



### Episode Details:

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Title: Episode 16: Tobacco-Free Pharmacies

Description: Pharmacies are licensed healthcare facilities uniquely positioned to provide healthcare services and health advice directly to community members across the US. Yet, many pharmacies still widely promote and sell tobacco products, the leading cause of preventable disease and death in this country. This episode focuses entirely on tobacco-free pharmacies. We'll hone in on evidence-backed research, dive into case studies and success stories, and consider the policy options that can establish tobacco-free pharmacies in *your* community

### Transcription:

I'm Allie Rothschild and you're listening to the Counter Tobacco Podcast.

Pharmacies are state and federally licensed healthcare facilities that are uniquely positioned to provide healthcare services and health advice directly to members of the community. Yet, beyond supplying life-saving medications, health remedies, and important health information, many pharmacies continue to sell tobacco products, which are the leading cause of preventable disease and death in the country and are responsible for killing more than 480,000 Americans each year. This episode will be all about tobacco-free pharmacies; we'll review evidence in support of removing tobacco products from pharmacy shelves, take a dive into some case studies and success stories, and consider the policy options that can establish tobacco-free pharmacies in your community.

Despite their focus on health and wellness, pharmacies comprise approximately 10% of all tobacco retailers and account for about 5% of all cigarette sales. More than 2 million adult smokers in the US last purchased their cigarettes from a pharmacy, and 5% of customers who fill a prescription for a chronic illness that could be worsened by smoking leave the pharmacy with a pack of cigarettes in their hand.

This is in part because pharmacies with slogans like "at the corner of happy and healthy" make purchasing tobacco products cheap and easy. A 2016 study from California found that cigarettes were roughly 46 cents to a dollar and ten cents cheaper at pharmacies than at other tobacco retailers like convenience stores and gas stations. As well, price promotions (like discounts and buy-one-get-one free offers), which make tobacco products more affordable for the consumer, were more common at pharmacies than almost all other tobacco retailers.

The fact that tobacco products are not only available but *cheaper* at pharmacies is illogical. Foremost, selling deadly products at a healthcare institution that provides community members' with medical advice and access to licensed healthcare providers conveys mixed messages about the dangers of tobacco products. Selling tobacco products at pharmacies implies approval of tobacco products from the healthcare community and sends a fictitious message that smoking isn't really "*that*" dangerous. It also adds to the abundance of places a person can easily stop at to buy tobacco products and reinforces positive social perceptions and norms around smoking and vaping.



Stocking and promoting tobacco products at pharmacies also undermines peoples' quit attempts. In fact, just last week, I went to Walgreens to pick up a few items and lo and behold, looming under a large sign advertising Walgreens as "happy and healthy since 1901", was an even more dominant power wall of tobacco products, all of which just so happened to be placed right next to the cessation products. The prominent display of tobacco products, coupled with the sales specials going on and the placement of these items not just in the same general retail space, but right next to cessation products, makes it extremely hard to for individuals attempting to quit to successfully abstain from purchasing and using tobacco products.

Additionally, selling tobacco products is in direct opposition to the code of ethics that guide pharmacists' work. Pharmacists supply medications that are used to treat many of the conditions that are caused or exacerbated by tobacco use. This conflict of interest is the reason why pharmacists are generally in support of banning tobacco products. The Truth Initiative actually held a discussion with a group of pharmacists back in December of 2018 and found that most pharmacists supported banning sales of tobacco products in pharmacies and most also thought doing so would improve the health of their customers and the surrounding community. And on top of this, nearly all the pharmacists in the sample were concerned about their customers' use of tobacco and had helped their customers' quit smoking in some form.

Not just pharmacists support a ban though. According to the Centers for Disease Control and Prevention, most Americans, 2 out of 3, believe pharmacies should not be allowed to sell tobacco products. Out of smokers, 1 in 2 believe pharmacies should not be allowed to sell tobacco products. Walgreens is still one of the major pharmacy chains that does sell tobacco products, but a 2019 Truth Initiative survey of Walgreens customers found that 3/4 would support the chain's decision to stop the sale of tobacco products and, actually, a quarter said they would shop at Walgreens *more* often if Walgreens stopped selling tobacco products.

Some cities and states have taken all this into consideration and have passed comprehensive licenses or bills that have restricted pharmacies from selling tobacco products. San Francisco was the first city in the US to ban tobacco sales in pharmacies, and did so back in 2008. Boston followed becoming the second city to do so, also in 2008. Since then hundreds of cities and counties in California, Massachusetts, and New York have passed similar bans and in Vermont, 98% of independently-owned pharmacies are tobacco-free. In 2019, Massachusetts became the first *state* to prohibit the sale of tobacco products at pharmacies, hospitals, and other health care institutions and this year, 2020, New York joined Massachusetts becoming the second state to ban the sale of tobacco products at pharmacies .

Evidence supports the effectiveness of these tobacco-free pharmacy ordinances in reducing tobacco retailer density and encouraging smoking cessation. Analyses from Massachusetts and California found that cities that banned sales at pharmacies saw a 3x greater reduction in retailer density compared to cities that did not implement a ban. Additionally, a study out of North Carolina determined that implementation of a tobacco-free pharmacy policy would reduce tobacco retailers in the state by more than 1,000 and would lower tobacco retailer density by 13.9%. And, lower density would, in turn, reduce exposure to POS advertising and marketing, accessibility to tobacco products, impulse purchasing, and tobacco use.

Establishing tobacco-free pharmacies is also an evidence-backed way to encourage quit attempts and quitting. Here's a little case study. Back in 2014, CVS announced they would stop selling tobacco products, becoming the first major retail pharmacy chain to do so. Following the removal of tobacco products from CVS shelves, states where CVS had a significant market share actually saw their total number of cigarette purchases decrease by 1%. Researchers also saw that smokers who had previously bought their cigarettes exclusively from CVS were 38% more likely to stop buying cigarettes altogether, compared to those who purchased their cigarettes from only non-CVS retailers. In the 2 years following the removal of tobacco products from CVS, quit attempts also increased by 2% among smokers who lived in counties with a high density of CVS stores compared to smokers who lived in areas with no CVS stores. And lastly,



after the decision to remove tobacco products, areas where CVS had a large retail presence saw a decrease in sales of cigarette packs and an increase in sales of nicotine patches.

It's also probable that banning sales of tobacco products at pharmacies could reduce youth use, since pharmacies illegally sell tobacco products to underage individuals at a surprisingly high rate. A study conducted from 2012 to 2017 found that Walgreens stores sold tobacco products to undercover youth decoys during FDA visits roughly 1 out of every 10 times. Other pharmacies similarly had poor violation rates, ranging from 4 to 8% of the time. In 2019, the FDA found that the Walgreens corporate violation rate was even higher – at 22% - when you look at the number of violations since the FDA began their inspections in 2010. Removing tobacco products from pharmacies could limit youth access to these harmful and addicting products.

I want to point out that the research has also shown that stopping tobacco sales at pharmacies has minimal economic impact on the businesses. Researchers found that nearly 90% of California's tobacco-free independent pharmacies experienced either no change in business or actually an increase in business once they stopped selling tobacco products.

So now we know, there's a lot of evidence for tobacco-free pharmacies, there's a lot of support, there's limited economic impact....so what are the policy options? The first is a policy, at the federal, state, or local level that bans the sale of tobacco products at pharmacies. This can be a free-standing policy or it can be part of a licensing scheme. For the latter, many states and local jurisdictions require tobacco retailers to obtain a tobacco retail license in order to sell tobacco products. The license can include a provision that prevents pharmacies from obtaining the license. The license can also establish fines and penalties for businesses, including pharmacies, that sell or continue to sell tobacco products without a license. For states or local jurisdictions that already have a tobacco retailer licensing system in place, a pharmacy ban can be added into an existing licensing scheme. At the local level, these stand-alone laws and licensing provisions have faced legal challenges over the years, but overall, these ordinances have survived these lawsuits, with the courts upholding the idea that local governments do have the legal authority to prohibit pharmacies from selling tobacco products. Resultingly, over 175 municipalities all across the US, and 2 states (Massachusetts and New York), have successfully passed and upheld policies establishing tobacco-free pharmacies. Of course, when going this route, it's important to first consult with a legal TA center or conduct a legal analysis, and to carefully draft an ordinance with very clear language. I've included model ordinance language as one of the resources in the show notes, so please feel free to take a look at those documents.

The second route is voluntary corporate action where pharmacies are called upon to voluntarily stop the sale of tobacco products at their retail locations. While this may work on a local level with independent pharmacies, public health groups have been calling on Walgreens to follow CVS's lead and end tobacco sales for over 5 years now, and they have yet to do so outside of a small pilot in Gainesville, FL. Additionally, while voluntary corporate action is welcome, governmental policy can have a bigger impact and a much bigger reach. State and local governments do not need to wait for corporations to finally do the right thing—nor should they. It's important to keep the pressure on corporations to do more AND keep the pressure on federal, state, and local government to take steps to make these and more comprehensive tobacco control policies a reality across all communities and for all retailers.

Of course, no matter which route is taken there's two important things to consider now - enforcement and health equity. For the time being, some major pharmacy chains like Walgreens as well as independent pharmacies will continue to sell tobacco products. With violation rates of illegal sales to minors so high in pharmacies, it's important that we continue to emphasize and support enforcement efforts, and ensure compliance to T21 and all other applicable tobacco control laws. As former FDA Commissioner Scott Gottlieb stated, "Ignoring the law and then paying associated fines and penalties should not simply be viewed as a cost of doing business." We agree, and we know that [tobacco retailer licensing](#) systems, particularly at the local level, allow for better monitoring of retailer



compliance and a wider range of penalties, including having a retailer's license to sell tobacco products suspended or revoked for repeated violations.

Additionally, it's critical to consider health equity approaches. A ban of tobacco sales at pharmacies may result in steeper decreases in retailer density in predominately high-income, white neighborhoods. To ameliorate this disparity, a tobacco-free pharmacy provision can and should be paired with other retailer restrictions such as a neighborhood or population- based cap on the number or density of tobacco retailers in a community or a restriction on the establishment of tobacco retailers near schools or other community locations more heavily trafficked by youth. Including these types of conditions in an ordinance or a license can help to reduce income and race-based disparities in retailer density and proximity and help to achieve a more equitable tobacco control landscape.

More information, model language for ordinances, and the sources used in this episode will all be included in the show notes on CounterTobacco.org. If you have any questions regarding topics from this episode or if you have any suggestions on topics to cover or guests to interview for future episodes, please email us at [info@countertobacco.org](mailto:info@countertobacco.org).

I appreciate you listening to the Counter Tobacco podcast and I look forward to you joining me again next time.