

Rapid Health Impact Assessment:

The Effects of Tobacco Retail Licensing on Youth Usage in a Rural Community

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What is a Health Impact Assessment?

A combination of procedures, methods and tools by which a policy, program or project may be judged as to its potential effects on the health of a population, and the distribution of those effects within the population.

-National Research Council (2011)

“Improving health in the United States: The role of Health Impact Assessment”

Overview of Health Impact Assessment

- Guided by the WHO definition of health as “a state of complete physical, mental and social well-being and not merely the absence of disease or infirmity”.
- Aims to ensure:
 - Participation in a transparent process for policies that affect their health
 - Both positive and negative impacts are shared equitably across a community
 - Both short and long term impacts are considered
 - Different scientific disciplines and methodologies are used to get as comprehensive an assessment as possible

HIA is a structured but flexible process that helps decision-makers understand the direct and indirect health impacts of their work

HIA Strengths



- Using a broad understanding of health
- Wide range of evidence



- Highlights the unknown, under-recognized, or unexpected



- Emphasis on vulnerable populations
- Intersectoral collaboration
- Supports sustainable development

HIA Challenges



- Define health and the boundaries of health
- Balance timeliness with a thorough review of evidence
- Produce quantitative estimates of health effects
- Synthesize conclusions on dissimilar health effects
- Engage stakeholders
- Ensure the quality and credibility of HIA
- Manage expectations

Defining the Problem



In Oregon, more than 3,800 kids get hooked on tobacco every year, or about two school buses full of children for every week of school. **One-third of these kids** have started an addiction that will eventually kill him or her.

Every day 10 kids start to smoke.



7,000 adults die every year from smoking. 88% of them started smoking before the age of 18.



Tobacco remains the **number one preventable cause of death in Oregon.**



Tobacco is a drain on the state's pocketbook. **Tobacco use costs the state of Oregon over \$1 billion each year in direct medical expenditures.**

\$137M annual tobacco industry spending in Oregon

KLAMATH

County Tobacco Fact Sheet 2013

Tobacco's toll in one year

10,300

NUMBERS ARE ROUNDED

ADULTS
REGULARLY
SMOKE
CIGARETTES

3,590

NUMBERS ARE ROUNDED

PEOPLE
SUFFER FROM
A SERIOUS ILLNESS
CAUSED BY TOBACCO

184

PEOPLE DIED FROM TOBACCO

\$34.7

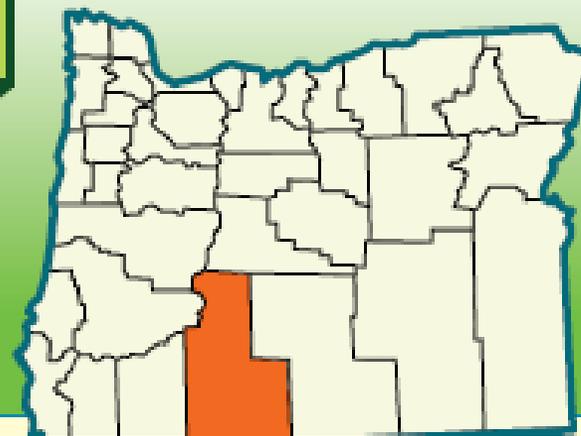
MILLION

SPENT ON MEDICAL CARE

\$30.4

MILLION

IN PRODUCTIVITY LOST DUE TO
TOBACCO-RELATED DEATHS



YOUTHS	14,749
ADULTS	51,831
TOTAL RESIDENTS	66,580



Tobacco Retail Assessment



36.6 percent of 11th graders report using tobacco, the highest number of all Oregon counties.

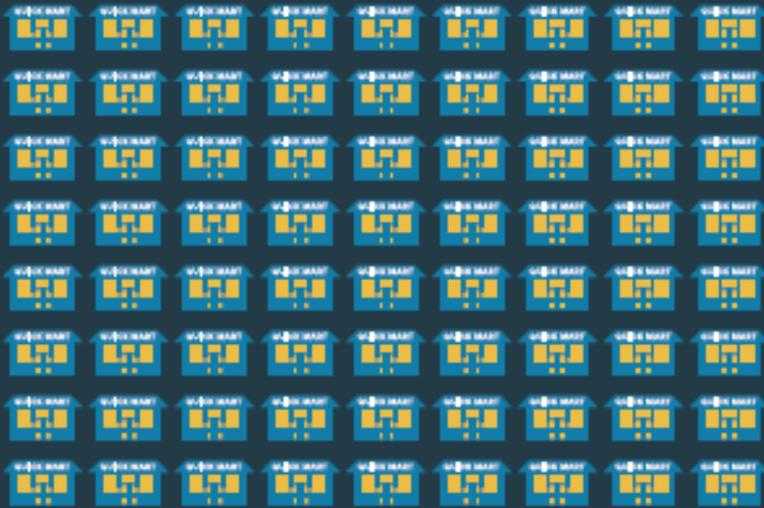


In Klamath County it takes only **three attempts for teens to successfully purchase tobacco**. In Oregon the average is five attempts and nationally the average is ten.



At least one type of flavored tobacco product was **available in every single store**.

72 TOBACCO RETAILERS

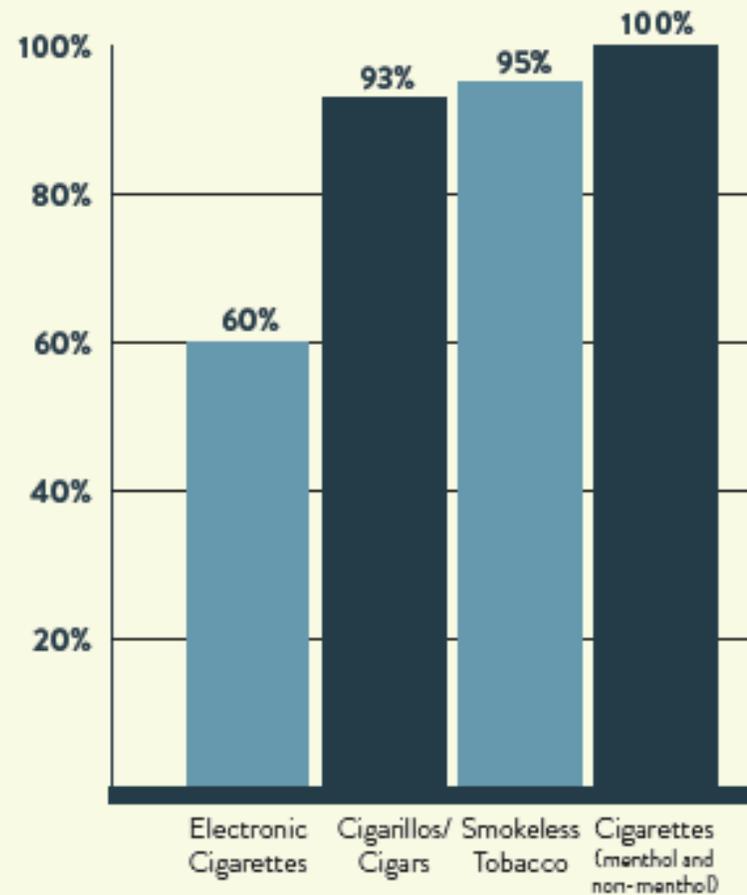


**24 TIMES MORE TOBACCO
RETAILERS THAN THE 3
MCDONALDS IN THE COUNTY**



TOBACCO AVAILABILITY

(Percentage of stores selling these products.)



Our HIA

- ❖ Rapid HIA
- ❖ Build on Tobacco Retail Assessment
- ❖ Look at youth tobacco use and the effect of built environment and exposure
- ❖ Tobacco Retail Licensing Options

HIA Findings

- **According to literature, price increases for tobacco products lead to lower rates of tobacco use by all users, including youth.**
- **A licensing fee by itself would probably not impact the price of tobacco products.**
- **A licensing fee would be unlikely to discourage retailers from selling tobacco or result in lost revenue.**
- **It is relatively easy for youth in Klamath County to purchase tobacco from some retail outlets**
- **Effective enforcement of sales-to-minors laws, when coupled with other youth focused education and programs, can reduce youth tobacco use rates**
- **Youth living in close proximity to tobacco retail outlets are more likely to use tobacco**

HIA Recommendations

➤ **Adoption of Tobacco Retail Licensing Ordinance**

- Should not be adopted as a stand-alone policy
- #1 recommendation is to adopt all 3 policies
- Will allow accurate retailer records for the County
- Will add incentive to compliance
- Will be formatted as a sustainable policy for enforcement and education

➤ **Density Cap on Tobacco Retailers**

- Current retailers grandfathered in
- Will lower density of retailers over time
- Will decrease targeting of low-income and at-risk populations

➤ **School Buffer Zone**

- Research shows this to be the least effective of the policies studied
- Decrease social norm of smoking and access
- Current retailers grandfathered in

HIA Successes

- 1st HIA completed regarding youth tobacco use
- Training in HIAs for staff and students
- Gathered significant data to support a change
- Learned more about the resources and needs of our community, regarding youth tobacco use
- Positive response from the retailers and decision-makers interviewed

HIA Challenges

- Off-site consultant
- Time and resource constraints
- Lack of literature on some subjects
- Unfamiliarity with the process, initially
- Managing expectations

Next steps and questions raised:

- Pursue Tobacco Retail Licensing as a beneficial policy for the community – including density and zoning requirements
- Consider an HIA with a larger scope/timeline
- Consider HIA as a process for questions we were not able to address
 - Flavored products
 - Coupons
 - E-cigarettes



Any Questions?

For more information:

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