and reduce tobacco use among kids by promoting the idea that the problem should be left to parents, instead. But dumping the entire burden on parents will not reduce the availability of cigarettes to underage buyers, stop tobacco marketing that reaches kids, establish smoke-free schools, or otherwise reduce youth exposure to tobacco marketing and tobacco use when outside of their homes. To address these powerful factors that influence kids to smoke, parents can take the following actions:

- Show your kids how cigarette ads and images are designed to manipulate them. Parents can reduce the powerful impact of all the cigarette ads and positive-smoking images that confront kids every day by talking with their children about the ads' false ideas of glamour, maturity, coolness, and beauty, and about how the tobacco companies try to manipulate kids into becoming their future addicted consumers.
- Make your kids' schools tobacco-free. By getting more involved in their children's schools, parents can try to make sure that the schools follow effective anti-smoking policies developed by the U.S. Centers for Disease Control and Prevention and others, such as:

- Prohibiting all smoking on school property or at school events.
- Not accepting any funding, curricula, or other materials from the tobacco industry.
- Educating students about the short- and long-term negative consequences of tobacco use, and providing peer-pressure refusal skills.
- Providing prevention education in kindergarten through 12th grade, with intensive education in junior high or middle school and reinforcement in high school.
- Providing tobacco-prevention training for teachers.
- Encouraging parental support of school-based tobacco-prevention programs.
- Offering assistance to both staff and student smokers who wish to quit.²⁸
- **Support other local tobacco-prevention efforts**, such as new state or local laws to make restaurants and other public areas smoke-free or new initiatives to enforce the existing laws that prohibit cigarette sales to kids.²⁹
- Support new state and federal laws to restrict cigarette marketing that reaches kids, such as state laws banning cigarette vending machines or a new federal law to give the U.S. Food and Drug Administration authority over tobacco products and their marketing that parallels the FDA's existing authority over other food and drug products.³⁰
- Support new state and federal programs to prevent and reduce tobacco use among kids, such as increases to federal or state cigarette taxes (which reduce smoking rates, especially among kids) or new state investments of tobacco-settlement funds in programs to prevent and reduce youth smoking.³¹

There are many ways to take action to influence local, state, and federal laws and programs to prevent and reduce tobacco use among kids. Working with locally based tobacco-prevention coalitions is one terrific option. Another way to take action and keep informed is to visit the Action Center on the Campaign for Tobacco-Free Kids' website. The Campaign's website is at <u>www.tobaccofreekids.org</u> and the Action Center is at <u>http://tfktakeaction.policy.net</u>.

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¹ DiFranza, J, et al., "Tobacco Acquisition and Cigarette Brand Selection Among Youth," *Tobacco Control* 1994, 3:334-38. See also, Campaign for Tobacco-Free Kids (TFK) factsheet, *The Path to Smoking Addiction Starts at Very Young Ages*. TFK factsheets are available at http://tobaccofreekids.org/research/factsheets.

² See TFK factsheet, Tobacco's Immediate Effects on YOUR Body.

³ U.S. Centers for Disease Control and Prevention (CDC), "Youth Risk Behavior Survey, 2007," *Morbidity and Mortality Weekly Report (MMWR)* 57(SS-4), June 6, 2008. <u>http://www.cdc.gov/mmwr/pdf/ss/ss5704.pdf</u>. Using a different survey methodology, the 2006 Youth Tobacco Survey (YTS) found a 19.7% high school smoking rate (18.4% for girls, 21.2% for boys), but the results from the YRBS and YTS cannot be compared because they use different methodologies. Current smoker defined as having smoked in the past month. YRBS is done in odd-numbered years, YTS in even.

⁴ Johnston, LD, et al., *National Survey Results on Drug Use from the Monitoring the Future Study, 1975-2002 – Volume I Secondary School Students*, Institute for Social Research, University of Michigan, NIH Publication No. 03-5375, National Institute on Drug Abuse (2003). 5 Substance Abuse and Montal Health Services Administration (SAMHSA), HHS. *Postute from the 2009 National Survey on Drug Use and*

⁵ Substance Abuse and Mental Health Services Administration, (SAMHSA), HHS, *Results from the 2008 National Survey on Drug Use and Health Detailed Tables*, <u>http://www.oas.samhsa.gov/NSDUH/2K8NSDUH/tabs/Sect4peTabs10to11.pdf</u>.

⁶ CDC, "Projected Smoking-Related Deaths Among Youth – United States," MMWR, 45(44), November 8, 1996.

⁷ U.S. Federal Trade Commission (FTC), *Cigarette Report for 2004 and 2005*, 2007, <u>http://www.ftc.gov/reports/tobacco/2007cigarette2004-2005.pdf</u>. See also, FTC, *Smokeless Tobacco Report for the Years 2002 and 2005*, 2007, <u>http://www.ftc.gov/reports/tobacco/02-05smokeless0623105.pdf</u> [data for top 5 manufacturers only].

⁸ Lorrilard, *Memo from TL Achey to Lorillard President Curtis Judge*, August 30, 1978. Bates No. TINY0003062.

⁹ Newman, I, et al., "The influence of parental attitude and behavior on early adolescent cigarette smoking," *Journal of School Health* 59(4): 150-2, April 1989. See also, Distefan, J, et al., "Parental influences predict adolescent smoking in the United States, 1989-1993," *Journal of Adolescent Health* 22:466-74, 1998.

¹⁰ Andersen, MR, et al., "Antismoking Parenting Practices Are Associated With Reduced Rates of Adolescent Smoking," *Archives of Pediatrics and Adolescent Medicine* 158(4):348-352, April 2004.

¹¹ Gilman, S.E., et al., "Parental Smoking and Adolescent Smoking Initiation: An Intergenerational Perspective on Tobacco Control," Pediatrics 123(2): e274-e281, February 2009. Bauman, K, et al., "Effect of parental smoking classification on the association between parental and adolescent smoking," *Addictive Behaviors* 15(5):413-22, 1990. See also, Osler, M, et al., "Maternal smoking during childhood and increased risk of smoking in young adulthood," *International Journal of Epidemiology* 24(4):710-4, August 1995.

¹² Farkas, A, et al., "Does parental smoking cessation discourage adolescent smoking," *Preventive Medicine* 28(3):213-8, March 1999.

¹³ Johnston, LD, et al., "Drug Use, Drinking, and Smoking: National Survey Results from High School, College, and Young Adult Populations, 1975-1988," *National Institute on Drug Abuse*, Washington, DC, 1989. See also, Stanton, W, et al., "Adolescents' experiences of smoking cessation," *Drug and Alcohol Dependence* 43:63-70, 1996.

¹⁴ Bauman, K, et al., "Effect of parental smoking classification on the association between parental and adolescent smoking," *Addictive Behaviors* 15(5):413-22, 1990. See also, Jackson, C, et al., "Do as I say: parent smoking, antismoking socialization, and smoking onset among children," *Addictive Behaviors* 22(1):107-14, January-February 1997.

¹⁵ Gilpin, E, et al., "Home smoking restrictions: which smokers have them and how they are associated with smoking behavior," *Nicotine and Tobacco Research* 1:153-162, 1999. See also, Proescholdbell, R, et al., "Home smoking restrictions and adolescent smoking," *Nicotine and Tobacco Research* 2(2): 159-67, 2000.

¹⁶ Sargent, J, et al., "Strong parental disapproval of smoking prevents adolescents from becoming established smokers," *Pediatric Research* 47(4 supp):11A (abstract 63), 2000. See also, Distefan, J, et al., "Parental influences predict adolescent smoking in the United States, 1989-1993," *Journal of Adolescent Health* 22: 466-74, 1998.

¹⁷ Reimers, T, et al., "Risk factors for adolescent cigarette smoking. The Muscatine study," *American Journal of Diseases of Children* 144(11): 1265-72, November 1990. See also, Greenlund, K, et al., "Cigarette smoking attitudes and first use among third- through sixth-grade students: The Bogalusa Heart Study," *American Journal of Public Health* 87(8):1345-8, August 1997.

¹⁸ American Academy of Pediatrics, Child Health Month Report, "The Risks of Tobacco Use: A Message to Parents and Teens," October 1998, <u>http://www.aap.org/advocacy/chmtouse.htm</u>. See also, Milam, J, "Perceived invulnerability and cigarette smoking among adolescents," *Addictive Behaviors* 25(1):71-80, January-February 2000.

¹⁹ See TFK factsheet, *Tobacco's Immediate Effects on YOUR Body.*

²⁰Newman, I, "Capturing the energy of peer pressure: insights from a longitudinal study of adolescent cigarette smoking," *Journal of School Health* 54(4):146-8, April 1984. See also, Stanton, W, et al., "Reasons for smoking or not smoking in early adolescence," *Addictive Behaviors* 18(3):321-9, May-June 1993.

²¹ See TFK factsheet, How Smoking Can Wreck and Prematurely Age Your Body Before It Kills You.

²² Chassin, L, et al., "Predicting the onset of cigarette smoking in adolescents: a longitudinal study," *Journal of Applied Social Psychology* 14(3): 224-43, 1984. Sussman, S, et al., "Adolescent nonsmokers, triers and regular smokers' estimates of cigarette smoking prevalence: when do overestimations occur and by whom," *Journal of Applied Social Psychology* 18(7): 537-51, 1988.

²³ International Communications Research, *Teen Excel Study*, telephone survey of 514 kids aged 12-17, done for the Campaign for Tobacco-Free Kids, April 7 through April 11, 1999 and March 1 through March 5, 2000.

²⁴ Resnick, M, et al., "Protecting adolescents from harm: Findings from the National Longitudinal Study on Adolescent Health," *Journal of the American Medical Association* 278(10):823-32, 1997. See, also, Kellam, S, et al., "Targeting early antecedents to prevent tobacco smoking: Findings from an epidemiologically based randomized field trial," *American Journal of Public Health* 88(10):1490-95, October 1998.

²⁵Jackson, C, et al., "The early use of alcohol and tobacco: its relation to children's competence and parents' behavior," *American Journal of Public Health* 87(3):359-64, March 1997. See also, Simons-Morton, B, et al., "Peer and parent influences on smoking and drinking among early adolescents," *Health Education and Behavior* 28(1):95-107, February 2001.

²⁶ U.S. Federal Trade Commission (FTC), *Cigarette Report for 2004 and 2005*, 2007, <u>http://www.ftc.gov/reports/tobacco/2007cigarette2004-2005.pdf</u>. See also, FTC, *Smokeless Tobacco Report for the Years 2002 and 2005*, 2007, <u>http://www.ftc.gov/reports/tobacco/02-05smokeless0623105.pdf</u> [data for top 5 manufacturers only].

²⁷ Pollay, R, et al., "The Last Straw? Cigarette advertising and realized market shares among youths and adults," *Journal of Marketing* 60(2):
1-16, April 1996. See also, Pierce, J, et al., "Tobacco industry promotion of cigarettes and adolescent smoking," *Journal of the American Medical Association* 279(7):511-515, February 1998.

²⁸ CDC, "Guidelines for School Health Programs to Prevent Tobacco Use and Addiction," *MMWR* 43(RR-2), February 25, 1994, www.cdc.gov/mmwr/PDF/rr/rr4302.pdf; TFK factsheet, *How Schools Can Help Students Stay Tobacco-Free.*

²⁹ See, e.g., TFK factsheets, *Smoke Free Restaurant & Bar Laws Do Not Harm Business; Enforcing Laws Prohibiting Cigarette Sales to Kids Reduces Youth Smoking.*

³⁰ See, e.g., TFK factsheet, Why FDA?

³¹ See, e.g., TFK factsheets, *Why States Should Use Tobacco Settlement Funds to Support New State Efforts to Reduce Tobacco Use, Increasing Cigarette Taxes Reduces Smoking (and the Cigarette Companies Know It).*