

# Effects of Tobacco Policies on Underage Smoking in China and the United States

**Effects of Tobacco Policies on Underage Smoking in China and the United States**

Student Full Name

Institutional Affiliation

Course Full Title

Instructor Full Name

Due date

## **Introduction**

Several studies illustrate that fewer adults are now smoking either because they have quit or are now more educated on the health implications of smoking (Agaku et al., 2014). The above case is consistent with the United States as the research shows that approximately 4,000 children who are below 18 years smoke their first cigarette a day, which equates to approximately 1.5 million new underage smokers annually (Agaku et al., 2014). In fact, the same study showed that nine out of every ten smokers start this habit before they are 18 years old, and ninety-nine percent begin before they are twenty-six.

The issue is further worsened by the fact that on any day, 25,000 youth transcend from casual to regular smokers (Agaku et al., 2014). On the other hand, a similar study that the World Health Organization performed showed that the age of smoking was also prevalent among individuals in this demographic. Specifically, the majority of children that were part of the survey started smoking before 15 years. The data showed that ninety-five percent of the participants had tried their first cigarette by the time they were 15 years old and ninety-nine percent by the time they were fifteen.

Therefore, the findings illustrate that there is an urgency for policy implementation among the youth, with an emphasis on China, which faces a higher prevalence of youth smoking. However, China has a higher smoking rate than the United States, which may explain the differences above. The reason for the selection of the youth as the starting point is the fact that regardless of the total prevalence of smoking in the country, the larger percentage of smokers is below 26 years (Centers for Disease Control and Prevention, 2013).

Additionally, many policies and programs are directed at the youth by the World Health Organization, special non-government organizations, and the governments of the United States and China. Furthermore, the data shows that many individuals start smoking at this age, presenting an opportunity to reduce the development of this habit that is accompanied by many health complications after chronic use.

### **Channels of Information Spreading**

One of the most effective ways of spreading information in the modern setting is the media, and it is especially accurate among the young population, which is more connected with the recreational use of the Internet and social networks. Policies that are targeted toward the youth through the media have been found to be effective in reducing smoking in both the United States and China.

The contradictory message nullifies or minimizes the attempt to portray smoking negatively in the

minds of youth who are still immature and searching for their character and identity. Hence, the policies regarding media representation are ineffective among both Chinese and American smokers because of double standards and the fact that when two messages are sent, individuals are likely to choose the option that is more supportive of their intentions.

### **Need for Intervention**

In 2014, the World Health Organization started the first ever and the largest national Global Youth Tobacco Survey in China, and results from the study further emphasized the urgency of the situation and the need for the government to take action through its policy implementation (Au et al., 2012). WHO data was in line with the notion that the majority of smokers start the habit in their teenage years, and there was a need to prevent young individuals from becoming customers in the tobacco industry today and mortality statistics tomorrow. The study showed that tobacco claims the lives of approximately one million individuals in China annually, and the number is expected to rise to three million by the year 2050 (Au et al., 2012).

However, data that is more related to the paper in this survey showed that over fifty percent of the students are subject to secondhand smoke daily, and this was mainly in the educational area. This illustrates that there is an urgent need for a comprehensive smoke-free law nationally to protect youth from secondhand smoke and reduce the appeal of smoking among younger students.

### **Current Interventions in the Marketing of Tobacco Products and Their Effects**

In the United States, several bans have been implemented on smoking in public areas. These will be elaborated further on in the paper; however, it shows the approach towards the reduction of smoking in public school areas, which could be one of the reasons for the lower prevalence of smoking among the younger population in comparison to China. Another point worth mentioning is that there was also a decline in the use of cigarettes among this population in the United States, which may also be a product of the bans on public smoking in schools.

The statistics also indicate the impact that policies have on reducing tobacco use as they are more effective than other approaches, such as advertisements in the form of campaigns and posters. An example is that of promotions and advertisements against smoking that were carried out in Chinese schools. Approximately half the students stated that they were aware of the negative impacts smoking has on their health, and they had come into contact with numerous advertisements highlighting these dangers (Im et al., 2015).

However, there was also a finding illustrating that there were positive campaigns that were carried out for marketing and promoting smoking purposes. These were more appealing to the youth. For example, in the Chinese media, smoking is represented as a masculine trait, and many members of the community perform this act to adhere to societal norms and satisfy their intrinsic need to occupy their gender role. In essence, the advertisement creates a scenario where smoking is an identity of males, and such a trait will have a significant impact on the youth.

In this aspect, the United States has made significant progress in the past fifty years in an attempt to change the attitudes and views toward smoking (Go et al., 2013). In fact, many public health scholars believe that the change in the laws governing advertisements of products such as tobacco was responsible for a slight decline in the number of users. The World Health Organization and the European Union both hold the opinion that all forms of tobacco advertising should be illegal.

### **The Challenge of Manipulations by Tobacco Monopolists**

The effects of advertisement control in China are yet to be realized, as the laws banning direct marketing of cigarettes were only implemented in 2015. However, there are concerns among healthcare stakeholders in China as many anti-smoking advocates stated that the laws that were implemented were subject to manipulation by tobacco monopolists in the country. According to a member of the World Health Organization, the language that is used in the policies is vague, and monopolists may still find a way to continue marketing their products (Im et al., 2015). In fact, he concluded that the government would have a problem stopping the advertising completely; however, the policies implemented should be solid enough to create a headache for the suppliers.

Another difference between the implementation of such aggressive anti-smoking policies in the United States and China lies in the fact that the latter is dependent on this commodity for revenue. Hence, a strong campaign against smoking in China will have a negative impact on the economy. An economic assessment shows that the tobacco industry has extraordinary power as it comprises seven to ten percent of the Chinese economy, which is approximately \$127 billion (Cai et al., 2014).

Therefore, the data above shows that there are some challenges in the implementation of policies that would reduce the appeal of smoking to youth through restricting advertising. As previously mentioned, more than half of the Chinese students were exposed to smoking promotions. In fact, another survey showed that these promotions were significant in persuading youth to try some of the products as the brand preference was related to its promotion (Sansone et al., 2015). Hence, there have been national campaigns for implementing comprehensive bans on smoking in the community, especially in schools.

However, there are still many challenges, as there are different motivations for stopping or completely banning the promotion of smoking. China is more dependent on the product than the United States; hence, it cannot take a similar aggressive approach. However, it raises a moral dilemma as China has one of the highest rates of smoking in the world, with projections illustrating that there will be a doubling or tripling in the number of mortalities related to smoking by the year 2050 (Sansone et al., 2015).

### **The Challenge of Varying Geographic Effects of Restrictions**

Another interesting point is that the statistics on smoking are mainly national for both the United States and China. Hence, there is a poor representation of the effectiveness of the policies, such as those involving advertisement restrictions. As illustrated above, many of the policies banning public smoking are implemented by the state. Hence, in the United States, the populations living in unrestricted areas will have a higher risk than the others, and data shows that more than ten states have no bans on public smoking. On the other hand, a similar pattern may be seen in China, yet it is less effective as most restrictions are in big cities, such as Beijing (Sansone et al., 2015). Hence, the rural population continues at risk as companies focus their advertisements and sales on these populations. Therefore, there is a need to implement national policies that will ensure that all populations are protected and that there is a reduction in the likelihood of youth beginning this habit.

### **The Challenge of Ease of Purchasing Cigarettes**

The purchase of cigarettes is also an issue in China; however, it is less aired in the United States. A study among a youth population in China showed that over eighty percent of individuals between thirteen and fifteen years old were able to buy cigarettes easily, regardless of laws that prohibit the sale of this commodity to individuals below the age of eighteen (Su et al., 2015). It is worth noting that many countries, including China, do not have a minimum age for smoking; however, there is a restriction on the age of the purchaser. Hence, it should be viewed as a defect in the regulatory ability of the Chinese government and the control over smoking in the country. Legally, there is no smoking permitted on school premises for all ages; however, it is still prevalent, as illustrated by the statistics of youth exposed to secondhand smoke at school. It is also worth stating that in China, there was no age restriction on the purchase of cigarettes until 2006 (Zhi et al., 2016).

On the other hand, there are differences in the age restrictions for both purchasing and smoking. The age restrictions for purchasing range from 18-21 years and above. However, many states do not have a minimum legal age for smoking. Hence, it creates a dilemma and double standards as minors are not allowed to purchase the product, yet they can legally use it. This is a similar issue in China, as individuals

can use the product once they gain access. Therefore, despite the lower prevalence of sales to minors in the United States in comparison to China, the policies restricting the purchase of cigarettes only are ineffective in regulating the rates of smoking in the community (Zhi et al., 2016). The youth will always find a way to gain access either by purchasing by themselves in China or by asking an individual who is in the legal age limit to buy the product for them. In essence, regardless of the different nature of the problem, both countries still face challenges in reducing access to cigarettes and the number of youth smoking.

Several campaigns have been made in China to reduce the number of outlets that sell cigarettes near school areas. These sources have the opinion that a lower rate of exposure to the product will have a positive impact on the reduction of sales (Su et al., 2015). However, it has also been shown to be ineffective, as a survey shows that youth who require access to cigarettes were able to attain the product easily. A similar survey was done in the United States, and it showed that all individuals who wanted to gain access to the product had no problems. Therefore, it illustrates that policies restricting access were ineffective. Other approaches should be taken that are directly targeted at the product.

### **Effects of Restrictions on Adult Smokers**

The information above illustrates the factors related to the youth and the initiation of smoking among members of the population. However, the reality is that there are also adult smokers who are not affected by the age restrictions and willingly purchase the product regardless of the big warning sign on the packet stating smoking can be hazardous to one's health. For such populations, different frameworks have been utilized as a guide for smoking regulation. The World Health Organization Framework Convention on Tobacco is a treaty that was adopted in 2003 on the 56th World Health Assembly. The framework is legally binding in 180 countries, and China became a party in 2006 (Zhi et al., 2016). However, the United States is a non-party to the framework. President Bush failed to send the treaty for Senate consideration when it was initially signed, and America wanted to change some provisions in the FCTC but maintain limited access (Zhi et al., 2016).

Among the provisions that the US wanted to change is the compulsory ban on the free distribution of tobacco samples, which is now not compulsory, the narrow definition of the term "minor" regarding the use and purchase of cigarettes, and the broad limitations in the promotion, sponsorship, and advertising of tobacco. In the final aspect, the United States government viewed it as violating some personal liberties, such as freedom of speech (Jha et al., 2013). The United States successfully opposed these. However, others were unsuccessful, such as the requirement for warning labels to be in the language of the country where the sale of tobacco is taking place. Secondly, the US was in opposition to the ban of some labels,

such as ultra-light or low tar, which were viewed by the World Health Organization as both deceptive and misleading (Jha et al., 2013). The reason for opposing this clause was that the process would infringe on the protections of trademarks. In essence, the United States was willing to comply with the different clauses except for some that it viewed would have been contradictory to the intrinsic national policies. Therefore, it also shows the differences and difficulties in implementing policies in both China and the United States. Countries have their constitutions, and the utilization of some measures to restrict or ban the use and distribution of cigarettes will directly contradict the countries' laws and the rights of businesses and citizens. Hence, there is a difficulty in limiting cigarette use and differences in the approach of each country.

### **Possible Solutions**

As mentioned above, China is a party to the WHO Framework Convention; therefore, there are approaches to creating a substantial amount of smoke-free places (Redmond et al., 2014). Reducing the number of public smoking areas will reduce both the exposure to secondhand smoke and the frequency of smoking, as people will have to find a place that permits smoking. Therefore, in compliance with this clause, smoking is banned in all schools and at least 28 indoor public places, such as restaurants, bars, and public transport (Su et al., 2015). As illustrated above, the bans in the United States are dependent on the state, and the country did not enact any federal bans on smoking nationally. Hence, any bans are a product of local criminal and occupational safety laws, as well as of first-level jurisdiction. Nevertheless, a study by the American Nonsmokers Rights Foundation illustrated that approximately eighty-two percent of all people in the United States live under a ban on smoking in “restaurants, and/or workplaces, and /or bars.”

However, it is also worth noting that only 49.3% of all Americans live in a place that covers all workplaces, all restaurants, and all bars (Jha et al., 2013). The data shows the inconsistencies in the policies that could be a contributing factor to the high national statistics associated with smoking. Furthermore, a larger percentage of the population will be exposed to smoking in at least one or more public areas. In essence, the United States requires more consistency in its policies regulating indoor smoking and in public places. The approach may be improved by implementing international recommendations such as the FCTC.

Additionally, the enactment of policies concerning national issues, such as a high prevalence of smoking, should be done nationally.



## Conclusion

Therefore, many factors must be taken into consideration by both countries as the policies appear to be flawed in the regulation of smoking, especially among the younger population. The government should take initiatives that are targeted directly at this demographic, as the studies show that in both countries, the majority of smokers begin when they are below eighteen years old. However, it is also worth noting that the focus should not stop on this group as the countries are in need of a broader approach that reduces the risk of smoking complications by reducing access by chronic smokers. The paper illustrated that several challenges in this aspect are unique to either the United States or China. In America, the major challenges include the individual liberties of the community, which prevents the banning of certain approaches in advertisement, as stated in the FCTC. Additionally, the United States does not have a federal approach toward smoking restriction, and the states differ in their strategies towards its regulations.

On the other hand, China faces a greater problem as the country's economy is largely dependent on cigarette distribution. Furthermore, the individuals in this industry are powerful in the community, and reports indicate that they have the power to influence the policies on the products the government implements. A sociological study in China also illustrated that other factors contributing to the high rate of teenage smoking include peer influence and lack of parental monitoring. Additionally, there was also a direct connection between the prevalence of smoking and the perception of the habit by members of the community. For example, the association between smoking and masculinity was found among the Chinese population. This point also raises another issue regarding smoking, as the female population is exposed to secondhand smoke. Many of the policies are focused on the male population, which is also leading to an increasing number of female smokers in China. As illustrated above, there is an association of smoking with masculinity, and many girls adopt this habit to attain a sense of empowerment.

Therefore, the countries may take specific strategies to resolve their problem. Firstly, both countries could improve the level of education regarding smoking and the long-term complications of the habit among all populations. The states should also take a more direct approach towards the product by increasing the level of taxes on tobacco, which may discourage people from purchasing the product due to the high prices. Studies already support this approach as they illustrate that an increase in cigarette prices by ten percent will lead to a reduction of 21.1% among the population below eighteen years (Jha et al., 2013).

There should also be strict restrictions in the media. China has already adopted the FCTC, which prohibits the devious words used in campaigns, such as "ultra-light," which often mislead buyers into thinking the product is less harmful.

## References

- Agaku, I. T., King, B. A., Dube, S. R., & Centers for Disease Control and Prevention (CDC). (2014). Current cigarette smoking among adults—United States, 2005–2012. *MMWR Morb Mortal Wkly Rep*, 63(2), 29-34.
- Au, W. W., Su, D., & Yuan, J. (2012). Cigarette smoking in China: Public health, science, and policy. *Reviews on environmental health*, 27(1), 43-49.
- Cai, L., Cui, W., He, J., & Wu, X. (2014). The economic burden of smoking and secondhand smoke exposure in rural South-West China. *Journal of Asthma*, 51(5), 515-521.
- Centers for Disease Control and Prevention (CDC). (2013). Vital signs: Current cigarette smoking among adults aged  $\geq 18$  years with mental illness—United States, 2009-2011. *MMWR. Morbidity and mortality weekly report*, 62(5), 81.
- Go, A. S., Mozaffarian, D., Roger, V. L., Benjamin, E. J., Berry, J. D., Blaha, M. J., ... & Fullerton, H. J. (2013). AHA statistical update. *Circulation*, 127, e62-245.
- Im, P. K., McNeill, A., Thompson, M. E., Fong, G. T., Xu, S., Quah, A. C., ... & Shahab, L. (2015). Individual and interpersonal triggers to quit smoking in China: A cross-sectional analysis. *Tobacco control*, 24(Suppl 4), iv40-iv47.
- Jha, P., Ramasundarahettige, C., Landsman, V., Rostron, B., Thun, M., Anderson, R. N., & Peto, R. (2013). 21st-century hazards of smoking and benefits of cessation in the United States. *New England Journal of Medicine*, 368(4), 341-350.
- Redmon, P., Koplan, J., Eriksen, M., Li, S., & Kean, W. (2014). The role of cities in reducing smoking in China. *International journal of environmental research and public health*, 11(10), 10062-10075.
- Sansone, N., Yong, H. H., Li, L., Jiang, Y., & Fong, G. T. (2015). Perceived acceptability of female smoking in China: Findings from waves 1 to 3 of the ITC China Survey. *Tobacco control*, tobaccocontrol-2015.

Su, X., Li, L., Griffiths, S. M., Gao, Y., Lau, J. T., & Mo, P. K. (2015). Smoking behaviors and intentions among adolescents in rural China: The application of the Theory of Planned Behavior and the role of social influence. *Addictive behaviors*, 48, 44-51.

Zhi, K., Huang, J., Deng, S., Chen, Y., Vaughn, M. G., & Qian, Z. (2016). Decreased smoking initiation among male youths in China: An urban–rural comparison. *International journal of public health*, 1-9.