

THE FDA IS CONSIDERING A BAN ON MENTHOL CIGARETTES AND FLAVORED CIGARS:

FOUR ESSENTIAL POINTS THAT OUR COMMUNITIES NEED TO KNOW NOW

Sabrina L. Smiley, PhD; Arturo Durazo, PhD; Anna Song, PhD

INTRODUCTION:

On April 29th, 2021, the U.S. Food and Drug Administration (FDA) announced that they will start the procedure to propose tobacco product standards to ban menthol (or “mint”) cigarettes and all flavored cigars, including cigarillos or small cigars. For the tobacco control community, this is a long-awaited and welcomed move by the FDA. Yet, the announcement is only the start of a long process that may yield new regulations on menthol cigarettes and flavored cigars. Between the announcement and action are periods of public comments, additional debates, and opposition from special interests groups who value profits over lives. Now more than ever, communities are needed to mobilize to ensure that community voices are heard during this important move towards health equity.

Below are four important points from research and science that community organizations should know as they communicate with citizens and other organizations. These points highlight the importance of a menthol cigarette and flavored cigar ban in bringing health equity to all communities.

1. THE FDA ANNOUNCEMENT IS IN RESPONSE TO A COMMUNITY PETITION (NOT A MEANS TO OPPRESS COMMUNITIES OR TAKE AWAY INDIVIDUAL RIGHTS)

This process was a direct response to a citizen-based petition¹ based on the overwhelming science that menthol is used to target marginalized and under-resourced communities, particularly the African American, Southeast Asian, Hispanics/Latinx, low-income, and rural communities.²⁻³ As noted by the Acting FDA Commissioner Janet Woodcock, M.D.: “Banning menthol—the last allowable flavor—in cigarettes and banning all flavors in cigars will help save lives, particularly among those disproportionately affected by these deadly products. With these actions, the FDA will help significantly reduce youth initiation, increase the chances of smoking cessation among current smokers, and address health disparities experienced by communities of color, low-income populations, and LGBTQ+ individuals, all of whom are far more likely to use these tobacco products.”⁴

2. MENTHOLS INCREASE NICOTINE ADDICTION

There is established evidence pointing to the harms of menthol cigarettes and other flavored tobacco products. Using menthol is linked to greater nicotine addiction and unsuccessful quit attempts among smokers who want to quit.⁵ In fact, scientists conducting laboratory studies report that menthol flavor triggers nicotine cravings.⁶

The science is very, very clear: menthol is not just flavor. The tobacco industry uses menthol and mint flavoring to mask nicotine’s bitter taste and harshness of tobacco smoke, making it easier to start smoking and harder to quit.⁷ Indeed, menthol flavoring is so effective in masking tobacco’s harshness when smoking or vaping, that it can even mask the early signs of tobacco-related diseases!⁸

3. THE TOBACCO INDUSTRY HAS A LONG HISTORY OF TARGETING COMMUNITIES OF COLOR, PARTICULARLY WITH MENTHOL CIGARETTES AND FLAVORED CIGARS

The FDA's announcement is a step towards health equity and racial justice. Again, the science is crystal clear: menthol cigarette marketing, such as advertisements and price promotions, targets communities of color, including the African American community.⁹⁻¹⁰ For more than 50 years, the tobacco industry has targeted the African American community, including enlisting African American celebrities to promote menthol cigarettes, and placing more advertisements for menthol cigarettes brands like Kool and Newport in predominantly African American neighborhoods and African American-owned media. A recent study conducted in Los Angeles County showed that storefront ads and cheaper prices for menthol cigarettes were more common in neighborhoods with more African American residents.¹¹ As a result, in surveys, 80 percent of African American smokers report smoking menthol cigarettes.¹²

Moreover, there is a long history of targeted marketing to other communities of color, including campaigns geared specifically to increase Hispanic/Latinx and youth smokers, particularly through menthol.² The tobacco industry continued the trend by targeting our communities with large and small flavored cigars that have fewer restrictions than cigarettes.¹¹ These products are just as harmful as cigarettes, yet are widely available in appealing flavors, and sold in singles for less than \$1. Popular flavored small cigar brands include Swisher Sweets, Black & Mild, and Backwoods.

4. MENTHOLS ARE A GATEWAY FOR SMOKING AMONG YOUTH

The tobacco industry uses flavored tobacco as a highly effective strategy to attract new young smokers. Evidence shows that teenagers experimenting with smoking are more likely to smoke when tobacco products are flavored, particularly menthol and mint.¹² Menthol flavor decreases the harsh effects of smoking, making it easier for smokers, including young smokers, to enjoy smoking.⁵ Evidence shows that youth who start using tobacco start with mint/menthol.^{13,14} Over 50% of youth smoke menthol cigarettes¹⁴ and over 90% of African American smokers reported using menthols when they first started smoking.⁹

In addition to its role as a gateway for smoking, menthols may also slow the progress we've made in curbing youth smoking. Youth smoking for non-menthol cigarettes is decreasing, but that decrease is not seen in youth use of menthol cigarettes. Indeed, some research has documented an increase in menthol cigarette use among youth.¹⁵ Further, cigars are just as popular as cigarettes, if not more.¹⁶ In this regard, it is clear that banning menthols and flavored cigars is key to curbing youth smoking and preventing a generation from suffering tobacco-related diseases and death.

WHAT COMMUNITIES NEED TO DO NOW:

1. DISSEMINATE THE INFORMATION:

A federal ban on menthol cigarettes and flavored cigars will reduce commercial tobacco use, disease, and death through cessation and prevention of youth use. Educate communities on the FDA's recent announcement by widely distributing this flyer. Post it on your social media platforms, and print and post it in your buildings, and other community locations.

2. ENGAGE CITIZENS AND COMMUNITIES:

Many smokers may choose to quit smoking. Others may consider switching to non-menthol tobacco products or menthol flavored e-cigarettes. Both of these scenarios necessitate ramped up efforts to provide free cessation support for marginalized and communities of color.

3. DISPEL MYTHS:

Know the facts and address industry-sponsored misinformation. There is real concern that a potential ban will be a way to stop, harass, arrest, and incarcerate people of color, when really, the ban would prohibit the production and retail distribution of menthol cigarettes and flavored cigars. Anyone purchasing, using, or possessing these products would **NOT** be criminalized.

4. SPEAK LOUDLY AND SUBMIT A PUBLIC COMMENT:

The FDA will most likely open up for public comment. It will consider comments from everyone. This is an opportunity for local community organizations and stakeholders to voice their opinions by submitting comments to the FDA. **The NCPC is here for support - we can help. You can contact us via email: NCPC@ucmerced.edu**

FREQUENTLY ASKED QUESTIONS

Q: Is the proposed FDA menthol ban just to discriminate against communities of color?

A: No. The proposed FDA ban came from a citizen petition.¹ It originated from a grassroots movement led by leaders of color and based on scientific evidence that communities of color, especially the African American community, are disproportionately targeted by menthol marketing and as a result, are far more likely to smoke menthol cigarettes. Menthol cigarettes increase the addictive nature of nicotine, which makes it harder for menthol users to quit smoking. Dr. Phillip Gardiner, Researcher and Founding Member of the African American Tobacco Control Leadership Council stated, "Part of what I try and get across to people is that the use of tobacco products by African Americans is furthering their oppression here in the United States, and that if we can get off of this, it puts us in a much healthier position to take up struggles, whether it is for greater affirmative action, or equal rights, or even getting a job."¹⁷

Q: Isn't the menthol issue mainly relevant to the African American community?

A: No. Most youth who start using commercial tobacco begin with menthol. Over 50% of youth and 80% of African American youth experimenting with tobacco products report using flavored tobacco, particularly menthol. Moreover, other communities of color are targeted by menthol marketing, including Asian Americans (AA) and Native Hawaiian/Pacific Islanders (NHPI).¹⁸ One study reported that over 50% of Californian AA and NHPI smoked menthol cigarettes. Additional research demonstrates that menthol is also more common among women, low income, Hispanic/Latinx, and/or LGBTQA+ communities.¹⁹⁻²¹ Menthol is a health equity issue and is relevant to all communities.

Q: Will the ban allow police to stop and cite people who smoke menthol cigarettes?

A: No. This ban is not an enforcement against individuals purchasing, possessing, or using menthol cigarettes. The FDA or law enforcement has no power to criminalize against purchase, possession, or use. This ban would focus on commercial tobacco retailer enforcement, as well as production of menthol cigarettes and flavored cigars.⁴

REFERENCES

1. Tobacco Control Legal Consortium et al., Citizen Petition: Asking the US Food & Drug Admin. to Prohibit Menthol as a Characterizing Flavor in Cigarettes. <https://www.publichealthlawcenter.org/sites/default/files/resources/tclc-fdacitizenpetition-menthol-2013.pdf>. Published April 12, 2013. Accessed June 7, 2021.
2. Menthol Discussion. Philip Morris Records. <https://www.industrydocuments.ucsf.edu/tobacco/docs/#id=jnwg0170>. Published 12 January 1996. Accessed June 2, 2021.
3. Hispanic Market Opportunity Assessment Progress Update Presentation. RJ Reynolds Records. <https://www.industrydocuments.ucsf.edu/tobacco/docs/#id=jnwg0170>. Published 1986. Accessed June 2, 2021.
4. U.S. Food and Drug Administration. FDA Commits to Evidence-Based Actions Aimed at Saving Lives and Preventing Future Generations of Smokers. <https://www.fda.gov/news-events/press-announcements/fda-commits-evidence-based-actions-aimed-saving-lives-and-preventing-future-generations-smokers>. Published April 29, 2021. Accessed June 7, 2021.
5. Ahijevych, K., & Garrett, B. E. The role of menthol in cigarettes as a reinforcer of smoking behavior. *Nicotine & Tobacco Research*, 2010; 12(suppl_2), S110-S116.
6. Biswas, L., Harrison, E., Gong, Y., et al. Enhancing effect of menthol on nicotine self-administration in rats. *Psychopharmacology*, 2016; 233(18), 3417-3427.
7. Kreslake, J. M., & Yerger, V. B. Tobacco industry knowledge of the role of menthol in chemosensory perception of tobacco smoke. *Nicotine & Tobacco Research*, 2010; 12(suppl_2), S98-S101.
8. Garten, S., & Falkner, R. V. Continual smoking of mentholated cigarettes may mask the early warning symptoms of respiratory disease. *Preventive Medicine*, 2003; 37(4), 291-296.
9. Gardiner, P. S. The African Americanization of menthol cigarette use in the United States. *Nicotine & Tobacco Research*, 2004; 6(Suppl_1), S55-S65.
10. Anderson, S. J. Marketing of menthol cigarettes and consumer perceptions: a review of tobacco industry documents. *Tobacco Control*, 2011; 20(Suppl 2), ii20-ii28.
11. Smiley SL, Cho J, Blackman KC, et al. Retail Marketing of Menthol Cigarettes in Los Angeles, California: A Challenge to Health Equity. *Preventing Chronic Disease*, 2021; 18(200144): <http://dx.doi.org/10.5888/pcd18.200144>
12. Villanti AC, Mowery PD, Delnevo CD, Niaura RS, Abrams DB, Giovino GA. Changes in the prevalence and correlates of menthol cigarette use in the USA, 2004-2014 external icon. *Tobacco Control*. 2016; 25:ii14-ii20 :10.1136/tobaccocontrol-2016-053329.
13. D'Silva J, Cohn AM, Johnson AL, Villanti AC. Differences in subjective experiences to first use of menthol and nonmenthol cigarettes in a national sample of young adult cigarette smoker external icon, *Nicotine Tobacco Research*. 2018; 20(9): 1062-1068.
14. Hersey, JC, Ng SW, Nonnemaker JM, Paul Mowery P, Thomas KY, Vilsaint M-C, Allen JA, Haviland ML, Are Menthol Cigarettes a Starter Product for Youth?, *Nicotine & Tobacco Research*, 2006; 8(3): 403-13.
15. Giovino, G. A., Villanti, A. C., Mowery, P. D., Sevilimedu, V., Niaura, R. S., Vallone, D. M., & Abrams, D. B. Differential trends in cigarette smoking in the USA: is menthol slowing progress?. *Tobacco Control*, 2015; 24(1), 28-37.
16. Gentzke AS, Wang TW, Jamal A, et al. Tobacco Product Use Among Middle and High School Students – United States, 2020. *MMWR Morb Mortal Wkly Rep* 2020; 69:1881-1888. DOI: <http://dx.doi.org/10.15585/mmwr.mm6950a1> external icon. Accessed June 7, 2021.
17. Gardiner, P. S. <https://www.npr.org/templates/story/story.php?storyId=5178418>. Published January 30, 2006. Accessed June 7, 2021.
18. Mukherjea, A., Wackowski, O. A., Lee, Y. O., & Delnevo, C. D. Asian American, Native Hawaiian and Pacific Islander tobacco use patterns. *American Journal of Health Behavior*, 2014; 38(3), 362-369.
19. Villanti, A. C., Mowery, P. D., Delnevo, C. D., Niaura, R. S., Abrams, D. B., & Giovino, G. A. Changes in the prevalence and correlates of menthol cigarette use in the USA, 2004-2014. *Tobacco Control*, 2016; 25(Suppl 2), ii14-ii20.
20. Fallin, A., Goodin, A. J., & King, B. A. Menthol cigarette smoking among lesbian, gay, bisexual, and transgender adults. *American Journal of Preventive Medicine*, 2015; 48(1), 93-97.
21. U.S. Food and Drug Administration. Preliminary Scientific Evaluation of the Possible Public Health Effects of Menthol Versus Nonmenthol Cigarettes. <https://www.fda.gov/media/86497/download>. Published 2013. Accessed June 7, 2021.