

THE LONG-TERM IMPACT OF EARLY-LIFE CIGARETTE TAXES ON ADULT PRE-PREGNANCY AND PRENATAL SMOKING

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DISCLOSURES

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- I have no other tobacco-related conflicts over the last 10 years.

INTRODUCTION

- Do early-life public policies impact long-term health behaviors?
 - Literature has shown—prenatal and early-childhood environment crucial for human capital development*
 - If early-life influences also impact on long-run health behaviors (such as smoking)—provides another potential avenue for early-childhood health to persist into adulthood

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- Do higher early-life cigarette taxes have **long-term *intergenerational* links to adult smoking behavior?**
 - Consider cigarette taxes in place during the mother's in-utero development (faced by the grandmother)
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WHY PRENATAL SMOKING?

- Prenatal smoking remains an ongoing public health threat
 - Raises the likelihood of pregnancy complications such as low birth weight (*Almond et al.; 2005*)
 - Prenatal smoking during gestation may also have long-term implications for health and human capital development (*Simon, 2016; Settele and Van Ewijk, 2018*)
 - Birth Certificates provide well-reported administrative record of prenatal smoking & include the mother's own birth state
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- **Prenatal smoking** from U.S. Birth Certificate records
- **Early-life taxes:** taxes in place during the mother's own gestation (1965-2000)
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 - 1% increase in early-life cigarette tax is associated with a reduction in the probability of prenatal smoking by 0.24 percent and pre-pregnancy smoking by 0.21 percent
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 1. Higher cigarette tax in the years leading up to the mother's in-utero exposure changes the likelihood of:
 2. SES/human capital also linked to lower prenatal smoking

- *Multigenerational effects on health and health behaviors*
 - Infant health:
 1. ↓ very premature
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IS THIS A COHORT EFFECT?

- Robust to a host of checks, except cohort-specific effect
- Two notable *cohort effects* appear in the data:
 1. *Contemporary* and *teenage* cigarette taxes: influential for older cohorts, those with first child during the *late 1990s* and *early 2000s*
 2. *Early-life* cigarette taxes appear important *after 2006*
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LITERATURE

CIGARETTE TAXES AND SMOKING

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BACKGROUND

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**WHY WOULD EARLY-LIFE TAXES INFLUENCE ADULT
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- **Reason 1:** Higher cigarette taxes during the mother's in-utero development will affect the grandmother's prenatal smoking.

Prenatal smoking:

- Impairs early health and human capital development (*Settele and Van Ewijk (2018)*)
- Increases infant risk factors, such as low birth weight (*Almond et al., 2005*)

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- **Reason 2:** In-utero and childhood exposure to nicotine may affect the individual's general **proclivity towards nicotine-containing products**
 - Nicotine exposure has been shown to affect rodent brain development; which may be generalizable to humans (*Lv et al., 2008; England et al., 2015; HHS, 2016, 2018; Romoli et al., 2019*)
 - Reducing exposure to nicotine during pregnancy may disrupt a generation of smokers

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- **Reason 3:** Higher cigarette taxes will affect smoking **in the home environment**
 - Children who grow up in households with smoking parents more likely to smoke in adulthood (*Bantle and Haisken-DeNew, 2002; Gohlmann et al., 2010*)
 - **Parental health behaviors causally impact the health behaviors of adult children** (*Darden and Gilleskie, 2016; Fadlon and Nielsen, 2019*)

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WHY WOULD EARLY-LIFE TAXES INFLUENCE ADULT SMOKING?

- **Reason 4:** Higher cigarette taxes shape the **state-level cultural environment**
 - Mother's beliefs about smoking shaped by parents, peers, and acquaintances
 - Cultural transmission of smoking behaviors (*Christopoulou and Lillard, 2015; Rodriguez-Planas and Sanz-de Galdeano, 2019; Kleinjans and Gill, 2020; Catalano and Gilleskie, 2021*)
 - Childhood exposure to a permissive smoking culture may play a role in shaping health behaviors

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- **Reason 5:** Cigarette taxes raised during early childhood may be *earmarked for public expenditures* on education or other beneficial programs (*Lav, 2002; Evans and Zhang, 2007*)
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 - We test for this in the mechanisms section

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WHY WOULD EARLY-LIFE TAXES INFLUENCE ADULT SMOKING?

- 1 In-utero exposure and human capital formation
- 2 Nicotine receptors in the developing brain
- 3 Smoking culture at home
- 4 Smoking culture in state
- 5 Earmarked expenditures

BACKGROUND

CIGARETTE TAXES OVER TIME

AVERAGE STATE-LEVEL CIGARETTE TAXES, 1965-2020



DATA

1. *Birth Certificate Records for 1996-2020:*

- Natality Detail File from the CDC and NVSS
- Revised version has information on smoking at three points in time (2009+)
- Primarily focus on revised version

2. *Cigarette Excise Taxes*

- State and federal excise taxes from the CDC's Tax Burden on Tobacco
- Use cigarette taxes in place at the conception of mother, during teen years (age 13), and at the conception of the newborn

3. Additional data sources: for tobacco and state-level policy controls listed in Appendix

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1. Prenatal Smoking

- Any smoking during the three trimesters of pregnancy

2. Smoking pre-pregnancy

3. Quantity of Cigarettes

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- **Main Sample:** first deliveries to adults (18-49) occurring over 2009-2020

2003 BIRTH CERTIFICATE REVISION

MOTHER	29a. DATE OF FIRST PRENATAL CARE VISIT MM / DD / YYYY <input type="checkbox"/> No Prenatal Care		29b. DATE OF LAST PRENATAL CARE VISIT MM / DD / YYYY		30. TOTAL NUMBER OF PRENATAL VISITS FOR THIS PREGNANCY _____ (If none, enter Δ0°.)																									
	31. MOTHER'S HEIGHT _____ (feet/inches)		32. MOTHER'S PREPREGNANCY WEIGHT _____ (pounds)		33. MOTHER'S WEIGHT AT DELIVERY _____ (pounds)																									
	35. NUMBER OF PREVIOUS LIVE BIRTHS (Do not include this child)		36. NUMBER OF OTHER PREGNANCY OUTCOMES (spontaneous or induced losses or ectopic pregnancies)		37. CIGARETTE SMOKING BEFORE AND DURING PREGNANCY For each time period, enter either the number of cigarettes or the number of packs of cigarettes smoked. IF NONE, ENTER Δ0°. <table border="0" style="width: 100%; border-collapse: collapse;"> <tr> <td colspan="2">Average number of cigarettes or packs of cigarettes smoked per day.</td> <td></td> <td></td> </tr> <tr> <td></td> <td style="text-align: center;"># of cigarettes</td> <td style="text-align: center;">OR</td> <td style="text-align: center;"># of packs</td> </tr> <tr> <td>Three Months Before Pregnancy</td> <td style="text-align: center;">_____</td> <td style="text-align: center;">OR</td> <td style="text-align: center;">_____</td> </tr> <tr> <td>First Three Months of Pregnancy</td> <td style="text-align: center;">_____</td> <td style="text-align: center;">OR</td> <td style="text-align: center;">_____</td> </tr> <tr> <td>Second Three Months of Pregnancy</td> <td style="text-align: center;">_____</td> <td style="text-align: center;">OR</td> <td style="text-align: center;">_____</td> </tr> <tr> <td>Third Trimester of Pregnancy</td> <td style="text-align: center;">_____</td> <td style="text-align: center;">OR</td> <td style="text-align: center;">_____</td> </tr> </table>		Average number of cigarettes or packs of cigarettes smoked per day.					# of cigarettes	OR	# of packs	Three Months Before Pregnancy	_____	OR	_____	First Three Months of Pregnancy	_____	OR	_____	Second Three Months of Pregnancy	_____	OR	_____	Third Trimester of Pregnancy	_____	OR	_____
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35a. Now Living Number _____ <input type="checkbox"/> None		35b. Now Dead Number _____ <input type="checkbox"/> None		36a. Other Outcomes Number _____ <input type="checkbox"/> None																										
35c. DATE OF LAST LIVE BIRTH MM / YYYY		36b. DATE OF LAST OTHER PREGNANCY OUTCOME MM / YYYY		39. DATE LAST NORMAL MENSES BEGAN MM / DD / YYYY																										
				40. MOTHER'S MEDICAL RECORD NUMBER																										
				38. PRINCIPAL SOURCE OF PAYMENT FOR THIS DELIVERY <input type="checkbox"/> Private Insurance <input type="checkbox"/> Medicaid <input type="checkbox"/> Self-pay <input type="checkbox"/> Other (Specify) _____																										

SOURCE: U.S. Standard Certificate of Live Birth, 2003 (<https://www.cdc.gov/nchs/data/dvs/birth11-03final-ACC.pdf>)

EMPIRICAL STRATEGY

For individual i residing in county j and state s_c at time t who was born in state s_b this specification appears as:

$$\text{Smoking}_{i,j,s_c,s_b,t} = \alpha + \beta \text{Early-life Tax}_{s_b(t-\text{age}-1)} + \mathbf{X}'_{i,j,s_c,s_b,t} \gamma + a_{s_c} + \delta_{s_b} + \eta_{(t-g)} + \nu_{(t-\text{age}-1)} + \phi_{s_b}(t - \text{age} - 1) + \epsilon_{i,j,s_c,s_b,t} \quad (1)$$

- $\text{Smoking}_{i,j,s_c,s_b,t}$ —smoking behavior for individual i
- $\text{Early-life Tax}_{s_b(t-\text{age}-1)}$ —real cigarette tax in the mother's birth state s_b & conception year $(t - \text{age} - 1)$
- $\mathbf{X}'_{i,j,s_c,s_b,t} \gamma$ are demographic and policy controls
- Fixed effects and trends
- $\epsilon_{i,j,s_c,s_b,t}$ is the standard error (clustered at the birth state level)

EMPIRICAL STRATEGY

For individual i residing in county j and state s_c at time t who was born in state s_b this specification appears as:

$$\text{Smoking}_{i,j,s_c,s_b,t} = \alpha + \beta \text{Early-life Tax}_{s_b(t-\text{age}-1)} + \mathbf{X}'_{i,j,s_c,s_b,t} \gamma + a_{s_c} + \delta_{s_b} + \eta_{(t-g)} + \nu_{(t-\text{age}-1)} + \phi_{s_b}(t - \text{age} - 1) + \epsilon_{i,j,s_c,s_b,t} \quad (1)$$

- $\text{Smoking}_{i,j,s_c,s_b,t}$ —smoking behavior for individual i
- $\text{Early-life Tax}_{s_b(t-\text{age}-1)}$ —real cigarette tax in the mother's birth state s_b & conception year $(t - \text{age} - 1)$
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- Fixed effects and trends
- $\epsilon_{i,j,s_c,s_b,t}$ is the standard error (clustered at the birth state level)

EMPIRICAL STRATEGY

For individual i residing in county j and state s_c at time t who was born in state s_b this specification appears as:

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- $\text{Smoking}_{i,j,s_c,s_b,t}$ –smoking behavior for individual i
- $\text{Early-life Tax}_{s_b(t-\text{age}-1)}$ –real cigarette tax in the mother's birth state s_b & conception year ($t - \text{age} - 1$)
- $\mathbf{X}'_{i,j,s_c,s_b,t} \gamma$ are demographic and policy controls
 1. Demographic controls: race/ethnicity
 2. Tobacco control: contemporary state-level cigarette tax, county-level Tobacco 21 laws, share of the population covered by indoor vaping and smoking restrictions, standardized ecigarette tax, and e-cigarette minimum purchasing age indicator
 3. General policy: ACA Medicaid expansion, state-level minimum wage and beer tax, county-level unemployment rate, median income, poverty rate, binary variables for state-level recreational & medical marijuana legalization and opioid PDMP

EMPIRICAL STRATEGY

For individual i residing in county j and state s_c at time t who was born in state s_b this specification appears as:

$$\text{Smoking}_{i,j,s_c,s_b,t} = \alpha + \beta \text{Early-life Tax}_{s_b(t-\text{age}-1)} + \mathbf{X}'_{i,j,s_c,s_b,t} \gamma + a_{s_c} + \delta_{s_b} + \eta_{(t-g)} + \nu_{(t-\text{age}-1)} + \phi_{s_b}(t - \text{age} - 1) + \epsilon_{i,j,s_c,s_b,t} \quad (1)$$

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 1. Current state \mathbf{a}_{s_c} and birth state δ_{s_b}
 2. Infant month-year of conception $\eta_{(t-g)}$, mother's conception year, $\nu_{(t-age-1)}$ and $\phi_{s_b}(t - age - 1)$ linear time trends
- $\epsilon_{i,j,s_c,s_b,t}$ is the standard error (clustered at the birth state level)

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For individual i residing in county j and state s_c at time t who was born in state s_b this specification appears as:

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- $\epsilon_{i,j,s_c,s_b,t}$ is the standard error (clustered at the birth state level)

MAIN RESULTS

Effect of Early-life Taxes on Smoking

	1(Any Pre-Pregnancy Smoking)			1(Any Prenatal Smoking)			Prenatal Per Day Cigarettes		
	(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)
At-Conception Cigarette Tax	-0.3115** (0.1414)	-0.3050** (0.1471)	-0.2126*** (0.0707)	-0.3681** (0.1693)	-0.3583** (0.1766)	-0.2403*** (0.0856)	-0.4170*** (0.1578)	-0.4135** (0.1702)	-0.2506*** (0.0848)
Observations	9,466,192	9,466,192	9,466,192	9,470,171	9,470,171	9,470,171	9,456,678	9,456,678	9,456,678
Adjusted R-squared	0.053	0.069	0.071	0.040	0.053	0.055	0.026	0.035	0.036
Mean Dependent	0.104	0.104	0.104	0.072	0.072	0.072	0.521	0.521	0.521
Baseline FE	X	X	X	X	X	X	X	X	X
Controls		X	X		X	X		X	X
Maternal Birth State Trends			X			X			X

Notes: Elasticities reported. Robust standard errors clustered at the level of the mother's birth state.

***, **, * represent statistical significance at 1, 5 and 10 percent levels.

Effect of Early-life Taxes on Smoking

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Baseline FE	X	X	X	X	X	X	X	X	X
Controls		X	X		X	X		X	X
Maternal Birth State Trends			X			X			X

Notes: Elasticities reported. Robust standard errors clustered at the level of the mother's birth state.

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Effect of Early-life Taxes on Smoking

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Baseline FE	X	X	X	X	X	X	X	X	X
Controls		X	X		X	X		X	X
Maternal Birth State Trends			X			X			X

Notes: Elasticities reported. Robust standard errors clustered at the level of the mother's birth state.

***, **, * represent statistical significance at 1, 5 and 10 percent levels.

ROBUSTNESS

Contemporary, Teenage, and Early-life Cigarette Taxes

	1(Any Pre-Pregnancy Smoking)			1(Any Prenatal Smoking)			Prenatal Per Day Cigarettes		
	(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)
Panel A: Main Sample, Adding Teenage and Contemporary Taxes									
At-Conception Cigarette Tax	-0.3403** (0.1444)	-0.3163** (0.1425)	-0.2092** (0.0686)	-0.4001** (0.1713)	-0.3713** (0.1710)	-0.2353** (0.0834)	-0.4472** (0.1600)	-0.4256** (0.1657)	-0.2423*** (0.0831)
Teenage (Age 13) Cigarette Tax	0.0997* (0.0603)	0.0895 (0.0640)	0.0153 (0.0348)	0.1151* (0.0649)	0.1023 (0.0688)	0.0223 (0.0352)	0.1086* (0.0628)	0.0952 (0.0660)	0.0365 (0.0386)
Present-Day Cigarette Tax	0.2316** (0.1002)	0.1433** (0.0639)	0.1621* (0.0881)	0.2493** (0.1111)	0.1336** (0.0681)	0.1585 (0.1008)	0.2362** (0.1156)	0.0549 (0.0728)	0.0784 (0.1027)
Observations	9,466,192	9,466,192	9,466,192	9,470,171	9,470,171	9,470,171	9,456,678	9,456,678	9,456,678
Adjusted R-squared	0.053	0.069	0.071	0.040	0.053	0.055	0.026	0.035	0.036
Mean Dependent	0.104	0.104	0.104	0.072	0.072	0.072	0.521	0.521	0.521
Baseline FE	X	X	X	X	X	X	X	X	X
Controls		X	X		X	X		X	X
Maternal Birth State Trends			X			X			X

Notes: Elasticities reported. Robust standard errors clustered at the level of the mother's birth state.

***, **, * represent statistical significance at 1, 5 and 10 percent levels.

Contemporary, Teenage, and Early-life Cigarette Taxes

	1(Any Pre-Pregnancy Smoking)			1(Any Prenatal Smoking)			Prenatal Per Day Cigarettes		
	(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)
Panel B: Never Movers, Adding Teenage and Contemporary Taxes									
At-Conception Cigarette Tax	-0.3414** (0.1607)	-0.3336** (0.1684)	-0.2253*** (0.0798)	-0.3923** (0.1906)	-0.3869* (0.2025)	-0.2499*** (0.0953)	-0.4110** (0.1743)	-0.4222** (0.1930)	-0.2471** (0.1027)
Teenage (Age 13) Cigarette Tax	0.1361** (0.0565)	0.1208* (0.0665)	0.0206 (0.0384)	0.1634*** (0.0610)	0.1433** (0.0716)	0.0289 (0.0403)	0.1564*** (0.0591)	0.1339* (0.0686)	0.0415 (0.0443)
Present-Day Cigarette Tax	0.2498* (0.1304)	0.1367 (0.0893)	0.1696 (0.1373)	0.2725* (0.1441)	0.1336 (0.1002)	0.1759 (0.1615)	0.2529* (0.1528)	0.0335 (0.1074)	0.0708 (0.1608)
Observations	6,500,087	6,500,087	6,500,087	6,502,930	6,502,930	6,502,930	6,493,287	6,493,287	6,493,287
Adjusted R-squared	0.054	0.071	0.073	0.041	0.055	0.057	0.026	0.036	0.037
Mean Dependent	0.111	0.111	0.111	0.077	0.077	0.077	0.567	0.567	0.567
Baseline FE	X	X	X	X	X	X	X	X	X
Controls		X	X		X	X		X	X
Maternal Birth State Trends			X			X			X

Notes: Elasticities reported. Robust standard errors clustered at the level of the mother's birth state. ***, **, * represent statistical significance at 1, 5 and 10 percent levels.

Contemporary, Teenage, and Early-life Cigarette Taxes

	1(Any Pre-Pregnancy Smoking)			1(Any Prenatal Smoking)			Prenatal Per Day Cigarettes		
	(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)
Panel C: Main Sample, Only Adding Teenage Taxes									
At-Conception Cigarette Tax	-0.3243**	-0.3150**	-0.2099**	-0.3830**	-0.3701**	-0.2359**	-0.4310**	-0.4251**	-0.2426**
	(0.1343)	(0.1427)	(0.0681)	(0.1609)	(0.1712)	(0.0829)	(0.1503)	(0.1659)	(0.0828)
Teenage (Age 13) Cigarette Tax	0.0943*	0.0887	0.0123	0.1092*	0.1016	0.0194	0.1031*	0.0949	0.0351
	(0.0570)	(0.0639)	(0.0356)	(0.0618)	(0.0687)	(0.0360)	(0.0606)	(0.0660)	(0.0390)
Observations	9,466,192	9,466,192	9,466,192	9,470,171	9,470,171	9,470,171	9,456,678	9,456,678	9,456,678
Adjusted R-squared	0.053	0.069	0.071	0.040	0.053	0.055	0.026	0.035	0.036
Mean Dependent	0.104	0.104	0.104	0.072	0.072	0.072	0.521	0.521	0.521
Baseline FE	X	X	X	X	X	X	X	X	X
Controls		X	X		X	X		X	X
Maternal Birth State Trends			X			X			X

Notes: Elasticities reported. Robust standard errors clustered at the level of the mother's birth state.

***, **, * represent statistical significance at 1, 5 and 10 percent levels.

Contemporary, Teenage, and Early-life Cigarette Taxes

	1(Any Pre-Pregnancy Smoking)			1(Any Prenatal Smoking)			Prenatal Per Day Cigarettes		
	(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)
Panel D: Main Sample, Adding Each Cigarette Tax Alone									
At-Conception Cigarette Tax	-0.2127*** (0.0704)			-0.2403*** (0.0853)			-0.2506*** (0.0847)		
Teenage (Age 13) Cigarette Tax		0.0304 (0.0411)			0.0397 (0.0417)			0.0560 (0.0439)	
Present-Day Cigarette Tax			0.1608* (0.0889)			0.1566 (0.1018)			0.0753 (0.1039)
Observations	9,466,192	9,466,192	9,466,192	9,470,171	9,470,171	9,470,171	9,456,678	9,456,678	9,456,678
Adjusted R-squared	0.071	0.071	0.071	0.055	0.055	0.055	0.036	0.036	0.036
Mean Dependent	0.104	0.104	0.104	0.072	0.072	0.072	0.521	0.521	0.521
Baseline FE	X	X	X	X	X	X	X	X	X
Controls	X	X	X	X	X	X	X	X	X
Maternal Birth State Trends	X	X	X	X	X	X	X	X	X

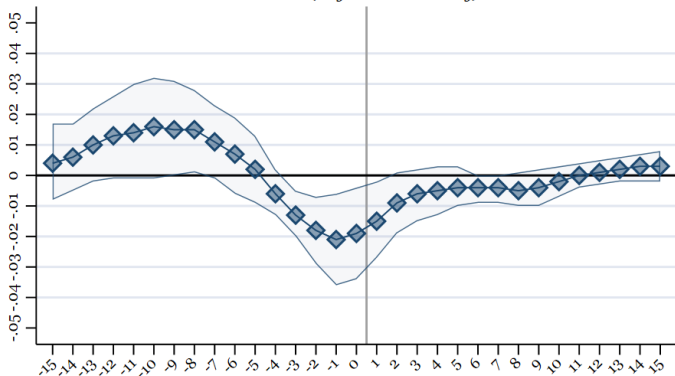
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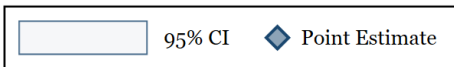
Tax Levels at Each Age

Panel A: Real Cigarette Tax at Each Age

Outcome: 1(Any Prenatal Smoking)



Real Cigarette Tax Level at Each Age



Other Notable Robustness Checks

1. Real taxes increases at each age (separately considered)
2. Event study of tax increases relative to mother's birth year
3. Effect over trimester
4. Balanced panels
5. Alternative clustering of standard errors

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MECHANISMS FOR THE MAIN EFFECT

1. Human Capital and Socioeconomic Status
2. Earmarked Expenditure
3. Related State-level Tobacco Control Policies
4. Biological impacts: mother and infant health
5. *Unable to test: Intergenerational effects*

- Early-life cigarette taxes influence *human capital formation* and adult *socioeconomic status*
 1. Higher cigarette tax in the years leading up to the mother's in-utero exposure changes the likelihood of:
 - 1.1 ↑ college degree attainment
 - 1.2 ↑ married at first delivery
 - 1.3 ↓ WIC receipt
 2. Also show that SES/human capital is linked to lower prenatal smoking

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 2. Also show that SES/human capital is linked to lower prenatal smoking

- *Multigenerational effects* on health and health behaviors.
- Mother health:
 1. ↓ pre-pregnancy BMI
 2. ↓ diabetes
 3. ↑ breastfeeding
- Infant health:
 1. ↓ very premature
 2. ↓ very low birth weight

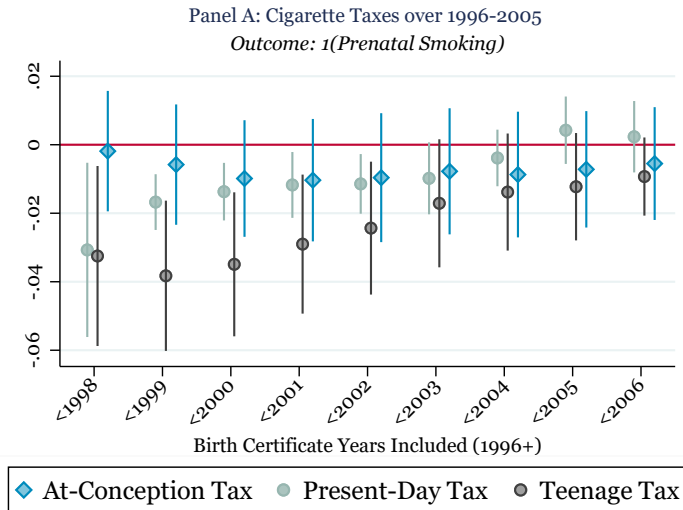
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EXTENSIONS—IS THIS A COHORT EFFECT?

- Remaining questions:
 1. When did early-life taxes become important?
 2. Why do contemporary and teen taxes fail to affect smoking behavior?
Have these cigarette taxes lost their bite? (Hansen et al. (2017); DeCicca et al. (2020))
- Add earlier delivery years, using the unrevised birth certificate data:
 - Consider 1996-2005 and 2002-2020
 - Ideally want to show when contemporary/teen taxes became less important and when early-life taxes arose as important

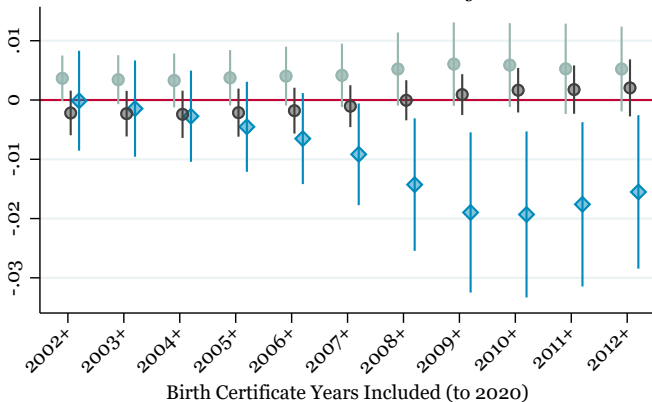
The Changing Importance of Life-Course Cigarette Taxes



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Panel B: Cigarette Taxes over 2002-2020

Outcome: 1(Prenatal Smoking)



◆ At-Conception Tax ● Present-Day Tax ● Teenage Tax

CONCLUSIONS

- **Primary Findings:** long-term link between mother's exposure to *higher in-utero (early-life) cigarette taxes* and *later-life adult prenatal smoking*
 1. The importance of early-life taxes holds over various specifications, notably:
 - Controlling for present-day and teenage cigarette taxes.
 - Event study
 - Considering taxes at all ages
 2. Most plausible mechanisms:
 - 2.1 *Human capital formation and adult socioeconomic status*
 - 2.2 *Multigenerational effects on health and health behaviors*

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IS THIS A COHORT EFFECT?

- Two notable *cohort effects* appear in the data:
 1. Contemporary and teenage cigarette taxes: influential for older cohorts, those with first child during the late 1990s and early 2000s
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GENERAL CONCLUSIONS

1. **Contemporary cigarette** taxes may have *“lost their bite”* in recent years, aligning with Hansen et al. (2017); DeCicca et al. (2020)
2. Public policies may have **cohort-specific effects**
 - Today, pregnant women *less responsive to contemporary/teenage taxes*
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THANK YOU!

Thank you!

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