Synar, what is it?

In July 1992, Congress enacted the Alcohol, Drug Abuse, and Mental Health Administration Reorganization Act (PL 102-321), which includes an amendment (section 1926) aimed at decreasing youth access to tobacco. This amendment, named for its sponsor, Congressman Mike Synar of Oklahoma, requires states to enact and enforce laws prohibiting the sale or distribution of tobacco products to individuals under the age of 18. States must comply with the Synar Amendment in order to receive their full Substance Abuse Prevention and Treatment Block Grant (SABG) awards.

The Synar Amendment was developed in the context of a growing body of evidence about the health problems related to tobacco use by youth, as well as evidence about the ease with which youth could purchase tobacco products through retail sources. The Synar program has been successful in preventing youth tobacco use.

Because it plays a lead federal role in substance abuse prevention, SAMHSA was charged with implementing the Synar Amendment. In January 1996, SAMHSA issued the Synar regulation to provide guidance to the states. The regulation requires that states:

- Enact laws prohibiting any manufacturer, retailer, or distributor of tobacco products from selling or distributing such products to any individual younger than age 18
- Enforce these laws
- Conduct annual, unannounced inspections that provide a valid probability sample of tobacco sales outlets accessible to minors
- Negotiate interim targets and a date to achieve a noncompliance rate of no more than 20% (SAMHSA requires that each state reduce its retailer violation rate to 20% or less by FY 2003)
- Submit an annual report detailing activities to enforce the law

Why is Synar so important to North Dakota?

SAMHSA requires that each state reduce its “tobacco retailer violation rate” to 20% or less. A violation refers to youth being able to purchase tobacco. If the violation rate is greater than 20%, the state could lose 40% of Federal Substance Abuse Prevention and Treatment Block Grant Funding. North Dakota (DHS’s Behavioral Health Division) receives approximately $6,533,550 annually and a loss of 40% would equal $2,613,420. North Dakota’s violation rate was 17.9% in 2015 which has steadily increased from a low of 1.7% in 2008.

Reference: www.samhsa.gov
Is Synar effective?

While the national weighted average retailer violation rate (RVR) for the 50 states and the District of Columbia (weighted by state population) was 40.1% in FY 1997, the RVR has steadily fallen since then, to 8.5% in FY 2011, and then increased slightly, to 9.1% in FY 2012.

Recent research shows that the enforcement of youth access laws through the Synar program is directly responsible for a portion of the decline in youth smoking. Specifically, a 2009 study by Joseph DiFranza, M.D., and colleagues that examined merchant compliance with youth tobacco access laws between 1997 and 2003 and data on tobacco use from the same time period found that after controlling for price changes, media campaigns, and smoking restrictions, the odds ratio for daily smoking was reduced by 2% for each 1% increase in merchant compliance with youth access laws.

The Synar program has also contributed to a decline in the percentage of youth smokers who report retail sources as their usual source of tobacco products. Specifically, according to the Youth Risk Behavior Survey (YRBS), in 1995, 38.7% of students under the age of 18 who were current smokers reported that they usually got their own cigarettes by buying them in a store or gas station. In 2011, this percentage had dropped to 14%.

At the same time, tobacco use among youth has been declining. According to YRBS, the percentage of students reporting current cigarette use dropped from 34.8% in 1995 to 18.1% in 2011.

Does the CDC support Synar?

Synar is a comprehensive strategy that specifically targets youth access of tobacco by focusing on laws, enforcement, and education which aligns with CDC’s recommendation for preventing tobacco use among youth (page 19; CDC’s Best Practices for Comprehensive Tobacco Control Programs, 2014):

“Mobilize the community to restrict minors’ access to tobacco products in combination with additional interventions such as stronger local laws directed at retailers, active enforcement of retailer sales laws, and retailer education with reinforcement.”

What should we do?

Active enforcement of youth tobacco access laws is an important component of a comprehensive youth tobacco prevention program and leads to reductions in youth smoking but should not be done in isolation. And, all efforts to reduce youth tobacco access should be combined with other efforts to reduce youth tobacco use.

We need to:

• Collaborate (creation of a youth access tobacco group/committee)
• Enforce youth tobacco access laws – statewide enforcement
• Mobilize the community to reduce minors’ access by implementing local efforts
• Stronger restrictions/policies on retailer sales of tobacco products
• Retailer education (letters and packets to all establishments along with training opportunities)
• Increase the price of tobacco products
• Implement mass media campaigns