# No More in Multnomah! Youth Call for an End to Illegal Tobacco Sales

Tobacco retailer licensing as an enforcement tool in Multnomah County, Oregon.

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# Facing the Facts

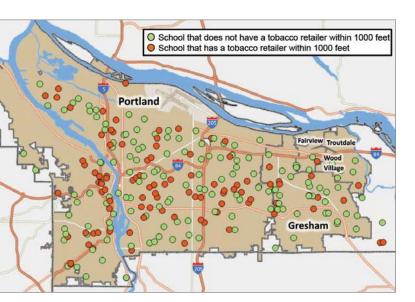
Multnomah County covers a small stretch of vibrant urban and rural communities in northwest Oregon. Like many diverse areas, it faces challenges in regard to disproportionately high rates of poor health outcomes in its communities of color and high-poverty neighborhoods.1 Behaviors like smoking and other tobacco use contribute to increased rates of cancer and heart disease, as well as shorter life expectancies among these residents. A few years ago, local health officials discovered the county's rates of illegal cigarette sales to minors were higher than the state average<sup>2</sup> - a sobering fact, considering that Oregon had the nation's highest rate of illegal sales in 2013.3 Given that nearly 9 out of 10 people who smoke start by age 18,4 reducing the percentage of youths who start using tobacco products could significantly improve the health outcomes associated with long-term tobacco use. But the officials found that there was no method for tracking tobacco retailers in order to enforce minimum purchase age laws.

In November 2015, the county board of commissioners unanimously adopted a tobacco retailer licensing ordinance requiring retailers to obtain a license and comply with all applicable laws in order to sell tobacco products, including cigarettes and electronic smoking devices like e-cigarettes.<sup>10,11</sup> The law was the result of comprehensive outreach and coordinated, persistent work by local organizations, youth groups, government departments, and legislators. It is a strong example of a community-driven response to combat the harmful effects of tobacco product use on youths and on public health more generally.









A map of the tobacco retail locations in Multnomah County within 1.000 feet of a school.

# Laying the Groundwork

In early 2015, Multnomah County responded to the alarming increase in youth use of electronic smoking devices, such as e-cigarettes, by incorporating them into county laws regulating the use and sale of tobacco products. This incorporation further highlighted the key problem in ensuring compliance: No one tracked who was selling tobacco products, much less to whom they were selling the products, until it was too late. The community was eager to gather data about tobacco retailers and start monitoring compliance with local and state laws.

Partners like the Oregon Health Equity Alliance (OHEA) were essential in facilitating information exchange throughout the policy development process. OHEA builds on the policy advocacy work of the People of Color Health Equity Collaborative and the Healthy Oregon Partnerships for Equity. It is an umbrella group that brings together 33 community-based organizations to promote community-driven solutions that aim to give every person "an equal chance to achieve their full health potential." OHEA worked with the Multnomah County Health Department to conduct tobacco retail assessments, gathering data about where and how tobacco products were sold in the community. For example, 37% of tobacco retailers in the county were located within 1,000 feet of a school. <sup>13</sup>

## Starting the Conversation

Once the assessments were complete, an OHEA member organization, Upstream Public Health (Upstream),14 convened a working group to conduct a health equity impact assessment (HEIA) of the county's data, with additional research into tobacco sales and use.<sup>13</sup> Health impact assessments are tools that systematically examine potential health impacts of a specific proposal, such as a tobacco control policy, in local communities; Upstream infused this process with an equity focus to analyze the effects of a potential policy on communities facing economic hardship and on communities of color. The HEIA found that areas with more people of color had more tobacco retailers per person, disproportionately exposing those residents to more tobacco sales. The working group then made policy recommendations that stressed education efforts and other strategies aimed especially at reducing tobacco use by people of color and other disproportionately affected populations.13

Upstream's HEIA also provided local perspectives on the issue of tobacco retail licensing. The working group provided an opportunity to involve representatives from organizations that serve community members who would be affected by tobacco retail licensing: the Multnomah Youth Commission, the Asian Pacific American Network of Oregon, the Oregon Latino Health Coalition, the Native American Youth and Family Center, and Smoke It Up Portland (a local tobacco store). They discussed the public health concerns associated with the use of tobacco products, including the health inequities in poorer neighborhoods and communities of color. The group felt it was also important to assess how licensing could affect retailers, particularly small mom-and-pop stores and shops owned by people of color. Some retailers were worried that local regulation might hurt business; others expressed support for a strong licensing ordinance, "so that people playing by the rules weren't losing out to those who broke them." The group also wanted to ensure that the enforcement methods selected would be fairly applied to all, regardless of race.

# Fostering Ongoing Exchange

The community also facilitated educational opportunities that brought diverse perspectives to the table throughout the policymaking process. Community groups helped disseminate specific data on tobacco product sales and health harms afflicting their members. Youth-focused data were collected and circulated by groups like Rebels for a Cause, which has a mission to change perceptions of tobacco use and reduce the number of youth who start the habit.15 For one event, Upstream partnered with staff from the county health department to provide a training for a predominantly African American youth group at Highland Christian Center. These types of partnerships allowed the department to tap into existing community resources and collaborate with respected leaders. Through this work, county staff reached groups that aren't always given the space to participate in the complex legislative processes that affect their lives.

The process of developing Multnomah County's tobacco retail licensing ordinance incorporated input from all types of stakeholders with expertise on new tobacco products, youth use rates, and legal issues: retailers, voters, youths, county legislators, city leaders, and other state-based organizations. Collaboration was a central recommendation from the HEIA workgroup. County commissioners traveled to cities across the county to discuss the ordinance with local leaders. Web forums provided information and opportunities for the public to submit questions and comments about the policy. Hearings were held in a variety of community locations and at different times of day, such as evening, so residents could attend after work and school. Translators attended in order to facilitate public participation. On November 12, 2015, the county board of commissioners unanimously adopted the tobacco retail ordinance.



Multnomah County Commissioners at the Commissioners' meeting where the proposed tobacco retail license ordinance was discussed. From left Commissioner Smith, Chair Kafoury, Commissioner Shiprack and Commissioner McKeel.

#### "Do Us a Favor - Ban the Flavor"

The training at Highland Christian Center provided youth participants with information about targeted marketing and other industry tactics to rope in young smokers, particularly African Americans.

"[Youths] don't know exactly how harmful tobacco use is, but they know it can't be good."

Youths were quick to connect the data to what they saw in their lives: Friends and family plagued by addiction and the harmful effects of secondhand smoke. When asked how they wanted to respond to the information, participants chose to prepare a campaign to support the proposed ordinance to establish tobacco retail licensing. Youths wrote talking points and practiced speaking in front of a county commissioner, who attended the training in person to provide feedback. The material created through this process, such as slogans like "Do us a favor - Ban the flavor," provided the foundation for youth participation at legislative hearings. Although the retail licensing ordinance adopted in 2015 didn't ban flavored tobacco products, youth organizations raised awareness on the public health impact of flavored tobacco products. Youths are extremely valuable partners when it comes to conveying concerns about tobacco sales and use to their community.



A Multnomah County youth speaking in support of tobacco retail licensing at the Multnomah County Commissioners' meeting.

#### Put It in Writing

Policy experts at the Oregon Public Health Division's Tobacco Prevention Program provided information on the evidence and impact of flavored tobacco use and also shared information from public health attorneys at the Tobacco Control Legal Consortium at the Public Health Law Center about best practices for policy development as the county considered changing its tobacco retail licensure policy. A new licensing scheme can incorporate provisions not previously considered by communities. Such provisions are included in the model tobacco retail licensing ordinance developed by the California-based nonprofit ChangeLab Solutions. The model ordinance provides a foundational licensing system of core components, to which additional provisions can be easily added.

Tobacco Retail License Rules Advisory Committee meeting to discuss the rules that will govern the licensing program.

For example, the Multnomah County ordinance includes these foundational elements:

- To sell tobacco products, including "electronic inhalant delivery systems," 18,19 retailers need a nontransferable license, 20 which must be renewed annually. 21
- As of January 1, 2016, license and renewal fees are set at \$580,<sup>22,23</sup> sufficient to fund ongoing administrative and enforcement costs.
- Licensees must comply with all local, state, and federal laws on tobacco sales<sup>24</sup> and an ID check requirement to aid compliance with laws on minimum purchasing age.<sup>25</sup>
- The enforcement agency must conduct periodic inspections to monitor retailer compliance.<sup>26,27</sup>
- Enforcement procedures must provide retailers with opportunities and incentives to comply with the law.<sup>23,28</sup>





Multnomah County Commissioner Chair, Deborah Kafoury meeting with local youth tobacco advocates in Providence Health Services' "Rebels for a Cause" program. From left: Majma Ahmed; Natalie Cante-Barrios; Winnie Lvo; Zelin Wu; Chair Kafoury; Sidney Ramirez; Vy Tran; and Ally Angeldekao

# Following Through

Opportunities for engagement continued during implementation of the new law, in line with the recommendations made in the HEIA prepared by Upstream Public Health. The county established an advisory committee that included representatives from many different sectors, including retailers, youth, residents, and public health partners.<sup>29,30</sup> The committee provided input to help the health department create rules to govern the licensing and compliance program. The implementation process also included a substantial investment in retailer education, another priority of the HEIA recommendations. Materials were disseminated in 7 different languages,31 and in-person visits to stores were conducted to educate retailers on the policy changes prior to compliance checks. Finally, the license application includes optional questions to help the county track how the ordinance affects businesses. For example, the application asks how many employees a retailer has, to help monitor how licensing affects small retailers.

By fall of 2016, more than 500 licenses had been issued. The county's comprehensive outreach campaign prepared county staff and retailers for compliance in January 2017. Today, when a business wants to sell tobacco products in Multnomah County, it must submit an application to the health department and obtain a license. Licensed retailers are subject to at least one unannounced compliance inspection per year. The health department may also initiate inspections following a complaint that a retailer has failed to comply with license requirements.

Violations of the licensing law – which include violations of any local, state, or federal law covering sales of tobacco products – may subject a retailer to civil penalties ranging from \$500 to \$1,000 and suspension or revocation of their license (for up to 2 years, for repeat violations).<sup>23</sup> Penalties are administered by the health department, along with compliance plans to help retailers correct their issues. Violations of laws or regulations related to tobacco sales may also be enforced by peace officers.<sup>32</sup>

Multnomah County's tobacco retail licensing requirements provide a framework for future opportunities to reduce tobacco use and further support public health. Through community outreach and involvement, the county has also opened the lines of communication to promote compliance through sustained cooperation with retailers and the larger community.

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### References

- Balajee SS, Cross T, Hermanns N, et al. Equity and Empowerment Lens 2012. Portland, OR: Multnomah County; 2012. www.racialequitytools.org/resourcefiles/ee\_lens\_final-portland.pdf.
- Oregon Tops Charts in Illegal Tobacco Sales to Minors; Multnomah County Considers Action. Multnomah County website. https://multco.us/communications/news/oregon-tops-charts-illegaltobacco-sales-minors-multnomah-county-considers. Published November 26, 2014. Accessed October 24, 2017.
- Substance Abuse and Mental Health Services Administration. FFY 2013 Annual Synar Reports: Tobacco Sales to Youth. Rockville, MD; 2013. www.samhsa.gov/sites/default/files/synar-annual-report-2013.pdf.
- U.S. Department of Health and Human Services. Preventing Tobacco 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; 2012. www.ncbi.nlm.nih.gov/books/ NBK99237/pdf/Bookshelf\_NBK99237.pdf.
- McLaughlin I. License to Kill? Tobacco Retailer Licensing as an Effective Enforcement Tool. Saint Paul, MN: Tobacco Control Legal Consortium; 2010. www.publichealthlawcenter.org/sites/default/ files/resources/tclc-syn-retailer-2010.pdf.
- The American Lung Association in California, The Center for Tobacco Policy and Organizing. Tobacco Retailer Licensing Is Effective. Sacramento, CA; 2013. http://center4tobaccopolicy.org/wpcontent/uploads/2016/10/Tobacco-Retailer-Licensing-is-Effective-September-2013.pdf.
- Satterlund TD, Treiber J, Haun S, Cassady D. Evaluating local policy adoption campaigns in California: Tobacco retail license (TRL) adoption. J Community Health. 2014;39(3):584-591. doi:https://doi.org/10.1007/s10900-013-9803-9.
- 8. Stead LF, Lancaster T. Interventions for preventing tobacco sales to minors. *Cochrane Database Sys Rev.* 2005; (1): CD001497. doi:10.1002/14651858.CD001497.pub2.
- DiFranza JR. Which interventions against the sale of tobacco to minors can be expected to reduce smoking? *Tobacco Control*. 2012;21:436-442. doi:10.1136/tobaccocontrol-2011-050145.
- 10. Multnomah Cty., Or., Ordinance 1225 (Nov. 12, 2015), available at https://multco.us/file/49480/download.
- Multnomah Cty., Or., Health Code §§ 21.510, 21.560-21.568 (2017), available at https://multco.us/file/40704/download.
- 12. About. Oregon Health Equity Alliance website. www.oregonhealthequity.org/about/. Accessed October 10, 2017.
- 13. Upstream Public Health. *Tobacco Retail Licensing Policy: A Health Equity Impact Assessment*. Portland, OR; 2015. www.pewtrusts. org/~/media/assets/external-sites/health-impact-project/upstream-2015-tobacco-licensing-report.pdf?la=en.
- 14. Home. Upstream Public Health website. www.upstreampublichealth. com/. Accessed October 10, 2017.
- Rebels for a Cause. Providence Health and Services website. http://oregon.providence.org/news-and-events/news/2014/11/ rebels-for-a-cause/. Accessed October 11, 2017.
- Tobacco Control Legal Consortium. Public Health Law Center website. Accessed October 11, 2017.
- ChangeLab Solutions. Model California Ordinance: Requiring a Tobacco Retailer License. Oakland, CA; 2015. www.changelabsolutions.org/publications/model-TRL-Ordinance.

- 18. Multnomah Cty., Or., Health Code §§ 21.510, 21.560 (2017), available at https://multco.us/file/40704/download.
- 19. Multnomah Cty. Bd. of Health, Order No. 2015-011 § (i) (Feb. 12, 2015), available at https://multco.us/file/38547/download.
- 20. Multnomah Cty., Or., Health Code §§ 21.561-21.563 (2017), available at https://multco.us/file/40704/download.
- 21. Multnomah Cty., Or., Health Code § 21.561(E) (2017), available at https://multco.us/file/40704/download.
- 22. Multnomah Cty., Or., Health Code §§ 21.561(C), 21.568(A) (2017), available at https://multco.us/file/40704/download.
- 23. Multnomah Cty., Or., Resolution 2016-061 (June 16, 2016), available at https://multco.us/file/53664/download.
- 24. Multnomah Cty., Or., Health Code §§ 21.561(D), 21.563(B) (2017), available at https://multco.us/file/40704/download.
- 25. Multnomah Cty., Or., Health Code § 21.563(A)(4) (2017), available at https://multco.us/file/40704/download.
- 26. Multnomah Cty., Or., Health Code § 21.565 (2017), available at https://multco.us/file/40704/download.
- 27. Multnomah Cty. Health Dep't, Tobacco Retail License Program Policy and Procedures § VII.H-J (July 1, 2016), available at https://multco.us/file/49951/download.
- 28. Multnomah Cty., Or., Health Code §§ 21.566, 21.568 (2017), available at https://multco.us/file/40704/download.
- 29. Multnomah Cty., Or., Health Code § 21.564(B) (2017), available at https://multco.us/file/40704/download.
- 30. Multnomah Cty., Or., Resolution 2015-125 (Dec. 10, 2015), available at https://multco.us/file/47973/download.
- 31. Multnomah County Health Department, *Tobacco Retail License Training: Rules and Responsibilities for Places Selling Tobacco Products in Multnomah County.* Multnomah County, OR; 2017. https://multco.us/file/63111/download.
- 32. Multnomah Cty. Health Dep't, Tobacco Retail License Program Policy and Procedures § VII.H(1) (July 1, 2016), available at https://multco.us/file/49951/download.