



TOBACCO HARM TO KIDS

Tobacco use continues to pose a serious threat to our children. Over 400,000 middle and high school students still smoke. Nationwide, 1.9 percent of high school students and 1.1 percent of middle school students currently smoke.¹ In 16 states and DC, cigar smoking by high school boys equals or surpasses cigarette smoking (nationally, 2.3% high schools boy smoke cigars and 2.3% of high school boys smoke cigarettes).² 2.1 percent of U.S. high school boys are current smokeless or spit tobacco users.³ In some states, spit tobacco use among high school males is much higher than the national rate. For example, in West Virginia, Alabama, Tennessee and Ohio, 9.0 percent, 5.6 percent, 3.5 percent and 2.0 percent of high school boys use spit tobacco, respectively.⁴

Nearly 90 percent of smokers begin at or before the age of 18.⁵ There are more than 36,000 new underage daily smokers in this country each year—and roughly one-third of them will eventually die prematurely from smoking-caused disease.⁶ According to the U.S. Surgeon General, 5.6 million kids under the age of 18 who are alive today will ultimately die from smoking-related disease.⁷

To make matters worse, 38.1 percent kids aged 3 to 11 still are exposed to secondhand smoke.⁸ In addition, 8.4 percent of all pregnant women smoke, and many non-smoking pregnant women are exposed to secondhand smoke – causing enormous harms to newborn babies.⁹

Tobacco Use Harms At or Around Birth. Smoking and exposure to secondhand smoke among pregnant women causes spontaneous abortions, ectopic pregnancies, still-born births, low-birth-weight babies, and other pregnancy and delivery complications requiring neonatal intensive care. Exposure to nicotine during fetal development, which is a critical time for brain development, also can have lasting negative consequences on brain development.¹⁰ In addition, smoking and exposure to secondhand smoke during pregnancy directly increase the risk of health and behavioral problems including: abnormal blood pressure in infants and children, cleft palates and lips, childhood leukemia, infantile colic, childhood wheezing, respiratory disorders in childhood, eye problems during childhood, intellectual disability, attention deficit disorder, behavioral problems and other learning and developmental problems.¹¹

Each year in the United States, more than 400,000 live-born infants are exposed in utero to tobacco from pregnant women smoking.¹² Smoking causes more than 1,000 deaths due to perinatal conditions annually, including 400 from sudden infant death syndrome (SIDS).¹³

Harm to Kids from Smoking by Family Members. Parental or other household smoking after birth also increases the chances that exposed children will suffer from smoke-caused coughs and wheezing, bronchitis, asthma, pneumonia, potentially fatal lower respiratory tract infections, eye and ear problems or injury or death from cigarette-caused fires. Each year, 280 children die from respiratory illness caused by secondhand smoke; and another 300 kids suffer from injuries caused by smoking-caused fires.¹⁴ Secondhand smoke aggravates asthma symptoms in 400,000 to 1 million children, is responsible for between 150,000 and 300,000 new cases of bronchitis and pneumonia and 7,500 to 15,000 hospitalizations among kids (aged 18 months or younger), and causes 790,000 cases of otitis media (an acute or chronic inflammation of the middle ear) that result in office visits each year.¹⁵ Moreover, in 2013, there were more than 8,000 reports of potentially toxic exposure to tobacco and nicotine products among children five years old or younger, caused primarily by young children ingesting cigarettes.¹⁶

Harm to Youth from Their Own Smoking. Most people focus on the increased risk of heart disease, lung cancer and other cancers from smoking and believe that the harms to kids from their own smoking or other tobacco use do not appear for many years. In fact, many health consequences can occur quite quickly. For example:

- Beyond smoke- or nicotine-stained teeth, smokers are also more likely to suffer from periodontal disease and to have more serious periodontal disease, including tooth loss.¹⁷

- Chronic coughing, increased phlegm, emphysema and bronchitis have been well-established products of smoking for decades. Smokers are also more susceptible to influenza and are more likely to experience severe symptoms when they get the flu.¹⁸
- Smoking causes mild airway obstruction, reduced lung function and slowed growth of lung function among adolescents.¹⁹
- Teenage smokers suffer from shortness of breath almost three times more often as teens that don't smoke and produce phlegm more than twice as often as teens who don't smoke. Not surprisingly, smoking also hurts young people's physical fitness in terms of both performance and endurance—even among young people trained in competitive running.²⁰
- The resting heart rates of young adult smokers are two to three beats per minute faster than nonsmokers, and studies have shown that early signs of heart disease and stroke can be found in adolescents who smoke.²¹
- Smoking is also associated with hearing loss, vision problems and increased headaches.²²
- While many smokers believe that smoking relieves stress, it is actually a major cause. Smoking only appears to reduce stress because it lessens the irritability and tension caused by the underlying nicotine addiction.²³
- High school seniors who are regular smokers and began smoking by the ninth grade are more than twice as likely than their nonsmoking peers to report poorer overall health; are roughly two and a half times more likely to report cough with phlegm or blood, shortness of breath when not exercising and wheezing or gasping; and are three times more likely to have seen a doctor or other health professional for an emotional or psychological complaint.²⁴
- Smoking causes bad breath, makes smokers' homes and clothes stink, and reduces their sense of smell.²⁵

Harm to Youth from E-Cigarettes. E-cigarettes have been the most popular tobacco product among youth since 2014. In 2023, over 2.1 million youth, including 10.0% of US high schoolers were current e-cigarette users.²⁶ Kids are not just experimenting with e-cigarettes, but are using them frequently, leading to an addiction that is difficult to break. In 2023, 39.7% of high school e-cigarette users reported vaping on 20 or more days/month, and 29.9% reported daily use. In total, 530,000 middle and high school students are vaping every single day.²⁷ Almost all e-cigarettes contain nicotine, a highly addictive drug that can have lasting damaging effects on adolescent brain development and has been linked to a variety of adverse health outcomes for the developing fetus.²⁸ Nicotine also impacts the cardiovascular system.²⁹ Exposure to liquid nicotine found in e-cigarettes has also resulted in thousands of calls annually to poison control centers, according to the American Association of Poison Control Centers (AAPCC).³⁰ In addition to nicotine, e-cigarettes can contain other harmful and potentially harmful constituents, including formaldehyde, acrolein, volatile organic compounds like toluene, tobacco-specific nitrosamines, and metals like nickel and lead.³¹ As stated by the Surgeon General, "E-cigarette use poses a significant – and avoidable – health risk to young people in the United States. Besides increasing the possibility of addiction and long-term harm to brain development and respiratory health, e-cigarette use is associated with the use of other tobacco products that can do even more damage to the body."³²

Campaign for Tobacco-Free Kids, November 6, 2023 / Hope Neuling

More information on kids and tobacco use is available at

<https://www.tobaccofreekids.org/fact-sheets/tobaccos-toll-health-harms-and-cost/tobacco-and-kids>.

¹ Birdsey J, et al. "Tobacco Product Use Among U.S. Middle and High School Students — National Youth Tobacco Survey, 2023." *MMWR* 72(44):1173–1182, November 3, 2023, <https://www.cdc.gov/mmwr/volumes/72/wr/pdfs/mm7244a1-H.pdf>.

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