



October 24, 2014

The Honorable Carl Levin  
 Chairman, Committee on Armed Services  
 United States Senate  
 Washington, DC 20510

The Honorable James Inhofe  
 Ranking Member, Committee on Armed Services  
 United States Senate  
 Washington, DC 20510

Dear Chairman Levin and Ranking Member Inhofe:

As the House and Senate continue discussions over the National Defense Authorization Act for FY 2015 (NDAA FY 2015), we urge you to reject language currently included in the House version of the bill that would prohibit the Secretary of Defense and the Secretaries of the military departments from implementing any new policy to limit, restrict, or ban the sale of any legal consumer product currently sold at commissaries or exchanges. This very broad language regarding the sale of all legal products appears primarily designed to block policies to reduce tobacco use. The Navy has indicated it is considering a policy to end tobacco sales in military exchanges and commissaries. Some proponents of the House language have implied that the Department of Defense (DoD) has suggested a ban on the *use* of tobacco products by service members – that is not accurate.

DoD is currently nearing the end of a thorough review of tobacco use in the military. This review will include recommendations for addressing the very real health, readiness, and financial consequences of tobacco use by service members. We urge the Senate to reject the House effort to preempt this review. Congress should not limit the ability of DoD to take steps to help tobacco users to quit and to reduce the number of service members who start

Unfortunately, tobacco use within the U.S. military is significantly higher than in the comparable civilian population. The smoking rate among those serving in the military was 24% in 2011 compared to 19% among adults in the civilian population. Many service members enter the military as non-smokers but become smokers while in the military. Between 36% and 40% of smokers in the military started smoking after they joined the military.

Not only is use of tobacco products harmful for the individual user, DoD, the Institute of Medicine (IOM), and others have pointed out that it undermines combat readiness by reducing physical fitness and endurance, delays wound healing, and increases work absenteeism. The IOM also reports that it costs DoD \$1.6 billion each year for tobacco-related medical care, increased hospitalization, and lost days of work. Most service members do not smoke, and many who do smoke want to quit.

DoD has taken a number of steps over the years to reduce tobacco use, including creating smoke-free areas and improving access to cessation services. But given the disproportionately high rates of tobacco use in the military, more needs to be done. We are pleased DoD is conducting a thorough review of its policy options and urge the Senate to reject the House language that would preempt this review and limit DoD's options.

Sincerely,

American Academy of Family Physicians  
American Academy of Otolaryngology—Head and Neck Surgery  
American Association for Cancer Research  
American Association for Respiratory Care  
American Cancer Society Cancer Action Network  
American College of Preventive Medicine  
American Congress of Obstetricians and Gynecologists  
American Dental Association  
American Heart Association  
American Lung Association  
American Medical Association  
American Psychological Association  
American Public Health Association  
American Society of Clinical Oncology  
American Thoracic Society  
Association of State and Territorial Health Officials  
Campaign for Tobacco-Free Kids  
Cancer Prevention and Treatment Fund  
Lung Cancer Alliance  
National Hispanic Medical Association  
National Latino Alliance for Health Equity  
Oncology Nursing Society  
Partnership for Prevention  
Society for Research on Nicotine and Tobacco  
Trust for America's Health  
United Methodist Church – General Board of Church and Society