



Support the Prevention Agenda by

Protecting Youth from Tobacco Marketing in the Retail Environment

You can support the Prevention Agenda goal of **Preventing Initiation of Tobacco Use by Youth and Young Adults** by encouraging the protection of youth from retail tobacco marketing in your county.

AIM:

Increase the number of municipalities that have policies in place that protect youth from tobacco marketing in the retail environment, also known as the point of sale (POS).

Why address retail tobacco marketing in your county's municipalities?

- The U.S. Surgeon General has stated that youth smoking is a pediatric epidemic. In New York State (NYS), 11.9% of high school students currently smoke and 11.1% of male high school students use smokeless or spit tobacco. Unless smoking rates decline, 389,000 NYS youth alive today will die prematurely from smoking.
- Most smokers start as adolescents. Nearly 9 out of 10 smokers start smoking by age 18 and 99% of smokers began smoking prior to age 26. In NYS, 19,900 youth under age 18 become new daily smokers each year. Cigarette smoking is highest among lower socioeconomic status youth.
- The tobacco industry spends billions of dollars to market its deadly products in stores where youth frequent, including paying retailers to prominently display tobacco products, in-store advertising, price discounts and other in-store promotions. Youth and young adults are significantly more susceptible to tobacco marketing than adults. Tobacco marketing has more influence on youth smoking behaviors than peer or parental influences. The U.S. Surgeon General reports that tobacco advertising and promotion cause youth to start smoking and continue to smoke.
- In most NYS retail stores and pharmacies where tobacco is sold, tobacco displays known as "power walls" are located directly behind the cash registers—the most visible and unavoidable spots in a store. In NYS, power walls in convenience stores measure about 32 square feet and are even larger in pharmacies, with an average 50 square feet of display space. To put this in perspective, the tobacco industry is prohibited by the Master Settlement Agreement (MSA) from placing billboards larger than 14 square feet.

- Research shows that the more tobacco youth see, the more likely they are to smoke. Stores located near schools
 or in which adolescents frequently shop, display nearly three times the amount of tobacco advertisements and
 promotional materials, and tend to offer significantly lower cigarette prices than other stores in the community.
 Retailers located in minority communities tend to market cheaper cigarettes or provide more "buy-one, get-one"
 deals than those in more affluent, non-minority communities.
- In addition to protecting the health of youth and young adults, addressing tobacco marketing contributes to the financial health of your communities. Local governments pay a staggering price for tobacco-related health care costs. In NYS, health care costs caused by smoking are \$8.1 billion every year, of which Medicaid costs borne by the State are \$3.3 billion.* Tobacco use costs each New York State household an average of \$842 annually in local, state and federal taxes to cover tobacco-caused costs to government. Preventing the initiation of tobacco use by youth and young adults now brings the hope for healthier communities in the future.

POLICY CHANGE:

Create an environment that protects youth from retail tobacco marketing in your community.

Policy Option	Description
Implement a local tobacco licensing system that limits the number, type and/or location of tobacco retailers	 Policy options include: Capping and/or reducing the total number of tobacco licenses issued yearly Prohibiting the issuance of licenses to pharmacies Prohibiting the issuance of tobacco licenses to new retailers within a certain distance from schools New York examples: Dutchess County – requires local permit to sell or distribute tobacco New York City – requires local tobacco licenses for retailers Cayuga County – local tobacco licensure limits new licenses within 100 feet of schools United States examples: Boston and San Francisco – prohibits tobacco sales in pharmacies Santa Clara County, CA – implemented a comprehensive tobacco licensing ordinance

Restrict the display of tobacco products in retail establishments open to youth	 International examples: Australia Iceland Ireland United Kingdom
Restrict the redemption of coupons or the use of multipack discounts from tobacco retailers	 New York example: New York City United States example: Providence, RI

ACTION:

Take these steps to protect youth from retail tobacco marketing in your community:

Recommended Step	Description
Identify and collaborate with local key partners Partner with local DOH-funded community contractors who work in counties across New York State to educate community leaders about the negative impact of retail tobacco marketing on youth.	 Reach out to local DOH-funded tobacco control community contractors: Reality Check Youth Action – www.realitycheckofny.com Community Partnerships – www.tobaccofreenys.org DOH-funded contractors also have established partnerships with: Youth-focused organizations and clubs Schools, colleges and universities Business leaders and business communities Faith-based organizations Health care providers, pediatricians, hospitals Service and advocacy organizations:
Educate community members and leaders	 The public is largely unaware of the harms caused by retail tobacco marketing and the authority of local communities to restrict the sale of tobacco products and the time, place and manner of tobacco advertising. Communities must understand why policy action is necessary before policy change can occur. Community education is essential for educating the public about point of sale (POS) tobacco marketing and the role of strong POS sale policies. Successful community education ensures there is public support for POS policies, helps mobilize the community to voice its support for POS policies and helps educate policy makers about the issue.

ACTION:

Take these steps to protect youth from retail tobacco marketing in your community:

Recommended Step	Description
Extend State and local health communications efforts to highlight the problem of retail tobacco marketing and youth smoking	 Paid media focuses on an existing collaborative statewide media campaign designed to educate the public about the harms caused by retail tobacco marketing and provide a call to action for the public to respond to this issue. Local and state media POS messaging and campaigns build support for multiple POS policy options at the local and state levels. Paid media activities advance local education initiatives and recognize municipalities that adopt strong POS policies. Coordinate local paid media with local DOH-funded tobacco control community contractors, who can assist with procuring POS-related media.
Educate policymakers about the problem of retail tobacco marketing	Coordinate efforts with DOH-funded community contractors to educate elected officials about the prevalence and impact of retail tobacco marketing and its impact on local youth and your community.
Mobilize community members to extend education efforts	 Community mobilization refers to engaging influential community members and organizations to advance community and policy-maker POS education efforts. A broad constituency must be committed to restricting retail tobacco marketing. Protecting youth is a primary goal of POS restrictions, and local youth and youth-focused organizations must be actively engaged in local POS activities. Low-income and racial/ethnic minority groups are disproportionately affected by retail tobacco marketing—engage organizations that represent these groups. Partners engaged through community mobilization must be able to provide clear POS educational messages to the media and elected officials.

ACHIEVEMENT:

Protecting youth from retail tobacco marketing supports the following Prevention Agenda objective:

Objective 2.1.3

By December 31, 2017, increase the number of municipalities that restrict tobacco marketing (including canceling store displays, limiting the density of tobacco vendors and their proximity to schools) from zero (2011) to 10.

Local Health Departments and their partners can include the above objectives in the Community Health Assessment (CHA), Community Health Improvement Plan (CHIP), and related initiatives.

Tracking performance/process measures can be important for reporting progress to stakeholders.

Short-Term Performance Measure

- Number of municipalities that restrict tobacco marketing in stores, including:
 - Tobacco display restrictions
 - Limiting the number, type and location of licensed tobacco retailers
 - Prohibiting the use of coupons and multi-pack discounts

Long-Term Performance Measures

- Percentage of any tobacco use (cigarettes, cigars, smokeless tobacco) by high school age students
- Percentage of cigarette smoking by adults ages 18-24 years

RESOURCES:

Ready to get started? These resources can help:

- The Center for Public Health & Tobacco Policy at New England Law | Boston:
 - Home page: http://tobaccopolicycenter.org
 - Retail Environment: http://tobaccopolicycenter.org/tobacco-control/retail-environment/
 - Tobacco Retail Licensing report:
 http://www.tobaccopolicycenter.org/documents/Licensing%20Report%20UPDATED%205-4-12%20with%20cover%20template.pdf
 - Tobacco Product Display Restrictions report:
 http://www.tobaccopolicycenter.org/documents/Display%20Report%203-2013.pdf
 - Tobacco Price Promotion Report: http://www.tobaccopolicycenter.org/documents/TR-COUPON%20FINAL.pdf
 - Cause and Effect: Tobacco Marketing Increases Youth Tobacco Use—Findings of the 2012 Surgeon General's Report: http://www.tobaccopolicycenter.org/documents/SGR%20NY%205-25-12.pdf
- Counter Tobacco A comprehensive resource for local, state, and federal organizations working to counteract tobacco product sales and marketing at the point of sale (POS). It is supported by the U.S. Centers for Disease Control and Prevention, Office on Smoking and Health, and the National Cancer Institute: www.countertobacco.org
- Winnable Battles Tobacco. Centers for Disease Control and Prevention (CDC): http://www.cdc.gov/winnablebattles/tobacco/index.html
- Guide to Community Preventive Services. Reducing tobacco use and secondhand smoke exposure.
 Centers for Disease Control and Prevention (CDC) and partners:
 www.thecommunityguide.org/tobacco/index.html
- Healthy People 2020 Tobacco. U.S. Department of Health and Human Services: http://www.healthypeople.gov
- Tobacco Control State Highlights 2012 Centers for Disease Control and Prevention (CDC): http://www.cdc.gov/tobacco/data_statistics/state_data/state_highlights/2012/sections/index.htm

CITATIONS:

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- vi. U.S. Department of Health and Human Services. Preventing Tobacco Use Among Youth and Young Adults: A Report of the Surgeon General, 2012.
- vii. Ibid.
- viii. NYS Tobacco Control Program. "Power Wall" Display of Tobacco Products by New York State Licensed Tobacco Retailers. New York State Department of Health, Tobacco Control Program. StatShot Vol. 5, No.1/January 2012.
 - $http://www.health.ny.gov/prevention/tobacco_control/reports/statshots/volume5/n1_display_of_tobacco_products_by_retailers.pdf$
- ix. Center for Public Health and Tobacco Policy. Point of Sale Tobacco Marketing—Disproportionately Targeting Vulnerable Populations. Center for Public Health and Tobacco Policy, New England Law | Boston, 2013.
 - http://www.tobaccopolicycenter.org/documents/Disparities%20Fact%20Sheet%20FINAL.pdf
- x. Armour BS, Finkelstein EA, Fiebelkorn IC. State-level Medicaid expenditures attributable to smoking. Prev Chronic Dis 2009;6(3):A84. http://www.cdc.gov/pcd/issues/2009/jul/08_0153.htm.