Public Health Policy

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Factors that Affect Health

Smallest Impact

Counseling & Education

Clinical Interventions

Long-lasting Protective Interventions

Changing the Context to make individuals' default decisions healthy

Socioeconomic Factors

Examples

Advice to eat healthy, be physically active

Rx for high blood pressure, high <u>cholesterol, d</u>iabetes

Immunizations, brief intervention, smoking cessation, colonoscopy

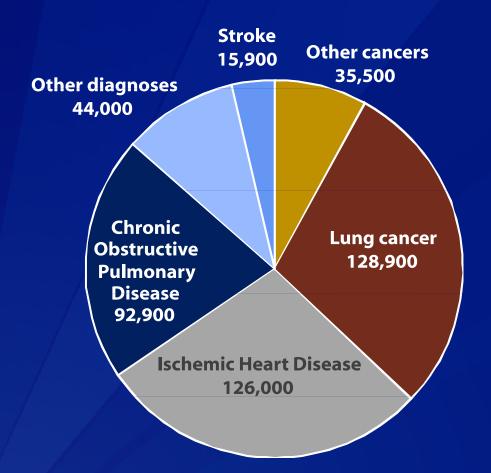
Fluoridation, 0g trans fat, iodization, smokefree, consumption tax

Poverty, education, housing, inequality

Largest Impact Problem

TOBACCO USE

Tobacco kills about 443,000 in the U.S. every year



EVERY YEAR:

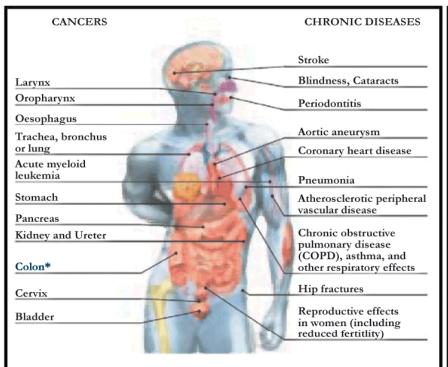
- \$96 billion in medical costs
- \$97 billion in lost productivity

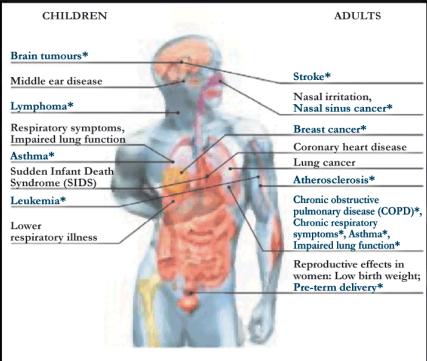
Average annual number of deaths, 2000-2004.

Source: Smoking-Attributable Mortality, Years of Potential Life Lost, and Productivity Losses – United States, 2000-2004. MMWR 2008;57(45):1226-1228.

Smoking and Secondhand Smoke Damages the Entire Human Body

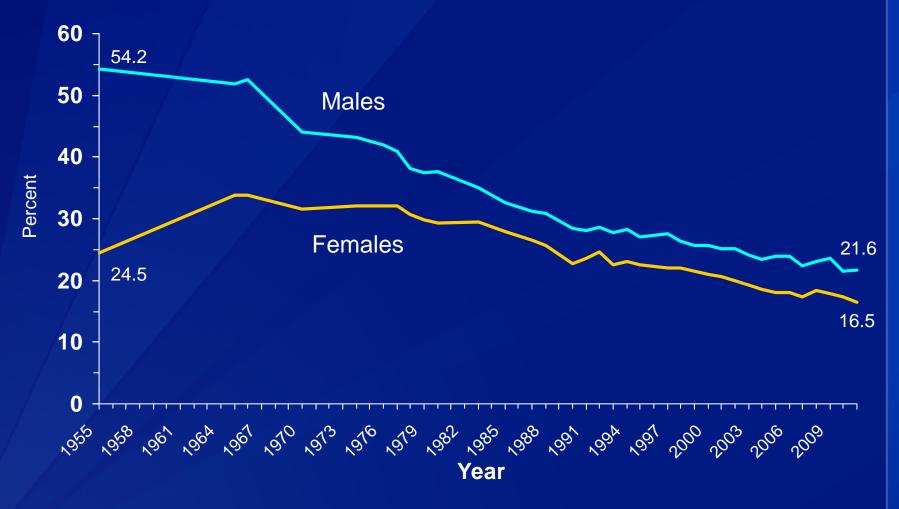






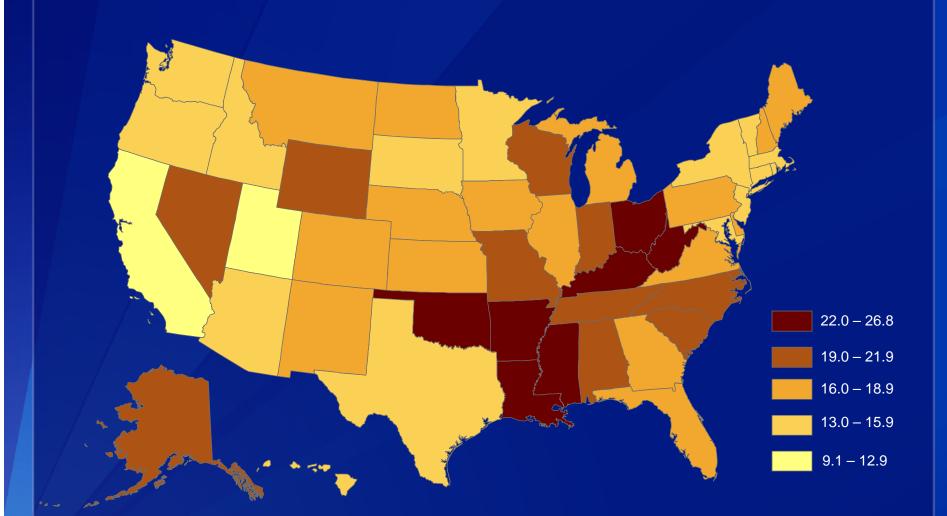
^{*} Evidence of causation: suggestive Evidence of causation: sufficient

Current Cigarette Smoking* Among Adults By Sex, U.S.—1955-2011

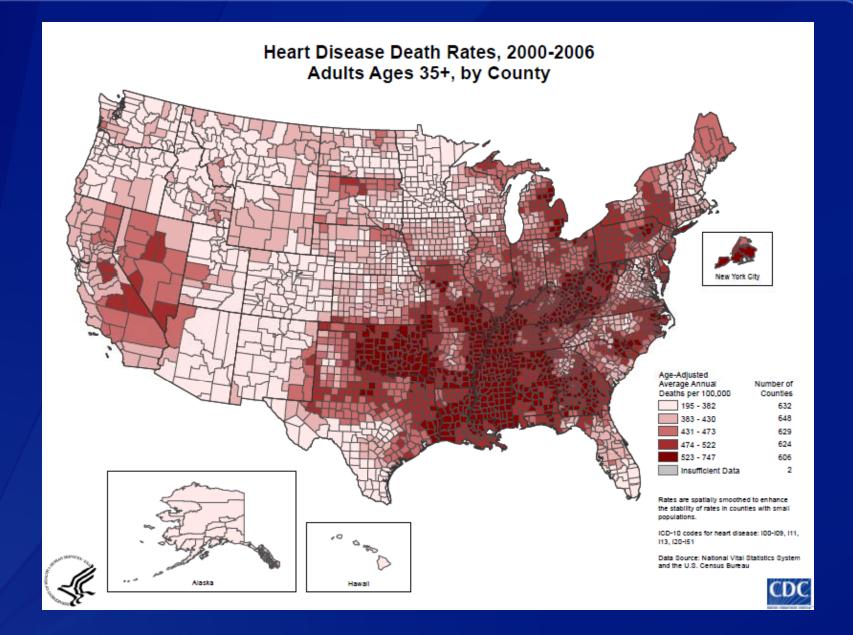


*Estimates since 1992 include some-day smoking. Sources: Current Population Survey; National Health Interview Survey





Note: Persons who have smoked at least 100 cigarettes in lifetime and currently smoke everyday or some days. Source: Behavioral Risk Factor Surveillance Survey, NCCDPHP, CDC.



For Tobacco We Know What Works: Evidence-Based Interventions

- 100% smoke-free policies
- Sustained funding of comprehensive programs
- Tobacco price increases
- Hard-hitting media campaigns
- Cessation access
- Comprehensive point of sale restrictions



Immediate impact of a comprehensive approach: youth and adult smoking rates in NYC



Source: BRFSS 1993 - 2001; NYC Community Health Survey 2002 - 2010; and NYC YRBS 2001 - 2010

HISTORY OF AN INTERVENTION:

COMPREHENSIVE SMOKE-FREE POLICIES

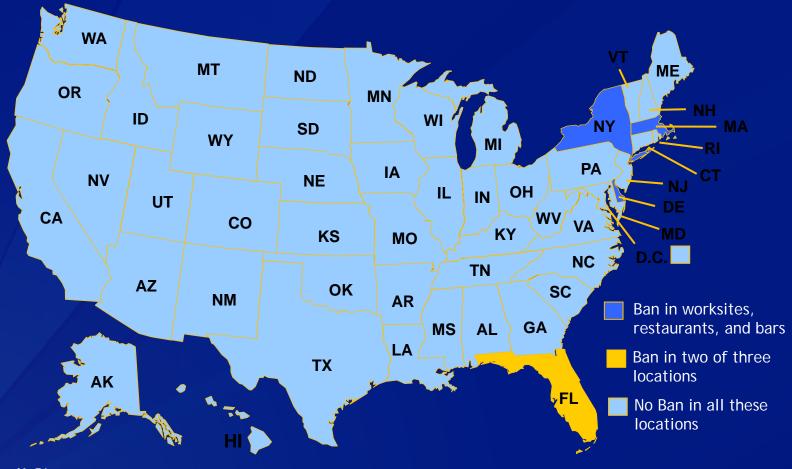
Problem: Health Effects of Secondhand Smoke

- Causes premature death and disease in children and nonsmoking adults
 - Adults
 - Heart disease
 - Lung cancer
 - Children
 - SIDS
 - Acute respiratory infections (bronchitis, pneumonia)
 - Middle ear disease (acute and recurrent otitis media, chronic middle ear effusion)
 - More severe asthma
 - Respiratory symptoms (cough, phlegm, wheeze, breathlessness)
 - Slowed lung growth

Solution: Comprehensive Smoke-free Policies

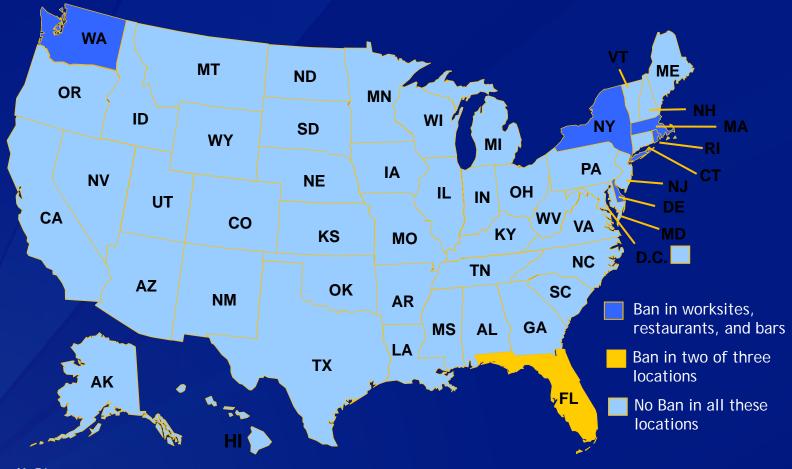
- The Surgeon General has concluded that the only way to fully protect nonsmokers from secondhand smoke (SHS) exposure is to prohibit smoking in ALL indoor areas
 - Separating smokers from nonsmokers, cleaning the air, and ventilating buildings cannot eliminate SHS exposure
- Effective smoke-free laws completely prohibit smoking in all indoor areas of public places:
 - Worksites
 - Restaurants
 - Bars

Laws in effect as of Dec 31, 2004



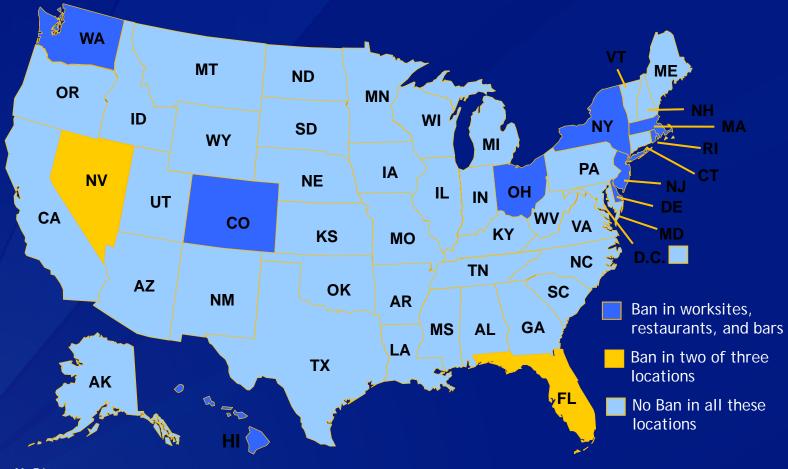
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Laws in effect as of Dec 31, 2005



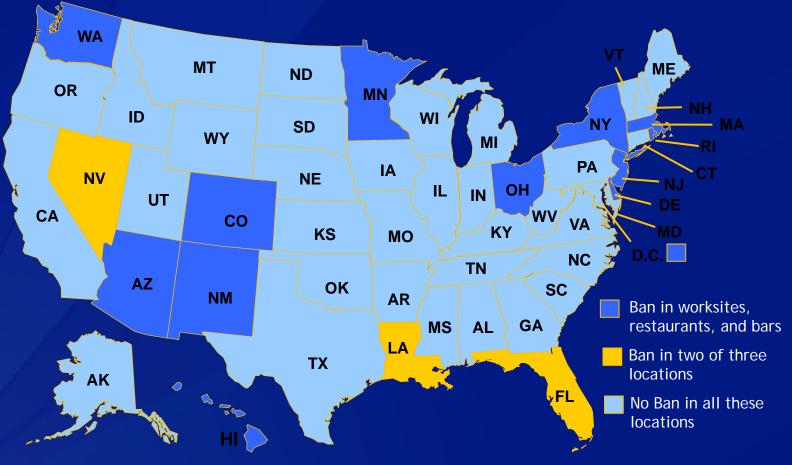
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Laws in effect as of Dec 31, 2006



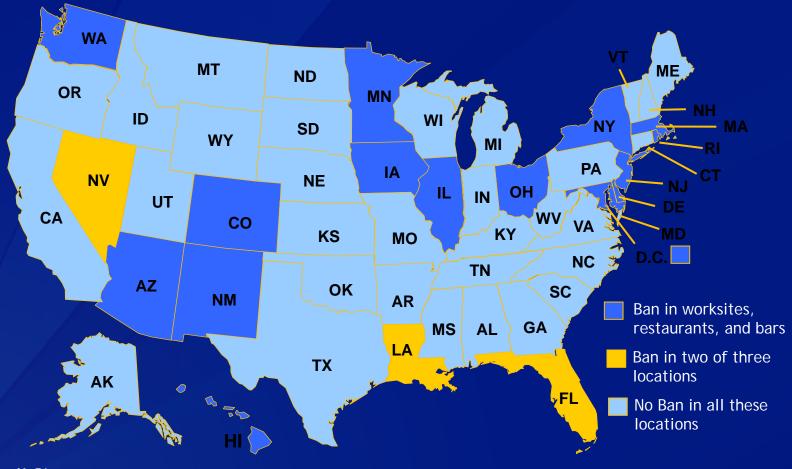
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Laws in effect as of Dec 31, 2007



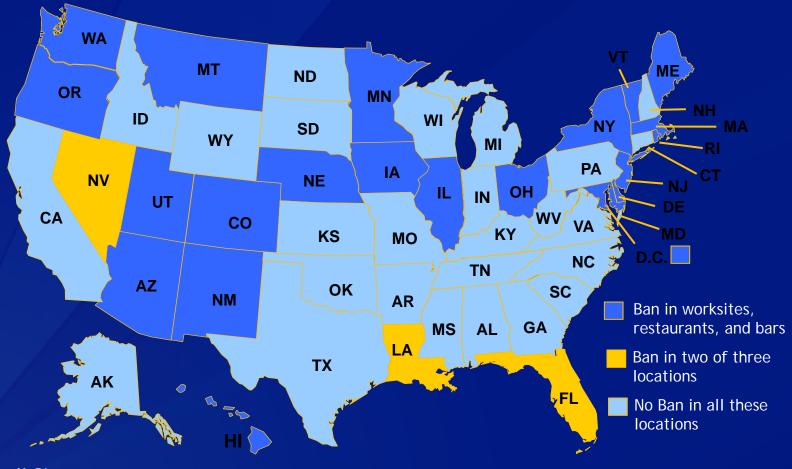
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Laws in effect as of Dec 31, 2008



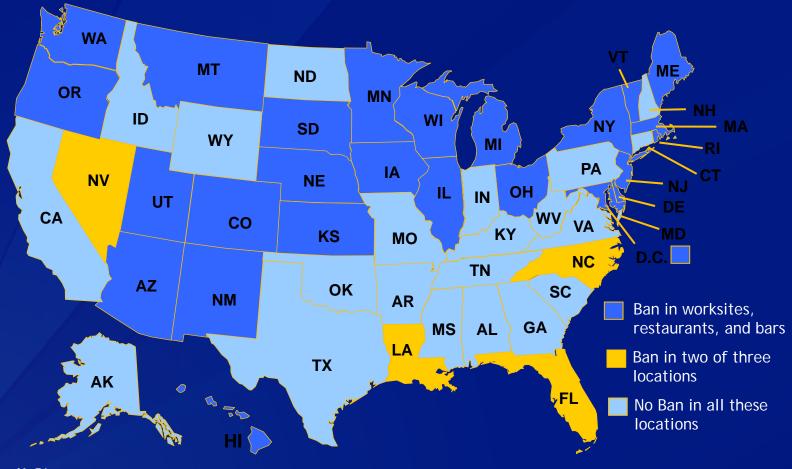
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Laws in effect as of Dec 31, 2009



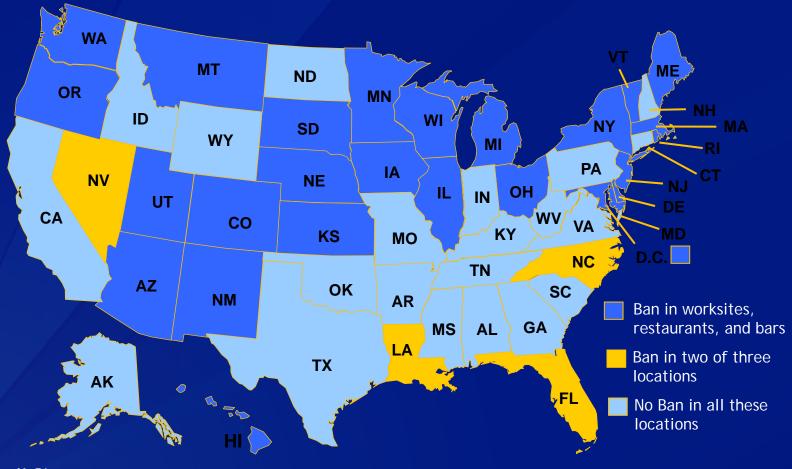
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Laws in effect as of Dec 31, 2010



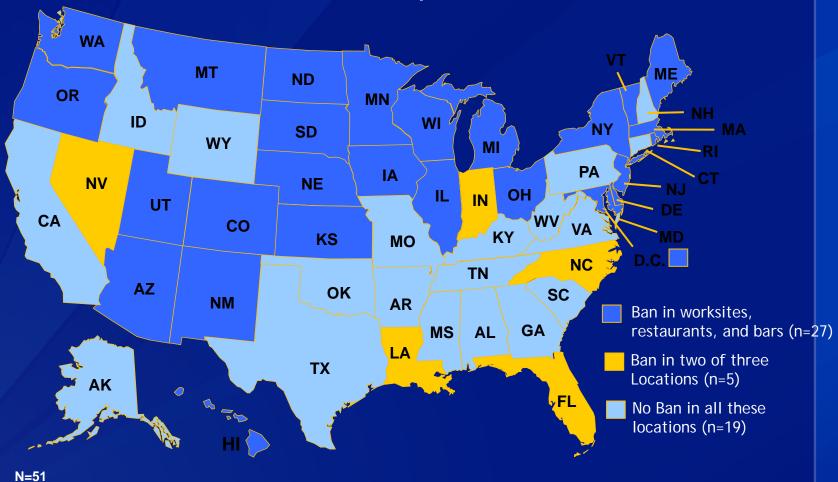
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Laws in effect as of Dec 31, 2011

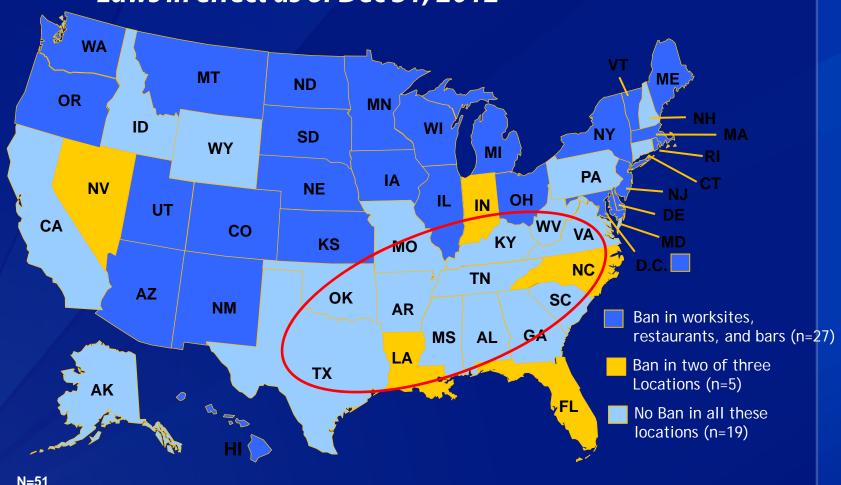


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Laws in effect as of Dec 31, 2012



Laws in effect as of Dec 31, 2012

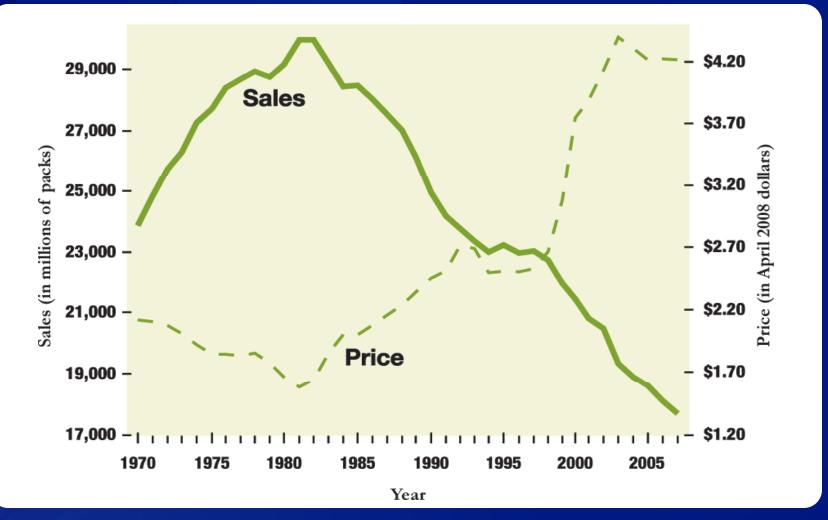


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BACKGROUND:

IMPACT OF MARKETING & PRICE

When cigarette prices increase, cigarette consumption/initiation decreases



Source: ImpacTeen Chartbook: Cigarette Smoking Prevalence and Policies in the 50 States.

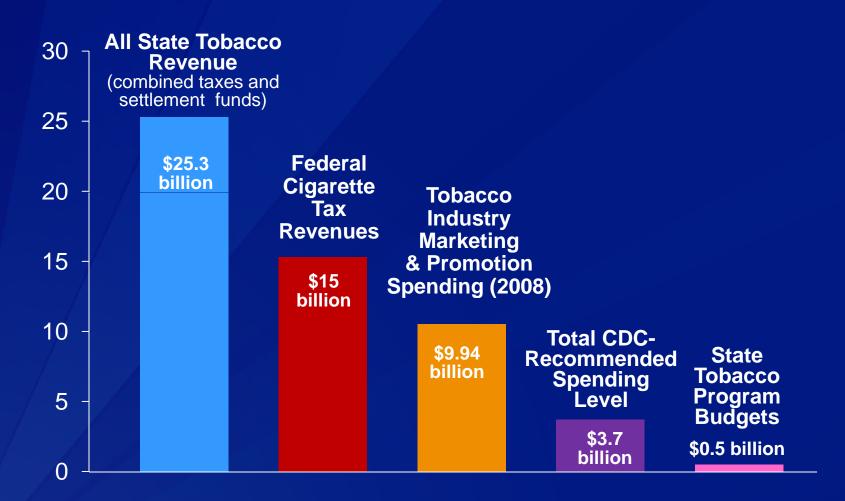
Interventions to Increase Price

- Primary Strategy: Increased Excise Taxes
 - State Excise Taxes
 - Local Excise Taxes (when allowed)

Alternative Strategies

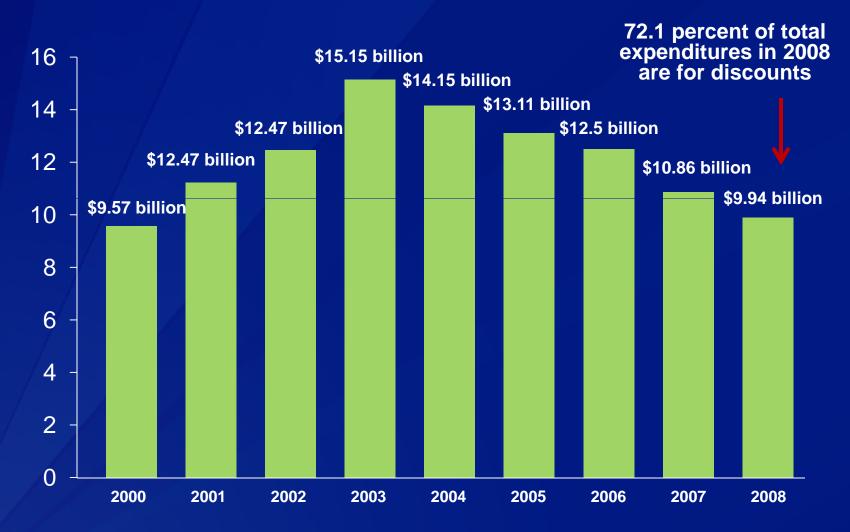
- State and Local Sales Taxes (when allowed)
- Litter Mitigation Fees
- Minimum Price Laws
- Point of Sale Interventions
 - Increased Retail License Fees
 - Discount Ban
 - Coupon Ban

Tobacco Industry is Outspending Prevention Efforts



Source: Campaign for Tobacco Free Kids, Federal Trade Commission, CDC Office on Smoking and Health

Cigarette Marketing Expenditures 2000-2008



Source: Federal Trade Commission Reports 2000-2008.

Point of Sale: Findings and Evidence from the 2012 Surgeon General's Report

- 88% of all first use of cigarettes for daily smokers occurs by 18 years of age, with 99% occurring by 26
 - Initiation is most likely to occur at age 15 or 16
- Tobacco companies use the retail environment extensively to advertise and stimulate sales of their products.
- Cigarette companies reach both current and future customers by advertising and promoting their products in stores; consumers, regardless of age, can be exposed to prosmoking messages in stores.
- Tobacco discounts increase sales by up to 30%.
- Youth and young adults are more sensitive than adults in general to advertising

SGR Findings Continued: Location Matters

- A study of retail outlets in 163 school areas found
 - stores close to schools have more exterior tobacco advertising than stores further away
 - stores where adolescents shop frequently have more cigarette marketing than other stores in the same community
- In California, 48% of stores had at least one cigarette marketing item at or below 3 feet from the floor and almost 25% had cigarette displays next to candy.
- Density of cigarette advertising in school neighborhoods is associated with smoking prevalence.

Other Specific Findings for Youth and Adults

- 11-14 year olds who visited convenience, liquor, or small grocery stores at least twice a week appear more than twice as likely to begin smoking as those who rarely visited such stores. (1)
- Experimental smoking among high school students was related to tobacco outlets density. (2)
- Residential proximity to tobacco outlets influences smoking cessation among adults. (3)
- 22% of retailers in Missouri and 51% in New York fall within 1000-foot buffers around schools (4).

Sources: 1) Henriksen, et al. A Longitudinal Study of Exposure to Retail Cigarette Advertising and Smoking Initiation, PEDIATRICS (2010); 2) McCarthy, et al. Density of Tobacco Retailers Near Schools: Effects on Tobacco Use Among Students. AJPH 2009. 3) Reitzel, et al. The Effect of Tobacco Outlet Density and Proximity on Smoking Cessation. AJPH 2011. (4) Luke, et al. Family Smoking Prevention and Tobacco Control Act: Banning Outdoor Tobacco Advertising Near Schools and Playgrounds. AJPM 2011.

EVIDENCE-BASED INTERVENTIONS:

POINT OF SALE POLICIES

Influence at the Point of Sale: Discounts, Advertising and Product Placement







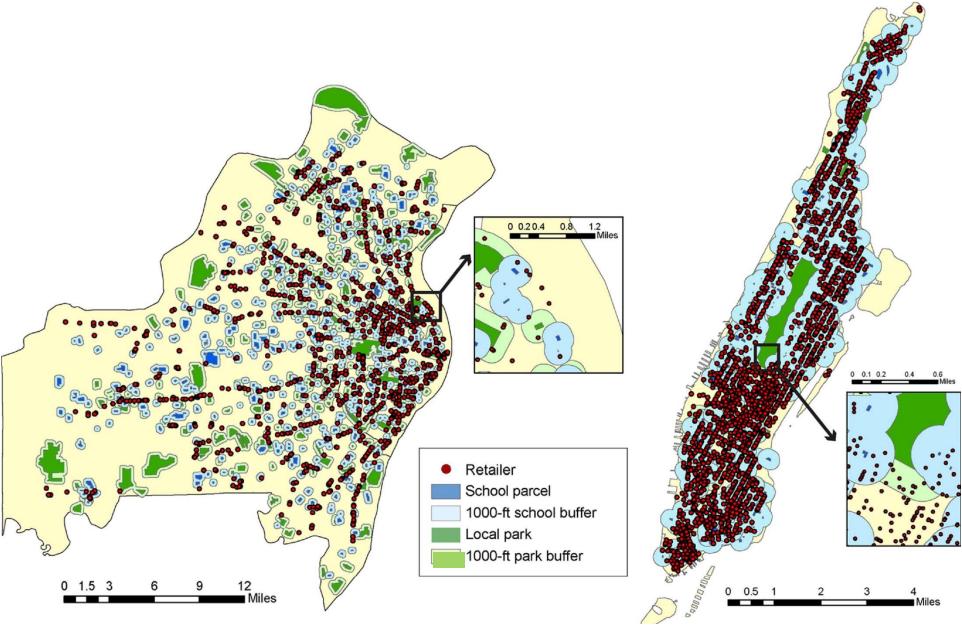
Point of Sale Strategies

- Comprehensive Licensing
 - Increased Annual License Fees
- Control Density, Location
- Control Type of Retailer (Pharmacy Ban)
- Prohibit Product Displays*
- Require Graphic Health Messages*
- Ban Discounts/Coupons
- Ban Flavorings
- *Caution: Know legal barriers



Point of Sale: Retailer Control

- Density
 - Cap on number of licenses in a community, zone
- Type
 - Prohibit sales in pharmacies
 - Prohibit sales in college campus stores
- Location
 - Restrict/Prohibit sales near schools, parks, etc.
 - Restrict how close retailers can be to each other



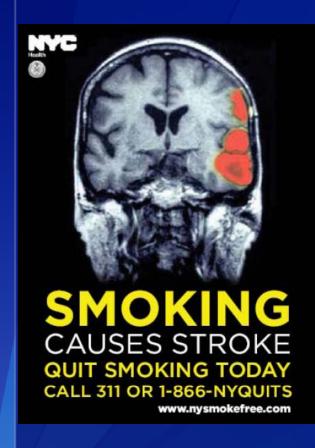
Source: Luke, Ribisl, Smith, Song (2011). Family Smoking Prevention and Tobacco Control Act: Banning Outdoor Tobacco Advertising Near Schools and Playgrounds. American Journal of Preventive Medicine, Vol. 40, Issue 3, 295-302.

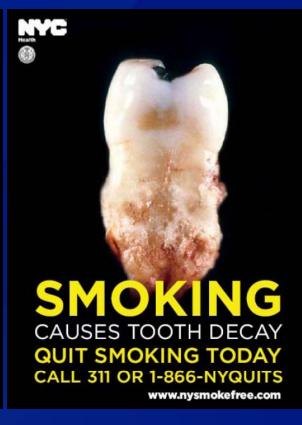
Point of Sale: Retail Display Bans





Point of Sale: Graphic Health Messages







Point of Sale: Discounts









Point of Sale: Flavor Ban

Myth: Tobacco companies are not allowed to sell candy flavored products



INDUSTRY REACTION

Samples of Recent Activity

- Pharmacy Sales Ban: San Francisco
 - Withstood Legal Challenge
- Flavor Ban: New York City
 - Withstood Legal Challenge
- Graphic Point of Sale Warnings: New York City
 - Overturned by District Court, Appeals Court
- Discount/Coupon Ban & Flavor Ban: Providence
 - Withstood Legal Challenge
- Powerwall Ban: Haverstraw, NY
 - Law repealed by city to avoid industry lawsuit

Lawsuits

- U.S. Smokeless Tobacco v. New York City (2009)
- Philip Morris v. City & Co of San Francisco (2009)
- Discount Tobacco City & Lottery, Inc. v U.S. (2010)
- 94th St. Grocery Corp. v N.Y.C. Board of Health (2011)
- N.Y. Association of Convenience Stores v. Village of Haverstraw, NY (2012)
- National Association of Tobacco Outlets v. City of Providence (2012)

Adaptations in Product Design



Source: Government Accountability Office. Tobacco taxes: large disparities in rates for smoking products trigger significant market shifts to avoid higher taxes. Report 12-475.

Public Health Policy

THANK YOU

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