

Conditional Use Permits for Tobacco Retailers in Sacramento County

Final Evaluation Report 2014-2017



Sacramento County Department of Public Health Tobacco Education Program

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The Sacramento County Tobacco Education program would like to thank the Sacramento County Tobacco Control Coalition (TCC) members for their continued support and dedication towards making Sacramento County a tobacco-free society in the 21st century. We would like to extend a personal thank you to our Executive Committee: Kimberly Bankston-Lee (Chair), Alison Atkins (Vice-Chair), Carolyn Martin (Past Chair), Twlia Laster (Secondhand Smoke Subcommittee Chair) Joelle Orrock (Youth and Young Adult Subcommittee Chair), and Elisa Tong, M.D., MA (Cessation Subcommittee Chair) for your assistance in retail activities such as presentations to policymakers and participation in Healthy Stores for a Healthy Community (HSHC) observation surveys as well as your invaluable expertise and guidance.

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Abstract

Sacramento County is a highly populated urban and rural area with approximately one third of its population under the age of 21, accounting for a fairly large percentage of youth and young adults respectively (CCHAT, 2016). Youth and young adults are especially vulnerable to the predatory marketing of the tobacco industry. In recent years, the retail environment has been a promising avenue for tobacco control change as evidenced by statewide efforts such as the Healthy Stores for a Healthy Community (HSHC) campaign. Due to political momentum, needs assessment results, and support of the local Tobacco Control Coalition (TCC), the retail strategy selected for the Sacramento County Tobacco Education Program (TEP)'s 2014-2017 Scope of Work (SOW) was the implementation of Conditional Use Permits (CUPs) to reduce the location of tobacco retailers near youth-sensitive areas.

Initial political will proved fruitful when a CUP policy was passed in the target jurisdiction less than halfway through the three year plan due to a combination of strategic meetings with key decision makers and good timing. Thus, the objective was achieved. There were a few SOW activities specific to CUP policies such as public intercept surveys to assess community support for CUP policies, a policy record review to assess the number of existing CUP policies and differences between them, and a pretest posttest observation in the jurisdiction that passed a CUP policy. The majority of key activities, however, were part of statewide collaborative efforts related to the HSHC retail campaign. HSHC activities included public intercept surveys, key informant interviews, store observation surveys, and implementation and evaluation of a regional media event. Most activities were viewed as successes with the exception of the media event, which was marked by significant challenges.

The activities conducted in the SOW cycle provided a rich source of data to inform future activities. Results and resources were shared with the Coalition and other community partners, and collaborative efforts for the next SOW cycle were explored. Lessons learned include the importance of recruiting and maintaining chronic disease prevention partners, involving youth/young adults throughout the SOW, and utilizing culturally competent strategies in order to strengthen approaches to the implementation of social norm change.

Aim and Outcome

In order to reduce youth exposure to tobacco advertising and access to tobacco products in the retail environment, the Sacramento County Tobacco Education Program (TEP) set forth the following objective:

“By June 30, 2017, at least one jurisdiction within Sacramento County will adopt and enforce a conditional use permit (CUP) policy to prohibit the location of tobacco retail outlets within 1,000 feet of youth-sensitive zones such as schools, parks, and youth facilities.” The corresponding Communities of Excellence (CX) indicator was Indicator 3.2.2: Tobacco Retailer Density/Zoning.

By the end of the 2014-2017 Scope of Work (SOW) cycle, the objective had been achieved. One of the two target jurisdictions, Unincorporated Sacramento County, adopted a Conditional Use Permit (CUP) policy on July 22, 2015 which became effective on September 25, 2015. Additionally, CUP policies were passed in the cities of Folsom (adopted June 24, 2014, effective July 24, 2014) and Rancho Cordova (adopted February 1, 2016) during the current SOW cycle, although the TEP did not play an integral role in policy adoption as it did in Unincorporated Sacramento County.

Background

Sacramento County is both an urban and rural county of approximately 1,450, 277 people located in the Gold Country region of California. The county consists of eight jurisdictions including seven cities (Citrus Heights, Elk Grove, Folsom, Galt, Isleton, Rancho Cordova, and Sacramento) as well as the unincorporated area of Sacramento County. The three most populous jurisdictions are Unincorporated Sacramento County (565, 496), the City of Sacramento (476, 075), and Elk Grove (158, 455). The ethnic composition of Sacramento County is as follows: White (47%), Hispanic/Latino (22%), Asian/Pacific Islander (16%), Black (10%), and all other races (5%). Twenty-five percent of the population is under the age of 18, and 30% are under 21, accounting for a relatively large percentage of youth and young adults (CCHAT, 2016).

While cigarette smoking rates have decreased substantially and steadily since the establishment of the California Tobacco Control Program (CTCP) in 1988, Sacramento County has consistently had a higher smoking prevalence than the state average. According to data from the California Health Interview Survey (CHIS), in 2012, the adult cigarette smoking rate in California was 11.7% as compared to 17.9% in Sacramento County (California Tobacco Facts and Figures 2015). Similarly, in 2017, the adult cigarette smoking rate was 12.7% in California (a slight increase despite the overall decreasing trend since 1988 in the state), but 16.9% in Sacramento (Healthy Stores for Healthy Community, 2017).

Another important tobacco trend has been the increase in the use of Electronic Smoking Devices (ESDs), also known as electronic cigarettes, e-cigarettes, vaping devices, etc. in recent

years. While the products do not contain the tobacco leaf itself, most do contain nicotine, the addictive chemical derived from tobacco. These products are popular with youth due to colorful packaging, “kid-friendly” flavors such as “Chocolate,” “Cherry Crush”, and “Gummy Bear,” and myths that the products are “safe” alternatives to traditional cigarettes. According to the Behavioral Risk Factor Surveillance System (BRFSS) and California Adult Tobacco Survey (CATS) data, ESD use nearly doubled among adults (from 1.8% to 3.5%) and quadrupled among young adults aged 18-24 (from 2.2% to 8.6%) between 2012 and 2013 (California Tobacco Facts and Figures 2015). These numbers have increased in 2017, with rates of youth “using any tobacco products,” ESDs included, at 13.8% in California and 14.6% in Sacramento County (Healthy Stores for Healthy Community, 2017).

Due to increased popularity of emerging tobacco products such as ESDs among youth and young adults, a relatively large population of youth and young adults in Sacramento, and consistently higher rates of tobacco use in Sacramento than the state, a focus on tobacco control efforts is essential. Besides youth and young adults, other vulnerable subpopulations include low income individuals, individuals of color, and Lesbian, Gay, Bisexual, Transgender, Queer (LGBTQ) individuals who are disproportionately targeted by the tobacco industry. Factors such as tobacco price, packaging, advertising, and location make the retail environment a rich opportunity to explore and implement tobacco control strategies and protect these at-risk individuals (CDC, 2016).

Because the retail environment is such a powerful avenue for change, CTCP has required all local health departments to include a retail objective in their Scope of Work (SOW). The 2014-2017 funding cycle was the first time that the Sacramento County Tobacco Education Program (TEP) had included a retail objective focused on Conditional Use Permit (CUP) policies. Prior to this, the TEP pursued Tobacco Retailer Licensing (TRL) as the focus of a retail objective and had worked diligently on this tobacco control strategy for over ten years.

A Conditional Use Permit (CUP), also referred to as a Special Permit, is an instrument used in zoning that allows a jurisdiction to place restrictions on land use by way of location and/or type of business. This is often done to determine whether the land use will be appropriate given the environment and the General Plan. Local tobacco control efforts often focus on adoption of CUP policies because of their ability to limit the density of tobacco retailers, the types of retailers that can sell tobacco, and the location of tobacco retailers. For example, stipulations of CUPs specific to tobacco retailers might prohibit smoke shops from being within 500 feet of each other (same-use restriction) and/or within 1,000 feet of schools (sensitive-use restriction). The main goal of requiring CUPs is to reduce access to tobacco, especially for vulnerable populations such as youth and low-income populations.

The idea of pursuing CUP policies came about when the City of Sacramento approached the Sacramento County Tobacco Control Coalition (TCC) with an interest in mandating a CUP for tobacco retailers and a request for assistance. Coalition members and TEP staff actively supported this cause by providing data from previous Youth Purchase Surveys and creating maps on retail density. The City of Sacramento successfully adopted a CUP policy on April 21,

2012. As set forth in the policy, any tobacco retailer that has 15,000 square feet or less of gross floor area and is located within 1,000 feet of a public or private school (K-12), measured for the nearest property lines of the affected parcels, must obtain a Conditional Use Permit from the planning director (Chapter 17.442.040 of the Sacramento City Code). While the Coalition and TEP did provide assistance, the City was the primary driver behind the creation and passage of the policy.

On October 29th, 2013, the TEP conducted a Communities of Excellence (CX) Needs Assessment to rate a variety of tobacco control indicators and assets as set forth by CTCP. This assessment is done approximately every three years by each CTCP-funded Local Lead Agency (LLA) with members of the local Coalition and other community stakeholders to determine areas of need and focus. After factoring in other variables such as political will, public support, and feasibility, the results of the needs assessment are then used as a foundation to draft objectives for the upcoming SOW. Participants in the 2013 CX planning session included 17 Coalition members, college students, interns, and community members who assessed a total of 12 indicators and five assets. The indicator on tobacco retailer density/zoning (Indicator 3.2.2) received a score of 58%, identifying it as an area of need. During the planning session, it was noted that there was a lack of data on the topic and an interest in pursuing the topic based on the youth component. For these reasons, along with the fact that there was existing political momentum and that the Coalition had waning interest in continuing to pursue TRL (which showed great initial success in the first few years but had become stagnant), the TEP decided to focus on CUP for its retail objective for the 2014-2017 SOW.

Evaluation Methods and Design

The 2014-2017 evaluation plan provided both formative data to support intervention activities and lessons learned along the way and outcome data to measure changes in a jurisdiction that adopted and implemented a CUP policy during the SOW. Specifically, the outcome evaluation activity utilized a non-experimental pretest posttest design. Key process and outcome evaluation activities are summarized in Table 1.

The outcome (implementation of the CUP policy) was measured by comparing observations of the number and visibility of tobacco retailers, the presence of signage, and other evidence of the sale of tobacco/tobacco use near the retailers located within 1,000 feet of youth-sensitive zones.

Process data was obtained from six main evaluation activities. Public intercept surveys in Year 1 focused on assessing opinions on CUP policies in the target jurisdiction. A policy record conducted in Year 2 was performed to count the number of CUP policies passed during the SOW and assess similarities and differences. Store observation surveys in Year 2 along with public intercept surveys; key informant interviews; and a media activity record, all conducted in Year 3, were part of the Healthy Stores for a Healthy Community (HSHC) statewide data collection effort focused on the retail environment. Survey Analytics and Microsoft Excel were

used to analyze quantitative data through descriptive statistics, and content analyses were performed to analyze qualitative data.

To help ensure that high quality data was collected, TEP staff attended all of the statewide and regional training events led by CTCP and the Tobacco Control Evaluation Center (TCEC) in preparation for the HSHC related evaluation activities. TEP Staff conducted a formal data collection training with 17 adults to prepare for the HSHC store observations. TEP staff also personally conducted many of the observations. Informal trainings were given for the two rounds of public intercept surveys and the pretest posttest CUP observation survey. TEP staff again assisted in the direct completion of these activities. Key informant interviews were conducted by TEP staff members only. All data collectors and interviewers were instructed to work in pairs for safety and were educated about how to avoid unsafe situations.

These evaluation activities provided important information on the availability of tobacco and other products in stores, public and key decision maker opinion on various tobacco control issues, effects of and differences between CUP policies, and the level of media coverage of the statewide HSHC press event and related tobacco topics.

Limitations

The major limitations of this design are as follows:

- 1) Not having a comparison jurisdiction to assess the effects of policy implementation in the target jurisdiction
- 2) Utilization of convenience samples in public intercept surveys, which may not be representative of the entire jurisdiction or county in which they were conducted

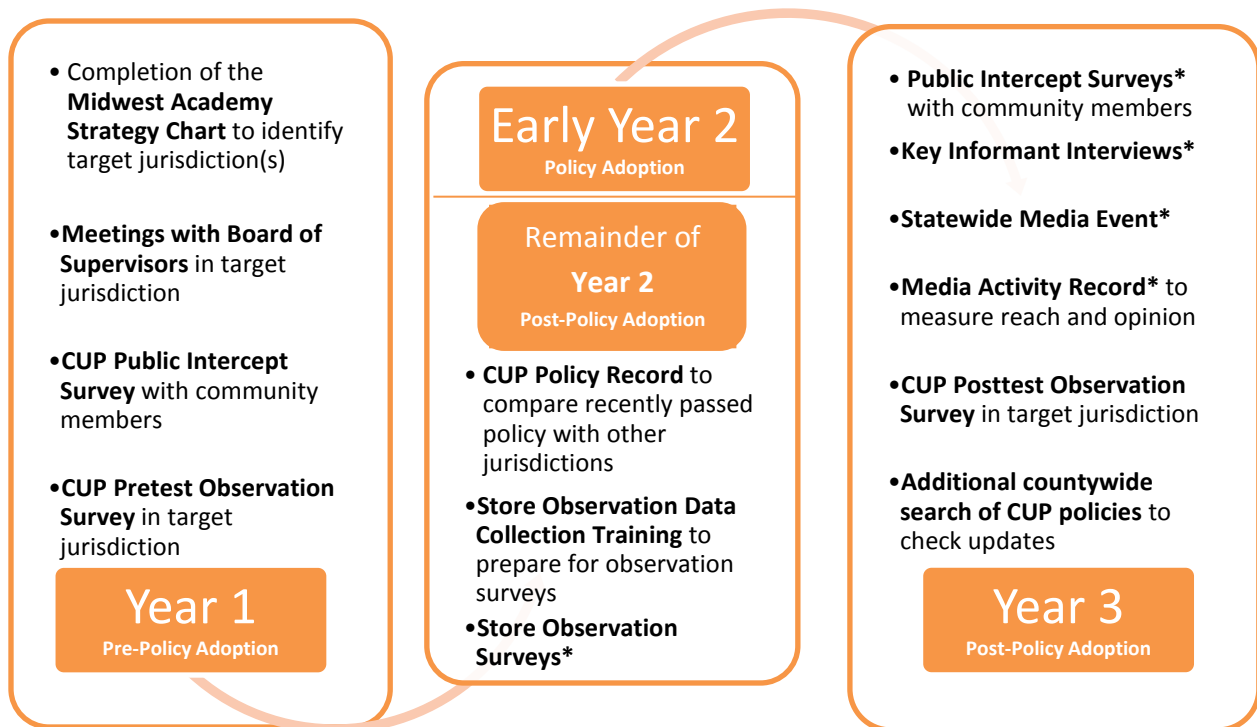
Table 1: Key Outcome and Process Evaluation Activities

Evaluation Activity	Purpose	Sample	Instrument Source	Analysis Method	Timing/Waves
Outcome					
Observations of the number and visibility of tobacco retailers and the presence of tobacco signage/use in youth-sensitive zones within 1,000 feet of tobacco retailers	Assess the problem of tobacco retailer proximity to youth-sensitive zones and the effectiveness of the (CUP) policy	Convenience sample of 21 youth-sensitive zones in Unincorporated Sacramento County	Project Staff	Descriptive Statistics	Pre policy adoption Year 2 (1st wave) Post policy adoption Year 3 (2nd wave)
Process					
CUP Public Intercept Survey	Measure public opinion on CUP policies	Convenience sample of 113 Elk Grove city residents	Tobacco Control Evaluation Center	Descriptive statistics	Year 1 (1 wave)
CUP Policy Record	Conduct a count of the number of CUP policies passed in Sacramento County and assess differences	Purposive sample of CUP policies passed in 2 Sacramento County jurisdictions	Project Staff	Descriptive statistics and content analysis	Year 2 (1 wave)
Statewide HSHC Store Observations	Measure the advertising and accessibility of tobacco and other products	Census of 346 stores within 19 randomly selected zip codes	Stanford University	Descriptive statistics	Year 2 (1 wave)
Statewide HSHC Public Intercept Survey	Measure public opinion on policies related to the retail environment	Convenience sample of 104 Sacramento County residents	Tobacco Control Evaluation Center	Descriptive statistics	Year 3 (1 wave)
Statewide HSHC Key Informant Interviews	Measure the level of support or opposition to a variety of tobacco control issues	Purposive sample of 9 key stakeholders in Sacramento County	Tobacco Control Evaluation Center	Descriptive statistics and content analysis	Year 3 (1 wave)
Statewide HSHC Media Activity Record	Measure the level of support or opposition, as well as reach	Census of 13 print, radio, and online media outlets in the area	Tobacco Control Evaluation Center	Descriptive statistics and content analysis	Year 3 (1 wave)

Implementation and Results

The order of intervention and evaluation activities was designed so that actions early on would help provide a foundation for progress and that lessons learned would influence future strategies and partnerships. Figure 1 illustrates an overview of the 2014-2017 SOW timeline for the CUP objective.

Figure 1. Key Intervention and Evaluation Activities in Chronological Order



*Evaluation activity that was part of the Healthy Stores for a Healthy Community (HSHC) statewide data collection effort coordinated by the California Tobacco Control program among all Local Lead Agencies in California

Target Jurisdiction Selection

TEP staff facilitated a strategic planning session on December 4, 2014 with Coalition members and other community stakeholders. The purpose of this session was to complete the Midwest Academy Strategy Chart (template provided by the state) to identify both short and long term goals, allies, opponents, and tactics for the pursuit of the TEP CUP policy objective. The two target jurisdictions identified in the session were the cities of Elk Grove and Unincorporated Sacramento County, and a Midwest Academy Strategy Chart was completed for each. The rationale for the selection of Unincorporated Sacramento County as a target was that there was existing political momentum for this type of policy in this jurisdiction. Elk Grove was identified

as a fruitful second option should momentum wane or a CUP policy pass in Unincorporated Sacramento County, either of which would dictate the need for focus on a different jurisdiction for the remaining SOW.

Meetings with Board of Supervisors

What began as a complaint from one constituent regarding a smoke shop located close to her daughter's school ultimately resulted in the passage of a CUP policy for certain tobacco retailers in Unincorporated Sacramento County. Three Coalition members and one TEP staff person met with four of the five county Board of Supervisors to discuss a variety of tobacco control topics: smoke-free multi-unit housing, inclusion of electronic cigarettes into existing local ordinances, and CUPs. These meetings took place on October 3, 2014 with Supervisors Don Nottoli and Susan Peters, on January 22, 2015 with Supervisor Phil Serna, and on February 26, 2015 with Supervisor Patrick Kennedy. It turned out that the Board of Supervisors were already working on updating the Sacramento County Zoning Code, which is one option for inclusion of CUP language, the other being a separate ordinance in a jurisdiction.

CUP Public Intercept Survey

To assess public support for CUP policies, a wave of public intercept surveys was conducted in the City of Elk Grove, one of the two target jurisdictions identified in the Midwest Academy strategy session for the CUP objective. Since a public intercept survey regarding tobacco accessibility, attitudes, and tobacco control policy strategies had already been collected in the unincorporated area of Sacramento County for the 2014 public intercept survey, the 2015 public intercept survey was carried out only in the City of Elk Grove. The surveys were administered in person on weekdays and weekends between 9:00 a.m. and 7:00 p.m. from April 15th through April 21st, 2015 and also online. In-person survey sites included agencies (e.g. WIC Resource Center in Elk Grove), community events (e.g. Elk Grove Electronic Recycling Event) and recreational areas (e.g. Elk Grove Regional Park) from which prior permission had been obtained by TEP staff. Online surveys were distributed to Day Care Center staff and friends and families of staff who resided in Elk Grove.

The sample was a convenience sample of Elk Grove residents over the age of 18. A total of 113 surveys were collected, 105 of which were considered to be complete. The survey completion rate was 82.2%. In-person interviewers consisted of four community volunteers along with a student intern and a Health Education Assistant. Interviewers received a brief survey specific training from the TEP Health Educator and were assigned to interview sites. Interviewers worked in pairs for safety, although each interview was conducted by a single interviewer which allowed two interviews to be conducted simultaneously.

The 2015 public intercept survey included a total of nine closed end questions on the topic of CUP policies as well as questions on sociodemographic information. While the main goal was to garner opinion on CUP policies for tobacco retailers, for comparison purposes, the survey also included questions related to sugar sweetened beverages. (A copy of the survey instrument is

provided in Appendix A.) Sociodemographic characteristics of the 105 respondents in the final sample were as follows: 63 females (60%), 41 males (39%), and 1 (.9%) declining to state gender identity. Forty-eight respondents (45.3%) reported being between the ages of 18-25, 43 respondents (40.6%) between the ages of 26-49, 14 respondents (13.2%) between the ages of 50-64 and 1 (0.9%) being 65 years or older. A majority (68, 64.8%) of the respondents had never used tobacco. Twenty-one (20%) reported being a former tobacco user, but currently not using. Thirteen (12.4%) respondents reported using tobacco, but only once in a while, and 3 respondents (2.8%) reported using tobacco on a regular basis.

A policy banning stores within 1,000 feet of youth-sensitive zones from selling tobacco was supported by 79 (75.2%) of respondents. In order to determine whether there were any differences in support based on the type of youth-sensitive locations included in the policy, survey participants were asked whether tobacco products should be sold within 1,000 feet of three different locations: schools, parks, and youth facilities. There were no differences found, with the majority of respondents, 77 (73.3%) for each of the three locations, stating that stores should not be able to sell tobacco within a 1,000 feet of the sites. About half of respondents (49, 46.7%) indicated that they would support a law that would allow for the grandfathering of stores (current stores would not be subject to the new policy). Grandfathering is a common practice included in the implementation of CUP policies to avoid community and retailer retaliation. While there was no difference in opinion based on the type of youth-sensitive zone subject to the hypothetical CUP policy for tobacco retailers, there was a substantial difference seen when comparing support for a CUP policy for tobacco products versus sugar sweetened beverages. Only 59 (56.2%) of respondents supported a policy that would ban stores within 1,000 feet of youth-sensitive zones from selling sugar sweetened beverages, which is approximately 20% less support than observed for the same policy for tobacco products.

Despite a notable difference in support for CUP policies for tobacco products versus CUP policies for sugar sweetened beverages, respondents perceived the sales of both types of products as problematic. Sixty-four (63.9%) of respondents stated that proximity of tobacco retailers near schools, parks, and youth facilities makes it more likely for youth to smoke and/or use tobacco products. A similar opinion was seen between stores that sell sugar sweetened beverages and rates for obesity and overweight amongst youth with 60 (57.1%) respondents indicating an association. While the accessibility of both tobacco and sugar sweetened beverages in the retail environment were perceived to influence consumption and have negative health consequences, there was much stronger support for a CUP policy prohibiting the sale of tobacco products near youth-sensitive zones than one prohibiting the sale of sugar sweetened beverages in the same areas.

There were a few limitations to the survey design and implementation. Although the survey read at a 7th grade level, it was reported by several data collectors that respondents needed more clarification with the proposed policies questions, for example clarification between support and opposition. Also, the majority of the sample was non-tobacco users, which may have resulted in higher support for CUP policies pertaining to tobacco than if additional tobacco users had been included.

CUP Policy Implementation: Pretest Observations

To assess the problem of tobacco retailer proximity to youth-sensitive zones such as schools, parks, and youth facilities and compare baseline data with data collected after the passage of a CUP policy in the target jurisdiction, an observation survey instrument was created. The survey instrument included questions on whether the youth-sensitive zone was enclosed or open; the total number of people present and whether they were children, teens/young adults, or adults; the number of people smoking; the number of “No Smoking” signs and the visibility of these signs; the amount of tobacco litter; and the type and visibility of tobacco retailers from the youth-sensitive zone. (See Appendix B for a copy of the survey instrument.) A total of 21 youth-sensitive sites were selected based on two criteria: 1) located in Unincorporated Sacramento County and 2) located within 1,000 feet of a tobacco retailer.

The observation study pretest was conducted over the course of four days in July 2015 to determine the influence of tobacco retail on nearby youth-sensitive zones in Unincorporated Sacramento County before the CUP policy was adopted. All 21 youth-sensitive zones were observed by three community volunteers in July 2015. Volunteers went through an informal training session where they were taught how to use the survey instruments, how to conduct the survey, and participated in mock surveys. To record any noteworthy observations, data collectors were asked to leave comment in the bottom section of the survey and/or take photos. Table 4 shows a comparison of key results between the pretest and posttest survey (see Pages 29-30). (A copy of the full observation survey report is included in Appendix B along with the survey instrument.)

Pretest survey results point to a need to increase “No smoking” signage and to improve trash collecting efforts in youth-sensitive zones because exposure to tobacco litter in areas frequented by youth may desensitize them to tobacco products. If they are seeing high amounts of tobacco use and/or litter in their parks and schools, youth may be less afraid to try tobacco in the future. Limitations of the study include the fact that surveys were only conducted during daylight hours (for safety reasons) which may have left out important data during the evening, late-night, and morning hours. Also, there may have been different interpretations of data between data collectors such as the assessment of the amount of tobacco litter, since the terms were not defined by parameters (ex. 5 or fewer cigarette butts= “Little,” 5-10 cigarette butts = “Some”) which could have affected the reliability of results.

Passage of the CUP Policy in Unincorporated Sacramento County

Due to good timing as well as the interest generated from the meetings with the Sacramento County Board of Supervisors, in Year 1, the county zoning code was updated to include distance requirements for certain tobacco retailers near youth-sensitive zones. Passed on July 22, 2015, the CUP policy was effective in Unincorporated Sacramento County on September 25, 2015. The policy mandates that there must be a 100 feet separation between hookah/smoking/vape lounges or smoke shops and residential zones, a 1,000 feet separation between these types of stores (same-use), and a 1,000 feet separation between these stores and sensitive-use zones,

defined as: “child day care center, library, public park, church, community center, public or private school, designated school bus stop, or indoor or outdoor recreation facilities that are primarily designed to serve persons under the age of 18” (Section 3.7.1.B. of the Sacramento County Zoning Code).

Comparison of CUP Policies across Sacramento County Jurisdictions

A policy record was conducted in Year 2 to assess similarities and differences between policies passed in Sacramento County from the beginning of the SOW (July 1, 2014) through December 2015, about halfway through the SOW cycle. The 2015 CUP policy passed in Unincorporated Sacramento County was assessed along with the 2012 CUP policy in the City of Sacramento. Although the CUP policy in the City of Sacramento was passed prior to the 2014-2017 SOW, it was included for comparison purposes. Both policies allowed for the grandfathering of existing stores, meaning that the retailers would be exempt from the distance requirements unless they opened up a new store or moved to a new location. One major difference found was that the policy adopted by the County of Sacramento was defined as a “Minor Conditional Use Permit (MCUP)” whereas the policy in the City of Sacramento was a “Conditional Use Permit (CUP).” The MCUP has less impact on adjacent properties than a CUP, and therefore, requires a less intensive review than a CUP. Furthermore, CUP and a MCUP processes are different: a CUP requires a public hearing and is reviewed by the Hearing Officer (HO) while the MCUP is reviewed by the planning staff and accompanied by a written letter to inform the applicants of the recommendations.

The MCUP in Unincorporated Sacramento County and the CUP in Sacramento City policies were similar in that they both placed distance requirements between tobacco retailers and schools. However, the policy in Unincorporated Sacramento County specifically named and included other youth-sensitive areas as well such as libraries, parks, churches, and community centers. While the MCUP in Unincorporated Sacramento County applied to a greater variety of youth-sensitive zones, the City of Sacramento’s CUP policy was much more inclusive of the types of tobacco retailers affected, making it a stronger tobacco control policy. The policy in Unincorporated Sacramento County only applied to hookah/smoking/vape lounges or smoke shops whereas the policy in the City of Sacramento included any tobacco retailer under 15,000 square feet (which would encompass most convenience stores, discount stores, gas stations, and small grocery stores). Since youth frequently visit these types of stores for snacks, beverages, and other convenience items, the inclusion of these stores in Sacramento City’s CUP likely will likely serve as an important contribution to the reduction of youth exposure to interior and exterior tobacco advertising and tobacco products in future years. For these reasons, the Sacramento City policy is viewed as a gold standard for CUP policies, a model for other jurisdictions seeking to limit tobacco retailer density and youth access to tobacco.

Statewide HSHC Store Observations

Originating in 2013, the Healthy Stores for a Healthy Community (HSHC) campaign is a statewide collaboration conducted every three years between tobacco use prevention,

nutrition, and alcohol prevention partners. The goal of this campaign is to improve the health of residents through supporting healthy changes in the retail environment. The completion of store observation surveys is one of the key HSHC evaluation activities.

On April 25th, 2016, TEP staff conducted a 6 hour training to prepare individuals to conduct in-store surveys. Data collection trainees included 17 Coalition members, college interns, adult volunteers, and other TEP staff. Feedback from the trainee evaluations showed that strengths of the training included: Kahoot quizzes (used to test knowledge and understanding throughout the presentation), enthusiasm of presenters, visual display and explanation of emerging tobacco products, venue, food, and the mock store practice. Weaknesses included: length of the training (multiple trainees mentioned it was too long. Suggestions included: breaking it up into two days, having one session for first-time volunteer data collectors and a second for those who have done the survey before, or just shortening the training in general) and a desire for more information on county programs such as TEP and the Sacramento County Obesity Prevention Program (SCOPP) and how the survey will help the county. Including youth volunteers might also be advantageous in future trainings of this kind to sharpen data collection skills and increase awareness of issues in the retail environment that may adversely affect this age group.

In 2016, a total of 19 zip codes within Sacramento County were randomly selected. Every store within the selected zip code that met the following criteria was included in the Sacramento County 2016 HSHC store list received from the state:

- 1) The store must have applied for and paid for a license to sell tobacco via the Board Equalization (even though at the time of the survey a few stores were found to not sell tobacco)
- 2) The store must not require a membership to enter
- 3) The store must not prohibit youth from entering (since many of the survey questions pertain to youth access to various products in the store)

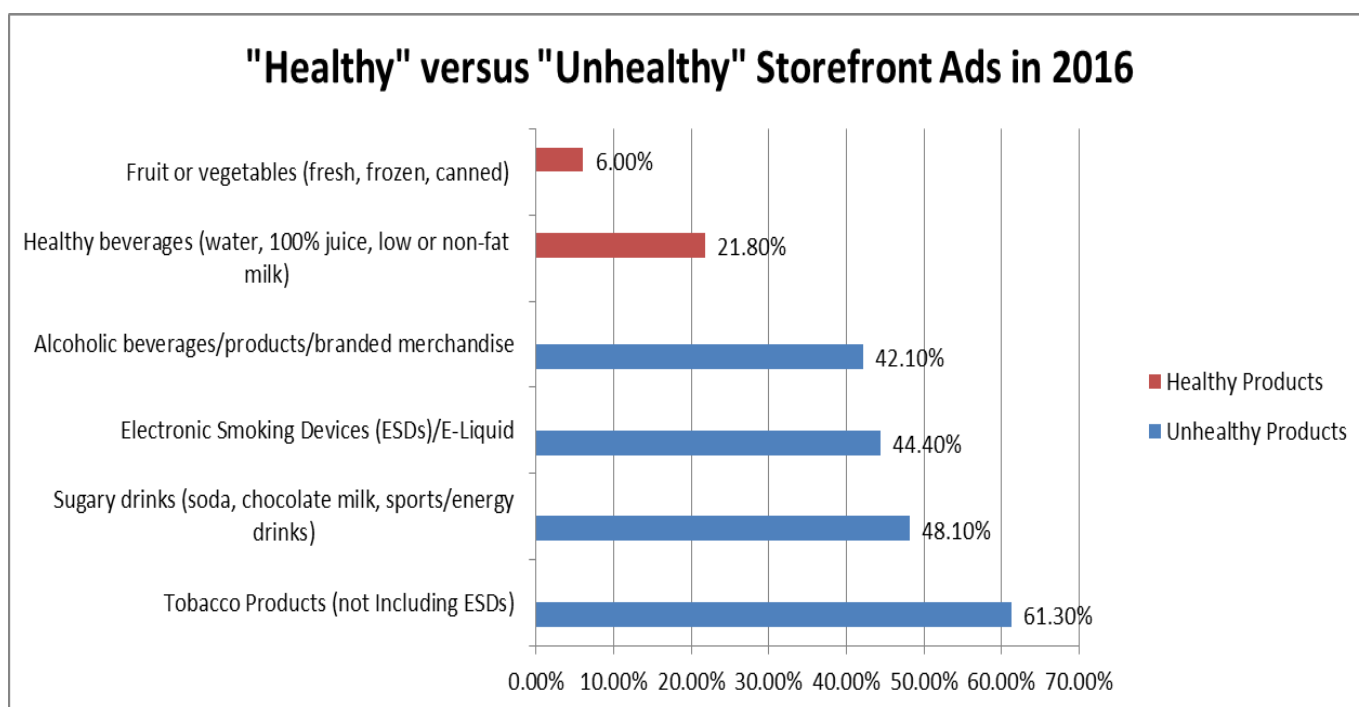
Data collectors attempted to survey each of the 346 stores on the HSHC store list for Sacramento County. Surveys were completed in entirety for 266 stores (76.9%). There were various reasons for non-completion such as that survey criteria was not met, the store was closed, the data collector was asked to leave, etc. Per TCEC data cleaning procedures, each LLA only received data for the completed surveys, and so the presented results are based on the 266 completed surveys, not the entire sample.

The 2016 HSHC store observation survey consisted of four main topics. While primarily focused on tobacco, it also included questions on nutrition, alcohol, and condoms. The Core Survey included 48 questions, and in addition, each county was asked to select at least one additional module to complete. Based on interests of both the TEP and the local Coalition, the Flavored

Module was selected for Sacramento County, which consisted of 14 questions. Surveys were conducted on handheld devices from April 25th, 2016 to June 27th, 2016.

The 2016 HSHC survey results provided a rich array of data due to the large sample size and variety of stores were assessed, which included chain convenience stores, smoke shops, liquor stores, gas stations, small and large grocery stores, etc. One notable trend was the high percentages of “unhealthy” storefront advertisements and low percentages of “healthy” storefront advertisements. This finding is relevant to the work of tobacco, alcohol, and nutrition partners alike. Results are presented in Figure 2.

Figure 2. Percentages of Stores with “Healthy” versus “Unhealthy” Exterior Advertisements in the 2016 HSHC Store Observation Surveys



Specific to tobacco, many products were widely available and easily accessible in stores. Unflavored cigarettes were found in 248 stores (93.2%), menthol cigarettes in 241 stores (90.1%), little cigars/cigarillos in 221 stores (83.1%), and ESDs in 210 stores (78.9%). Not surprisingly, 258 (97.0%) of the stores had tobacco products that were visible to customers (tobacco products are often showcased what is known as a “Power wall” behind the counter). In addition to visibility, many tobacco products were considered easy to purchase due to small package sizes and low price. Of the 221 stores reported as selling little cigars/cigarillos, the smallest package size was singles (pack of 1) in 128 stores (57.9%) and packs of 2-5 in 91 stores (41.2%). Taken together, this meant that 99.1% of stores that sold little cigars/cigarillos were in package sizes of five or fewer. What’s more is that 98.2 % of stores that sold little cigars/cigarillos sold them in some sort of flavor (mint, liquor, fruit/sweet, etc.). This is a problem due to the appeal of flavors to youth and potential as a gateway to other tobacco

products. Nearly half of the stores that sold Swisher Sweets, a popular brand of cigarillos, sold them as singles, and 91.3% of those stores sold them for less than \$1.00. This makes it easy for vulnerable populations such as youth and low-income individuals to purchase these products due to their low price. Figure 3 illustrates trends relevant to Swisher Sweet cigarillos and other flavored products. The percentage of stores that sell Swisher Sweets and sell them for less than \$1 has increased in the last three years. However, the percentage of stores that sell non-cigarette flavored products, which would include products such as Swisher Sweets, near schools shows a small decrease. This could be in part to CUP policies being implemented in Sacramento County.

Figure 3. Comparison of Swisher Sweet Cigarillos and other Flavored Tobacco Sales between 2013 and 2016 in Sacramento

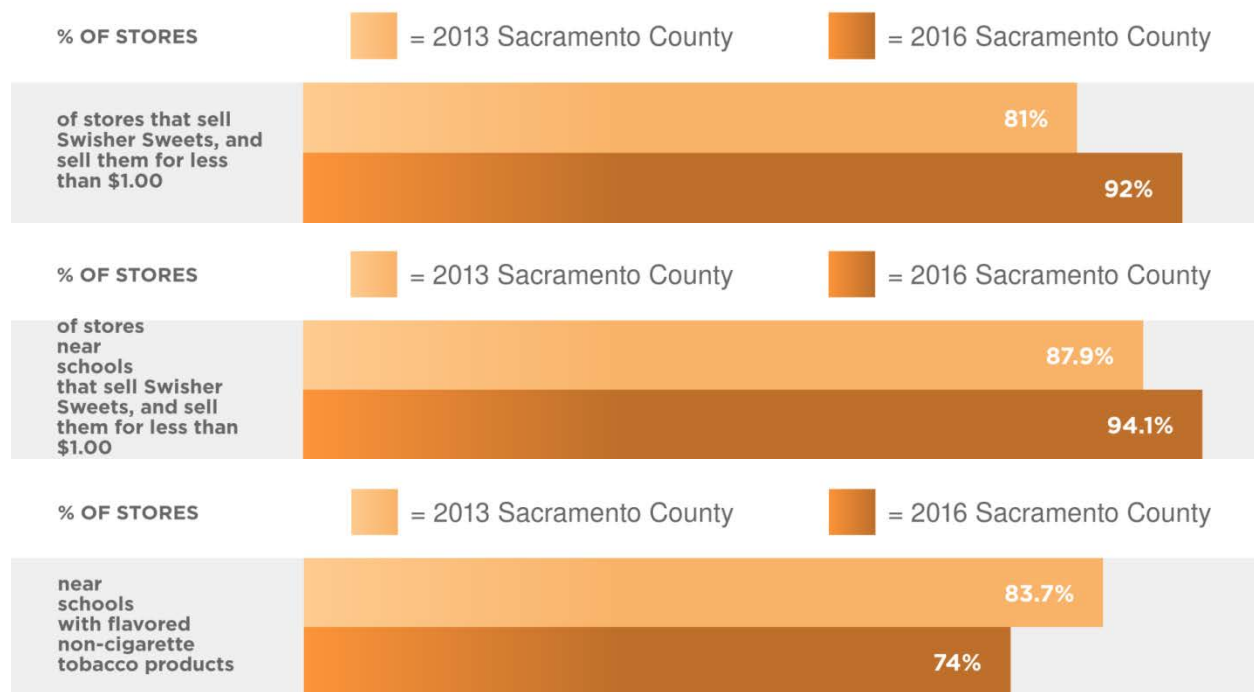


Image from www.healthystorehealthycommunity.com website

Another important trend is that sales of ESDs are increasing. Reflective of the historical patterns discussed in the background section of this report, Table 2 shows that the percentage of stores selling ESDs is higher in Sacramento County than in both the Sacramento Region and the state and that sales have increased in similar percentages in each area over the past three years.

Table 2. Percentage of Stores that Sold Electronic Smoking Devices (ESDs) between 2013 and 2016: A Comparison of Geographic Areas

	2013	2016
Sacramento County	62.1	78.5
Sacramento Region*	52.7	73.2
State of California	45.7	62.3

*For the purposes of this survey, the Sacramento Region includes: Amador, Calaveras, Colusa, El Dorado, Nevada, Placer, Sacramento, San Joaquin, Stanislaus, Sutter, Tuolumne, Yolo, and Yuba

One limitation of the 2016 HSHC data is that while zip codes were randomly selected in both 2013 and 2016 (and a census of stores within those zip codes that met selection criteria constituted the sample), not all zip codes were the same for both years. While this procedure gives a good snapshot of the retail environment of Sacramento County as a whole, it limits the ability to compare data within specific zip codes over time. Another limitation is potential differences in procedures followed by data collectors. Since there was a fairly large group of data collectors, 17, the possibility of differences in survey implementation is increased. For example, some data collectors may have been more thorough in looking for products than others. Or, some may have collected the survey discreetly, whereas others may have introduced themselves to the retail clerks, which could have affected both completion rates and accuracy of data.

TEP staff developed a presentation summarizing key results from the 2016 HSHC Retail Surveys and including a discussion on collaboration opportunities. A webinar which included this presentation as well as a brief introductory presentation created by TCEC was conducted by TEP staff, with the assistance of TCEC, to TCC members on 5/24/17. Eight TCC members were in attendance, and a copy of the recorded webinar was shared with the entire Coalition. (A copy of the complete presentation is provided in Appendix C.) Additionally, a modified version of the

presentation was included as part of a Lunch and Learn session facilitated by TEP staff to other Sacramento County public health programs. Participants included seven staff members from the SCOPP, HIV/STD, and Dental Health programs. The other portion of the presentation was dedicated to providing an overview of the TCC mission and accomplishments in an effort to recruit new TCC members and make the case for the importance of collaboration across programs to tackle chronic disease. Both the webinar and Lunch and Learn presentation were well received by the audiences members based on feedback provided.

Statewide HSHC Public Intercept Survey

As part of the statewide HSHC retail campaign, the TEP conducted two waves of public intercept surveys, one in 2014 and one in 2016. The surveys were virtually identical in order to allow for comparisons over time, with the exception of some additional questions added by TCEC and TEP staff and minor wording changes. The 2014 public intercept survey was an evaluation activity included in the 2013-2014 Bridge Year SOW, thus, is not listed as a key evaluation activity for the 2014-2017 SOW in this report. However, the results provide a baseline for which the 2016 public intercept results can be compared, and so, it will be discussed.

In order to carry out the mission and vision of the HSHC campaign, during Spring and Summer of 2014, the TEP collaborated with the Sacramento County Obesity Prevention Program (SCOPP) to carry out a public intercept survey. This survey was developed by TCEC to evaluate the accessibility to alcohol, tobacco, and different types of foods and beverages and attitudes about tobacco control policy strategies. In collaboration with representatives from SCOPP, the TEP modified the survey to incorporate additional nutrition related questions and to develop survey protocols that meet the needs of both programs. A Spanish version of the survey was developed and widely utilized.

All surveys were administered by trained data collection staff. Due to the collaboration with SCOPP, survey sites included local retail stores (i.e. convenience stores, grocery stores, etc.) located within the nine SCOPP target neighborhoods. A team of six Community Health Outreach Workers (CHOWs), or Promotoras, and a Program Coordinator from the Health Education Council and Sacramento Food Bank (both subcontractors of SCOPP at the time) were trained by TEP staff and assigned to a list of sites. Interviewers worked in pairs for safety, although each interview was conducted by a single interviewer; this allowed two interviews to be conducted simultaneously. Interviewers were assigned to at least two sites from their assigned list per day by their Program Coordinator. Eligible participants were Sacramento resident adults, aged 18 or older who understood and/or spoke English or Spanish. All interviews were conducted on weekdays between 9:00 a.m. and 7:00 p.m. from June 11th through July 11th (note that some of the interviews did carry into the 2014-2017 cycle in order to fulfill the collaboration agreement between TEP and SCOPP, but the minimum sample size set forth in the 2013-2014 SOW was met during that time period).

The 2014 public-intercept survey included information regarding accessibility, advertisement and suggested policies for tobacco and nutrition in the retail environment, sociodemographic characteristics, level of education, and tobacco use. (See Appendix D for a copy of the survey instrument.) The survey consisted of 18 items and took approximately 5 minutes to complete. All surveys were administered using handheld devices. A total of 309 surveys were conducted of which there were a total of 258 completed surveys. The survey completion rate was 89%. Surveys were conducted in all nine SCOPP census tracts in a total of 30 sites.

Sociodemographic characteristics of the participants were as follows: The majority of participants reported belonging in the 30 to 39 age group. Self-reported race was 21.2% White/Caucasian, 27% Black/African American, 5.2% Asian, 1.5% American Indian/Alaskan Native, 3.6% Native Hawaiian/Other Pacific Islander, 7.2% two or more races/ethnicity, and 5.7% other. Twenty-eight percent identified as Hispanic/Latino. Most of the participants reported having high school or some college level of education (82.6%), and 13.4% reporting having higher level of education. The majority of participants (45%) reported never using tobacco products while 35% reported being current tobacco users. Two hundred and fourteen (81%) of the respondents were in favor of a policy that would prevent stores within 1,000 feet of youth-sensitive zones from selling tobacco products (n=246). Thirty-two (12%) were in opposition. When asked about the same type of policy for sugar sweetened beverages, there was substantially less support, 151 (58%) versus 68 (26%) opposed.

A major strength of the 2014 public intercept survey was that it was conducted in Spanish. This proved to be very important as approximately 30% of the surveys were conducted in Spanish. This is a huge asset in terms of being able to assess the opinions of the sample, given that approximately 22% of Sacramento County is Hispanic/Latino, with even higher rates in the SCOPP low-income target areas, and is an example of a culturally competent strategy in tobacco control.

Several limitations of the 2014 public intercept survey are worth noting. Although the survey read at a 7th grade level, it was reported by several data collectors that respondents needed more clarification with the proposed policies questions, for example clarification between support and opposition. Finally, interview sites, in most cases convenience and grocery stores, were all located in low-income neighborhoods. Convenience and grocery stores with a more affluent customer base may face different economic, social and environmental pressures that could influence their support for various tobacco, alcohol and nutrition policies.

The 2016 public intercept survey was conducted on both weekdays and weekends between August 20th and September 12th. A major difference from the 2014 public intercept survey is that in 2014, TEP staff conducted the survey in collaboration with SCOPP. This collaboration resulted in the addition of several survey questions related to nutrition and the selection of survey locations in specific census tracts in order to meet the needs of both programs. Although TEP did not collaborate with SCOPP on the survey in 2016, many survey questions were kept the same as in 2014 to allow for meaningful data comparisons over time. The 2016 survey

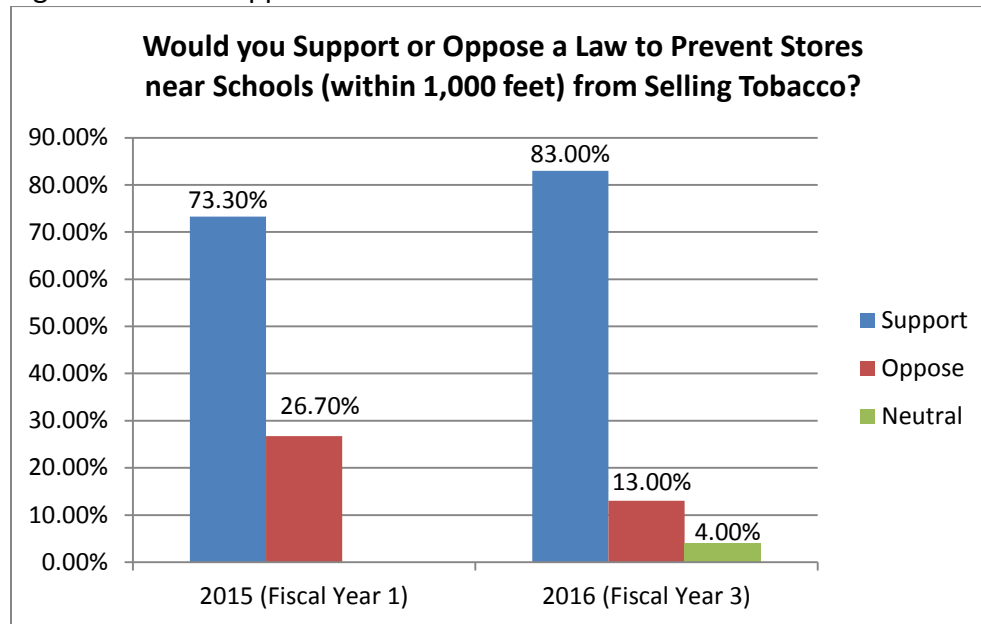
consisted of 21 items and took approximately 5 to 7 minutes to complete. Two versions of the survey were developed: Spanish and English.

The 2016 public intercept survey consisted of a convenience sample of 104 Sacramento County residents approached at designated survey sites. The survey completion rate was 96.15%. (A copy of the survey instrument is provided in Appendix E.) Survey locations were selected on factors such as representativeness, alignment with other TEP programmatic activities, high foot traffic areas, convenience, etc. There were a total of three TEP staff members and four trained TEP volunteers who conducted the survey with handheld devices. For the most part, interviewers worked in pairs (for safety reasons) although each interview was conducted by a single interviewer, allowing two interviews to be conducted simultaneously.

The majority of participants reported belonging to the 18 to 24 age group (23.4%), although there was fairly equal representation across age groups. Self-reported race/ethnicity from highest to lowest percentages was 31.52% Black or African American, 26.09% White, 17.39% Hispanic/Latino, 10.9% two or more races/ethnicities, 9.78% Asian, 2.17% Native Hawaiian/Other Pacific Islander, and 2.17% declined to state. The majority of respondents indicated their gender as female (57.61%), 41.3% stated that they were male (41.3%), and 1 respondent declined to identify a gender. Most of the participants reported their highest education level as “Some college” (46.74%). 2.17% reported less than a high school education, 9.78% stated they were high school graduates, 29% stated that they were college graduates, and 9.78% indicated they were postgraduates. Self-reported cigarette use in the last 30 days was 15.22%, but only 4.35% of the sample reported using an electronic smoking device. Most respondents stated they did not have children under the age of 18 living with them (66.3%).

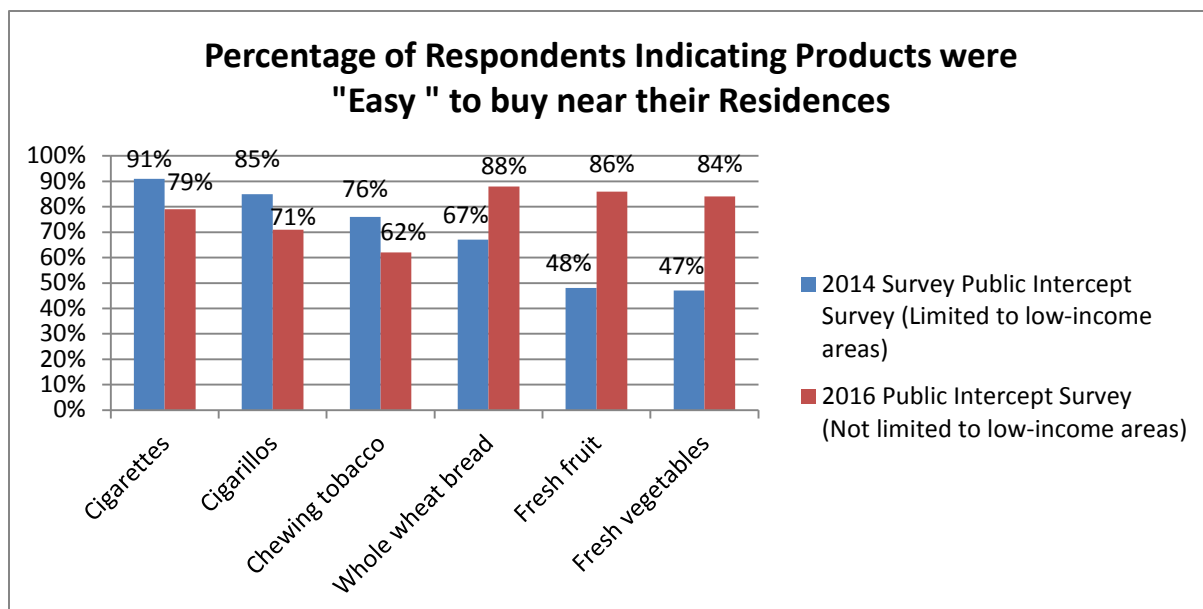
As compared to results from the 2014 public intercept survey, there was a slight increase in support for a policy to prevent stores near youth-sensitive zones from selling tobacco. In 2016, 77 (83%) (n=93) were in support of preventing stores within 1,000 feet of schools from selling tobacco. Twelve (13%) were opposed. Four percent were neutral. Compare this to 2014 where 214 (81%) of the respondents were in favor of a policy that would prevent stores within 1,000 feet of youth-sensitive zones from selling tobacco products (n=246). Thirty-two (12%) were opposed. Since the exact same question was asked in the 2015 CUP public intercept survey as was in the 2016 HSHC public intercept survey (the question in the 2014 public intercept survey was slightly different and asked about “youth-sensitive zones” as opposed to just “schools”) results were compared between the 2015 and 2016 surveys to assess changes in support for CUP policies over time. Figure 4 illustrates that there has been a moderate increase in public support for CUP policies for tobacco retailers near schools between 2015 and 2016.

Figure 4. Public Support for CUP Policies has Increased since 2015



An important trend seen when comparing results from the 2014 and 2016 public intercept surveys as relates to the overall retail environment is that there appears to be easier to access healthy products in higher income areas than in lower income areas. Figure 5 illustrates differences seen between the 2014 survey, which was only conducted in low-income areas due to the partnership with SCOPP, and the 2016 survey, which was not limited to low-income areas. Recall that the 2016 HSHC store observation results showed an increase in sales of tobacco products, especially emerging products, from 2013 to 2016 in Sacramento County. Because of this, results shown in Figure 5 are more likely related to income differences than time. This difference may be an example of an important social disparity and resulting health disparities.

Figure 5. Access to Harmful vs. Healthy Products in the Retail Environment may Suggest Disparities by Income



One limitation of the 2014 and 2016 survey comparisons is that while questions were very similar between the two versions of the survey, there were a few slight differences in wording that could have affected results. For example, the 2016 version of the survey included a “neutral” answer choice for each of the opinion questions, whereas the 2014 version did not. In addition to a few changes in the required survey questions set forth by TCEC between the 2014 and 2016 survey instrument, there were also some additional optional changes made by TEP staff. It is worth noting that both the TEP Project Director and Health Educator were both different in 2016 than 2014. The 2016 TEP staff was interested in identifying those individuals who were ambivalent about certain tobacco control issues to better understand the full range of opinions. Though it doesn’t appear to have made a huge difference (since the majority of respondents still indicated either “Support” or “Oppose” in 2016 even with the “Neutral” option available), this does pose a minor validity concern, because those who may have been in fact been neutral in 2014 were forced to choose between support or opposition in the survey. Moving forward, it would be best to adhere to identical survey questions and procedures as much as possible to increase the ability to make meaningful comparisons over time. However, it is inherent that some level of interviewer bias, sample error, and other limitations will always be present in survey implementation and evaluation.

Another limitation is that while Spanish versions were created for both the 2014 and 2016 public intercept surveys, Spanish data collectors were only successfully recruited in 2014. Many of the individuals subcontracted with SCOPP were bilingual, and the partnership between the SCOPP and TEP allowed for easy access to these individuals as data collectors. In 2016, TEP staff was diligent in working with the county Volunteer Coordinator to secure two Spanish speaking volunteer data collectors, but unfortunately, both had to cancel last minute. The good news is that there were no individuals interviewed who requested a Spanish version of the survey (so no one was excluded for that reason); however, having Spanish data collectors available is both a necessary resource in order to implement a Spanish version of the survey and a culturally competent strategy to assess the true opinions of a population.

Statewide Key Informant Interviews

Also as a part of the HSHC retail campaign, key informant interviews were conducted with community leaders and experts to assess and understand opinions toward the retail environment in Sacramento County. Key informants were chosen based on multiple factors such as knowledge and expertise regarding tobacco and the retail environment, level of influence in the community, and having an existing relationship with TEP staff and/or other Sacramento County public health programs. The TEP made a concerted effort to include a variety of sectors represented in order to reduce bias and to better understand perspectives of individuals serving different populations.

A total of nine individuals were interviewed, four of whom participated in a special group interview as representatives from a shared organization. (A copy of the survey instrument is included in Appendix F.) Key informant interview participants included 8 females (88.9%) and 1 male (11.1%). 4 participants were between the ages of 30 and 40 (44.4%), 2 between 41 and 50

(22.2%), 2 between 51 and 60 (22.2%) and 1 over the age of 60 (11.1%). 5 of the 9 interviewees (55.6%) identified their race/ethnicity as White, 1 (11.1%) as Middle-eastern, 2 as Black/African American (22.2%) and 1 as Native Hawaiian/ Other Pacific Islander (11.1%). None of the respondents reported using cigarettes or electronic nicotine devices in the last 30 days; however, it is worth noting that one respondent reported current, regular use of hookah products, and two respondents indicated that they were former cigarette smokers. Interviewees came from a variety of different community sectors: Health Education, Non-profit, Retail, Clinical, Faith-based, Youth, and Government. Specific roles are included in Table 3 of this report, along with a summary of opinions on proposed policies in the retail environment. Opinions regarding distance requirements for tobacco retailers near schools are highlighted.

Table 3. A Summary of Support/Opposition to Proposed Retail Strategies/Legislation among Key Informants

Key Informant Role	Ban pharmacies from selling tobacco	Prevent stores near schools from selling tobacco	Require store owners to buy a local license to sell tobacco	Ban sale of flavored tobacco	Ban price discounts on tobacco	Make it illegal to sell small amounts of tobacco	Include electronic smoking devices in local tobacco laws	Implement a "Healthy Store" certification or rating system	Provide incentives for retailers selling less alcohol/tobacco and more fruits/vegetables
Health System Supervisor/ Diabetes Educator/ Dietician*	Maybe	Yes	Maybe	Yes	Yes	Yes	Yes	Yes	Yes
Smoking Cessation Specialist/ Nurse*	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
Health Educator (Smoking Cessation)*	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
Health Educator (Smoking Cessation)*	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
Clergy/ Non-profit organization founder	Yes	Yes	Yes	Yes	No	No	Yes	Yes	Yes
Vape shop owner (Retailer/ manufacturer)	Yes	No	No	No	No	No	No	Yes	Yes
Clinical Manager/ Patient Education Program Director	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Maybe	Maybe
Director of Government Relations, Non-Profit Organization	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
Project Director, Youth Organization	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes

*Respondents were interviewed as a group since they were representatives of the same organization.

Overall, there was high support among key informants for each of the retail policies and strategies presented. As might be expected, the greatest opposition came from the vape shop owner who both manufactures and sells tobacco products. TEP staff met this individual while conducting an HSHC store observation survey in the vape shop. The individual was skeptical of the survey and a county staff person coming into the store initially, but the interaction turned into an engaging hour long discussion on tobacco products and policy. Since the initial meeting, the retailer contacted the TEP staff person several times with questions on new tobacco laws in an effort to ensure compliance, and technical assistance was provided. While the retailer was firm in his belief that vaping products should not be grouped into the same category as cigarettes under "tobacco products" due to his perception of vaping products as much safer alternatives to cigarettes and even successful cessation products, he was very proactive in educating himself on new tobacco laws and following these laws in order to protect his business. Due to the professional relationship established, this individual was selected for a key informant interview to provide a retailer perspective. Additionally, many of the other key informants had existing relations with TEP staff either from collaboration with other county public health programs or connections in the community.

When asked if they would support or oppose a policy that would prevent stores near schools from selling tobacco, 8 of the 9 key informants (88.9%) were in support, and 1 key informant (11.1%), the vape shop owner, was in opposition. Common themes that emerged from the responses that were in favor of the proposed policy were that it would be an important prevention tool by making tobacco products less convenient to youth, and thus, more difficult for them to start smoking. Due to the fact that youth are impressionable and their brains are still forming, supporters stressed that it is important to focus on preventing them from using these addictive products. Multiple respondents stated that they would like to see tobacco retailers even further away from K-12 schools than the local Sacramento County TEP goal of 1,000 feet, and a few added that an even more effective barrier to tobacco use than access is cost.

"Young people are impressionable, especially ages 15-17. Their brains are still forming at that age. They see adults smoking, and soon it is, "Can I bum one off of you?" Or, "Can you buy me some cigarettes?" This law would make it more difficult for young people to start"- Director of Government Relations, Non-Profit Organization

"With tobacco shops comes tobacco ads. The further away, the better"- Project Director, Youth Organization

The key informant in opposition to the proposed policy was the vape shop owner. Throughout the interview, the retailer repeatedly expressed the opinion that traditional cigarettes and electronic cigarettes/hookah are completely separate types of products that should not be likened to one another. Taken from both personal and professional experience, the retailer stated that traditional cigarettes undeniably do cause immense harm and health problems but that electronic cigarettes and hookah do not, or at the very least, that there is not enough

research to show it. The owner also shared that many customers have been able to quit cigarette smoking by switching to vaping.

“It’s a vague question. Would you ban 7-11? Cigarettes are everywhere. These people are dreaming. Big corporations are going to give them the finger. You would have to ban grocery stores. You’re giving kids other alternatives. New laws have made it to where 18-20 year olds have no place to go. If they can’t smoke [tobacco], they will likely find a worse alternative (ex. suddenly they have back pain and extreme anxiety and go get medical marijuana cards)”- Vape shop owner

Extending beyond the question specific to CUPs, the key informant interviews as a whole produced some useful suggestions for making healthy changes in the retail environment. Common themes identified were that buy-in from the community and retailers are a top priority. It is important to understand community needs and preferences and see if there is a demand for healthy products. Retailers need to see a benefit for their business before committing to healthy changes. Grassroots efforts and community engagement are essential. Partnering with retailers via farmers markets, local events, and community gardens can help. Recommendations for promoting healthy living among low-income populations include EBT matching programs at farmer’s markets, cooking classes, and working with retailers to bring food donations directly to the people.

One limitation of the key informant interviews is that only one policymaker and one retailer were interviewed. In future key informant interviews and other retail-related activities, the TEP will strive to include more representatives from these sectors. Additionally, the TEP will make a concerted effort to reach and garner opinion from members of the LGBTQ community as well as youth and young adults, especially since these subpopulations are often targeted by the tobacco industry.

Since the completion of the key informant interviews, the TEP has been proactive in sharing the findings of the key informant interviews with SCOPP and its current subcontractor Public Health Institute (PHI) whom the TEP plan to work with for its retail objective in the 2017-2018 Bridge Year SOW. PHI will be piloting a Healthy Retail Recognition Program in low-income neighborhoods, specifically, those where over 50% of the population qualifies for the Supplemental Nutrition Assistance Program (SNAP), also known as CalFresh in California. While the TEP retail objective will continue to focus on CUP policies, as in the 2014-2017 SOW, a few activities were included specific to collaboration with SCOPP and PHI on the Healthy Retail Recognition Program pilot. Through this partnership, TEP and PHI aim to reach and strategize with multiple retailers to better understand business owner perspectives and implement healthy changes that are mutually beneficial. The overall goal of the collaboration will be to reduce the burden of chronic disease and health disparities among vulnerable populations through the pairing of nutrition and tobacco education in the retail environment.

HSHC Media Activities

In coordination with CTCP and 12 other LLAs, the Sacramento County TEP served as the “Gold Country” regional lead and host for the local HSHC regional press conference on March 8, 2017. As lead, TEP staff was charged with event logistics (date, venue, assembling and printing materials, securing local and regional spokespersons, etc.) as well as regular and efficient communication. Throughout the event planning and follow-up, TEP staff generated approximately 300 email correspondences between internal staff, other LLAs, CTCP, and external speakers. To prepare for the HSHC media event and the in-person spokesperson training, which the TEP also hosted, the TEP attended 6 state CTCP- lead conference calls. Four spokespeople from different areas of the region served as podium speakers at the event. The TEP worked with each LLA to set up a table at the event, in a health fair fashion. In addition to the LLAs, other subject matter experts were present at the event including PHI and CTCP grantee, the Saving Our Legacy (SOL) Project: African Americans for Smoke-free Safe Places. (Photos from the HSHC Media Event are provided in Appendix G.)

Despite all of the diligent planning and efforts that went into coordinating the local HSHC media event, there were some very important obstacles. The most significant barrier was that the Sacramento County Department of Health and Human Services (DHHS) Project Information Officer (PIO) had concerns about the press release template and survey results. There were internal concerns that there was not enough compelling data to warrant a press release and spokesperson. The decision was made that the TEP would not be allowed to submit a press release or secure spokespersons on behalf of Sacramento County. The TEP still hosted the event, but the role was more as a representative of the region rather than the county. TEP was able to secure another local spokesperson who released their own press release on Sacramento County data. A second obstacle was that the date of the HSHC media event in Sacramento fell on the same day as International Women’s Day. In a follow up meeting to discuss results of the media event, a member of the TCC shared her strong belief that this contributed to a lack of media present at the HSHC event due to media being drawn to other events that were related to International Women’s Day.

A media record review was conducted to assess exposure and opinion garnered from the event utilizing a specific template provided by CTCP. Unfortunately, none of the interviews done by the local spokesperson populated, and only one interview within the “Gold Country Region” was found. There were multiple tobacco-related articles focused on the Proposition 56 tobacco tax increase in California, effective April 1st, 2017, and on FDA tobacco regulations that occurred in 2016, but not much was found specific to the local HSHC media event. Searches that included “Healthy Stores” and “E-Cigarettes” did generate hits from media outlets in other California counties outside of the “Gold Country” Region including Butte, Orange, San Francisco and Marin. However, all of these publications were specific to outlets within those counties and likely not viewable by residents of Sacramento County.

A lesson learned from the challenges faced regarding the local HSHC media event is that some challenges, such as decisions from those higher up in an organization’s chain of command, are

unavoidable. Other factors such as major events occurring simultaneously, is something that might be able to be avoided with enough planning and communication with those in the know. A final lesson learned is the importance of having strong partnerships and connections in the community. Because of an existing professional and positive relationship with other subject matter experts in the area, a non-county local spokesperson was willing to speak at the HSHC event on behalf of the county. The mutually advantageous opportunity has further strengthened the collaborative efforts between the two agencies.

CUP Policy Implementation: Posttest Observations

The observation survey posttest was conducted in March 2017 to assess changes in the youth-sensitive zones after the CUP policy went into effect in Unincorporated Sacramento County. On Wednesday, March 8th; Thursday, March 9th; and Monday, March 13th, the same 21 youth-sensitive zones assessed during the pretest were observed by two TEP staff members. (A copy of the survey instrument and summary report is provided in Appendix B.) As a reminder, designated sites were chosen in 2015 based on two criteria: 1) the site must be located in the unincorporated area of the county, and 2) the site must be a youth-sensitive zone located within a 1,000 feet radius of a tobacco retailer. While all 21 sites selected in 2015 were located within a 1,000 feet radius of a tobacco retailer, it is possible that fewer sites met the second criterion at the time of the posttest in 2017 due to store closures (criterion 2). It is important to note that stores in the 1000 foot zone around youth-sensitive sites at the time of policy adoption were grandfathered in; the CUP only applied to any new stores in the area after the policy was passed. Table 4 illustrates key results found in the pretest and posttest observation survey.

Table 4. Comparison of Key Pretest/Posttest Observation Survey Results by Site

Schools					
Site Name	# Smokers Present	# NO SMOKING Signs Present	Visibility of NO SMOKING Signs	Visibility of Tobacco Retailers	Tobacco Litter Present
River Valley School	0	0	N/A	Easily seen	No litter
	0	0	N/A	Somewhat easily	Few
South Pointe Christian School	0	0	N/A	Not easily seen	No litter
	0	2	Somewhat easily seen	Not easily seen	No litter
Trinity Christian School	0	0	N/A	Not easily seen	No litter
	0	0	N/A	Easily seen	Few
Cornerstone Christian	0	0	N/A	Not easily seen	No litter
	0	0	N/A	Easily seen	Some
Fruitridge Elementary	0	1	Easily seen	Not easily seen	A little
	0	2	Easily seen	Not easily seen	Some
Fortune Elementary	0	1	Easily seen	Not easily seen	A little
	0	5	Easily seen	Not easily seen	Few
Howe Avenue Elementary School	2	1	Easily seen	Easily seen	A lot
	0	3	Easily seen	Easily seen	A lot
La Entrada Continuation High School	0	2	Somewhat easily seen	Not easily seen	No litter
	0	3	Easily seen	Not easily seen	Few
Valley Oaks School	0	3	Somewhat easily seen	Not easily seen	No litter
	0	4	Easily seen	Somewhat easily	No litter

*Note: Pretest values are shaded in white, and posttest values are shaded in orange

Table 4. Comparison of Key Pretest/Posttest Observation Survey Results by Site (Cont.)

Parks					
Site Name	# Smokers Present	# NO SMOKING Signs Present	Visibility of NO SMOKING Signs	Visibility of Tobacco Retailers	Tobacco Litter Present
Nicholas Park	0	0	N/A	Not easily seen	A little
	1	0	N/A	Not easily seen	Few
Crofoot Park	0	2	Easily seen	Not easily seen	A little
	0	2	Easily seen	Not easily seen	Few
Patriots Park	1	1	Easily seen	Not easily seen	A little
	0	1	Not easily seen	Not easily seen	Some
American River Parkway- N. Watt Access	0	0	N/A	Not easily seen	A lot
	0	0	N/A	Not easily seen	A lot
Howe Community Park	0	0	N/A	Not easily seen	A lot
	1	1	Somewhat easily seen	Not easily seen	Few
Oakdale Park	0	2	N/A	Not easily seen	A lot
	0	1	Easily seen	Not easily seen	Few
Foothill Community Park	0	0	N/A	Not easily seen	A lot
	0	1	Somewhat easily seen	Not easily seen	Some
Del Paso Park	0	0	N/A	Not easily seen	A lot
	1	0	N/A	Easily seen	Few
Bellview Park	3	0	N/A	Not easily seen	A lot
	2	0	N/A	Not easily seen	Few

Other					
Site Name	# Smokers Present	# NO SMOKING Signs Present	Visibility of NO SMOKING Signs	Visibility of Tobacco Retailers	Tobacco Litter Present
Croatian-American Cultural Center	0	0	N/A	Not easily seen	A little
	0	0	N/A	Not easily seen	No litter
Fruitridge Community Park and Aquatic Center	0	1	Not easily seen	Easily seen	A little
	0	2	Easily seen	Somewhat easily seen	Few
Slavic Community Center	2	0	Not easily seen	Easily seen	A little
	0	3	Not easily seen	Not easily seen	Few

*Note: Pretest values are shaded in white, and posttest values are shaded in orange

Of the 21 sites surveyed, 9 (42.9%) were listed as schools, 9 (42.9%) were listed as parks, and 3 (14.3%) were listed as “Other.” One notable result was the increase in “No Smoking” signage between the pretest and posttest. In the pretest, only 9 sites (42.9%) had at least one “No Smoking” sign visible, for a total of 14 signs observed across the 21 sites. However, in the posttest, 13 sites (61.9%) had at least one visible “No Smoking” sign, a total of 30 signs across sites. Another change is that the amount of litter observed in the sites decreased between the pretest and the posttest. Seven sites (33.3%) were reported as having “A lot” of litter in the pretest compared to only 2 sites found to have “A Lot” of litter in the posttest. These two sites in the posttest found to have high amounts of litter were also reported as having high amounts of litter in the pretest. One of the core variables in the survey, the visibility of tobacco retailers from the youth-sensitive zones, did not show any significant changes. As was seen in the pretest, few tobacco retailers were visible from the youth-sensitive zones in the posttest, and most were not close enough to assess storefront signage.

It is important to note that while the original goal of the CUP policy was inclusion of all tobacco retailers, only hookah/smoke/vape lounges and smoke shops were included in the final policy. This leaves many other tobacco retailers such as convenience stores, gas stations, and grocery stores still operating within 1,000 feet of youth-sensitive zones frequented by both youth and adults. Since youth are likely to visit these stores for snacks, beverages, and other convenience items, they will likely still be exposed to interior and exterior tobacco advertising and tobacco products. In addition to youth, adults also frequent areas considered “youth-sensitive” such as parks. Since adults can still purchase tobacco products in many nearby stores, this could contribute to youth exposure to tobacco such as by visibility of smokers or tobacco litter in parks. For these reasons, the CUP in Unincorporated Sacramento County likely would have a minimal impact on the observational study results.

Additionally, there was a federal law and multiple California state laws affecting the sale, purchase, and use of tobacco adopted between completion of the observation survey pretest and posttest. Effective August 8, 2016, the federal definition of tobacco products was updated to include Electronic Smoking Devices (ESDs) as well as their components and parts whether or not sold separately. As a result of this, ESDs were added to the existing tobacco product definition in California; importantly, this means that all laws that applied to traditional tobacco products such as cigarettes now also apply to ESDs. On June 9, 2016, the “Tobacco 21” law, was adopted in California which raised the purchase age for tobacco from 18 to 21 with the exception of those in the military, who may purchase tobacco at the age of 18 with an active military ID. Since it was legal to sell tobacco to 18-20 year olds at the time of the pretest but not during the posttest, it is likely that there would be a large decrease in tobacco use among this age group in the youth-sensitive zones observed in the posttest. This could have contributed to a reduction in the overall number of people seen smoking and in the amount of tobacco litter found at the sites. The passage of these laws limits the ability to isolate the CUP in Unincorporated Sacramento County as the reason for any differences seen between the pretest and posttest as it may be difficult to separate it from the impacts of the other policies.

Another California bill was adopted which mandates that school districts, charter schools, and county offices of education display signs stating “Tobacco use is prohibited” at all entrances to school property. Use of all tobacco products, including ESDs, is prohibited in charter school or school district-owned or leased buildings, on school or district property, and in school or district vehicles. The adoption of this law likely played a large role in the posttest results found in the school sites, particularly related to the survey questions on signage and the number of people smoking. For example, there were smokers observed at one school during the pretest, but no smokers observed at any schools during the posttest. Also, the number of “No smoking” signs found in the school sites more than doubled from the pretest (8 signs) to the posttest (19 signs). Based on pretest and posttest results, there appears to be an association between type of school and signage. Three schools were found to have no visible “No smoking” signs in the posttest, and four schools were reported as having no visible “No smoking” signage in the pretest. The schools that did not have a sign in the posttest were the same schools that did not have a sign in the pretest (minus one school, who appears to have put one up sometime between the pretest and posttest). Interestingly, the schools without signage were all private schools. The reason for this is likely that these schools are not held to the same signage requirements as public schools; thus, results indicate a lack of voluntary signage.

Another trend to note is that each school identified as having visible “No smoking” signs in the pretest increased their number of “No smoking” signs by the time of the posttest, the highest count being five signs at a charter school. Taken together, these findings suggest that schools required by state law to place “No smoking” signs have taken voluntary action to increase signage in order to further support and enforce tobacco-free campuses for youth; however, the majority of schools without signage requirements have not taken voluntary action. This may indicate a need to provide education in private schools on emerging tobacco products and health risks as well as new tobacco laws in order to encourage proactive tobacco control approaches in these youth-sensitive zones.

Survey results suggest that tobacco litter has decreased, especially in parks. As a secondhand smoke protection, California banned smoking and disposal of tobacco-related waste within 25 feet of a playground or tot lot in 2002. In 2016, a new law took this a step further by prohibiting the use of any tobacco product, including electronic cigarettes, within 250 feet of a youth sporting event. A “youth sports event” is defined as “any practice, game, or related activity organized by any entity at which athletes up to 18 years of age are present.” Many of these events would likely take place at the types of youth-sensitive zones examined in this observation study. In the posttest, only 1 (11.1%) of the 9 parks was listed as having “A lot” of tobacco litter present. This particular site, American River Parkway- N. Watt Access, is unique in that it is considered a park, but does not have any playground equipment. This means that none of the parks observed that had playgrounds were found to have a high amount of tobacco litter in the posttest. However, in the pretest, 4 (66.7%) of the 6 parks listed as having “A lot” of tobacco litter present were listed as having a sandbox and/or playground equipment on site, and thus, in violation of law assuming the trash was found within 25 of the playground equipment. The differences between the pretest and posttest are very positive and promising

and may be the result of factors such as any or all of the laws affecting the purchase, sale, and use of tobacco in 2016; more “No smoking” signs; or the ultimate goal- social norm change!

One limitation of this observation study is that the posttest data collectors were different than the pretest data collectors. This poses a potential problem with consistency because the procedures and interpretations of the posttest data collectors may have been different than the pretest data collectors, thus affecting how results were determined. While a list of protocols was created at the time of the pretest, it was not highly detailed. For example, it did not define distance parameters of the “surrounding area” or “youth-sensitive zone.” When conducting the posttest, TEP staff members did a very thorough job of scanning the entire area (for example, if a park had multiple playgrounds, they checked each one if possible) and noting whether tobacco retailers could be seen from the front entrance or the parking lot (in many cases, they were only visible from the parking lot). These specifics are not mentioned in the pretest protocols or results, so it is possible that the volunteer data collectors utilized in the pretest were not as thorough, creating some discrepancies between the pretest and posttest on administration of the observation survey.

Another limitation is the fact that data collectors were instructed to observe the sites during daylight due to safety reasons. Unfortunately, this meant that only part of the day was observed which may have left out important data from early morning, evening, and late-night hours. The times of year that the posttest and pretest were conducted may also have affected the results. The posttest was conducted in March, but the pretest was conducted during July. Six of the nine school sites had children present in the posttest whereas only one of the nine school sites was reported to have children present in the pretest. The reason for this difference is likely that students and teachers were on summer break at the time of the pretest, which could have influenced other data assessed such as the number of people smoking and the amount of tobacco.

Follow-up CUP Policy Search in Sacramento County

A search of CUP policies in Sacramento County was again conducted in March 2017 (Year 3) to see if any additional policies had been passed. The search revealed that distance requirements were in place for certain tobacco retailers in all jurisdictions (Citrus Heights, Elk Grove, Folsom, Sacramento City, Rancho Cordova, Unincorporated Sacramento County) except the cities of Galt and Isleton. Some policies were listed as Conditional Use Permits, some as Minor Conditional Use Permits (MCUPs), and others as "Special Use Regulations"; however, none of these policies were widely publicized, and the TEP was not directly involved with them. From the research conducted, it appears that none of the policies are as inclusive as the CUP policy of Sacramento City. Formal policy records for these jurisdictions will likely take place during the 2017-2018 Bridge Year as the TEP will be continuing to focus on CUP for its retail objective and determining the target jurisdiction(s). While a Midwest Academy Strategy Chart will be completed and Coalition support will be garnered prior to selecting a jurisdiction of focus, for the time being, the assessment of CUP policies in Sacramento County suggests a need to focus on the strengthening of existing policies rather than the creation of new ones.

Conclusions and Recommendations

The TEP's goal of passing a Conditional Use Permit (CUP) policy to prohibit tobacco retailers from operating within 1,000 feet of youth-sensitive zones such as schools, parks, and youth facilities was achieved. During the 2014-2017 SOW, a CUP policy was successfully adopted and implemented in Unincorporated Sacramento County.

Research conveys that tobacco marketing visibility at retail stores strongly increases the likelihood of youth exposure to tobacco. In the CUP pretest posttest observation study, tobacco retailers were not easily visible from the youth-sensitive zones examined, and when they were, they were almost always convenience stores and/or gas stations. The only tobacco retailers included in Unincorporated Sacramento County's CUP are smoke shops and hookah/smoke/vape lounges. This policy could be strengthened by including other tobacco retailers such as convenience stores and gas stations. These stores are frequented by youth purchasing snacks, beverages, etc., and limiting the density of these types of stores near schools and other youth-sensitive zones would likely decrease exposure and access to tobacco among youth. Further reducing tobacco retailer density near youth-sensitive zones will serve as an important public health measure to protect youth from not only starting to use tobacco but also from secondhand smoke.

The implementation and evaluation activities as part of the HSHC statewide retail campaign were very important in garnering opinion of community members as well as key decision makers and assessing trends over time. The focus on collaborative efforts with nutrition, HIV/STD, and alcohol programs solidify the need to take a multi-pronged approach to tackling issues in the retail environment in order to not only prevent tobacco-related chronic disease but chronic disease as a whole.

Future directions include the need to recruit more youth and young adults to help with tobacco control strategies such as the implementation of CUP policies. The reason for this is that policymakers, retailers, and other key decision makers tend to be especially receptive to this age group. Also, as we know, this group is particularly vulnerable to tobacco industry marketing. From recent discussions at Youth and Young Adult (YYA) Subcommittee meetings, a Subcommittee of the local TCC, about plans for the upcoming Bridge Year SOW, the importance of engaging youth throughout the SOW cycle was stressed. Rather than scrambling to find youth last minute to help with a specific activity in order to gain support or media attention, it is integral to involve youth from a project's start to finish. This practice will help create lasting relationships and contribute to a greater likelihood of strides made in social norm change. Involving youth in a variety of activities, offering generous incentives, providing train the trainer opportunities, and meeting with them at times and in locations that are convenient to them are effective strategies that will help to empower youth and keep them motivated. These strategies have been suggested and supported by local youth-serving organizations.

Finally, the importance of collaboration and community buy-in cannot be stressed enough. For example, TEP's connection with community partners was an asset when challenges were presented during the HSHC media event: a representative was able to serve as a strong spokesperson in place of county staff. Another instance of successful collaboration was seen in the partnership between the TEP and SCOPP. Being able to pay individuals from SCOPP's subcontracting organizations to conduct public intercept surveys in Spanish was a huge accomplishment as seen in the number of surveys conducted and populations of interest included. Additionally, the planning and resource sharing between the TEP, SCOPP, and PHI in preparation for the retail partnership in the Bridge Year SOW has been productive. Given that the retail environment is a hot topic of interest among both nutrition and tobacco control advocates, a two pronged approach is a smart and timely move. In addition to collaboration across public health programs, there is a need to involve retailers and ensure buy-in in order to make retail changes that are beneficial not only to health goals, but business goals as well, as indicated by the key informant interviews. Overall, creating and strengthening partnerships with diverse subject matter experts to identify strategies and obtaining stakeholder support for the implementation and maintenance of these strategies will be crucial to the attainment of successful social norm change.

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Appendix

Appendix A: 2015 Conditional Use Permit (CUP) Public Intercept Survey Instrument

Appendix B: Pretest Posttest Observation Survey Instrument and Summary Report

Appendix C: HSHC Webinar Presentation for Coalition Members

Appendix D: 2014 HSHC Public Intercept Survey Instrument

Appendix E: 2016 HSHC Public Intercept Instrument

Appendix F: 2016 HSHC Key Informant Interview Instrument

Appendix G: 2017 HSHC Media Event Photos