

Retail Assessment of Klamath County: Tobacco, Foods, Alcohol, and Lottery



Conducted By Klamath County Public Health

Tobacco Prevention and Education Program

2014



Acknowledgements

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Executive Summary

Research shows that genetics account for only 20 percent of our health while environment and lifestyle behaviors account for 80 percent. It is the responsibility of Klamath County Public Health (KCPH) to monitor the health of our community, identify underlying causes of poor health outcomes, and take steps to address them.

In February 2014, KCPH's Tobacco Prevention and Education Program (TPEP) collaborated with Oregon Health and Science University's Nursing Program and conducted a retail environment assessment to understand the landscape of our retail environment and how it affects our health. The purpose was to, identify areas of improvement and strategize on ways to create a healthier Klamath County. Results of this retail environment assessment will be used to inform decision-makers and stakeholders in the community, raise awareness, and serve as a call to action.

The primary focus of this assessment was on tobacco, but alcohol, food and energy drinks, and lottery were also assessed. Density of retailers, availability and placement of products, advertising, and pricing were assessed, as research shows these factors to contribute to health behaviors. Special attention was paid to youth and how the retail environment influences their perceptions and future health behaviors.

Background Information:

- One in five adults in Klamath County smoke cigarettes and over \$34 million is spent on tobacco-related medical care.
- Thirteen percent of 8th graders have used tobacco in the past 30 days—nearly double the state average
- 36.6 percent of 11th graders report using tobacco—the highest percentage in all Oregon counties
- More than 1 in 10 adults in Klamath County are low income and have low access to a supermarket or grocery store
- In Klamath County, over 60 percent of adults, 34 percent of 11th and 8th graders, and 12 percent of preschoolers are overweight or obese

Key Findings:

- Klamath County has 72 tobacco retailers and nearly 1 in 2 tobacco products or advertisements were strategically placed in ways that are appealing to children
- 57 percent of retailers surveyed sold fresh fruit whereas 97 percent sold chips, cake, or cookies. However, a variety of other healthy options were available such as juice and granola
- 91 percent of stores sold energy drinks, and nearly 1 in 2 products or advertisements appealed to children
- 97 percent of retailers surveyed sold alcohol and 80 percent displayed positive signage highlighting age restrictions for purchasing alcohol
- 77 percent of the stores that sold lottery had lottery products available at the cash register

Introduction

Traditionally, health was thought of as something you got at the doctor's office, but now we know that health starts where you live, learn, work, and play. Currently, Klamath County's health rankings are very low, coming in last at 33 out of 33 Oregon Counties in a comprehensive analysis of health outcomes¹. Tobacco use, obesity, and alcohol abuse are the top three leading causes of *preventable* death in the U.S., the State of Oregon, and Klamath County^{2, 3}.

The goal of public health is to create a community where people can thrive by making the healthy choice the easy choice. The purpose of this assessment was to determine the influence the retail environment has on the health of Klamath County residents, focusing primarily on our number one killer--tobacco.

The project assessed the availability, product placement and advertisement of tobacco, healthy and unhealthy foods, alcohol, energy drinks, and lottery. Special attention was also paid to youth, as they are impressionable and still developing. Nearly 70 percent of adolescents shop in convenience stores on a weekly basis or more,⁴ where they are exposed to a tidal wave of advertisements and unhealthy options. Research shows that health behaviors are influenced by the availability, placement, and marketing of products⁵. In regards to tobacco, these strategies create social norms, undermine quit attempts, keep current users addicted, and attract new, young users. The same can be said about health behaviors related to food, alcohol, energy drinks, and lottery.

Klamath County's noncompliance rate for selling tobacco to minors is 32%-- three times the national rate

Tobacco:

In Klamath County one in five adults smoke cigarettes and over \$34 million dollars are spent on tobacco-related medical care annually⁶. Even more worrisome are our staggering rates of youth tobacco use. Thirteen percent of 8th graders have used tobacco in the past 30 days—nearly double the state average—and 36.6 percent of 11th graders report using tobacco, the highest percentage of all Oregon counties⁷. Research shows that 88 percent of smokers pick up the habit



¹ Robert Wood Johnson Foundation. 2014 County Health Rankings and Roadmaps. Accessed from: <http://www.countyhealthrankings.org/app/oregon/2013/klamath/county/outcomes/overall/snapshot/by-rank>

² Oregon overweight, Obesity, Physical Activity and Nutrition Facts. 2013. Accessed from: https://public.health.oregon.gov/preventionwellness/physicalactivity/documents/oregon_panfactst_2012.pdf

³ Centers for Disease Control. Excess Alcohol Use. 2011. Accessed from: <http://www.cdc.gov/chronicdisease/resources/publications/aag/alcohol.htm>

⁴ Tobacco Control Legal Consortium. 2012. Cause and Effect: Tobacco Marketing Increases Tobacco Use, Findings from the 2012 Surgeon General's Report.

⁵ National Center for Chronic Disease Prevention and Health Promotion (US) Office on Smoking and Health. 2012. "Social, Environmental, and Genetic Influences on the Use of Tobacco Among Youth." Accessed from: www.ncbi.nlm.nih.gov/books/NBK99236/?report=printable.

⁶ Oregon Health Authority. 2011 and 2013 Klamath County Tobacco Fact Sheets.

⁷ Oregon Healthy Teens survey. 2013.* combined results for cigarettes, menthol, smokeless tobacco, cigars, hookah, dissolvable tobacco, or electronic smoking devices

before age 18 and Big Tobacco spends billions of dollars annually on marketing to make our youth lifetime customers⁸. Because of the marketing restrictions for tobacco 95 percent of the tobacco industry's \$8 billion dollar marketing budget is spent on point-of-sale annually⁹. This includes price promotions, advertisements, and product placement. Their strategies entice youth to initiate tobacco use, keep current users addicted, and undermine quit attempts.

Oregon is one of only eleven states that do *not* require tobacco retailers to operate under a license or permit, so tobacco sales are going unregulated. It is illegal to sell tobacco to minors under 18 years of age, but when Klamath County is put to the test it repeatedly falls short. To test tobacco retailers' compliance with the Synar Amendment¹⁰, Oregon annually conducts random checks by sending in adolescent decoys to try to purchase tobacco. Nationally, it takes teens an average of 10 attempts before successfully purchasing tobacco—in Oregon it takes less than 5. In Klamath County it takes only 3 attempts, making Klamath one of the easiest counties for minors to successfully purchase tobacco.

Obesity:

Access to nutritious food is an important factor making healthy choices, but too often healthy choices must be sought out. More than 1 in 10 adults in Klamath County are low income and have low access to a supermarket or grocery store¹¹. Neighborhood corner stores are filled with low-cost fast foods and sugary drinks with little nutritional value.

In Klamath County, over 60 percent of adults, 34 percent of 11th and 8th graders, and 12 percent of preschoolers are overweight or obese¹². Less than one in three adults and adolescents are getting the recommended 5+ servings of fruits and vegetables each day¹³. Inadequate nutrition and unhealthy habits are a major concern as the weight of the nation and chronic diseases continue to rise. Youth are particularly vulnerable, as their bodies and eating habits are still developing, which can affect their health outcomes as they mature.

Special attention was paid to energy drinks because there is a growing body of evidence showing the dangers of energy drinks. According to the CDC, "Energy drinks contain caffeine that ranges from 50 mg to 500 mg per can or bottle (compared with the average can of cola that has 35 mg), as well as other ingredients aimed at boosting energy. When used in excess, they can cause health problems such as elevated blood pressure and dehydration because of their high caffeine content. The American Academy of Pediatrics in 2011 recommended against energy drink intake by adolescents given their possible adverse health effects."¹⁴

The Federal Drug Administration's adverse events reports show that 34 deaths have been linked to energy drinks and 54 hospitalizations due to high blood pressure, convulsions, and heart attacks¹⁵.

⁸ Surgeon General's Report 2012

⁹ Federal Trade Commission. 2011. Cigarette Report.

¹⁰ requires states to have laws in place prohibiting the sale and distribution of tobacco products to persons under the age of 18 and to enforce those laws effectively.

¹¹ HealthyKlamath.org

¹² HealthyKlamath.org; Oregon Healthy Teens Survey 2013.

¹³ HealthyKlamath.org; Oregon Overweight, Obesity, Physical Activity and Nutrition Facts. 2012.

¹⁴ CDC. 2014. Youth Perceptions About Energy Drinks. Accessed from: <http://content.govdelivery.com/accounts/USCDC/bulletins/a8e782>

¹⁵ Center for Science in the Public Interest. 2014. Accessed from: <https://www.cspinet.org/new/201406251.html>

Furthermore, factors associated with energy drink intake among young people include alcohol use, decreased vegetable and fruit consumption, and increased fast food consumption¹³.

Alcohol:

As the third leading cause of preventable death, alcohol is strongly correlated with chronic diseases such as liver cirrhosis, pancreatitis, and cancer. It is also associated with risky behaviors causing unintentional injuries (i.e. car accidents), unprotected sex (i.e. pregnancies, sexually transmitted disease), and alcohol poisoning³. Alcohol abuse also has negative social consequences such as violence, failure to meet responsibilities at home, school, or work, legal issues, and relationship strain.

Again, youth are of primary concern because of their curiosity, social pressure, and inexperience with alcohol. According to the Centers for Disease Control, alcohol is the most commonly used and abused drug among youth in the United States and is responsible for more than 4,700 annual deaths among underage youth¹⁶. In Klamath County*, 41 percent of 8th graders and 75 percent of 11th graders have tried alcohol, and 14 and 38 percent respectively have consumed alcohol in the past 30 days¹⁷.

Lottery:

According to the National Council of Problem Gambling, problem gambling is “gambling behavior which causes disruptions in any major area of life: psychological, physical, social or vocational”¹⁸. Data on lottery and gambling is scarce for Klamath County, which prompted its inclusion in this assessment.

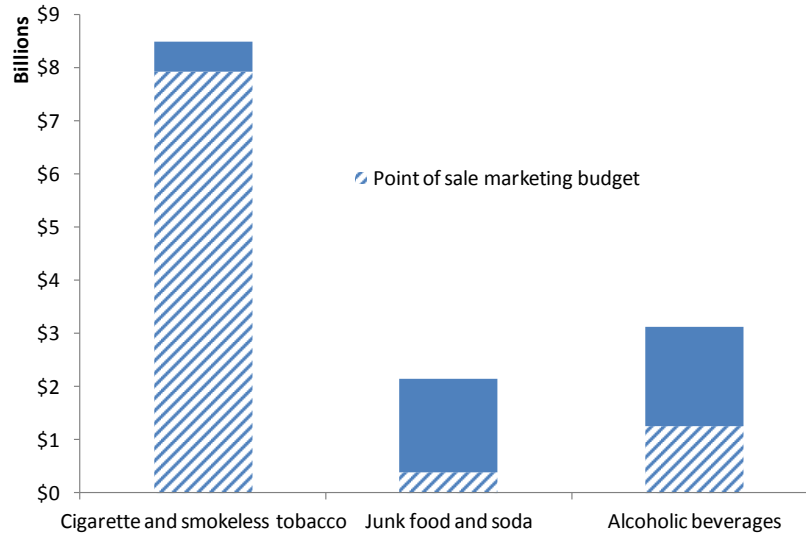
Point of Sale:

The tobacco, junk food, and alcohol industries spend billions of dollars on marketing whether it is on sponsorships, audiovisual and printed advertisements, price promotions, or product placements. This retail assessment focused solely on the point of sale—what you see when you go near or in the establishment. As the below graph depicts, the tobacco industry is outspending the other industries and is saturating the point of sale.

¹⁶ CDC. 2012. Alcohol and Public Health: Underage Drinking. Accessed from: <http://www.cdc.gov/alcohol/fact-sheets/underage-drinking.htm>

¹⁷ Oregon Healthy Teens Survey. 2013. *Due to small sample sizes, Klamath and Lake Counties were combined for more robust results.

¹⁸ National Council on Problem Gambling. Accessed from: <http://ncpgambling.org/i4a/pages/index.cfm?pageid=3286>



Source: Oregon Health Authority

Methodology

Klamath County Public Health’s (KCPH) Tobacco Prevention and Education Program (TPEP) coordinated this retail environment assessment. TPEP staff first created the survey by consulting several public health professionals and combining various survey tools. The Standard Tobacco Assessment for Retail Settings (STARS) is a survey tool developed by a national work group for standardization of tobacco retail assessments across the United States. KCPH piloted this survey in order to gather standardized data that will be comparable to other counties across the nation. Included in the STARS survey was a training PowerPoint and Pocket Guide Book to ensure consistent data collection.

The STARS survey only assesses tobacco and KCPH wanted a more comprehensive survey that would provide richer data to describe the retail environment. KCPH consulted Linn and Clackamas County TPEP coordinators who had previously conducted retail environment assessments and used their surveys as a template. Once a final survey was created that included the STARS survey along with questions about healthy food, alcohol, energy drinks, and lottery, it was vetted by an Oregon Health Authority data analyst.

Since the primary focus was on tobacco, only tobacco retailers were selected as survey locations. Because Klamath County does not require tobacco retailers to have a license or permit, there is no definitive list of tobacco retailers in the county. To obtain a primary list of tobacco retailers, KCPH consulted the Substance Abuse and Mental Health Services Administration (SAMHSA) division of the Oregon Health Authority, which conducts the annual Synar compliance checks. However, this was an incomplete list so additional tobacco retailers were identified by initial visits to stores and phone calls. Once all locations were identified, retailers were notified by letter of the upcoming assessment and

were given the opportunity to opt out. Unfortunately several tobacco retailers were identified after results were compiled, so the sample was not comprehensive.

Data collection was conducted by TPEP staff, Jennifer Little and Molly Jespersen, and the 2016 Class of Oregon Health and Science University Klamath Falls Campus nursing students. Data collectors received training on the data collection tool and worked in pairs to ensure consistent data collection. At the beginning of each assessment, data collectors would introduce themselves to the store clerk or manager and present a copy of the letter they received explaining the project.

The data collection period was from January to February of 2014. Each assessment took approximately 15 to 20 minutes depending on the size of the store. All data were inputted into iPads and analyzed by an Oregon Health Authority data analyst.

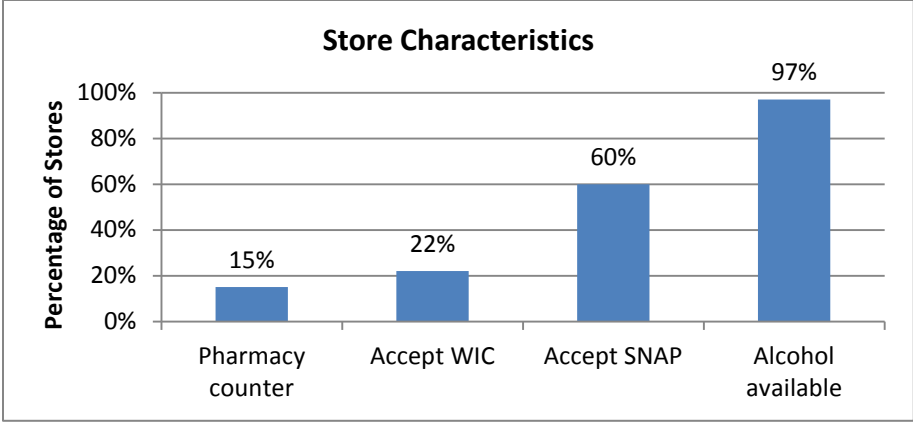
Retailer Overview

A total of 72 tobacco retailers were identified and 59 of them participated in the assessment. Most of the retailers were located in Klamath Falls, but outlying communities were also assessed including: Beatty, Bly, Bonanza, Chemult, Chiloquin, Crescent, Crescent Lake, Gilchrist, Keno, Merrill, and Midland.

Majority of stores were convenience stores, but some liquor stores, drug stores/pharmacies, grocery stores, mass merchandisers, tobacco shops, and other specialty stores were assessed. Bars that sell tobacco were not included because minors are not able to enter the premises. The table below shows the number of tobacco retail outlets assessed by store type.

Number of Tobacco Retail Outlets Assessed by Store Type		
<i>STORE TYPE</i>	<i>NUMBER OF STORES</i>	<i>PERCENT OF STORES</i>
Convenience Store- with or without gas	35	59%
Grocery Store	13	22%
Tobacco Shop	4	7%
Mass Merchandiser	3	5%
Liquor Store that sells tobacco	2	3%
Drug Store or Pharmacy	1	2%
Other (kiosk, specialty store etc.)	1	2%
TOTAL	59	100%

Store characteristics play a role in health behaviors and also influence the type of demographic that frequent the store. Women, Infants, Children (WIC) and Supplemental Nutrition Assistance Program (SNAP) are federal programs that offer food assistance to those who are low income or nutritionally at risk. Presence of a pharmacy counter and availability of alcohol were also included, as those influence health behaviors—both positively and negatively respectively. The graph below shows store characteristics.



Results- Tobacco

Research shows that youth who are exposed to more tobacco advertisements or live in areas with high retailer density are more likely to experiment and have favorable attitudes towards tobacco^{19,20}.

Consider the social math: there are 24 times more tobacco retailers than McDonalds in Klamath County.



At the end of the document you will find maps showing the retail density for the county and for Klamath Falls. Maps of smaller, outlying communities are available upon request.

¹⁹ National Center for Chronic Disease Prevention and Health Promotion (US) Office on Smoking and Health. Preventing Tobacco Use Among Youth and Young Adults: A Report of the Surgeon General. Atlanta (GA): Centers for Disease Control and Prevention (US); 2012. Social, Environmental, Cognitive, and Genetic Influences on the Use of Tobacco Among Youth.

²⁰ Tobacco Legal Consortium. 2014. Point of Sale Strategies: A Tobacco Control Guide.

Advertising and Product Placement



The tobacco industry pays for advertising to build brand recognition and promote the social norm that tobacco is prevalent and acceptable. Over 1 in 4 retailers displayed a tobacco product within 12 inches of toys, candy, gum, soda machine, or ice cream and 1 in 3 displayed advertisements within 3 feet of the floor, at child's eye level. **Taken together, 1 of every 2 tobacco product and advertisement exposure may be appealing to children.**



Impulse buys are also a major money-maker, so it was not surprising to find that 8 in 10 tobacco retailers had a wall or shelf of cigarettes on display within 3 feet of the checkout stand and nearly half displayed advertising outside of the store. While keeping tobacco products close to the counter is a good way to prevent theft, it is also a common means by which youth are exposed to and obtain tobacco. These tactics can also undermine quit attempts for those who are trying to quit, build brand recognition, and create social norms.

Positive Signage

Prohibiting tobacco sales to minors is an important responsibility for retailers. Nearly all stores (97%) displayed a sign asking for identification or a warning against purchasing tobacco for minors. However, recall that results of the Synar checks demonstrated a high noncompliance rate of selling tobacco to minors.



Product Availability

Product availability plays a big role in tobacco consumption. Of the 72 stores assessed, 100 percent sold traditional and menthol cigarettes and a majority sold smokeless tobacco and little cigars or cigarillos.

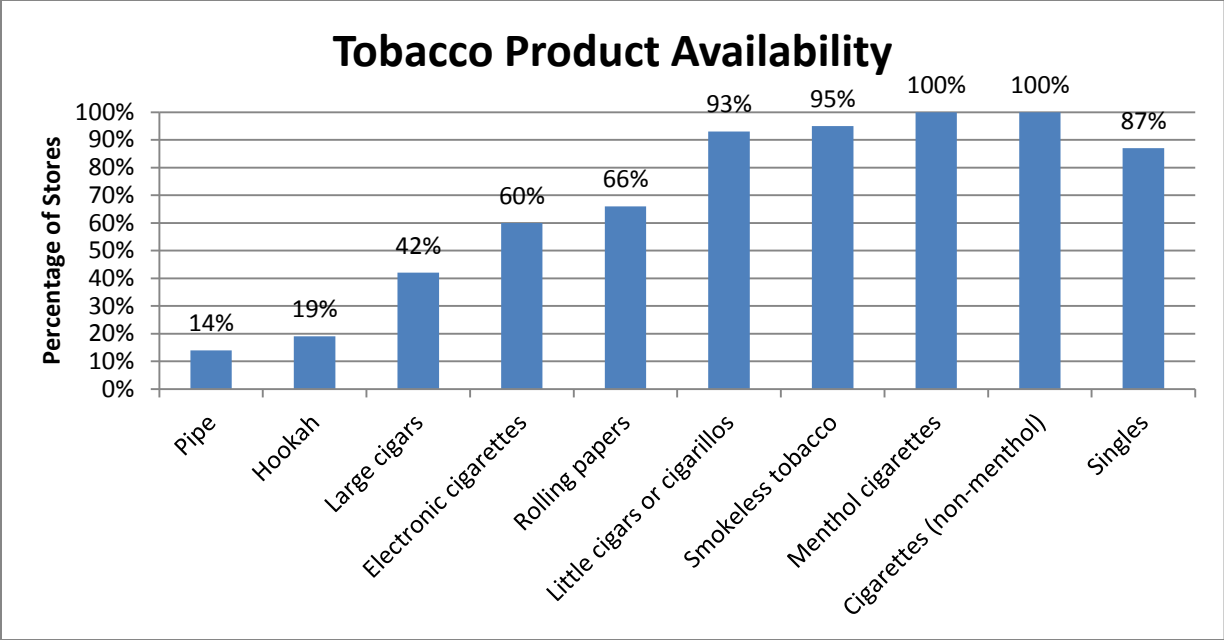
A newer product that is gaining popularity is the electronic cigarette, which was found in 60 percent of tobacco retail stores. Electronic cigarettes are not yet regulated by the Federal Drug Administration and have yet to be approved as a smoking cessation device.

Most concerning is their appeal to youth, which may lead to nicotine addiction or dual use with cigarettes. The CDC reported that use of electronic cigarettes among youth has doubled from 2011 to 2012, resulting in 1.78 million high school students having used electronic cigarettes²¹. Locally, 3.3 percent of 8th graders and 8.7 percent of 11th graders have smoked an electronic cigarette within the past 30 days²².

In 2010 the Food and Drug Administration banned the sale of single cigarettes because they are cheap and more accessible to price-sensitive groups such as youth, but other tobacco products were not included in the policy. Of the retailers assessed in Klamath County, nearly nine in ten sold single cigarillos or little cigars.

²¹ CDC. 2013. Morbidity and Mortality Weekly Report: 62(35); 729-730. Notes from the Field: Electronic Cigarette Use Among Middle and High School Students-United States 2011-2012

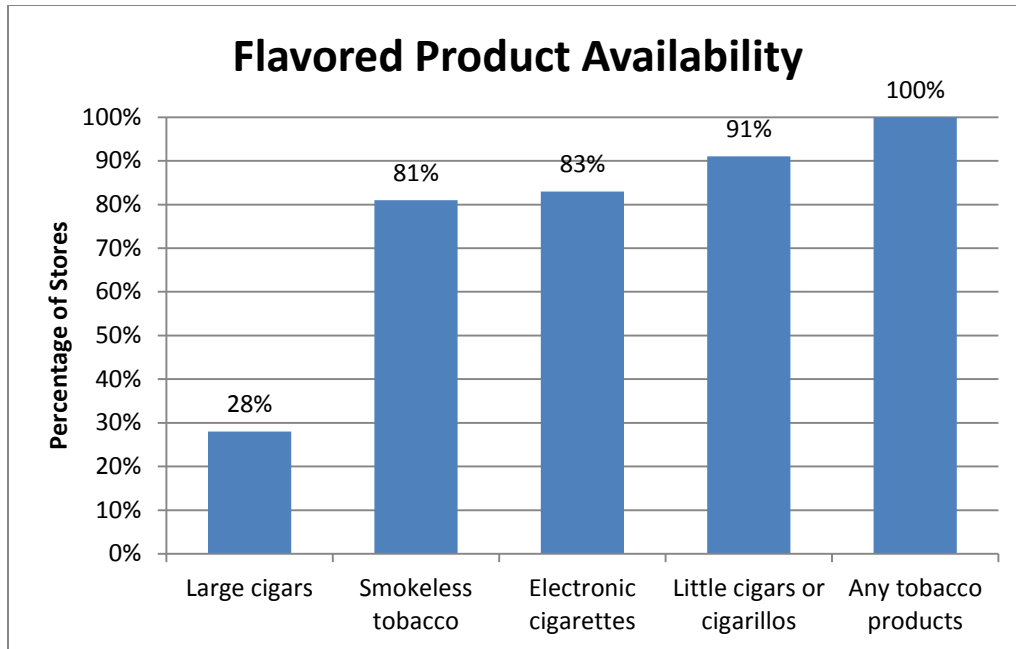
²² Oregon Healthy Teens Survey. 2013.



Flavored Products



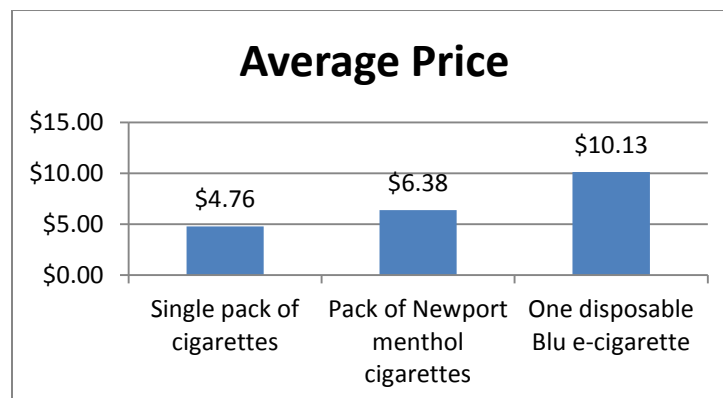
Flavored products are appealing to youth and make it easier for them to initiate use by masking unpleasant tobacco taste and making the smoke feel less harsh as it is inhaled. Flavors like bubble gum and cotton candy are packaged in bright, kid-friendly wrapping, enticing youth to experiment with tobacco. In *every single store* at least one type of fruit or candy flavored product was available. Of the tobacco retailers that sold electronic cigarettes, 83 percent had a flavored option. Of those who sold little cigars or smokeless tobacco, flavored options were available in 91 percent and 81 percent of stores respectively.



Pricing

Research shows that price has a direct correlation on cigarette consumption—as price increases, consumption decreases²³.

One pack of Newport Menthol cigarettes, one Blu disposable electronic cigarette, and one pack of the cheapest available regular cigarette (non-menthol) were priced out to determine the average cost for consumers. Newport Menthol cigarettes ranged from \$4.40 to \$8.49, Blu electronic cigarettes ranged from \$8.79 to \$12.99, and the cheapest pack of cigarettes ranged from \$3.00 to \$7.50. The average prices are shown below.



The tobacco industry spends billions of dollars on price discounts in retail settings (i.e. buy one get one free, special sales, coupons), which is highly influential for price-sensitive populations such as youth or

²³ USDA Economic Research Service; US Bureau of Labor Statistics. 2007. Tax Burden on Tobacco.

low-income. In fact, of the \$8 billion spent on tobacco marketing, 90 percent (\$7.2 billion) of expenditures at the point of sale are spent on price reductions²⁴. Over half of tobacco retailers had a price promotion for at least one type of tobacco product with non-menthol cigarettes being most common at 42 percent.



²⁴ Oregon Health Authority. (2013). Point of Sale: The Final Frontier. Webinar.

Results-Healthy Foods

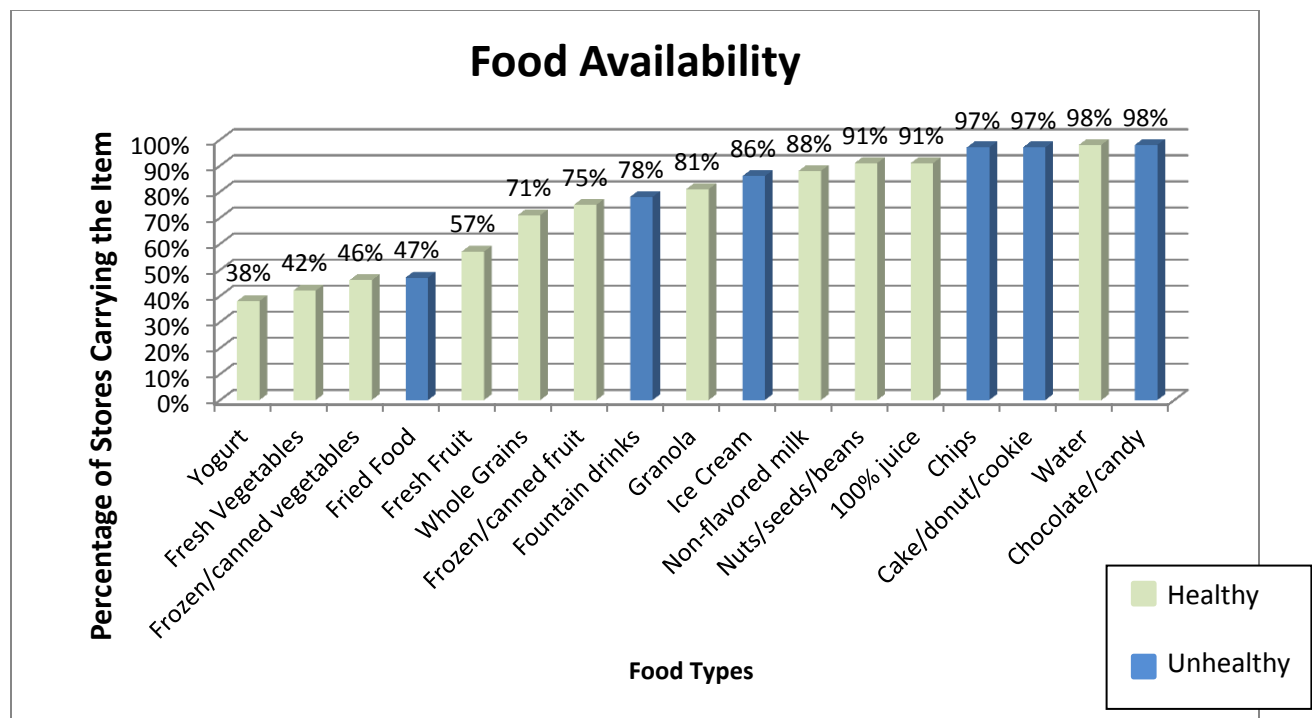
Fifty seven of the 59 stores assessed sold food products, and availability of various foods has a tremendous impact on health behaviors and social norms. Recall that 22 percent of stores accepted WIC and 60 percent accepted SNAP, both of which are supplemental nutrition programs offered to low-income residents. WIC has strict guidelines on which foods may be purchased in order to meet high nutrition standards whereas SNAP is less restrictive.

Those who receive WIC or SNAP are low-income and typically have significant health disparities. Access to healthy foods is a critical aspect of achieving optimal health, especially for vulnerable populations such as low income and children whose bodies and health behaviors are still developing.

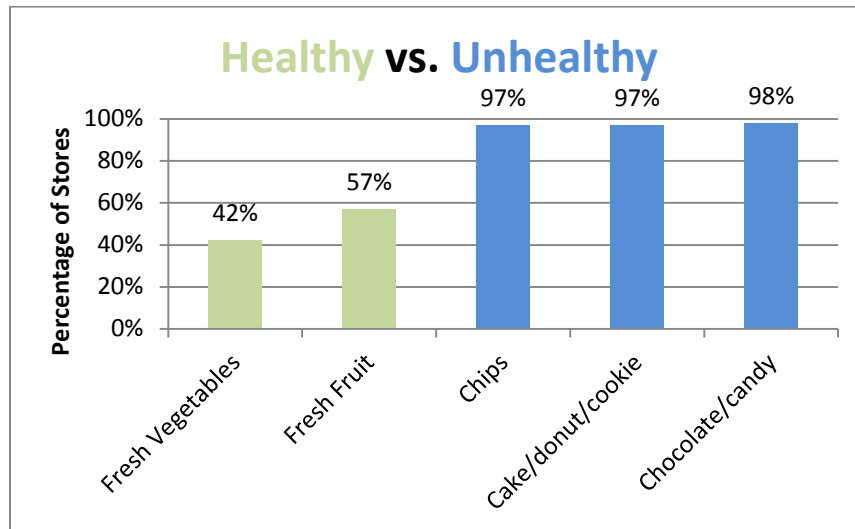
Availability of Foods

Availability of healthy food selections were assessed including fresh, frozen, or canned produce, whole grains (bread, oatmeal, rice), nuts, seeds, beans, granola, yogurt, 100% fruit juice, non-flavored milk, and water. Unhealthy choices were also assessed including chips, cakes, donuts, cookies, chocolate and candy, fried foods, ice cream, and fountain drinks.

The graph below shows the availability of each item.



When analyzing the “gold standard” for healthy options--fresh fruits and vegetables--there is a significant disparity when compared to typical unhealthy options such as chips, cookies, and candy.



Apples, oranges, and bananas were the most common fresh fruit and the lowest found price was \$0.59 per pound or \$0.50 each. Potatoes, carrots, and lettuce were the most common fresh vegetable seen in stores and the lowest found price was \$1.00 per pound or \$0.49 each.

Despite the lack of fresh produce and an overwhelming amount of unhealthy foods, it was great to see a variety of other healthy items being offered. The picture below shows a brightly lit, enticing display of healthy choices that was located right next to the cash register and was one of the first items seen when entering the building.



Informal conversations with several retailers revealed that past efforts were made to offer fresh produce and other healthy options but unfortunately they did not sell, so they discontinued carrying them.

Food Advertising

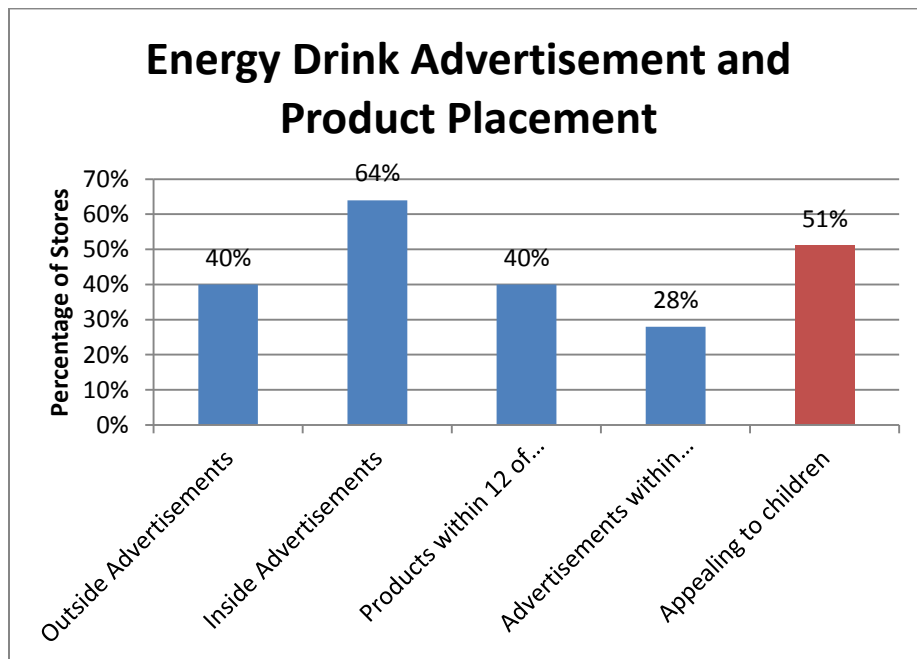
Of the 57 stores that sold food only 3 of them had advertisements for healthy options. This may not be due to lack of will, but potentially lack of available marketing materials provided by companies.

Energy Drinks

Energy drinks are growing in popularity among young people with about half of the energy drink market consisting of adolescents and young adults¹³. Of the stores assessed, 91 percent sold energy drinks, 64 percent of which was visible at the checkout stand. Nearly half of them had price promotions as well.

Energy Drink Advertising

Of the stores that sold energy drinks 1 in 5 had outside advertisements and 1 in 3 had advertisements on the interior of the store. Again, children and youth are a major concern so placement of products and advertisements were assessed. Forty percent had energy drinks within a foot of toys, candy, gum, or ice cream and 28 percent had advertisements that were within 3 feet of the floor. Taken together, more than half of the stores had energy drinks or advertisements displayed in a way that is appealing to children.



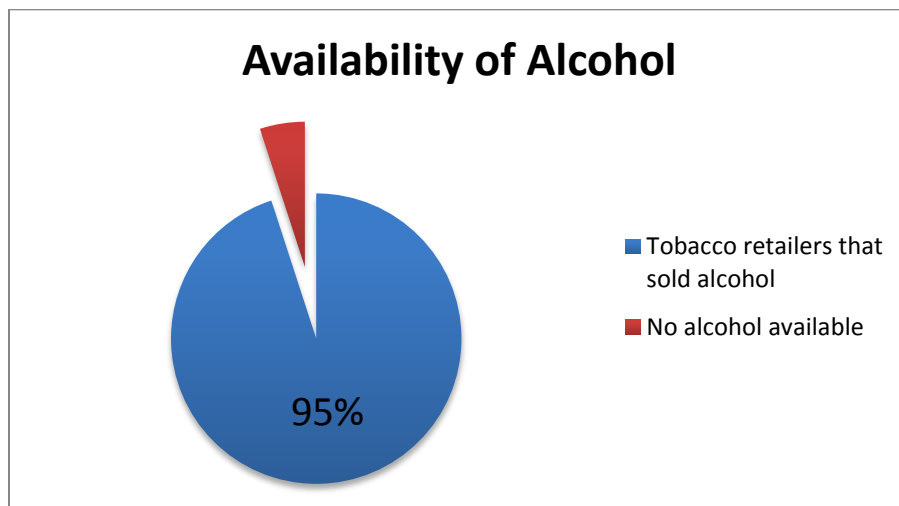
Results- Alcohol

The alcohol industry spends over \$3.5 billion on marketing and 35 percent of that is spent helping retailers promote alcohol and on outdoor advertisements²⁵. Research suggests that higher exposure to alcohol advertising is correlated with higher rates of underage drinking²⁶. In Klamath County more than one in three 11th graders report having drunk alcohol at least once in the past 30 days²⁷.

Placement of products and advertisements influences brand recognition, perceptions of social norms, and health behaviors. The alcohol industry does not have the same, tight restrictions on advertising that the tobacco industry faces, so they are able to advertise on billboards, television, and radio, in addition to point of sale.

Product Availability

Of the 59 tobacco retail stores assessed, 56 also sold alcoholic beverages.



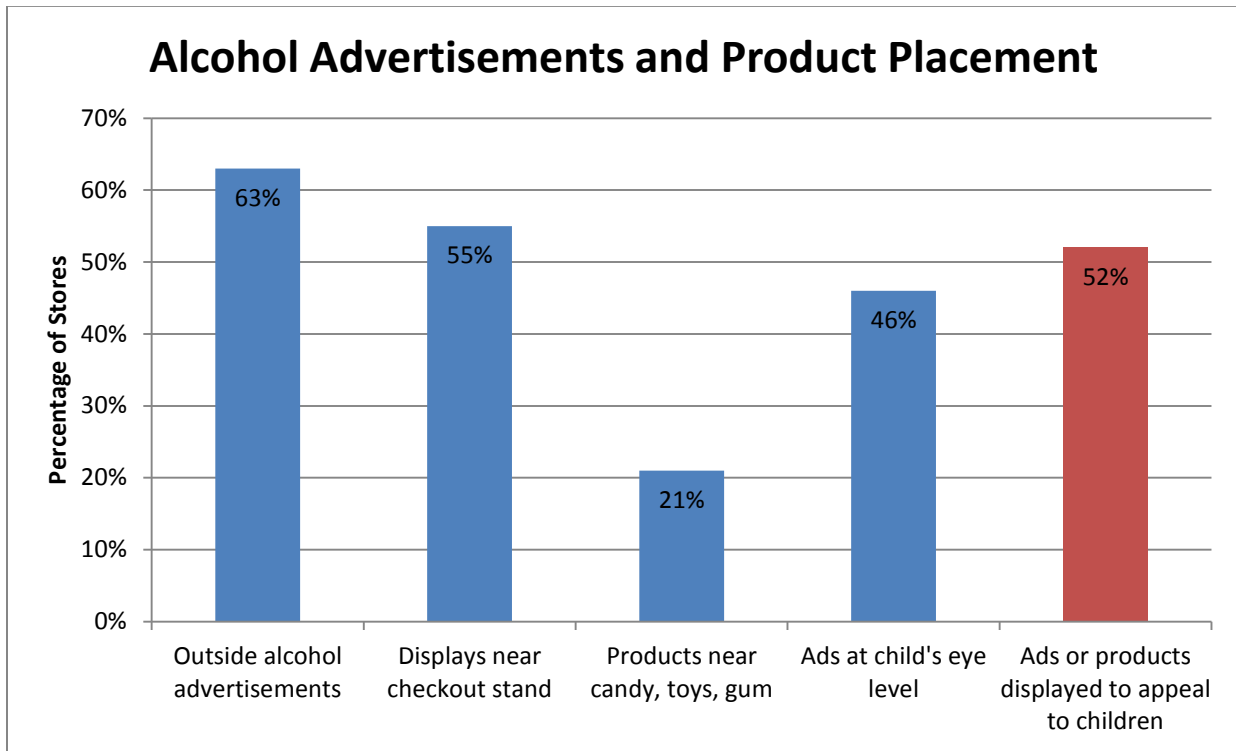
Advertisements and Product Placement

Outdoor advertisements were present at 63 percent of stores and interior ads were in 80 percent. Of the advertisements, those that could appeal to children are of utmost concern. Twenty one percent of advertisements were within 12 inches of toys, candy, gum, soda machines, or ice cream. Forty six percent of advertisements were within 3 feet of the floor, at child's eye level. Combined, 52 percent of alcohol products or advertisements were displayed in a manner appealing to children.

²⁵ Federal Trade Commission. 2014. Self-Regulation in the Alcohol Industry. Accessed from: <http://www.ftc.gov/system/files/documents/reports/self-regulation-alcohol-industry-report-federal-trade-commission/140320alcoholreport.pdf>.

²⁶ Multinational Monitor. 2008. Intoxicating Brands: Alcohol Advertising and Youth. Vol 30(1). Accessed from: <http://www.multinationalmonitor.org/mm2008/072008/iernigan.html>.

²⁷ Oregon Healthy Teens Survey. (2013). Accessed from: https://public.health.oregon.gov/BirthDeathCertificates/Surveys/OregonHealthyTeens/Documents/2013/County/39_Klamath_Lake_Counties.pdf

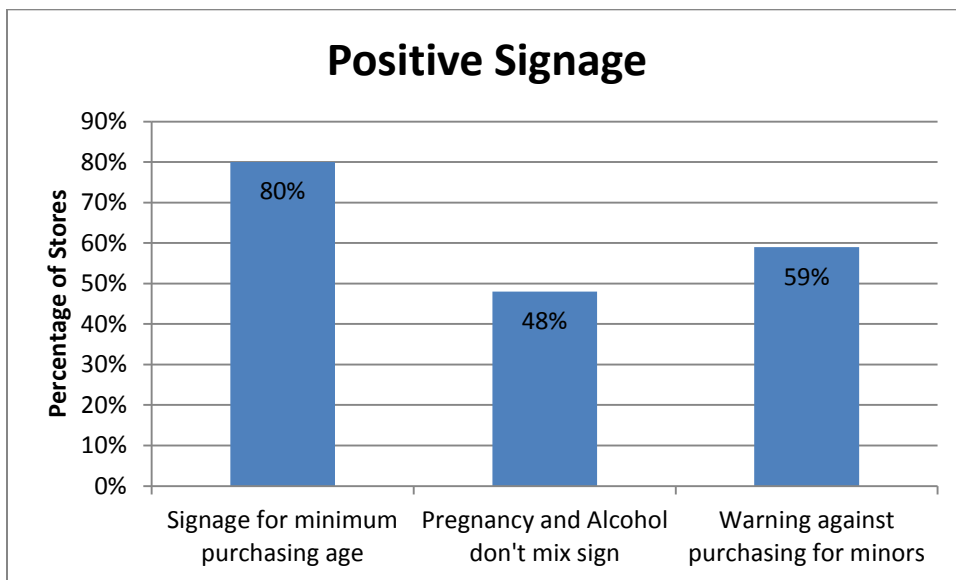


Pricing

Price promotions are a marketing strategy that encourages product consumption. Forty five percent of stores that sold alcohol had price promotions.

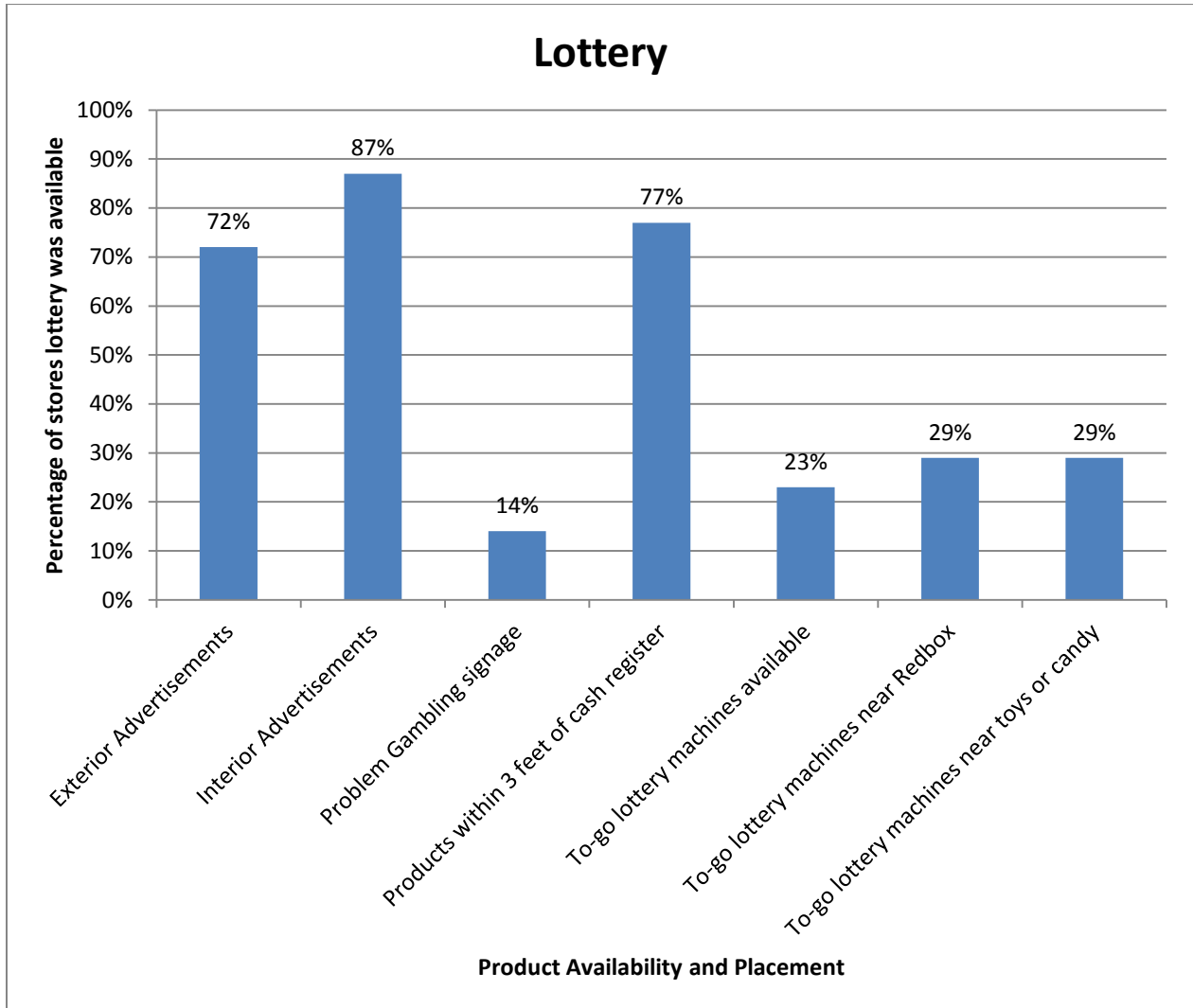
Positive Signage

Of the retailers that sold alcohol, 80 percent displayed signs stating the minimum age for purchasing alcohol, and 59 percent warned against purchasing alcohol for minors. A unique warning sign seen in nearly half of stores was a sign stating that alcohol and pregnancy don't mix. These are positive messages that work to reduce high risk drinking among youth and pregnant women.



Results-Lottery

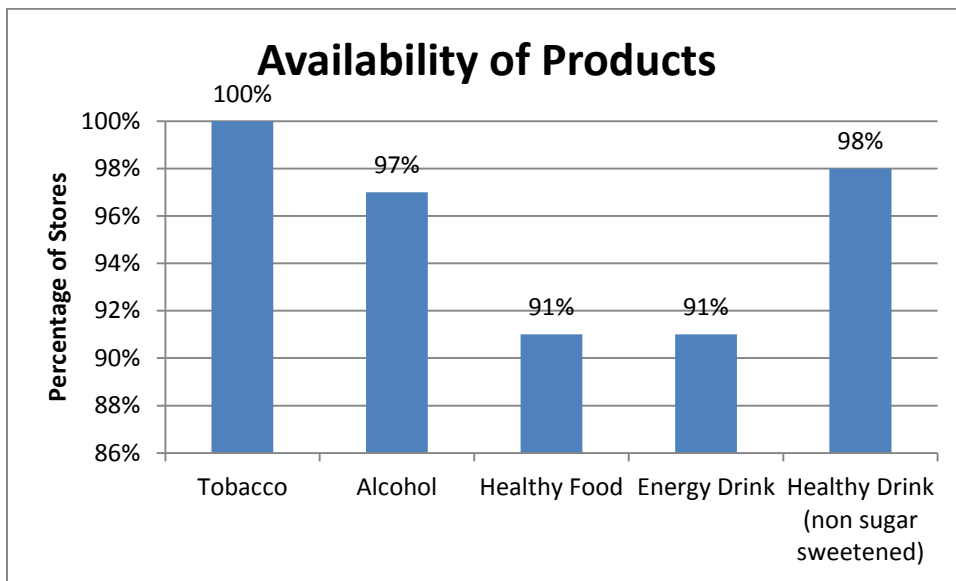
Of the 59 stores assessed 30 sold lottery products. Since little data is available for lottery, advertisements, positive signage, and product placement were assessed. Particular attention was paid to how lottery may be perceived by youth as well as impulse buys. The graph below shows the results for lottery items.



Combined Results

Each section of this report has highlighted various factors that influence the community's health behaviors and social norms. It is important to also look at the combined results to understand the retail environment as a whole and how it is affecting the health of Klamath County.

The below graph shows the availability of the products assessed throughout this survey. Recall that only tobacco retailers were surveyed. Refer to the table on page 9 to see the breakdown of types of stores assessed.

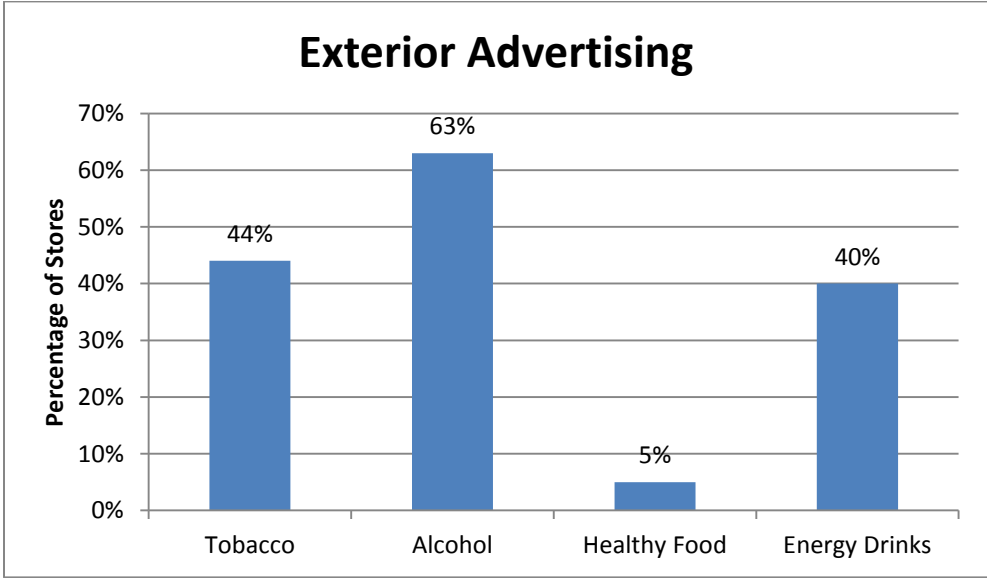


*Only tobacco retailers were surveyed

Not only is availability of the product important, but also the advertisements that are visible. Advertisements are meant to draw in new customers and build brand recognition, which influences what people purchase and social norms.



The graph below shows the advertisements being displayed on the outside of the retail stores that were assessed.



Call to Action

With an understanding of the tobacco retail environment and how it affects the health behaviors of our community, it is now time to take action.

It has become a social norm to expect unhealthy options in convenience stores and healthy options to be sought at grocery stores. But imagine how different the health of our community would be if healthy choices held the majority in convenience stores. Think about how perceptions would change if we weren't surrounded by unhealthy options or weren't being bombarded with advertisements enticing us to choose an unhealthy product.

The point-of-sale is where local retailers can make a difference and change the landscape of the built environment. We have the opportunity to start new initiatives and set local policy to change the environment that so greatly influences our health outcomes.

Tobacco retail licensing is a logical first step. Licensing allows for greater oversight for limiting minors' access to tobacco and can set a limit on the density of tobacco retailers in our community. Another

option is to work with them to not put up make sure all tobacco view in efforts to tobacco.

Retailer density and policies limiting the allowed in the distance buffers from solution.



our retailers and encourage tobacco advertisements or products are hidden from reduce youth's exposure to

proximity are concerns, so amount of tobacco retailers community or establishing schools is a potential

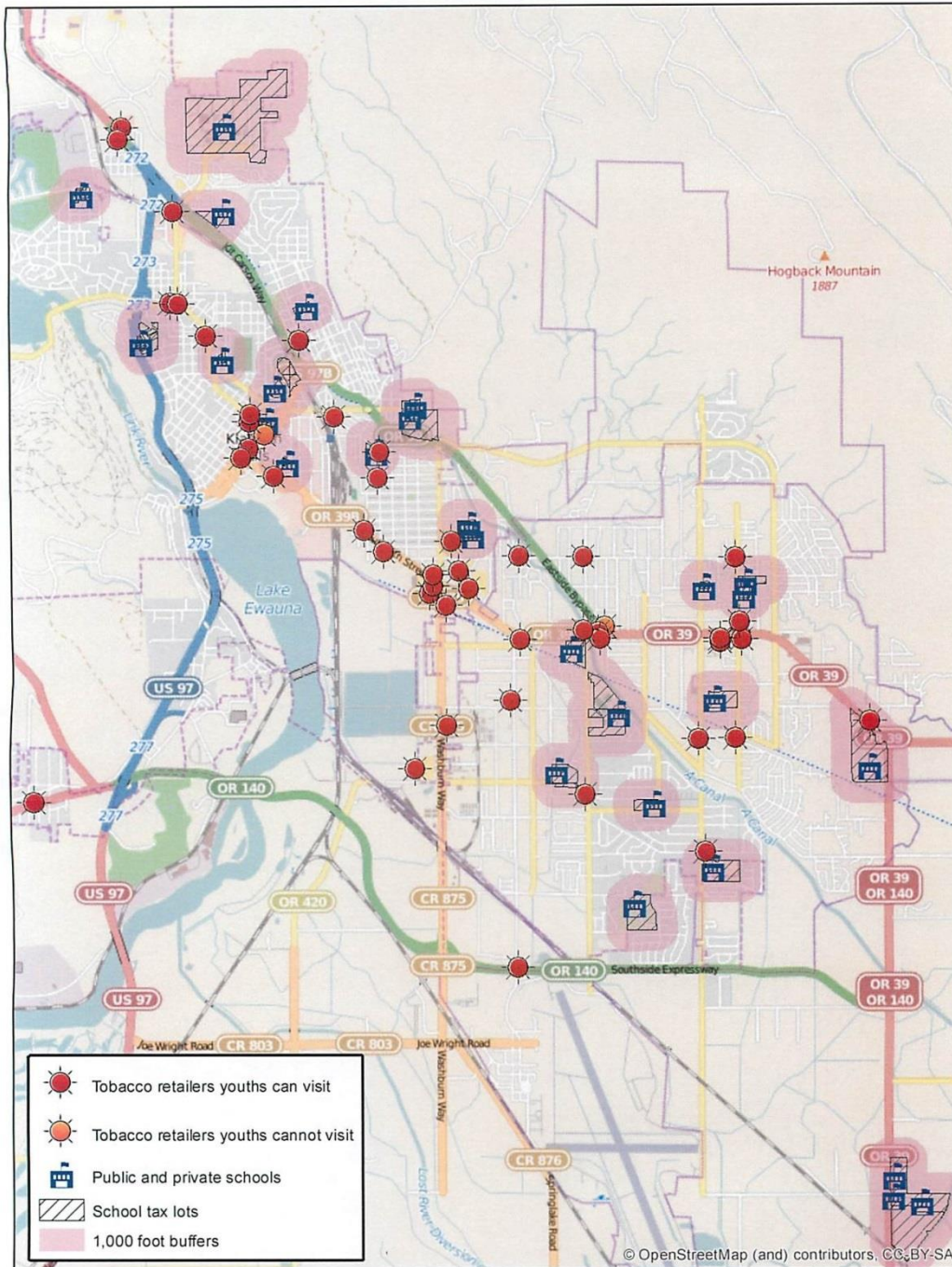
Source: <http://nycsmokefreeblog.org/2013/04/03/out-of-sight-and-out-of-mind/>

Limiting advertising of tobacco, alcohol, and unhealthy foods and drinks is an easy step for retailers to voluntarily take to begin changing the social landscape of our community. They can also bring in and highlight healthier options.

These simple actions can help begin shifting the culture and raise expectations for healthy options and a healthy community.

"Marketing is just washing over this country like a tidal wave, and we're trying to give people swimming lessons"
--Kelly Brownell
Co-founder of Rudd Center for Food Policy and Obesity

Klamath Falls - Tobacco retailers and 1,000 foot buffers around public and private schools



Klamath County - Tobacco retailers and 1,000 foot buffers around public and private schools

