

# Tobacco Point of Sale (POS) Marketing and Promotions

*Among Youth in Georgia*



Georgia Tobacco Use Prevention Program  
[dph.ga.gov/tobacco](http://dph.ga.gov/tobacco)



## Acknowledgements

### **Georgia Department of Public Health**

J. Patrick O'Neal, MD  
Commissioner, State Health Officer

### **Health Protection**

J. Patrick O'Neal, MD  
Director

### **Epidemiology Program**

Cherie L. Drenzek, DVM, MS  
State Epidemiologist

### **Chronic Disease, Healthy Behaviors and Injury Epidemiology Section**

Rana Bayakly, MPH  
Chief Epidemiologist

### **Tobacco Use Epidemiology**

Alina Chung, MPH  
Epidemiologist

### **Chronic Disease Prevention Section**

Jean O'Connor, JD, DrPH  
Chronic Disease Prevention Director

### **Tobacco Use Prevention Program**

Kenneth Ray, MPH  
Deputy Director

For more information on tobacco surveillance in Georgia, please contact:

Tobacco Epidemiologist  
Chronic Disease, Healthy Behaviors and Injury Epidemiology Section  
Division of Health Protection  
Georgia Department of Public Health  
2 Peachtree Street NW, 14<sup>th</sup> Floor  
Atlanta, GA 30303-3142  
(404) 657-2588  
<http://dph.georgia.gov/georgia-tobacco-use-surveillance>

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## Tobacco Use among Youth

Tobacco use is the leading cause of preventable illness and deaths in Georgia. Furthermore, smoking during youth is particularly harmful due to cumulative exposure to toxins present in cigarettes and tobacco products, increasing the risk for diseases such as cancer, cardiovascular diseases, respiratory diseases and perinatal conditions later in adulthood.<sup>1</sup> Despite the adverse health effects from smoking, almost all smokers have their first cigarette by age 26 and about 90% of smokers began smoking before 18 years of age.<sup>1</sup>

The tobacco industry spends nearly \$9.5 billion a year to market its products throughout the United States (U.S), and 96% (\$9.1 billion) of this money is spent at the point of sale (POS).<sup>2</sup> POS marketing and promotions refer to a variety of marketing practices, including signs on the interior and exterior of retail stores, coupons and price discounts that reduce the price of tobacco products for the consumer.<sup>2</sup> Tobacco company advertising at the POS encourages youth initiation and discourages cessation.<sup>3</sup>

The Youth Tobacco Survey (YTS) provides comprehensive data on various tobacco-related topics for high school (HS) students in Georgia. Topics include: tobacco use, access to tobacco products, smoking cessation, knowledge and attitudes about tobacco, social influences for tobacco use and exposure of tobacco products in the media and the internet. In 2015, 1,434 students (grades 9<sup>th</sup>-12<sup>th</sup>) from 35 Georgia public high schools' results presented below.

### Point of Sale (POS)

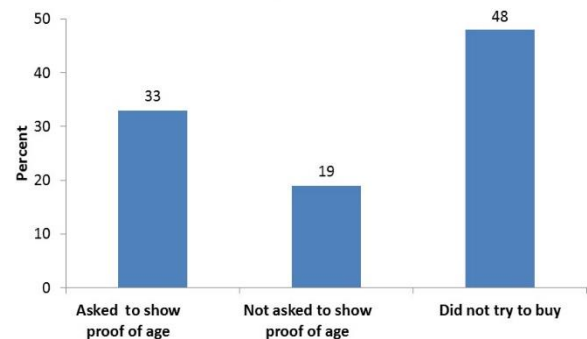
***According to the 2012 Surgeon General's Report, advertising and promotional efforts of the tobacco companies cause the initiation and progression of tobacco use among youth.<sup>1</sup>***

In 2015, only 46% (230,000) of Georgia's HS students believed that tobacco companies promote tobacco products to youth.

In the 2013 YTS, approximately 12.7% (53,000) of HS students in Georgia smoked cigarettes. Among HS smokers, only 33.1% (16,000) were ever asked to show proof of age when purchasing cigarettes during the past 30 days whereas, 19.0% (9,000) of smokers were not asked at all and 47.9% (23,000) of smokers did not try to buy (Figure 1).

In 2015, Georgia White HS students were two times more likely to be asked to show proof of age (60.2%; 8,900) than Black students (29.2%; 4,300); also more male HS students (76.2%; 11,400) were asked for proof of age than HS females (23.8%; 3,600).

Figure 1. Percentage of current high school smokers who were ever asked to show proof of age Georgia, 2015



Source: 2015 Youth Tobacco Survey (YTS)

**Only 43.5% (20,500) of Georgia HS student smokers reported that they were not refused to purchase cigarettes despite of their age.**

More than half of Georgia HS smokers (60.1%) reported they usually possess cigarettes as a result of (Figure 2):

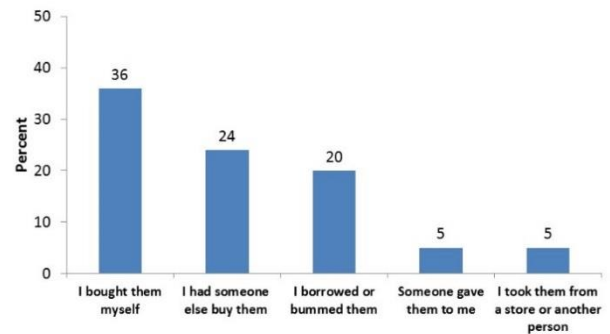
- Bought them themselves (35.8%; 15,500);
- Had someone else buy them (24.3%; 10,500);
- Borrowed or bummed them (20.3%; 8,600);
- Someone gave them (5.3%; 2,500); and,
- Took them from a store or another person (4.7%; 2,000).

Forty-four percent (44%; 20,500) of Georgia's HS student smokers chose to go to a gas station to purchase cigarettes. Other places for purchasing cigarettes were drug stores, vending machines and over the internet (Figure 3):

- Gas station (44.0%; 20,500);
- Convenience store (7.2%; 3,500);
- Grocery store (5.8%; 3,000); and,
- Other places (3.4%; 1,600).

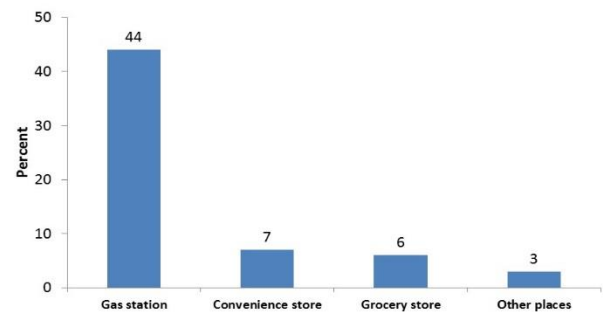
Overall, more male HS student smokers preferred to go to a gas station (71.5%; 14,100) to buy cigarettes while only 28.4% (5,600) of female HS student smokers preferred to go to a gas station. Similar percentages of males and females chose to go to either a convenience store or a grocery store to purchase cigarettes (Figure 4).

Figure 2. Percentage of current high school smokers, by purchasing methods, Georgia, 2015



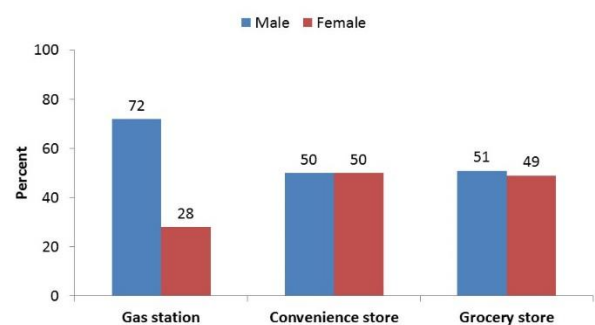
Source: 2015 Youth Tobacco Survey (YTS)

Figure 3. Percentage of current high school smokers, by point of sale, Georgia, 2015



Source: 2015 Youth Tobacco Survey (YTS)

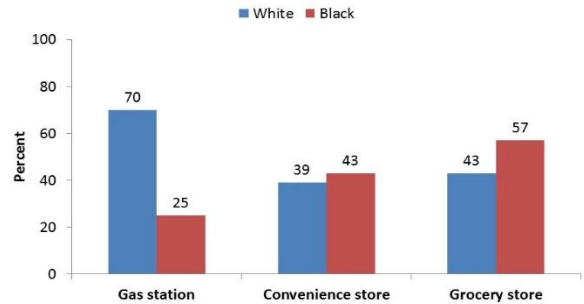
Figure 4. Percentage of current high school smokers, by point of sale, by sex, Georgia, 2015



Source: 2015 Youth Tobacco Survey (YTS)

Seventy percent (70%; 12,600) of White HS student smokers preferred to go to a gas station while Black HS student smokers preferred to go either to a convenience store (42.7%; 1,200) or a grocery store (57.0%; 1,600) to purchase cigarettes (Figure 5).

Figure 5. Percentage of current high school smokers, by point of sale, by race/ethnicity, Georgia, 2015

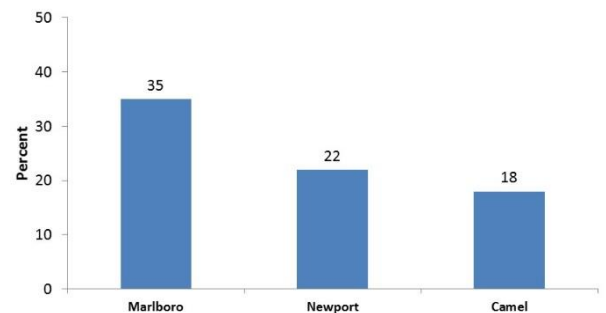


Source: 2015 Youth Tobacco Survey (YTS)

***According to the 2012 Surgeon General's Report, the industry's extensive use of price-reducing promotions has led to higher rates of tobacco use among young people than would have occurred in the absence of these promotions.<sup>4</sup>***

In 2015, in Georgia, across all store types, 40% of Camel brand cigarettes, 24% of Marlboro brand cigarettes, and 23% of Newport brand cigarettes had special price promotions.<sup>5</sup> These three brands also happen to be preferred by 74.6% of Georgia HS student smokers as well (Marlboro 35.0%; 16,000; Newport 21.6%; 9,800; and Camel 18.0%; 8,500) (Figure 6).

Figure 6. Percentage of current high school smokers, by favorite brands, Georgia, 2015



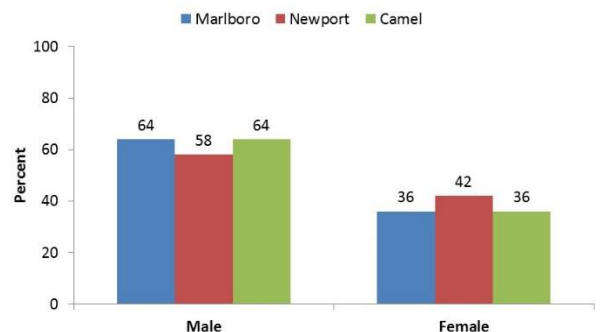
Source: 2015 Youth Tobacco Survey (YTS)

***Research shows that there is more store advertising for menthol cigarettes and a greater availability of price promotions for menthol brand tobacco products like Newport. Those strategies make menthol cigarettes more visible and more affordable to youth.<sup>5</sup>***

Overall, HS smokers (both males and females) preferred the following brands (Figure 7):

- Marlboro (63.8%; 11,000); (36.2%; 5,800);
- Camel (63.7%; 5,100) ; (36.4%; 2,900); and,
- Newport (58.0%; 5,700); (42.0%; 4,100).

Figure 7. Percentage of current high school smokers, by favorite brands, by sex, Georgia, 2015



Source: 2015 Youth Tobacco Survey (YTS)

Newport is the leading brand of cigarettes used among Black students aged 12-17 years nationally.<sup>7</sup> In Georgia, Black HS student smokers were 3 times more likely to choose Newport brand (75.0%; 7,000) than White HS student smokers (23.2%; 2,100). White HS student smokers chose either Marlboro (93.6%; 14,000) or Camel brands (80.2%; 5,900) (Figure 8). HS students can select more than one brand of cigarettes when responding to the YTS.

## POS Advertisement

***HS students who reported seeing tobacco advertising were more likely to be susceptible to trying cigarettes than their peers who did not see such advertising.***<sup>6</sup>

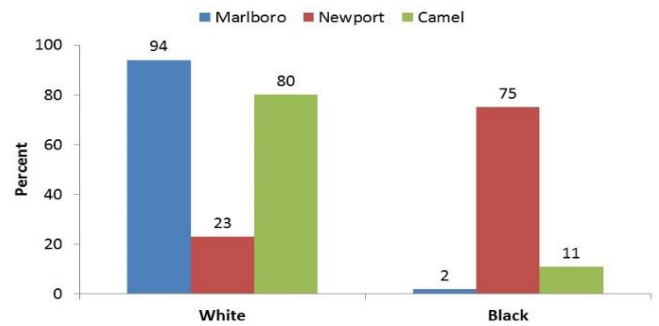
Two out of three (68.0%; 32,000) Georgia HS student smokers reported they often see promotions or advertisements for cigarettes and other tobacco products when they go to a convenience store, supermarket, or gas station. Additionally, Georgia HS students saw promotions and advertising materials on the internet (40.8%; 19,000) and in newspapers or magazines (24.6%; 12,000) (Figure 9).

Among those HS students who received tobacco advertisements online, they reported the following online sources (Figure 10):

- Web Searching (22.0%; 3,500);
- Facebook (20.6%; 3,200);
- Text message (17.9%; 2,800);
- Instagram (16.3%; 2,500);
- Email (9.9%; 1,600); and,
- Twitter (9.3%; 1,500).

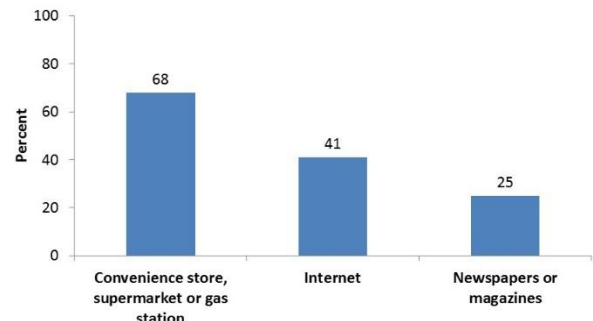
Almost 31% of Georgia HS student smokers (15,000) reported that they would very likely use or wear something such as a lighter, T-shirt, hat, or sunglasses that had a tobacco company name or picture on it.

Figure 8. Percentage of current high school smokers, by favorite brands, by race/ethnicity, Georgia, 2015



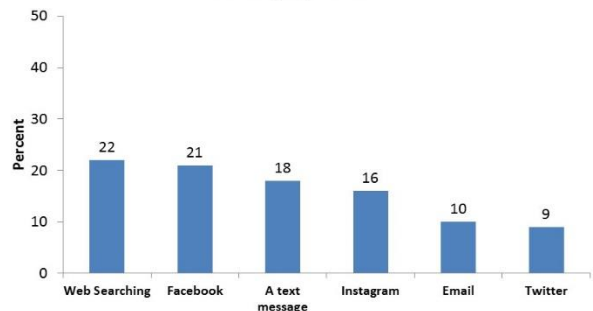
Source: 2015 Youth Tobacco Survey (YTS)

Figure 9. Percentage of current high school smokers by tobacco advertisement sources, Georgia, 2015



Source: 2015 Youth Tobacco Survey (YTS)

Figure 10. Percentage of current high school smokers, by internet tobacco advertising sources, Georgia, 2015



Source: 2015 Youth Tobacco Survey (YTS)

The majority (64.1%; 30,000) of Georgia HS student smokers reported they often saw a warning label explaining the product is harmful either by a picture or in words on a cigarette pack. 47.8% (23,500) of HS student smokers saw a warning label on a smokeless tobacco product. Only 23.7% (11,000) of HS student smokers reported that they did not see warning labels on cigarette pack. 25.2% (12,000) reported that they did not see a warning labels on smokeless tobacco products (Figure 11).

## Coupon Promotions

***Use of value-added or coupon promotions makes cigarettes more affordable to youth with less financial resources. For students, coupons affect new users by encouraging them to smoke more and moving from the trial stage to being a regular smoker.<sup>6</sup>***

Among Georgia HS students who received coupons, they were more likely to receive them through (Figure 12):

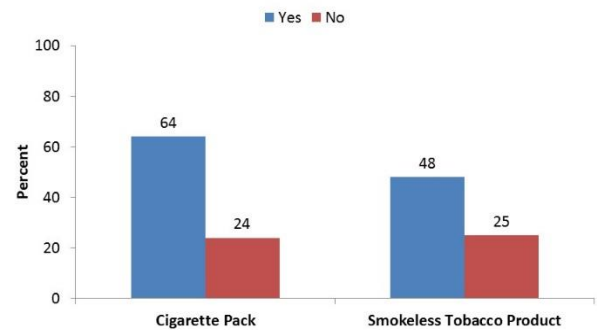
- Mail (10%; 4,800);
- Text message (7.0%; 3,200);
- Instagram (5.2%; 2,500);
- Facebook (4.4%; 2,000); and,
- The internet (3.9%; 1,800).

## Health Risk Behaviors

**Many researches have shown that youth smokers tend to engage in unhealthy behaviors,<sup>1</sup> such as physical fighting, abusive dating, drinking, and physical inactivity. Those who show such risky behaviors are more likely to experience depression, suicide attempts, and being bullied on school property.**

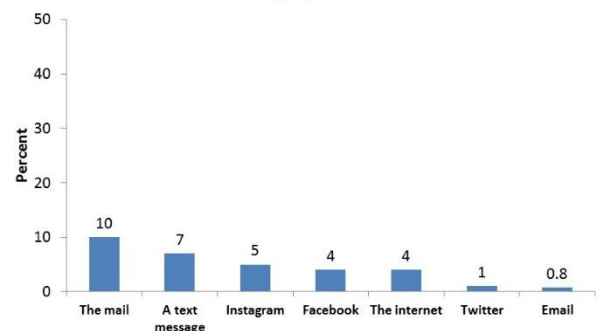
According to the 2013 Georgia Youth Risk Behavior Survey (YRBS), 39.4% (19,000) of HS student smokers said they were in a physical fight during the past 12 months compared to 16.7% (51,500) among those who did not smoke (Figure 13).

Figure 11. Percentage of current high school smokers, by warning label, Georgia, 2015



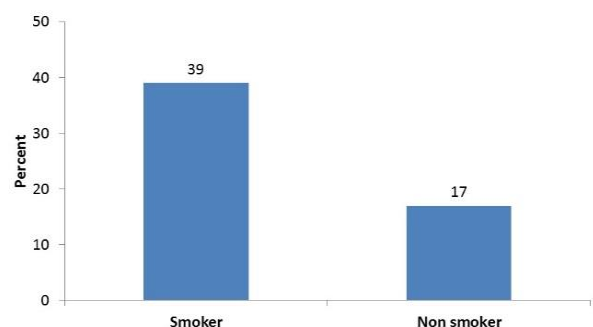
Source: 2015 Youth Tobacco Survey (YTS)

Figure 12. Percentage of current high school smokers, by tobacco coupon sources, Georgia, 2015



Source: 2015 Youth Tobacco Survey (YTS)

Figure 13. Percentage of current high school students who were in a physical fight, by smoking status, Georgia, 2013



Source: 2013 Youth Risk Behavior Survey (YRBS)



Georgia HS students who smoke (16.1%) were three times more likely to date someone who physically hurt them than non-smokers (5.3%; 19,000) (Figure 14).

HS student smokers were 60% (27.3%; 14,000) more likely than non-smokers (17.1%; 61,000) to have ever been bullied on school property.

A higher percentage of Georgia HS smokers (40.5%; 21,500) said that they felt so sad or hopeless almost every day for two weeks or more in a row that they have stopped doing some usual activities (Figure 15).

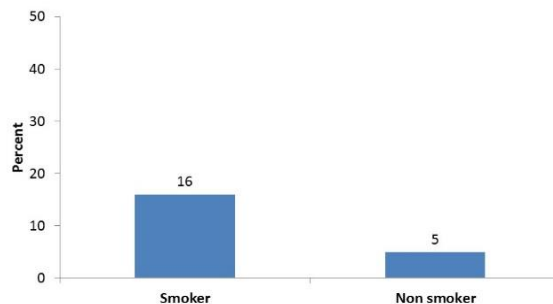
Moreover, 27.7% (14,500) of HS smokers said that they seriously considered attempting suicide during the past 12 months compared to 12.1% (43,500) among non-smokers.

***Based on the National Institute of Health (NIH) findings, alcohol consumption and tobacco use are closely linked behaviors. Thus, not only are people who drink alcohol more likely to smoke but also people who drink larger amounts of alcohol tend to smoke more cigarettes.<sup>7</sup>***

In Georgia, HS students who had their first drink of alcohol before age 13 years were more likely to smoke (33.5%; 17,500) than not to smoke (12.7%; 45,000).

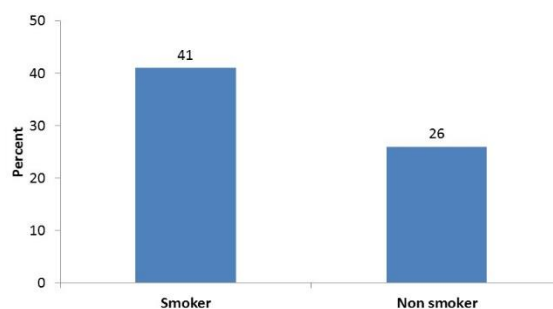
Additionally, Georgia HS student smokers were four times more likely (78.5%; 32,500) to say that they currently drink alcohol than non-smokers (19.8%; 64,000) (Figure 16).

Figure 14. Percentage of current high school students who experienced dating violence, by smoking status, Georgia, 2013



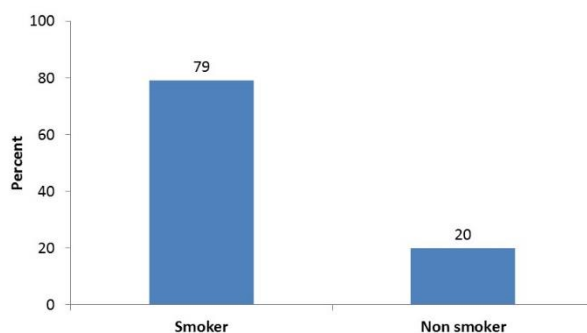
Source: 2013 Youth Risk Behavior Survey (YRBS)

Figure 15. Percentage of current high school students who felt depressed, by smoking status, Georgia, 2013



Source: 2013 Youth Risk Behavior Survey (YRBS)

Figure 16. Percentage of current high school alcohol drinkers, by smoking status, Georgia, 2013

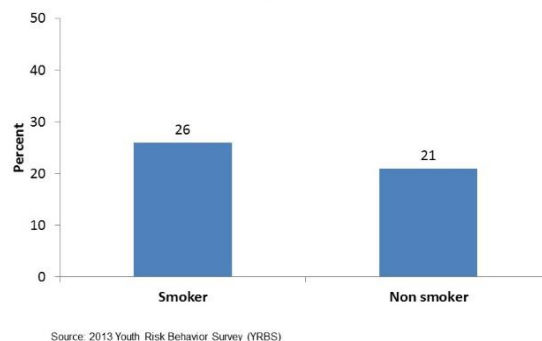


Source: 2013 Youth Risk Behavior Survey (YRBS)



Georgia HS students who do *not* smoke (26.3%; 91,500) tend to be more physically active a total of at least sixty minutes per day each day of the past seven days than smokers (21.8%; 11,500) (Figure 17).

Figure 17. Percentage of current high school students with physical activity, by smoking status, Georgia, 2013



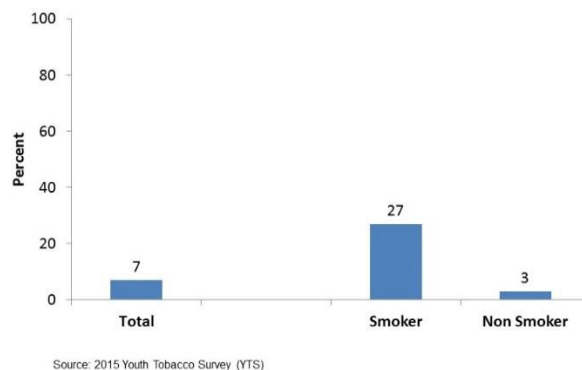
**Sleep problems experienced during youth are associated with increased incidence of adulthood depression, anxiety, attention problems, and aggressive behaviors.<sup>8, 10</sup> The Centers for Disease Control and Prevention (CDC) recommends that youth get an average of 9 to 10 hours of sleep during each 24-hour period.<sup>9</sup>**

Almost all Georgia HS students (90.9%; 401,000) reported they sleep less than 9 hours on an average school night regardless of their smoking status (smokers: 90.7%; 42,500 vs. non-smokers: 91.1%; 346,000).

Additionally, during the past 30 days, 6.8% (28,600) of Georgia HS students reported they sleep somewhere else—at friend's, relative's, or other people's house, in a motel or hotel, in a shelter or emergency housing, in a car, park, campground, or other public place, or move from place to place.

Among those who smoke cigarettes, 27.4% (12,100) said they sleep somewhere else besides home during the past 30 days, which is almost 9 times higher than those who do not smoke (3.4%; 12,500) (Figure 18).

Figure 18. Percentage of current high school smokers, by homeless status, Georgia, 2015



## 100% Tobacco-Free School Policy

**More than one in three Georgia HS students (35.3%; 17,000) reported they smoke cigarettes on school property. Among those who smoke, 11.5% (5,600) of them said they smoked on the school property every single day during the past 30 days.**

Tobacco-free school policies help to prevent smoking initiation among youth and stop youth smokers from becoming established adult smokers. The model “100% Tobacco-Free School Policy” includes no tobacco use or possession: <sup>11</sup>

- On school property, in school vehicles or at school functions held off school property
- By all students, staff, parents, and visitors
- At all times 24 hours, seven days a week

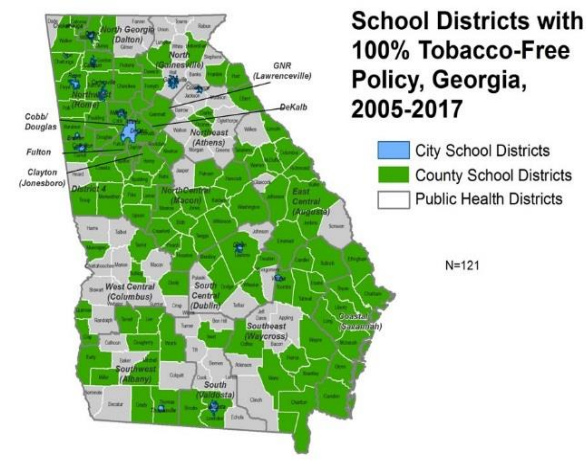
Studies found that 100% tobacco-free school policies contribute to reducing tobacco use among youth.<sup>1</sup> Smoking prevalence is lower among youth attending 100 % tobacco-free schools due to lack of visibility of others smoking on school grounds, including parents and school staff, which has been associated with social acceptability, <sup>12</sup> reduced negative role models, <sup>13, 14</sup> reduced opportunity to smoke and changing social norms.<sup>15</sup>

**Almost one in four Georgia HS students (23.3%; 103,500) reported they think young people who smoke cigarettes have more friends; 14.5% (67,500) of Georgia HS students said they would smoke if their best friends offered them a cigarette.**

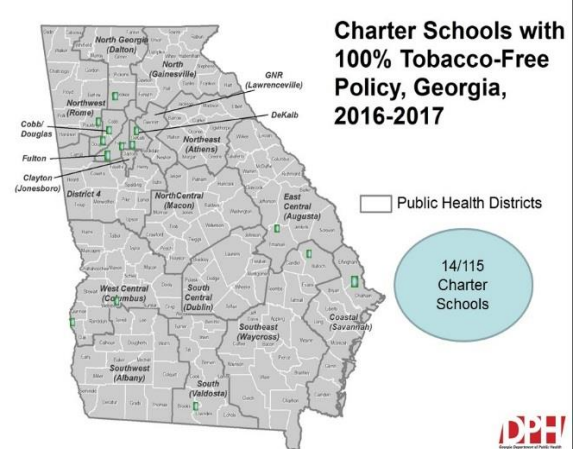
Georgia does not have statewide legislation mandating 100% tobacco-free policies in public K-12 schools. Therefore, each school district must pass the 100% tobacco-free policy individually.

In Georgia, currently, 67% (121/188) of cities and school districts and 13% (14/115) of charter schools passed 100% tobacco free policy protecting at least 1,466,143 youth from 1,889 cities and school districts; 22,634 youth from 14 charter schools; and thousands of employees are covered from the harmful effects of smoking. This is a significant increase from 2005, when only one Georgia school district had a 100% tobacco-free policy.

Map 1. School Districts with 100% Tobacco-Free Policy, Georgia, 2017



Map 2. Charter Schools with 100% Tobacco-Free Policy, Georgia, 2017



## Tobacco Retailers in Georgia

When tobacco retail shops are concentrated in certain neighborhoods or around schools, there are negative consequences for tobacco control and public health. Communities that are densely populated with tobacco retail shops make it easier for youth to get tobacco products.<sup>15</sup>

***According to the 2016 Food and Drug Administration (FDA) and the US Department of Revenue report, there are 51,055 tobacco retail shops in Georgia as of September 2016. Among those retail shops, one in four (25%), that is 12,944 retail shops, are located within ½ mile of any public school.***

Research also showed that youth who live or go to schools in neighborhoods with the highest density of tobacco licensed retailer shops (or with the highest density of retail tobacco advertising) have higher smoking rates compared to youth who live or attend school in neighborhoods with fewer or no tobacco retail shops.<sup>16</sup>

The retail environment is an important area of focus for tobacco control partners. Most tobacco products are bought in retail establishments (e.g., convenience stores, gas stations, grocery stores, and pharmacies), and the industry focuses most of its marketing efforts in these settings.<sup>17</sup> Several mechanisms can be used to implement point of sale (POS) strategies, including direct or stand-alone laws, licensing laws, and laws related to zoning or conditional use permits. The primary types of POS strategies are: <sup>18</sup>

- Reducing (or restricting) the number, location, density, and types of tobacco retail outlets
- Increasing the cost of tobacco products through non-tax approaches
- Implementing prevention and cessation messaging
- Restricting POS advertising
- Restricting product placement

## References:

1. 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.
2. U.S. Federal Trade Commission (FTC), Cigarette Report for 2013, 2016, <https://www.ftc.gov/system/files/documents/reports/federal-trade-commission-cigarette-report-2013/2013cigaretterpt.pdf>
3. Paynter, J & Edwards, R, "The impact of tobacco promotion at the point of sale: A systematic review," *Nicotine and Tobacco Research* 11(1):25-35, January 2009; Slater, SJ, et al., "The impact of retail cigarette marketing practices on youth smoking uptake," *Arch Pediatr Adolesc Med* 161(5):440-445, May 2007; Wakefield ,M, Germain, D, & Henriksen, L, "The effect of retail cigarette pack displays on impulse purchase," *Addiction* 103(2):322-328, Feb 2008. Center for Public Health Systems Science, Point-of-Sale Report to the Nation: The Tobacco Retail and Policy Landscape, 2014.
4. United States Department of Health and Human Services. Substance Abuse and Mental Health Services Administration. Center for Behavioral Health Statistics and Quality. National Survey on Drug Use and Health, 2014. ICPSR36361-v1. Ann Arbor, MI: Inter-university Consortium for Political and Social Research [distributor], 2016-03-22. <http://doi.org/10.3886/ICPSR36361.v1>. Youth defined as 12-17 year olds.
5. Henriksen, L, et al., "Targeted Advertising, Promotion, and Price for Menthol Cigarettes in California High School Neighborhoods," *Nicotine & Tobacco Research* 14(1):116-121, January 2012.
6. Dube, S, et al. "Pro-Tobacco Influences and Susceptibility to Smoking Cigarettes Among Middle and High School Students—United States, 2011," *Journal of Adolescent Health*, 52:S45-S51, 2013.
7. David J. Drobes, Ph.D. "Concurrent Alcohol and Tobacco Dependence," <https://pubs.niaaa.nih.gov/publications/arh26-2/136-142.htm>
8. A. M. Gregory, J. van der Ende, T. A. Willis, and F. C. Verhulst, "Parent-reported sleep problems during development and self-reported anxiety/depression, attention problems, and aggressive behavior later in life," *Archives of Pediatrics and Adolescent Medicine*, vol. 162, no. 4, pp. 330–335, 2008
9. CDC Features: "Sleep and Sleep Disorders," <http://www.cdc.gov/features/sleep/>
10. Velasquez-Portocarrero, C., Chung, A., Vajani, M., Bayakly, R. 2014 *Georgia Youth Tobacco-Free School Policy Report*. Georgia Department of Public Health, Health Protection, Epidemiology, Chronic Disease, Healthy Behaviors and Injury Epidemiology Section, August 2015
11. Alesci NL, Forster JL, Blaine T. Smoking visibility, perceived acceptability, and frequency in various locations among youth and adults. *Preventive Medicine* 2003;36(3):272–81.
12. Levy, D. T., Friend, K., and Polishchuk, E. Effect of clean indoor air laws on smokers: the clean air module of the SimSmoke computer simulation model. *Tobacco Control* 2001: 345-351.
13. Wakefield, M. & Chaloupka, F. J. (2000) Effectiveness of comprehensive tobacco control programs in reducing teenage smoking in the USA. *Tobacco Control*, 9, 177–186.
14. Wakefield and Forster. Growing evidence for new benefit of clean indoor air laws: reduced adolescent smoking. *Tobacco control* 2005, 14:292-293.
15. Novak et al., *supra* note 10, at 674-75; and Ying-Chih Chuang et al., *Effects of Neighbourhood Socioeconomic Status and Convenience Store Concentration on Individual Level Smoking*, 59 J. EPIDEMIOLOGY & COMMUNITY HEALTH 568, 570-71 (2005).

16. Henriksen et al., *supra* note 8; Scott T. Leatherdale & Jocelyn M. Strath, *Tobacco Retailer Density Surrounding Schools and Cigarette Access Behaviors Among Underage Smoking Students*, 33 ANNALS OF BEHAV.MED. 105,106 (2007); McCarthy et al., *supra* note 8; and Joshua H. West, et al., *Does Proximity to Retailers Influence Alcohol and Tobacco Use Among Latino Adolescents?* 12 J. IMMIGRANT & MINORITY HEALTH 626, 631 (2010).
17. Center for Public Health systems Science. *Point of Sales Strategies: A Tobacco Control Guide*. St. Louis Center for Public Health Systems Science. George Warren Brown School of Social Work at Washington University in Sr. Louis and the Tobacco Control Legal Consortium, 2014.
18. National Cancer Institute. *The Role of the Media in Promoting and Reducing Tobacco Use*. Bethesda, MD: National Institutes of Health; 2008.