RWJF and Tobacco Policy Research: One Researcher’s Perspective

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Presenter Disclosures

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(1) The following personal financial relationships with commercial interests relevant to this presentation existed during the past 12 months:

No Disclosures to make
RWJF, Tobacco, and Me

- First round grantee of the Tobacco Policy Research Program, 1993
- Audits & Surveys teenage tobacco use survey and environmental audits, 1996
- Substance Abuse Policy Research Program, 1996
- Bridging the Gap Program & ImpacTeen project, 1997
- Evaluation of SmokeLess States National Tobacco Policy Initiative, 2001
- International Tobacco Control Policy Evaluation Project, 2002
What Makes RWJF Funding Different

- Focus on research that addresses policy relevant questions
- Support for new, junior investigators
- Multidisciplinary/interdisciplinary research
- Seed funding for promising projects
- Willingness to take risks on big projects
- Emphasis on communications and dissemination with professional support
- Network of advocacy and action programs ready to use research evidence
Research on Tobacco Taxes

• At the start, conventional wisdom was that higher taxes wouldn’t affect smoking given how addictive it is

• RWJF funded research clearly showed that higher taxes:
  • Significantly reduce consumption
  • Keep kids from starting or escalating
  • Lead adult smokers to quit smoking
  • Are particularly effective among pregnant women
  • Lead to larger declines in smoking by the poor
  • Increase revenues
  • Do not result in net job losses
  • and much more......
Communicating the Findings

• Don’t talk like an economist!
• Developed research/policy briefs
• Work with Tobacco-Free Kids to use estimates to show impact of state/federal tax increases on revenues, sales, youth and adult smoking, deaths caused by smoking, and various health care costs
• Briefings for SmokeLess States coalitions
• Briefings/testimony for legislators
• Research syntheses
Overview of Cigarette Taxes and Pricing

Author: Frank Chaloupka, Ph.D., University of Illinois at Chicago

Review Panel: William Evans, Ph.D., University of Maryland, Matthew Farrelly, Ph.D., Research Triangle Institute, John Tauras, Ph.D., University of Illinois at Chicago

Introduction: Over the past few years, all but a few states and several communities have adopted substantial increases in cigarette and other tobacco product excise taxes.

These tax increases have raised many questions about their role in reducing the health and other consequences of tobacco use; the impact of increased cigarette smuggling and other tax evasion activities on cigarette tax revenues; their economic impact; and their impact on smoking behaviors (particularly in high-risk populations such as youth, young adults, and pregnant women).

During the last ten years, SAPRP has funded 24 studies examining a variety of issues related to cigarette and other tobacco product taxation and pricing.
State and Federal Cigarette Taxes, 1990-2009
Inflation Adjusted, September 2009 Dollars

Source: Burden on Tobacco, 2009, and author’s calculations
State Tobacco Control Funding and Youth Smoking

- State-level funding for various tobacco control program activities (state programs, SmokeLess States, ASSIST, IMPACT, NTCP)
- Youth Smoking Prevalence from Monitoring the Future
- Found clear evidence that increased funding for tobacco control programs was associated with lower youth smoking prevalence (Tauras, et al., *AJPH*, 2005)
- Variety of communications efforts
- Used national estimates to estimate impact at state level of funding at CDC recommended levels
Press Release

Study Finds Youth Smoking Would be Much Lower if States Followed Federal Guidelines for Tobacco Control Spending

“There would be far fewer teen smokers in America today if state spending on tobacco control followed levels recommended by the federal Centers for Disease Control and Prevention (CDC), according to a study published in the February 2005 issue of the American Journal of Public Health (AJPH).”

Fed up with program cuts, anti-smoking groups appeal to voters

“There's wide agreement that state programs like Florida's were behind recent drops in children smoking, said John Tauras, a health economist at the University of Illinois-Chicago who wrote about the effectiveness of such programs in the American Journal of Public Health earlier this year.”

“"The more states spend on tobacco control, the fewer youths will smoke," Tauras said.”
Related Efforts

Estimates used to develop state by state measures of the impact of state tobacco control funding on youth smoking prevalence, based on CDC recommendations for minimum funding required for a comprehensive tobacco control program.

**States Can Keep Two Million Kids from Smoking, Save Over 600,000 Lives By Fully Funding Tobacco Prevention, New Research Shows**

“At the request of the Campaign for Tobacco-Free Kids, two of the UIC researchers, Frank J. Chaloupka and John A. Tauras, used the same economic model as in the study to estimate the number of kids who would be prevented from smoking and the number who would be saved from premature, smoking-caused deaths if every state funded a tobacco prevention program at the CDC’s minimum levels.”

“This model estimated that if every state funded a prevention program at CDC minimum levels, the number of kids alive today who start to smoke would be reduced by 1,952,550 and 624,650 fewer of them would die an early death from smoking.”
50 state specific releases:

**Campaign for Tobacco-Free Kids**

FOR IMMEDIATE RELEASE CONTACT: Jennifer Friedman January 26, 2005 / Joel Spivak 202-296-5469

**Maine Can Keep 19,870 Kids from Smoking and Save 6,350 from Early Death By Fully Funding Tobacco Prevention, New Research Shows**

Maine Will Also Save $238.4 million in Health Care Bills

WASHINGTON, DC (January 26, 2005) – Maine will prevent 19,870 kids alive today from starting to smoke, save 6,350 of these kids from a premature, smoking-caused death if it funded a tobacco prevention and cessation program at levels recommended by the U.S. Centers for Disease Control and Prevention (CDC), according to new research data released today by the Campaign for Tobacco-Free Kids. Maine will also save $238.4 million in long-term, smoking-related health care costs as a result of these reductions in youth smoking.

Nationally, if every state increased funding for tobacco prevention programs to CDC minimum levels, they would prevent nearly two million kids from starting to smoke, save 624,650 of these kids from premature death, and save $23.4 billion in health care costs, according to the new data.

**Campaign for Tobacco-Free Kids**

FOR IMMEDIATE RELEASE CONTACT: Jennifer Friedman / January 26, 2005

**Indiana Can Keep 55,870 Kids from Smoking and Save 17,880 from Early Death By Fully Funding Tobacco Prevention, New Research Shows**

Indiana Would Also Save $670.5 million in Health Care Bills

WASHINGTON, DC (January 26, 2005) – Indiana would prevent 55,870 kids alive today from starting to smoke and save 17,880 of them from a premature, smoking-caused death if it funded a tobacco prevention and cessation program at minimum levels recommended by the U.S. Centers for Disease Control and Prevention (CDC), according to new research data released today by the Campaign for Tobacco-Free Kids. Indiana would also save $670.5 million in long-term, smoking-related health care costs as a result of these reductions in youth smoking.

Nationally, if every state increased funding for tobacco prevention programs to CDC minimum levels, they would prevent nearly two million kids from starting to smoke, save 624,650 of these kids from premature death, and save $23.4 billion in health care costs, according to the new data.

**Campaign for Tobacco-Free Kids**

FOR IMMEDIATE RELEASE CONTACT: Jennifer Friedman / January 26, 2005

**Oregon Can Keep 25,750 Kids from Smoking and Save 8,240 from Early Death By Fully Funding Tobacco Prevention, New Research Shows**

Oregon Would Also Save $174.5 million in Health Care Bills

WASHINGTON, DC (January 26, 2005) – Oregon would prevent 25,750 kids alive today from starting to smoke, save 8,240 of these kids from a premature, smoking-caused death if it continues to fund a tobacco prevention and cessation program at levels recommended by the U.S. Centers for Disease Control and Prevention (CDC), according to new research data released today by the Campaign for Tobacco-Free Kids. Oregon would also save $174.5 million in long-term, smoking-related health care costs as a result of these reductions in youth smoking.

Nationally, if every state increased funding for tobacco prevention programs to CDC minimum levels, they would prevent nearly two million kids from starting to smoke, save 624,650 of these kids from premature death, and save $23.4 billion in health care costs, according to the new data.

**Campaign for Tobacco-Free Kids**

FOR IMMEDIATE RELEASE CONTACT: Jennifer Friedman / January 26, 2005

**Delaware Can Keep 14,540 Kids from Smoking and Save 4,650 from Early Death By Fully Funding Tobacco Prevention, New Research Shows**

Delaware Would Also Save $71.4 million in Health Care Bills

WASHINGTON, DC (January 26, 2005) – Delaware would prevent 14,540 kids alive today from starting to smoke and save 4,650 of them from a premature, smoking-caused death if it continues to fund a tobacco prevention and cessation program at levels recommended by the U.S. Centers for Disease Control and Prevention (CDC), according to new research data released today by the Campaign for Tobacco-Free Kids. Delaware would also save $71.4 million in long-term, smoking-related health care costs as a result of these reductions in youth smoking.

Nationally, if every state increased funding for tobacco prevention programs to CDC minimum levels, they would prevent nearly two million kids from starting to smoke, save 624,650 of these kids from premature death, and save $23.4 billion in health care costs, according to the new data.
Effect of Televised Tobacco Company-Funded Smoking Prevention Advertising on Youth Smoking Related Beliefs, Intentions, and Behavior

- Television market level data on exposure to televised anti-smoking ads, by sponsor (states, Legacy Foundation, tobacco companies)
- Youth Smoking Prevalence from Monitoring the Future
- Found that increased exposure to tobacco company parent-targeted ads was associated with lower recall of anti-tobacco advertising and stronger intentions to smoke in the future for all students (Wakefield, et al., *AJPH*, 2006)
- Variety of communications efforts
- Industry sponsored ads have since been pulled
Press Release

“Televised ads sponsored by tobacco companies and targeted at youth do not change teen smoking outcomes, according to a study published online today by the American Journal of Public Health. Results from the study also show that tobacco industry-sponsored prevention ads intended for parents may have harmful effects on older youth, lowering youth perceptions about the danger of smoking and increasing their likelihood of smoking.”

“What's the best way to convince a teenager that smoking is a great idea? Tell him his parents want him to stop.”

“That's the rather disturbing suggestion of a study of teens who had watched tobacco-industry-funded television ads urging parents to talk to their children about smoking. The study shows that these teens were more likely to have smoked in the past month and more likely to say that they planned to smoke in the future.”
Philip Morris has adopted the role of good citizen these days. Its Web site brims with information on the dangers of smoking, and it has mounted a campaign of television spots that urge parents, oh so earnestly, to warn their children against smoking. That follows an earlier $100 million campaign warning young people to “Think. Don’t Smoke,” analogous to the “just say no” admonitions against drugs.

All this seems to fly against the economic interests of the company, which presumably depends on a continuing crop of new smokers to replace those who drop out or die from their habit. But in practice, it turns out, these industry-run campaigns are notably ineffective and possibly even a sham. New research shows that the ads aimed at youths had no discernible effect in discouraging smoking and that the ads currently aimed at parents may be counterproductive.

(...) 

Philip Morris says it has spent more than $1 billion on its youth smoking prevention programs since 1998 and that it devised its current advertising campaign on the advice of experts who deem parental influence extremely important. But the company has done only the skimpiest research on how the campaign is working. It cites June 2006 data indicating that 37 percent of parents with children age 10 to 17 were both aware of its ads and spoke to their children about not smoking. How the children reacted has not been explored. And somehow the company forgot to tell the parents, as role models, to stop smoking themselves.

Philip Morris, the industry’s biggest and most influential company, is renowned for its marketing savvy. If it really wanted to prevent youth smoking — and cut off new recruits to its death-dealing products — it could surely mount a more effective campaign to do so.
Monday, November 6, 2006

**Smoking Ads Ineffective**

According to the American Journal of Public Health, children age 12-17 had stronger intentions to smoke more after viewing ads encouraging parents to talk to their children about smoking. What do you think?

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**Joel Meyer, Gunsmith**

“I’m appalled when I think back to all those heartfelt discussions I had with my kids about the cool fresh taste of Salem Menthol Lights.”

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**Cathy Wegman, Systems Analyst**

“Interesting. After reading the findings of this study, I have a strong urge to ignore them.”

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**Brian Plumber, Cashier**

“Any chance they’ll start airing PSAs where parents tell their kids not to date the 50-year-old guy who works the night shift at Stop & Shop?”
The Impact of Retail Cigarette Marketing Practices on Youth Smoking Uptake

• BTG’s observationally collected measures of point-of-sale marketing (advertising, price promotions, etc.)

• Uptake measure based on current/past smoking behavior and future smoking intentions

• Found that increased POS advertising associated with greater likelihood of experimenting, while increased price-related marketing associated with progression towards regular smoking (Slater, et al., *Arch. Ped. & Adol. Med.* 2007)

• Variety of communications efforts
“They found that point-of-sale advertising is associated with youth trying smoking; that pricing strategies contribute to increases all along the smoking continuum, from initiation and experimentation to regular smoking; and that cigarette promotions increase the likelihood that youth will move from experimentation to regular smoking.”

“The scientists found that point-of-sale advertising is associated with getting children to try smoking, but has little effect in encouraging habitual tobacco use. However, cigarette promotions, especially those that involve price reductions, may tempt teenagers who have already experimented with tobacco to become regular smokers.”
Related Efforts

Study Finds Retail Tobacco Marketing Increases Teen Smoking, Underscores Need for FDA Authority Over Tobacco, Higher Tobacco Taxes

A new study published today in the Archives of Pediatrics and Adolescent Medicine concludes that the more cigarette marketing teens are exposed to in retail stores, the more likely they are to smoke, and that restricting these retail marketing practices would reduce youth smoking. This is the first national study to examine how specific marketing strategies in convenience stores and other retail settings affect youth smoking. The study is significant and timely because retail marketing today makes up the vast bulk of all tobacco marketing and Congress is considering legislation that would curtail some of the industry’s most harmful marketing practices. This study shows that the most common marketing strategies currently used by the tobacco industry remain highly effective at getting children to smoke and must be curtailed.

This new research demonstrates the urgent need for Congress to enact the pending legislation granting the U.S. Food and Drug Administration (FDA) authority over tobacco products, including the authority to crack down on tobacco marketing that impacts children.
Cigarette Smoking Prevalence and Policies in the 50 States: An Era of Change

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