

Cigarette Sales to Minors in Kelantan

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Summary

Cigarette smoking among minors is a major public health problem in Malaysia. Legislation has been enacted making selling to and smoking cigarettes in persons under 18 years illegal. However, it is widely known that minors can easily purchase cigarettes from shops. This study was done to assess how easy is it for minors to purchase cigarettes. Six minors, between ages 15 and 17 years visited 117 shops with the intention of purchasing cigarettes. There were 114 (97.4%) successful attempts to purchase cigarettes. None of the shops asked the minors to produce their identification cards. Only four shops displayed notices about the illegality of cigarette sales to persons below 18 years. One hundred and seven shops had cigarette advertisements easily visible from the paying counter. A more comprehensive legislation with effective enforcement is required to control the easy access to cigarettes by minors. Additional measures should include the education of cigarette retailers about the legal implications of selling cigarettes to minors plus the health consequences of smoking.

Key Words: Smoking, Cigarette, Minors, Legislation

Introduction

The smoking habit of minors has been extensively studied in various developing countries and has been found to be a growing problem¹. Traditionally, smoking prevention has focused on educating minors on the dangers of tobacco use. However, the powerful marketing and promotion of cigarettes by the tobacco industry has greatly undermined this effort². Even when there are controls on cigarette advertising and promotion, there is a concern that the ease with which minors are able to obtain cigarettes may limit the efficacy and the credibility of educational messages³. Efforts to reduce tobacco smoking among minors therefore should include measures to prevent the availability of cigarettes to them. Availability is a key element in the successful marketing of any product and is a crucial factor in both creating and maintaining addiction to cigarettes. It has been shown that the 'ready availability' of tobacco increases the amount consumed by current smokers and makes it much more difficult for them to stop. It also makes it easier for minors to start smoking⁴.

In Malaysia, the Control of Tobacco Product Regulations 1993 prohibits the sale or supply of cigarettes to persons below 18 years. Although the regulations are well intended, observations of the high prevalence of smokers among minors suggest that they may be of limited use in reducing the availability of cigarettes to minors. This study therefore sought to assess formally the ease with which minors were able to purchase cigarettes by over the counter sales in the shops.

Methodology

The methods guiding this survey were based on those in similar studies in the United States and Australia^{5,6}. A geographical area along 4 stretches of road was conveniently selected in Kota Bharu. All 120 shops selling cigarettes along the respective roads were selected. The sample included 65 retail shops, 53 delicatessens and 2 mini-markets. The outlets were randomised into 6 groups, with 20 shops in each group.

With the consent of their parents, four boys and two girls, aged between 15 and 17 years visited these shops

to attempt to purchase cigarettes. They were volunteers and dressed casually to simulate actual situations. None of them were regular smokers and no attempt was made to recruit minors who looked older than their chronological age.

Only one purchase attempt was made at each shop. The minors were driven to each preselected shop by the researcher, who remained in the car and out of view of the retailer. The minors were instructed to enter the shop and ask the retailer for a stick of a popular brand of cigarette, which costs 20 cents. The minors were instructed to be honest about their age if the retailer asked, thus allowing an opportunity for a sale not to be made. They were also told to tell the retailer that the cigarette was for their brother's use if asked. As soon as the sale was made or otherwise, the minor immediately left the shop and returned to the car.

In addition to whether the purchase attempt was successful, the minor also reported on the sex and approximate age of the retailer (<30 years, >30 years), whether other customers were present in the shop, whether the retailer asked for his or her age and whom the cigarettes were intended for. After the purchase attempt, the researcher entered the shop to determine whether there were any warning signs about cigarette sales to persons under 18 years and whether any cigarette advertisements were displayed. There were three shops which were closed on the day of the visit.

Results

Cigarettes were purchased by minors from 114 (97.4%) of the 117 shops that sold cigarettes. The minors were refused purchase at only 3 shops, which were all retail shops. Where the minors were successful in purchasing cigarettes, they were not asked their age, nor were they asked to produce their identification card. Only one was asked whether he was schooling and two were asked for whom the cigarettes were intended. Ironically, there were three successful attempts where the retailer gave advice on smoking but still allowed the minors to purchase cigarettes.

There were three occasions where the minors were refused sale. It involved two male and one female minors. Only the female minor was asked for her age

and whether she was schooling. They were not asked to produce their identification card. However, all three of them were asked for whom the cigarettes were intended and the sale was refused. They were not given any advice by the retailer.

Four of the shops displayed signs of the illegal sales of cigarettes to persons under 18 years, which were given by cigarette companies. One hundred and seven shops had cigarette advertisements which were easily visible. The presence of other people in the shop, and the sex and age of the retailer made no difference to whether a minor was sold cigarettes. There was also no relationship between the age and the sex of the minors and the success or failure of purchase of cigarettes.

Discussion

This study confirms that minors can easily purchase cigarettes, despite the existence of legislation aimed at preventing selling of cigarettes to persons below the age of 18 years. Any legislation needs enforcement for it to be effective. However, there are considerable practical difficulties in enforcing the legislation against cigarette sales to persons under 18 years. Specifically, successful prosecution requires the evidence of an independent person, such as a health inspector who is actually present at the point of sale. Prosecution is also time consuming and laborious, reflected by the fact that very few prosecutions for selling cigarettes to persons under 18 years has been made in Kelantan since the gazettement of the Regulations (unpublished records).

A 'comprehensive law' to reduce the illegal sale of cigarettes to minors has been proposed⁷. Though some of these options may not be appropriate in the Malaysian context, others may be worthy of consideration and have been in force in the country. Some of these elements include: increasing maximum penalties, on the spot fine, allowing the alleged offender to pay a compound sum of money to the enforcement agency in lieu of court proceedings; increasing the licence fees for cigarette retailing and using a proportion of it to fund the use of local government environmental health personnel for increased surveillance and enforcement; the posting of an approved sign stating that sales of cigarettes to persons under 18 years is illegal and smoking is illegal for persons under 18 years.

This study did not include the appraisal of knowledge and attitudes of retailers about the legislation making cigarettes sales to persons under 18 years illegal. Efforts to educate and influence the vendors about the legislation should be an ongoing effort and be a part of the licencing process. A visible warning sign about the illegality of selling cigarettes to persons under 18 years should be mandatory and be clearly visible at the paying counter of each shop. This study noted that cigarette advertisements were very visible in all the shops. The extent of cigarette advertising can limit an adequate display of mandatory signs about illegal sales of cigarettes to minors in the shops⁸. Comprehensive approaches to preventing cigarette sales to minors might also consider the need to limit point of sale advertising, so that tobacco control signage is made more prominent.

With a more comprehensive legislation and its effective enforcement, it is reasonable to expect that an increasing difficulty in obtaining cigarettes may contribute to an interruption of this process among some minors, making occasional use and eventual addiction less likely⁹. Indeed, studies of restrictive smoking policies in schools have suggested that by making smoking inconvenient, the probability of

regular tobacco use is postponed until adulthood¹⁰. Furthermore, recent studies have documented that increased enforcement and harsher penalties for underage cigarette sales decreased the likelihood for cigarette purchases and experimentation among minors^{11,12}.

Conclusion

This study confirms the need to review existing means of preventing sales of cigarettes to minors. This should include a more comprehensive legislation to include mandatory warning signs about illegal sales of cigarettes to persons under 18 years and mandatory education for cigarette vendors about the legislation. Such a move is now timely, given the increasing prominence of smoking as a health problem in Malaysia.

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References

- World Health Organisation. Smoking control strategies in developing countries -Report of a WHO Expert Committee. WHO Technical Report Series 695, Geneva, World Health Organisation, 1983.
- Chapman S. Smokers: why do they start and continue? World Health Forum 1995;16 : 1-9.
- Armstrong BK, de Klerk NH, Shean RE *et al*. Influence of education and advertising on the uptake of smoking by minors. Med J Aust 1990;152 : 117-24.
- Kaplan 3. The hardest drug: heroin and public policy Chicago, University of Chicago Press, 1985.
- Altman DG, Foster V, Rasenick-Douss L, Tye 3. Reducing the illegal sales of cigarettes to minors. JAMA 1989;261 : 80-3.
- Wakefled M, Carrangis 3, Wilson D, Reynolds C. Megal cigarette sales to minors in South Australia. Tobacco Control 1992;1 : 114-7.
- DiFranza JR, Norwood BD, Garner DW, Tye J. Legislative efforts to protect minors from tobacco. JAMA 1987;257 : 3 387-9.
- Cummings KM, Sciandra R, Lawrence J. Tobacco advertising in retail shops. Public Hlth Rep 1991;106 : 570-5.
- Altman DG, Rasenick-Douss L, Foster V, Tye 313. Sustained effect of an educational program to reduce sales of cigarettes to minors. Am J Pub Hlth 1991;81 : 891-3.
- Porter A. Disciplinary attitudes and cigarette smoking: a comparison of two schools. BMJ 1982;285 : 1725-6.
- Jason LA, Ji PY, Anes MD, Birkhead SH. Active enforcement of cigarette control laws in the prevention of cigarette sales to minors. JAMA 1991;266 : 3159-61.
- DiFranza LA, Carlson RP, Caisse RE. Reducing youth access to tobacco. Tobacco Control 1992;1 : 58.