



Fact Sheet

This is the 31st tobacco-related Surgeon General's report issued since 1964. It describes the epidemic of tobacco use among youth ages 12 through 17 and young adults ages 18 through 25, including the epidemiology, causes, and health effects of this tobacco use and interventions proven to prevent it. Scientific evidence contained in this report supports the following facts:

We have made progress in reducing tobacco use among youth; however, far too many young people are still using tobacco. Today, more than 600,000 middle school students and 3 million high school students smoke cigarettes. Rates of decline for cigarette smoking have slowed in the last decade and rates of decline for smokeless tobacco use have stalled completely.

- Every day, more than 1,200 people in this country die due to smoking. For each of those deaths, at least two youth or young adults become regular smokers each day. Almost 90% of those replacement smokers smoke their first cigarette by age 18.
- There could be 3 million fewer young smokers today if success in reducing youth tobacco use that was made between 1997 and 2003 had been sustained.
- Rates of smokeless tobacco use are no longer declining, and they appear to be increasing among some groups.
- Cigars, especially cigarette-sized cigars, are popular with youth. One out of five high school males smokes cigars, and cigar use appears to be increasing among other groups.
- Use of multiple tobacco products—including cigarettes, cigars, and smokeless tobacco—is common among young people.
- Prevention efforts must focus on young adults ages 18 through 25, too. Almost no one starts smoking after age 25. Nearly 9 out of 10 smokers started smoking by age 18, and 99% started by age 26. Progression from occasional to daily smoking almost always occurs by age 26.

Tobacco use by youth and young adults causes both immediate and long-term damage. One of the most serious health effects is nicotine addiction, which prolongs tobacco use and can lead to severe health consequences. The younger youth are when they start using tobacco, the more likely they'll be addicted.

- Early cardiovascular damage is seen in most young smokers; those most sensitive die very young.
- Smoking reduces lung function and retards lung growth. Teens who smoke are not only short of breath today, they may end up as adults with lungs that will never grow to full capacity. Such damage is permanent and increases the risk of chronic obstructive pulmonary disease.
- Youth are sensitive to nicotine and can feel dependent earlier than adults. Because of nicotine addiction, about three out of four teen smokers end up smoking into adulthood, even if they intend to quit after a few years.
- Among youth who persist in smoking, a third will die prematurely from smoking.

Youth are vulnerable to social and environmental influences to use tobacco; messages and images that make tobacco use appealing to them are everywhere.

- Young people want to fit in with their peers. Images in tobacco marketing make tobacco use look appealing to this age group.
- Youth and young adults see smoking in their social circles, movies they watch, video games they play, websites they visit, and many communities where they live. Smoking is often portrayed as a social norm, and young people exposed to these images are more likely to smoke.
- Youth identify with peers they see as social leaders and may imitate their behavior; those whose friends or siblings smoke are more likely to smoke.
- Youth who are exposed to images of smoking in movies are more likely to smoke. Those who get the most exposure to onscreen smoking are about twice as likely to begin smoking as those who get the least exposure. Images of smoking in movies have declined over the past decade; however, in 2010 nearly a third of top-grossing movies produced for children—those with ratings of G, PG, or PG-13—contained images of smoking.

Tobacco companies spend more than a million dollars an hour in this country alone to market their products. This report concludes that tobacco product advertising and promotions still entice far too many young people to start using tobacco.

- The tobacco industry has stated that its marketing only promotes brand choices among adult smokers. Regardless of intent, this marketing encourages underage youth to smoke. Nearly 9 out of 10 smokers start smoking by age 18, and more than 80% of underage smokers choose brands from among the top three most heavily advertised.
- The more young people are exposed to cigarette advertising and promotional activities, the more likely they are to smoke.
- The report finds that extensive use of price-reducing promotions has led to higher rates of tobacco use among young people than would have occurred in the absence of these promotions.
- Many tobacco products on the market appeal to youth. Some cigarette-sized cigars contain candy and fruit flavoring, such as strawberry and grape.
- Many of the newest smokeless tobacco products do not require users to spit, and others dissolve like mints; these products include snus—a spitless, dry snuff packaged in a small teabag-like sachet—and dissolvable strips and lozenges. Young people find these products appealing in part because they can be used without detection at school or other places where smoking is banned. However, these products cause and sustain nicotine addiction, and most youth who use them also smoke cigarettes.
- Through the use of advertising and promotional activities, packaging, and product design, the tobacco industry encourages the myth that smoking makes you thin. This message is especially appealing to young girls. It is not true—teen smokers are not thinner than nonsmokers.

Comprehensive, sustained, multi-component programs can cut youth tobacco use in half in 6 years.

- Prevention is critical. Successful multi-component programs prevent young people from starting to use tobacco in the first place and more than pay for themselves in lives and health care dollars saved.
- Strategies that comprise successful comprehensive tobacco control programs include mass media campaigns, higher tobacco prices, smoke-free laws and policies, evidence-based school programs, and sustained community-wide efforts.
- Comprehensive tobacco control programs are most effective when funding for them is sustained at levels recommended by the Centers for Disease Control and Prevention.