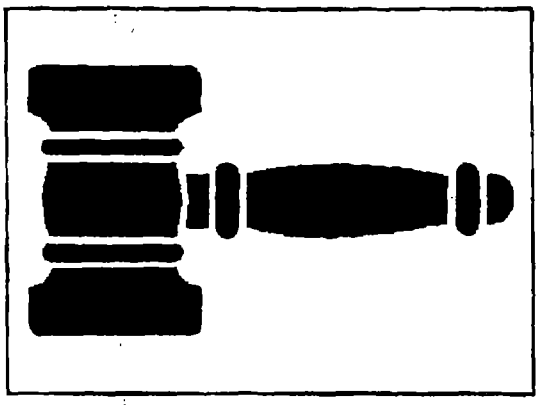
301-594-6777

U.S. DEPARTMENT OF HEALTH & HUMAN SERVICES
OFFICE OF THE GENERAL COUNSEL

PHONE: (202) 690-6318
FAX: (202) 690-7998

DATE: December 19, 1996



TO: **ELIZABETH DRYE**
fax: 456-7028

FROM: ANDREW D. HYMAN
Special Assistant to the General Counsel
U.S. Department of Health and Human Services
Office of the General Counsel, Room 707F
200 Independence Ave., SW
Washington, D.C. 20201

COMMENTS: I hope this helpful. Thanks.

No. of Pages (including cover): 2

FDA Regulations

The FDA's final rule to protect children from tobacco products was announced by the President on August 23, 1996 and published in the Federal Register on August 28, 1996. Lawsuits challenging the rule have been filed in U.S. district court in Greensboro, N.C. Briefs by those challenging the rule and by the federal government defending the rule have been filed. Oral arguments are scheduled for February 10, 1997. District Judge Osteen has said he will try to rule by March.

The first provisions of the rule take effect on February 28, 1997 (six months after publication); these provisions include the nationwide prohibition on the sale of tobacco products to individuals under 18 and the requirement that retailers verify the customer's age with a photographic ID. Most of the remaining provisions, such as advertising restrictions and eliminating vending machines, become effective on August 28, 1997. The tobacco sponsorship restrictions become effective on August 28, 1998.

Monitoring the Future

On December 19, HHS released the 22nd "Monitoring the Future" survey, which monitors drug, alcohol, and tobacco use by 8th, 10th, and 12th graders in public and private schools. This year's survey showed an increase in marijuana and tobacco use among 8th and 10th graders between 1995 and 1996, while use of these substances remained level among 12th graders. Use of cigarettes in the past month increased from 19.1 to 21.0 percent among 8th graders and from 27.9 to 30.4 percent among tenth graders. 34 percent of 12th graders used cigarettes in the past month. In addition, the percentage of 10th graders who smoked a half pack of cigarettes or more daily increased from 8.3 percent in 1995 to 9.4 percent in 1996.

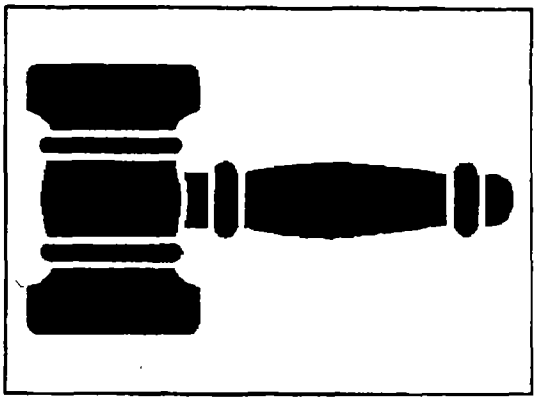
Wall Street Journal Article

On December 19, the *Wall Street Journal* reported that representatives of the tobacco industry are still interested in achieving a legislative compromise in which the industry would accept the FDA's youth tobacco restrictions and in return Congress would grant the industry immunity from liability and FDA would relinquish jurisdiction over tobacco. The article further reported that Thomas Hale Boggs is trying to broker such a deal with the help of a three-person panel including retiring Senator Howell Heflin, former Senator Howard Baker, and Leon Panetta. White House officials have made clear that Mr. Panetta has no interest in participating in such a panel and that the White House is not engaged in any negotiations.

U.S. DEPARTMENT OF HEALTH & HUMAN SERVICES
OFFICE OF THE GENERAL COUNSEL

PHONE: (202) 690-6318
FAX: (202) 690-7998

DATE: December 16, 1996



TO: **ELIZABETH DRYE**
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FROM: ANDREW D. HYMAN
Special Assistant to the General Counsel
U.S. Department of Health and Human Services
Office of the General Counsel, Room 707F
200 Independence Ave., SW
Washington, D.C. 20201

COMMENTS: As discussed earlier, attached is a draft of the MMWR, which deals with tobacco sales to minors in California. The first page provides a pretty good summary. Call w/any questions.

No. of Pages (including cover): 10

[Draft #7 - 12/13/96] tobacco.doc

(h1)Statewide Estimates of Retailers Willing to Sell Tobacco to Minors --- California, August--September 1995 and June--July 1996

<px>Tobacco Sales to Minors<pa>

The prevalence of tobacco use among adolescents is increasing, and the most common source of tobacco products for persons aged <18 years (minors) is retail stores (1\t). In 1991, an estimated 29.6 million packs of cigarettes re illegally sold to minors in California, and an estimated 255 million packs were illegally sold to minors nationwide (2\t). Federal law (i.e., the Synar Amendment) enacted in July 1992 requires statutes in all states that receive federal funds for prevention and treatment of substance abuse to have and enforce laws prohibiting the sale or distribution of tobacco to minors, conduct annual statewide inspections of over-the-counter tobacco outlets and vending machines to assess the statewide rate of illegal tobacco sales to minors, and develop a plan to decrease the illegal sales rate to of ≤20% over eral years (3\t). California enacted the Stop Tobacco Access to Kids Enforcement (STAKE) Act on September 28, 1994, which requires that 1) tobacco retailers (i.e., vendors) post warning signs at each point of purchase and check the identification of persons who appear aged <18 years; 2) the California Department of Health Services (CDHS) develop a statewide forcement program and establish a toll-free telephone number for reporting observed unlawful tobacco sales to minors; and 3) CDHS annually assess and report the rate of illegal sales of tobacco products to minors (4\t). This report describes the retailer education and enforcement program and summarizes the results of the first two annual assessments (Youth Tobacco Purchase Surveys [YTPSs]), which indicate that among over-the-counter tobacco outlets

fr August--September 1995 to June--July 1996 the percentage of retailers who asked for age identification increased substantially, the percentage of stores displaying warning signs on age restrictions increased, and the percentage of retailers willing to sell tobacco products to minors decreased.

(h2)Education About and Enforcement of Youth Access Laws

In response to provisions of the STAKE Act, in August 1995 CDHS initiated an ongoing public and retailer education program before the enforcement of the law began on December 27, 1995. The education program consisted of an advertisement in a retail trade journal; a statewide press conference; paid radio and television commercials and billboard advertisements promoting a toll-free telephone number; a direct mailing of educational materials and warning signs to approximately 27,000 retailers; and educational materials provided to local government officials, retail trade groups, local health groups, chambers of commerce, and state legislators. In addition, 120 local and regional community organizations conducted educational, policy, and media activities to stimulate local law enforcement of youth access laws.

The STAKE Act requires that the CDHS statewide enforcement program include 15- and 16-year-old minors for unannounced inspections of tobacco retailers. Civil penalties of $200 to $6000 can be levied against the business owner depending on the number of offenses during a 5-year period. During December 27, 1995--June 10, 1996 (the period before the second YTPS began), CDHS conducted 865 unannounced inspections in 22 of the state's 58 counties. Fines totaling $18,550 were paid by 147 business owners among the 290 who were in violation of the STAKE Act; CDHS is processing and reviewing litigation with the remaining 143 business owners, as of June 11, 1996.

(h2)Youth Tobacco Purchase Surveys

The 1995 YTPS was the first statewide random survey in California of

illegal tobacco sales to minors and was conducted during August--September 1995. A second YTPS was conducted during June 11--July 26, 1996, after the initiation of the retailer education campaign and enforcement programs. The YTPS methodology was designed to permit statistically valid statewide estimates and year-to-year comparisons of over-the-counter tobacco sales to minors. The California State Board of Equalization provided a list of businesses most likely to sell tobacco over the counter, including all convenience stores, gas stations, drug stores, liquor stores, supermarkets, and cigar stores in California. Using simple random sampling, sample sizes of 405 for 1995 and 434 for 1996 were obtained after eliminating stores that were no longer in business, not tobacco outlets, or considered unsafe by the survey teams (none in 1995 and eight in 1996). Odds ratios and p values were calculated for the change from 1995 to 1996. The odds ratios for asking age, asking for identification, presence of warning signs, and total sales were adjusted for store type.

Newspaper advertisements and contacts in local health departments, tobacco-control organizations, and community programs were used to recruit the 63 minors aged 15--16 years (including 31 males and 32 females) who participated in the 1995 YTPS and 67 minors aged 15--16 years (including 29 males and 38 females) who participated in the 1996 YTPS. The adult escorts included staff members from local tobacco-control organizations. Teams consisting of one or two adults and two minors made one purchase attempt per store using the following protocol: an adult escort entered the store immediately before or shortly after one of the minors entered the store. The adult observed the transaction between the retailer and the minor and noted age restriction signs posted inside the store. The minors could choose either cigarettes or smokeless tobacco. If asked by retailers, the minors were

required to truthfully state their age and that they carried no age identification. Retailers were considered to be willing to sell tobacco products to minors if they recorded a sale on a cash register or placed the tobacco on the counter and asked for money. Retailers who refused to sell tobacco to the minor for any reason were considered to be not willing to sell tobacco to the minor. If the retailer was willing to sell tobacco to the minor, the minor stated that he or she did not have enough money and left the store.

Overall, the percentage of retailers willing to sell tobacco to minors decreased from the assessment period in 1995 (37.0%) to 1996 (29.3%) (Table 1). Although sales to minors decreased in most types of stores, the decrease s statistically significant only for convenience stores selling gasoline (from 48.6% to 28.9%; odds ratio [OR] for type of store=0.4, p=<0.01). From 1995 to 1996, the low percentage of retailers willing to sell tobacco to minors when the retailer asked for identification (2.4% in 1995 compared with 3.5% in 1996) or when the retailer asked either the minor's age or for identification (4.4% in 1995 compared with 3.3% in 1996) was similar.

However, the percentage of stores in which retailers asked minors for id tification increased from 41.7% to 53.5% (OR=1.6, p<0.05), and the centage of stores in which the retailer asked either the minor's age or for i tification increased from 61.7% to 70.3% (OR=1.5, p<0.01). The percentage of stores that displayed age of sale warning signs increased from 32.6% to 63.8% (OR=3.6, p<0.01). The percentage of retailers willing to sell tobacco to minors in stores with warning signs decreased from 26.5% to 20.9%.

(rep)Reported by: Z Weinbaum, PhD, V Quinn, MEd, A Roeseler, MSPH, V Foster, MPH, N Bagnato, MPH, M Johnson, PhD, DG Bal, MD, Tobacco Control Section, D Walth, Food and Drug Br, California Dept of Health Svcs; R Kropp, MA, J

Keller, MPH, North Bay Health Resources Center, Petaluma. Office on Smoking and Health, National Center for Chronic Disease Prevention and Health Pr tion, CDC.

(ed)Editorial Note: The findings in this report are consistent with previous reports indicating that illegal sales to minors may be effectively decreased by the combination of increased merchant education and enforcement of laws prohibiting sales of tobacco to minors, and that retailers' requiring proof of age is associated with very low sales rates (5--8\%). In this report, sales were less likely in both years when age was asked and/or identification was requested and when warning signs were present.

This study is subject to at least two limitations. First, because comparable data are available for only 2 years, interpretation of trend data is tentative. Second, because the STAKE Act required statewide implementation, an experimental design using control communities was not possible, and further analyses are needed to confirm whether retailer education and law enforcement have contributed to the decrease in illegal sales to minors.

The combined efforts from government and private sectors in California provide a model for reducing tobacco sales to minors. For example, California's STAKE Act contains strengthening provisions that were not specifically required by the Synar Amendment. In addition, the STAKE Act was amended in 1995 to prohibit the sale of tobacco products from vending machines except those in bars not adjoining restaurants, while a different law bans the sale of individual cigarettes from open packages. Despite these efforts, the findings in this report for 1996 indicate that one third of stores did not post warning signs, minors were asked for proof of age identification in approximately half of stores, and retailers were willing to sell tobacco to minors in almost one third of the purchase attempts. These findings underscore

the need for additional methods for reducing the illegal sale of tobacco to minors.

On August 28, 1996, the Food and Drug Administration (FDA) issued regulations that prohibit sales of tobacco to persons aged <18 years, require retailers to request photographic identification to verify the age of all persons aged <27 years who request tobacco, ban vending machines and self-service displays except in facilities where only adults are permitted, ban sales of single cigarettes and packages with <20 cigarettes, and eliminate fr samples of cigarettes and smokeless tobacco products (9\t). February 28, 1997, is the effective date for the provisions prohibiting tobacco sales to minors and requiring photographic identification, and August 28, 1997, is the effective date for the provisions affecting sales through vending machines, self-service displays, single cigarettes sales, and distribution of free samples. The FDA rule should further enhance state and local efforts to rease minors' access to tobacco. In addition, the Substance Abuse and tal Health Services Administration has developed guidelines for interventions, inspections, and statewide sampling methodologies covering both over-the-counter and vending machine outlets that can be used by states to comply with requirements of the Synar Amendment (10\t).

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*Public Law 102-321, §1926 (42 USC §300x-26).

†California Penal Code, Section 308.2.

TABLE 1. Number of store visits and number, percentage, and change in percentage of retailers willing to sell tobacco products to minors*, and point change in the percentage of retailers willing to sell tobacco, by category --- California, 1995 and 1996

Category	1995 No. store visits	1995 %	1995 Retailers willing to sell tobacco No.	1995 Retailers willing to sell tobacco %	1995 Retailers willing to sell tobacco P value†	1996 No. store visits	1996 %	1996 Retailers willing to sell tobacco No.	1996 Retailers willing to sell tobacco %	1996 Retailers willing to sell tobacco P value†	1995 to 1996 % Point change %	1995 to 1996 % Point change OR§	1995 to 1996 % Point change P value†
Type of store													
Gas/convenience	70	17.3	34	48.6	<0.05	121	27.9	35	28.9	NS**	-19.7	0.4	<0.01
Gas stations only	19	4.7	9	47.4		11	2.5	5	45.5		- 1.9	0.9	NS
Liquor stores	61	15.1	27	44.3		77	17.7	27	35.1		- 9.2	0.7	NS
Small grocery/convenience	133	32.8	49	36.8		141	32.5	42	29.8		- 7.0	0.7	NS
Other**	17	4.2	6	35.3		8	1.8	2	25.0		-10.3	0.6	NS
Supermarkets	69	17.0	17	24.6		45	10.4	9	20.0		- 4.6	0.8	NS
Drug stores/pharmacies	36	8.9	8	22.2		31	7.1	7	22.6		+ 0.4	1.0	NS
Clerk asked for age													
No	301	74.3	143	47.5	<0.05	337	77.7	124	36.8	<0.05	-10.7	0.6	<0.01
Yes	104	25.7	7	6.7		97	22.4	3	3.1		- 3.6	0.5	NS
C k asked for identification													
No	236	58.3	146	61.9	<0.05	202	46.5	119	58.9	<0.05	- 3.0	0.9	NS
Yes	169	41.7	4	2.4		232	53.5	8	3.5		+ 1.1	1.5	NS
Clerk asked for age or identification													
No	155	38.3	139	89.7	<0.05	129	29.7	117	90.7	<0.05	+ 1.0	1.1	NS
Yes	250	61.7	11	4.4		305	70.3	10	3.3		- 1.1	0.7	NS
ng signs in the store													
No	273	67.4	115	42.1	<0.05	157	36.2	69	44.0	<0.05	+ 1.9	1.0	NS
Yes	132	32.6	35	26.5		277	63.8	58	20.9		- 5.6	0.7	NS
Total	405	100.0	150	37.0		434	100.0	127	29.3		- 8.2	0.7	<0.05

*Persons aged <18 years.
†Tests for the difference within the same year in the number of retailers willing to sell tobacco to minors between store types, whether or not retailer asked for age, asked for identification, and presence or absence of warning signs.
§Odds ratio for change in number of retailers willing to sell tobacco to minors from 1995 to 1996. OR for ask age, ask identification, presence of warning signs, and total number of retailers willing to sell tobacco to minors, adjusted for store type.

*Tests for the difference between years in number of retailers willing to sell tobacco to minors from 1995 to 1996.
**Not significant.
†Includes other store types listed by the California State Board of Equalization as selling tobacco products (e.g., gift stores and cigar stores).

Monitoring the Future Study - Summary of Findings Through 1996

Between 1995 and 1996 **use of cigarettes and marijuana** ***increased*** notably among 8th and 10th graders. In addition, **fewer of these students expressed negative perceptions of marijuana use.** For 8th and 10th grade students, these changes replicate recent trends that began in the early 1990s. However, for seniors, this year's data indicate that the rate of increase of use has slowed and that attitudes are improving somewhat, with many differences in use and attitudes between 1995 and 1996 being **non-statistically significant.** Unless noted otherwise, all changes presented below are statistically significant.

Illicit Drug Use

- Use of **marijuana/hashish** continued to climb, especially among 8th and 10th graders. Between 1995 and 1996, lifetime, past year, past month, and daily marijuana use *increased* among 8th and 10th graders, while only lifetime use *increased* among 12th graders. Since 1992 past year **marijuana** use has *increased* in all three grades and in virtually all demographic and geographic subdomains surveyed. (i.e., gender, census region, population density, and race/ethnicity). The only exception was *no change* among Hispanic Americans in 12th grade.
- Driven in large part by the rise in **marijuana**, lifetime, past year, and past month use of **any illicit drug** *increased* among 8th and 10th graders.
- Past month use of **hallucinogens** *decreased* among 12th graders between 1995 and 1996, as did past month use of **LSD** among 10th and 12th graders.
- Lifetime use of **cocaine in any form** *increased* for 10th graders while past year use *increased* for 12th graders. Use of crack for all recency periods remain *unchanged* among all three grades.
- Lifetime, past year, and past month use of **tranquilizers** *increased* for 8th graders while lifetime use *increased* for 10th graders.
- **Heroin** use *did not change* among seniors, 10th, and 8th graders.
- Use of **stimulants** for any recency period *did not change* among any grades.

Perceived Harmfulness and Availability

- The percentage of 10th graders reporting "great risk" in trying **marijuana** once or twice or in smoking the drug occasionally *decreased.* Among 8th graders, the percent reporting "great risk" in regular **marijuana** use *decreased* from 73.0 percent in 1995 to 70.9 percent in 1996. The percent of seniors reporting "great risk" in regular **marijuana** use *decreased* steadily from 78.6 percent in 1991 to 60.8 percent in 1995, and remain *unchanged* at 59.9 percent in 1996.
- The perceived risk (percentage reporting "great risk") of smoking a **pack or more of cigarettes per day** remain *unchanged* among all three grades.
- The perceived risk of trying **inhalants** once or twice or using them regularly, *increased* among 8th and 10th graders.
- The perceived risk of taking one or two **drinks** once or twice each weekend *deceased* for 8th graders and *increased* for 12th graders. Also the perceived risk of taking one or two **drinks** nearly every day *decreased* among 8th graders.
- The percentage reporting that **marijuana** was "fairly easy" or "very easy" to get *increased* among 8th and 10th graders. The perceived availability of amphetamines and steroids *decreased* among seniors.

Alcohol Use

- As in past years, alcohol continues to be used at unacceptably high levels. Notably, however, **daily drinking** and **"being drunk"** during the past month *increased* among 8th graders.

Cigarette Use

- Between 1995 and 1996, past month **cigarette** use *increased* from 19.1 to 21.0 percent among 8th graders and from 27.9 to 30.4 percent among 10th graders. Daily **smoking** *increased* from 16.3 to 18.3 percent among 10th graders. Among subgroups in 10th grade, increases occurred for males and females, whites, and those with college plans.
- Since 1991, past month **smoking** has *increased* from 14.3 to 21.0 percent for 8th graders, 20.8 to 30.4 percent for 10th graders, and 28.3 to 34.0 percent for 12th graders.
- From 1995 to 1996, **smoking ½ pack or more per day** increased among 8th and 10th graders.
- African American students continue to have the lowest rates of **smoking.**

CIGARETTE USE

- Cigarette smoking continues to rise among 8th and 10th graders. Between 1995 and 1996, lifetime, past month, daily, and smoking ½ pack or more daily increased among 10th graders. An estimated 9.4% smoked ½ pack or more in 1996 compared to 8.3% in 1995.

- Also between 1995 and 1996, lifetime, past month, and smoking ½ pack or more daily increased among 8th graders. An estimated 19.1% smoked during the past month

- Between 1991 and 1996, the percentages of students who smoked cigarettes in the past month increased from 14.3% to 21.0% for 8th graders and from 20.8% to 30.4% for 10th graders.

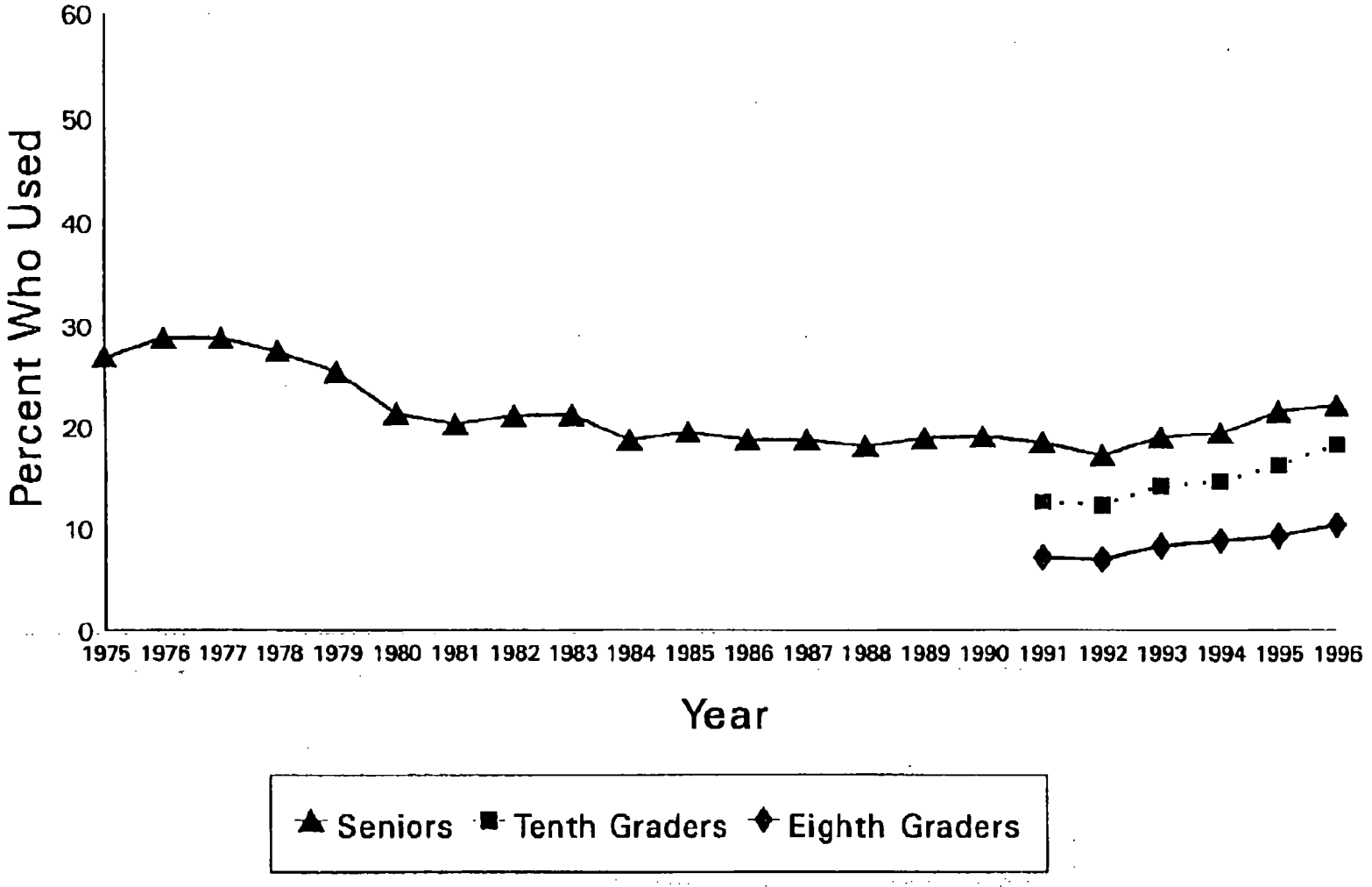
- From 1991 to 1996, the percentages of students who smoked daily increased from 7.2% to 10.4% for 8th graders; 12.6% to 18.3% for 10th graders; and 18.5% to 22.2% for 12th graders. Reports of smoking ½ pack or more a day also increased over this time period for 8th, 10th and 12th graders; from 3.1% to 4.1%, from 6.5% to 9.4%, and from 10.7% to 13.0%, respectively.

- Among 10th graders, past month cigarette use increased from 1995 to 1996 for both males and females. Increases were found among white students while rates among African American and Hispanic students remained stable.

- Between 1995 and 1996 smoking at least ½ pack per day increased among 8th graders (from 3.4% to 4.3%) and 10th graders (from 8.3% to 9.4%); however, the 1996 rate for seniors (13.0%) was not statistically different from the 1995 rate (12.4%)

- African American students continue to have lower rates of smoking than white or Hispanic students.

Daily Use of Cigarettes: Seniors, (1975-1996) Tenth and Eighth Graders, (1991-1996)



Source: Monitoring the Future Study, 1996

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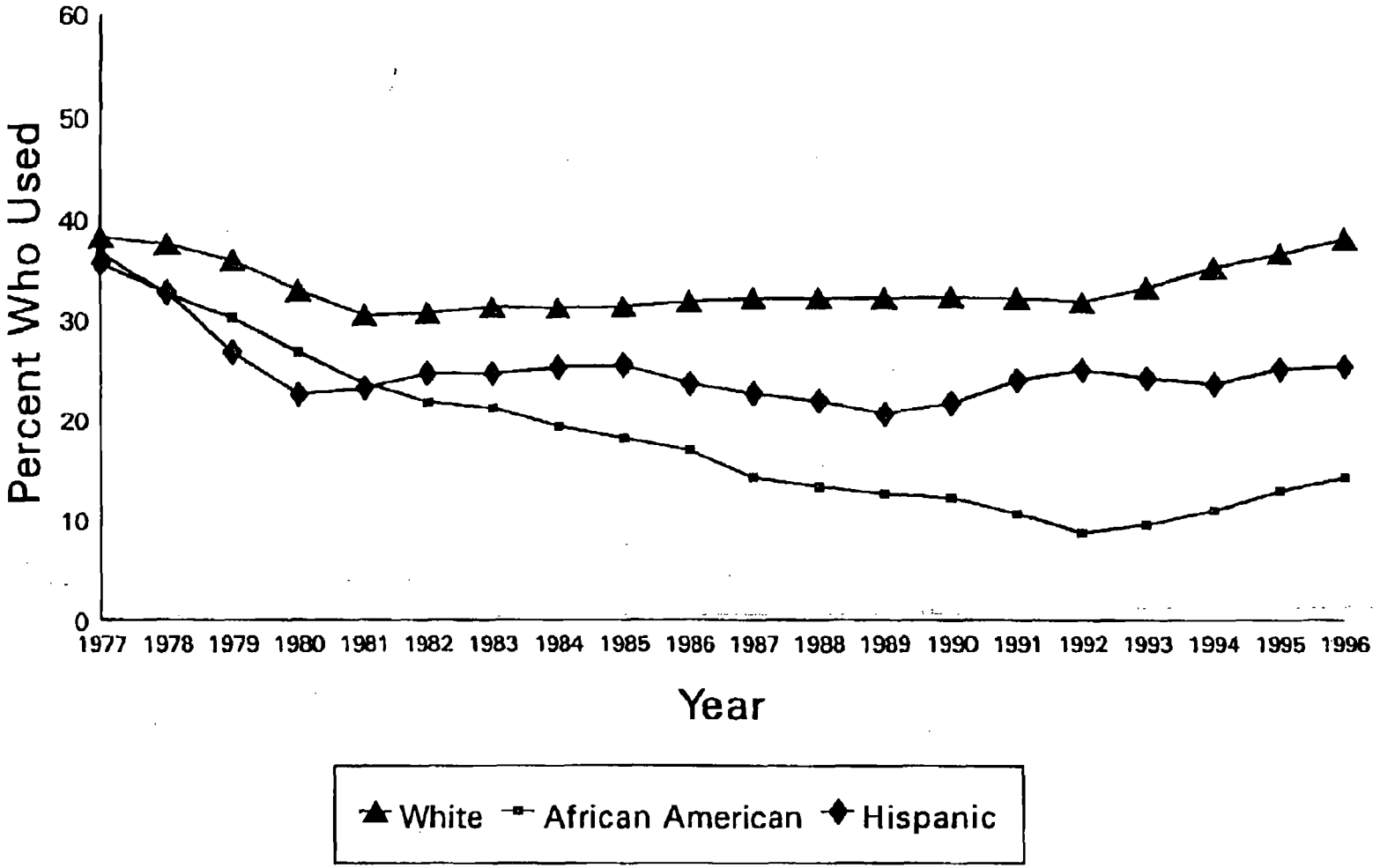
Past Month Use of Cigarettes by Race/Ethnicity: Twelfth Graders, 1977-1996 2-year Moving Averages



Source: Monitoring the Future Study, 1996

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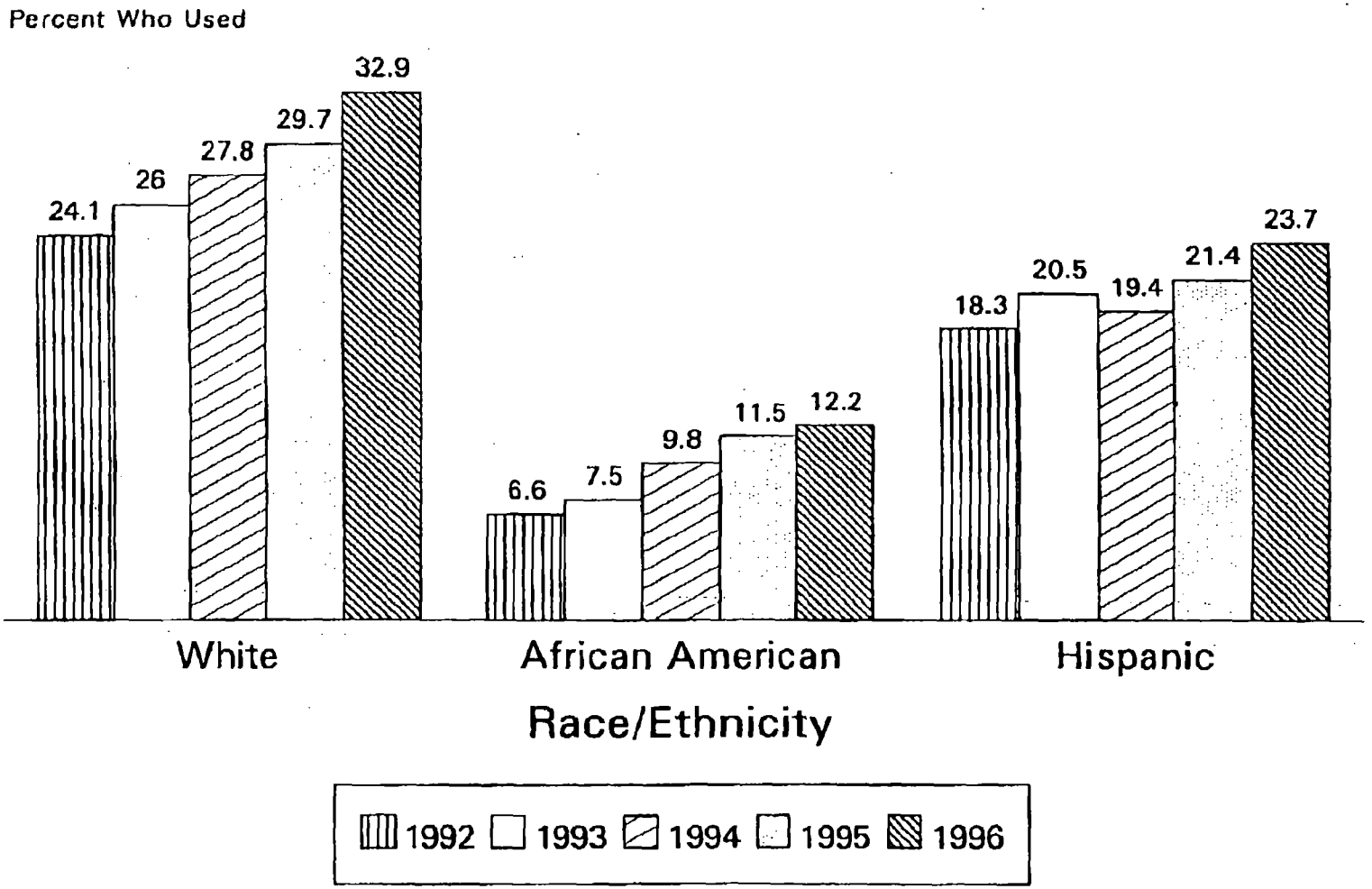
Past Month Use of Cigarettes by Race/Ethnicity: Tenth Graders, 1992-1996 2-year Moving Averages



Source: Monitoring the Future Study, 1996

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DRAFT

Remarks

Donna E. Shalala

Secretary of Health and Human Services

at

Monitoring the Future Survey

December 19, 1996

The holiday season is always a time for cherishing children -- but it must also be a time for saving them.

That's why today we are releasing NIDA's 22nd annual Monitoring the Future Survey.

The Survey shows that substance abuse among teenagers continues to rise -- especially tobacco and marijuana -- and that alcohol use also remains unacceptably high.

The results on alcohol are two-fold.

In the last year, the percentage of 8th graders reporting daily use of alcohol rose from 0.7 percent to 1.0 percent, ...

... and those reporting having "been drunk" in the past month rose from 8 percent to almost 10 percent.

On the other hand, alcohol use among 10th and 12th graders remained level but at high rates.

Similarly, the percentage of young people who smoked cigarettes in the past month continued to rise among 8th and 10th graders -- from 19 percent to 21 percent, and from 28 percent to 30 percent, respectively, ...

... while the percentage of 12th graders smoking cigarettes in the past month -- 33 percent -- was statistically unchanged from the previous survey.

As for drugs, the survey conveys a familiar warning: Drug use among young people is at unacceptable levels, and the core of the problem is marijuana.

Past month marijuana use among 8th and 10th graders went from 9 percent to 11 percent, and from 17 percent to 20 percent, respectively.

This is an increase of over 250 percent since 1991 for 8th graders, and over 150 percent for 10th graders since 1992.

In contrast, for 12th graders, there was no statistically significant increase in annual, current or daily marijuana use this year -- although, like alcohol, rates are dangerously high.

The message of today's Monitoring of the Future Survey is unmistakable.

To parents it says: Sit down -- and talk straight -- to your children about drugs, alcohol and tobacco.

To young people it says: Drugs are illegal, dangerous and wrong.

And to all of us it says: Get involved and work together.

Working together is why later today, as part of National Drunk and Drugged Driving Prevention Month --

-- I'll be having a roundtable discussion with Mothers Against Drunk Driving, law enforcement and other groups concerned with alcohol use among teens.

Working together is why the President launched his historic tobacco initiative.

And I'm proud that on February 28th, absent court action, the first two parts of this initiative begin; ...

... it will be illegal to sell to anyone under 18, and retailers must check ID.

And working together is why we're focusing more than ever on marijuana.

The survey shows that our marijuana problem is fueled by teens who believe that marijuana is not harmful, ...

... and by parents who sometimes, because of their own past marijuana use, find it hard to give their children a clear message about the terrible dangers posed by marijuana.

But the dangers are real -- and the research proves it.

Marijuana harms the brain, heart, lungs and immune system.

Marijuana limits learning, memory, perception, judgement and the ability to drive a car.

And marijuana smoke typically contains over 400 carcinogenic compounds -- and may be addictive.

Now we're putting that research into the hands of parents.

"Reality Check" is our anti-marijuana campaign of free materials to help parents talk to their children about drugs.

And we have an aggressive communications strategy for reaching children with a message of prevention and opportunity.

We've partnered with Weekly Reader on a supplement distributed to 200,000 teachers and 1.5 million students -- that teaches children how to look critically at media messages.

We've partnered with Scholastic Magazine on a poster and insert that has reached 2.3 million students and families urging kids not to harm themselves with drugs.

And just last month we launched Girl Power! -- where we're teaming up with NBC and great Olympic athletes to teach 9 to 14 year old girls that they're too strong to use drugs or engage in other risky behaviors.

But we have to do much more because our nation cannot afford to go down the dangerous road to drug legalization as two states have done.

That means we must oppose the dangerous and misguided effort to legalize marijuana and other illicit drugs.

We must send clear and consistent messages to young people that marijuana is not a "soft drug."

And in this holiday season, symbolized by light and renewal, we must renew our sacred commitment to keep our children safe and drug free.

Thank you.

And now I'd like to introduce General Barry McCaffrey.

HHS NEWS

DRAFT

U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES

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CONTACT: Mona Brown
Sheryl Massaro
(301) 443-6245

MARIJUANA AND TOBACCO USE STILL RISING AMONG 8th AND 10th GRADERS

Marijuana and tobacco use increased among eighth and tenth graders between 1995 and 1996, while use of these substances remained generally level among twelfth graders, according to the 22nd annual "Monitoring the Future" survey, released today by the U.S. Department of Health and Human Services. The survey also showed an increase in the use of alcohol by eighth graders.

The survey showed increases in lifetime, annual, current (use within the past 30 days) and daily use of marijuana by eighth and tenth graders, continuing a trend that began in the early 1990s. Among twelfth graders, rates of marijuana use remained high and increased for lifetime use, but for the first time since 1993 showed no significant change in annual, current or daily use.

Cigarette smoking also continued to rise among eighth and tenth graders and remained high among twelfth graders, although there were no statistically significant changes in the high school seniors' cigarette use.

Daily use of alcohol increased for eighth graders, while remaining level for tenth and twelfth graders, although at high rates.

The findings were released at a press conference by HHS Secretary Donna E. Shalala, White House Drug Control Policy Director Barry McCaffrey, Education Secretary Richard Riley and Transportation Secretary Frederico Pena.

The clear increase in use of marijuana among younger high school students stood in contrast with mixed and overall unchanged measures for other drugs. Secretary Shalala noted in particular that this year's survey shows an increasing problem with perceptions of the dangers posed by marijuana. Among eighth and tenth graders, the perceived risk of using marijuana continued to decline, while perceived risk of using other drugs either increased or remained level.

"Our young people need to hear a clear and true message about marijuana, but too often they're just getting winks, nods and static," Secretary Shalala said. "Marijuana today poses an increasingly serious drug abuse problem, and our children need to know that. In particular, I ask all American parents to talk with their children about drugs, and especially to talk about marijuana."

Five months ago, HHS launched its "Reality Check" public information campaign aimed at helping parents discuss marijuana with their children. Free materials are available from 1-800-729-6686. HHS also sponsored the first national conference on marijuana in July 1995, and is funding and disseminating findings from new research on the effects of the drug. In addition, the Clinton Administration has launched a major initiative to prevent smoking by minors. FDA regulations affecting retail sales to minors and the advertising of tobacco products begin to go into effect in 1997.

" *** McCaffrey quote – overall drug strategy? ***"

Marijuana:

The 1996 Monitoring the Future Study found that 23.1 percent of eighth graders had tried marijuana at least once in their lifetime, compared to 19.9 percent in 1995. Among tenth graders, lifetime marijuana use increased from 34.1 percent in 1995 to 39.8 percent in 1996. Current use of marijuana among eighth graders increased from 9.1 percent in 1995 to 11.3 percent in 1996 and increased among tenth graders from 17.2 percent in 1995 to 20.4 percent in 1996.

Among high school seniors, there were no statistically significant increases or decreases in annual, current or daily use of marijuana from 1995 to 1996, although the percentage of seniors who had used marijuana at least once in their lifetime increased from 41.7 percent in 1995 to 44.9 percent in 1996. This is well below the peak level reported in 1979, when 60.4 percent had used marijuana at least once in their lifetime.

Dr. Alan I. Leshner, Director of the National Institute on Drug Abuse, the agency that funded the survey, said, "It is important that young people understand the harm and danger caused by illicit drug use. Through continuing years of objective, scientific research, this risk has become ever clearer, and not just for drugs such as cocaine and heroin but also for marijuana."

Research shows that marijuana is harmful to the brain, heart, lungs and immune system. It limits learning, memory, perception, judgment and complex motor skills like those needed to drive a vehicle. It has been shown to damage motivation and interest in one's goals and activities. Marijuana cigarette smoke typically contains over 400 carcinogenic compounds. In addition, new evidence suggests that marijuana may be addictive and that, among heavy users, its harmful short-term effects on alertness and attention span last more than 24 hours.

Tobacco:

Cigarette smoking continued to rise among eighth and tenth graders and remained at high levels among twelfth graders, although there were no statistically significant changes in seniors' use. Between 1995 and 1996, use of cigarettes in the past month increased from 19.1 to 21.0 percent among eighth graders and from 27.9 to 30.4 percent among tenth graders. About one-third of twelfth graders (34.0 percent) used cigarettes in the past month.

In 1996, the percentage of tenth graders who smoked a half pack of cigarettes or more daily, increased from 8.3 percent in 1995 to 9.4 percent in 1996. Current use of cigarettes among tenth graders increased between 1995 and 1996 for both males and females.

Alcohol:

Between 1995 and 1996, the percentage of eighth graders reporting daily use of alcohol increased from 0.7 percent to 1.0 percent. In addition, the percentage of eighth graders reporting having "been drunk" in the past month increased from 8.3 percent in 1995 to 9.6 percent in 1996. Alcohol use among tenth and twelfth graders remained level but at high rates, with 21.3 percent of tenth graders and 31.3 percent of twelfth graders reporting having been drunk in the past month.

Other survey findings include:

- Current use of hallucinogens decreased among twelfth graders from 4.4 percent in 1995 to 3.5 percent in 1996. Current use of LSD among tenth graders decreased from 3.0 percent in 1995 to 2.4 percent in 1996 and among twelfth graders from 4.0 percent to 2.5 percent. Current use of PCP among twelfth graders increased from 0.6 percent in 1995 to 1.3 percent in 1996.

- Current use of inhalants decreased among twelfth graders from 3.2 percent in 1995 to 2.5 percent in 1996. Use of inhalants among eighth and tenth graders remained stable.

- The survey found increases in the non-medical use of tranquilizers among eighth and tenth graders. Lifetime, annual and past month use increased among eighth graders and lifetime use increased among tenth graders from 6.0 percent in 1995 to 7.1 percent in 1996. In addition, daily use increased among seniors.

- Past year use of cocaine (including crack) increased among twelfth graders from 4.0 percent in 1995 to 4.9 percent in 1996. There was an increase in the percentage of tenth graders who had tried cocaine at least once in their lifetime, rising from 5.0 percent in 1995 to 6.5 percent in 1996.

- This is the first year that a question regarding the use of MDMA (Ecstasy) was added to the questionnaire for all three grades. Only senior data on friends' use and availability of MDMA were collected previously. In 1996, 6 percent of twelfth graders, 5.6 percent of tenth graders and 3.4 percent of eighth graders had used MDMA at least once in their lifetime.

The 1996 Monitoring the Future Survey was conducted under a NIDA grant to the University of Michigan, Institute for Social Research. Under the direction of Dr. Lloyd Johnston, the survey was administered in the spring of 1996 to a national probability sample of 14,824 high school seniors, 15,873 tenth graders and 18,368 eighth graders in public and private schools. The study has been conducted annually since 1975, with 1996 representing the 22nd annual survey of high school seniors and the sixth year data have been collected on eighth and tenth graders.

NIDA, a component of the National Institutes of Health, supports over 85 percent of the world's research on the health aspects of drug abuse and addiction. The Institute also carries out a large variety of programs to ensure the rapid dissemination of research information and its implementation in policy and practice.

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Note: HHS press releases are available on the World Wide Web at: http://www.dhhs.gov/.