



Tobacco Retail Licensing: Protecting Youth from Tobacco and Nicotine

Tobacco Use in Our Community

The burden of tobacco use is felt in Oregon and in Deschutes County. Nearly one in five adults regularly smoke cigarettes.¹ About nine in ten adults who smoke daily started before age 18,² and nine in ten regret ever starting.² In 2014, \$50.3 million was spent on tobacco-related medical care.² Additionally, the cost in productivity losses due to premature tobacco-related deaths was \$40.3 million.² It is estimated that 68,000 kids who are under the age of 18 and currently living in Oregon will ultimately have a premature death from smoking.³

While the use of cigarettes among 11th graders in Deschutes County has declined to 9% in 2016, the use of e-cigarettes had increased to 19%.⁴ In 2016, Deschutes County 11th graders used all tobacco products (e-cigarettes, mods, vape pens, cigarettes, cigarillos, cigars, hookah, snus, snuff, pipe tobacco) more than their peers across Oregon.⁴

Tobacco Marketing Targeting Kids

The Tobacco Industry increased spending on marketing from \$8.37 billion in 2011 to \$9.17 billion in 2012.⁵ Since the 1998 Master Settlement Agreement restricted more traditional venues for advertising, such as bill-boards, TV, radio, and print media, the Tobacco Industry has channeled more resources into its new primary marketing channel – the retail environment.⁶ This is a public health concern because the more advertising that youth see, the more likely they are to use tobacco.⁷ Price discounts, flavored products and kid-friendly packaging are examples of marketing that appeal to kids.⁸

In Deschutes County:

- ◆ Three out of five 8th graders and two out of five 11th graders, visit convenience stores one or more times a week.⁹
- ◆ Seven out of ten 8th graders and eight out of ten 11th graders, saw tobacco advertising on a storefront or in a store.⁹
- ◆ One in five stores that sold flavored tobacco also had price promotions such as coupons or other price discounts.¹⁰
- ◆ One in five stores that sold flavored tobacco also placed tobacco within 12 inches of candy.¹⁰

Tobacco Retail Licensing



Currently in Deschutes County, retailers do not have to obtain a license to sell tobacco, resulting in various levels of compliance with local, state, and federal law. Deschutes County's non-compliance rate has been as high as 43%.¹¹ In the most recent 2014-2015 Food and Drug Administration (FDA) compliance inspections, nearly one in five stores sold tobacco to a minor.¹² During these inspections youth, under age 18, purchase tobacco products despite showing their identification. An FDA inspector reported all stores in one Deschutes County community failed to check any identification resulting in the sale to a minor. Tobacco retail licensure (TRL) is proven to reduce illegal sales to minors.¹³

Preventing adolescents from gaining access to tobacco requires a comprehensive and properly enforced TRL law. Additional policies that can be included in TRL, such as the restriction of retailer proximity to schools and prohibiting flavored nicotine products in places where youth frequent, can have an even bigger impact on youth initiation and health care expenses for chronic illnesses (e.g. cardiovascular disease, emphysema, cancer, etc.).^{14,15} These policy strategies are identified in the Central Oregon Regional Health Improvement Plan as ways to improve community health.

Implementing TRL locally will:

- ◆ Allow public health to reach tobacco retailers with information about laws and training resources tailored to the local community
- ◆ Provide an opportunity to create a fee structure that is effective and not economically detrimental to small businesses
- ◆ Allow the chosen enforcement agency to conduct frequent compliance inspections, instead of the sporadic state and federal inspections that currently take place
- ◆ Keep the revenue generated from licensing and penalty fees within Deschutes County

References

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- ² Portland State University Population Research Center 2014; Oregon Behavioral Risk Factor Surveillance System 2013; CDC Smoking Attributable Morbidity and Mortality Cost calculator 2013.
- ³ Campaign for Tobacco Free Kids. *Toll of Tobacco in Oregon*. 2016.
- ⁴ Oregon Health Authority, Public Health Division, Health Promotion and Chronic Disease Prevention. Oregon Student Wellness Survey. 2016. Available at: <https://oregon.pridesurveys.com/>
- ⁵ Campaign for Tobacco-Free Kids. 2015 March 30. *FTC Reports Tobacco Marketing Increased to \$9.6 Billion in 2012 – Efforts to Fight Tobacco Use Must Also Intensify*. Available at http://www.tobaccofreekids.org/press_releases/post/2015_03_30_ftc.
- ⁶ Wakefield M, et al. Tobacco Industry Marketing at Point of Purchase After the 1998 MSA Billboard Advertising Ban. *Am J Public Health* 2002;92(6):937-40.
- ⁷ U.S. Department of Health & Human Services. Prevention Tobacco Use Among Youth and Young Adults: A Report of the Surgeon General, 2012. Available at: http://www.cdc.gov/tobacco/data_statistics/sgr/2012/index.htm.
- ⁸ U.S. Department of Health and Human Services. *E-Cigarette Use Among Youth and Young Adults. A Report of the Surgeon General*. Atlanta, GA: U.S. Department of Health and Human Services, Centers for Disease Control and Prevention, National Center for Chronic Disease Prevention and Health Promotion, Office on Smoking and Health, 2016.
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- ¹⁰ Deschutes County Health Services Tobacco Prevention and Education Program. Retail Assessment. 2016.
- ¹¹ Oregon Health Authority. Public Health Division Promotion and Chronic Disease Section 2016; Oregon Annual Synar Reports 2007-2016.
- ¹² Food and Drug Administration. Inspection data: 2014-2015. Available at: https://www.accessdata.fda.gov/scripts/oc/inspections/e_insp_searching.cfm
- ¹³ The Center for Tobacco Policy and Organizing, The American Lung Association. *Tobacco Retailer Licensing is Effective*. August 2012.
- ¹⁴ Center for Public Health Systems Science. Point-of-Sale Strategies: A Tobacco Control Guide. St. Louis, MO: Center for Public Health Systems Science, George Warren Brown School of Social Work at Washington University in St. Louis and the Tobacco Control Legal Consortium, 2014.
- ¹⁵ Center for Public Health Systems Science. Point-of-Sale Report to the Nation: The Tobacco Retail and Policy Landscape. St. Louis, MO: Center for Public Health Systems Science, George Warren Brown School of Social Work at Washington University in St. Louis and the National Cancer Institute, State and Community Tobacco Control Research Initiative, 2014.



To request this document in an alternative format, please contact Penny Pritchard at (541) 322-7481 or pennyp@deschutes.org.