

In recent years, regulation of flavored products has emerged as a critical policy area that must be addressed in order to reduce youth access to tobacco. While both the federal government and many local communities have passed measures restricting flavored tobacco, most of these restrictions have not extended to menthol-flavored tobacco. Some cities have banned menthol sales, but only in retailers within a certain distance of schools. Because menthol cigarettes are by far the largest segment of the flavored tobacco market, Big Tobacco has fought hard to keep these products on the shelves.

Now, two Californian communities have emerged as leaders in this fight.



In 2016, **Santa Clara County** became the first community in the nation to ban sales of menthol tobacco products regardless of retailer location.

Yolo County quickly followed suit with a similar measure. The groundwork has been laid for more communities to step up by protecting their citizens from the especially harmful effects of menthol products.

Ken Yeager, Santa Clara County Board of Supervisors



“This past year Santa Clara County was proud to become the first municipality in the nation to restrict menthol and flavored cigarette sales, including e-cigarettes, to 21-and-over retailers. The tobacco industry has long used flavored cigarettes, especially menthol, to target youth and underserved communities of color. It’s a public health crisis and we must fight back.”

Why does menthol matter?

Menthol products are used by over 20 million smokers in the United States.¹ Those who smoke menthol products inhale more deeply as a result of the anesthetizing properties of the flavor, which makes the smoke feel “smoother.”² Plus, menthol smokers show greater signs of nicotine dependence and are less likely to quit smoking than non-menthol smokers.^{3,4} Our best shot at reducing the unique health burdens of menthol tobacco is to regulate its sale at the retail level.



Menthol regulation isn't just a health issue... it's a social justice issue!

Tobacco companies have aggressively marketed menthol products to minority and low-income communities for decades.⁵ Almost 90% of African American smokers use menthol cigarettes, and African Americans are more likely to die due to smoking related diseases.⁶ LGBT smokers are also more likely to use menthol cigarettes than non-menthol.⁷ Regulating sales of menthol products is the best way to counter Big Tobacco's long history of preying upon minority communities.

Carol McGruder, African American Tobacco Control Leadership Council



“We are thrilled to see local communities taking a stand against menthol cigarettes and other flavored tobacco products. We've known for years that the tobacco industry uses flavored tobacco to get young men and women of color addicted to their deadly products. They have attacked the health of our most vulnerable communities and that must stop. The true power of tobacco control has always been at the local level, we are encouraged that more and more cities and counties are joining this fight.”

Sources:

- 1 Substance Abuse and Mental Health Services Administration, Center for Behavioral Health Statistics and Quality. The NSDUH Report: Recent Trends in Menthol Cigarette Use. 2011.
- 2 Kreslake, J.M., et al., Tobacco industry control of menthol in cigarettes and targeting of adolescents and young adults. American Journal of Public Health, 2008. 98(9): p. 1685.
- 3 Trinidad, D.R., et al., Menthol cigarettes and smoking cessation among racial/ethnic groups in the United States. Addiction, 2010. 105(1): p. 84-94.
- 4 Fagan, P., et al., Nicotine dependence and quitting behaviors among menthol and non-menthol smokers with similar consumptive patterns. Addiction, 2010. 105(1): p. 55-74.
- 5 Gardiner, P.S., The African Americanization of menthol cigarette use in the United States. Nicotine & Tobacco Research, 2004. 6(1): p. 55-65.
- 6 American Heart Association, Tobacco industry's targeting of youth, minorities and women.
- 7 Fallin A, Goodin AJ, King BA. Menthol cigarette smoking among lesbian, gay, bisexual, and transgender adults. Am J Prev Med. 2015; 48(1):93-97.