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Most County Adults Support Tobacco Control Laws

Tobacco use is the single leading preventable cause of death and disability in the United States, accounting for more than 400,000 deaths each year. Approximately 85% of all lung cancer deaths are directly attributable to smoking. Smoking is also a leading cause of heart disease, stroke, emphysema, chronic bronchitis, and cancers of the mouth, throat, and gastrointestinal tract.² In addition to the direct effects of tobacco use, exposure to secondhand smoke is also an important cause of illness and premature death.³ Children of parents who smoke, for example, are more likely to develop respiratory infections, asthma, and other respiratory symptoms compared with children of non-smoking parents.

Growing public awareness of the harmful effects of smoking and exposure to secondhand smoke has led to an increase nationwide in policies to reduce and restrict tobacco use. In California, tobacco control policies include some of the strictest in the nation. Statewide clean indoor air policies restrict smoking in most enclosed public places and workplaces, including restaurants, bars, and gaming clubs. Youth access laws require signs to be posted at checkout counters and proof of age when purchasing tobacco products. In addition, these laws prohibit inclusion of tobacco products in vending machines except for those in establishments with on-site liquor licenses.

In the spring of 1997, a random-digit-dial telephone survey was conducted in Los Angeles County to examine public views on tobacco control policies, the tobacco industry's role in promoting smoking, and other factors that influence the use of tobacco products.⁴ A total of 519 county residents aged 18 years and older completed the survey.

- 1. McGinnis JM, Foege WH. Actual causes of death in the United States. JAMA 1993;270:2207-2212.
- 2. Fielding JE, Husten CG, Eriksen MP. Tobacco: health effects and Control. In: Public Health and Preventive Medicine,
- 3. Department of Health and Human Services. The health consequences of involuntary smoking: a report of the Surgeon
- 4. Participants were selected randomly from the 8,004 households that participated in the 1997 Los Angeles County Health Survey.



The data presented in this report were collected in a supplement to the Los Angeles County Health Survey, a population-based telephone survey of 8,004 households in Los Angeles County, examining health-related issues for children and adults. A total of 519 households were randomly selected from the larger survey population to obtain information on public opinion regarding tobacco control policies. The survey was conducted for the Department of Health Services in the spring of 1997 by Field Research Corporation with assistance from local universities. Additional support for the survey was provided by the California Department of Health Services and The California Endowment.

Percentages in this report are based on the responses of those surveyed and were weighted to the most recent data available for the Los Angeles County population. When possible, data were weighted to the 1996 Current Population Survey data for Los Angeles County.

In any survey that involves sampling, some degree of error is introduced by the sampling process, even when the sample is chosen randomly. In the present survey, if 50% of the overall sample of adults answered "yes" to a specific question, the sampling error would be plus or minus 4 percentage points at the 95% confidence level. This means that there is a 95% chance that had the entire adult population been interviewed using the same questionnaire and methods, the result would be between 46% and 54%.

There are a number of other possible sources of error in any survey. For example, some households don't have telephones, questions may be misunderstood, respondents may not provide accurate information, and errors may occur in the processing of data. The survey professionals working on this study made every effort to minimize such errors.

L. A. County Board of Supervisors
Gloria Molina
Yvonne Brathwaite Burke
Zev Yaroslavsky
Don Knabe
Michael D. Antonovich

L. A. County Department of Health Services

Mark Finucane Director

Jonathan Fielding, MD, MPH
Director of Public Health and Health Officer

Associate Director of Health Services,
Clinical and Medical Affairs

313 North Figueroa Street, Room 127 Los Angeles, CA 90012 Phone: 213/240-7702 Website: www.dhs.co.la.ca.us The results were weighted to the sex, age, and racial/ethnic distribution of the 1996 county adult population to adjust for differential rates of participation. Twenty percent of those who participated in the survey reported being current smokers, comparable to the estimated 20% smoking prevalence in the general county adult population.⁵

Most Adults In The County Support Tobacco Control Policies. (Figures 1-4)

The survey results indicate that most adults in Los Angeles County support tobacco control policies that restrict the use of tobacco products in public places. This support is evident among smokers and nonsmokers. The findings:

- → 92% of nonsmokers and 90% of smokers believe it is very important or somewhat important to have smoke-free workplaces.
- → 91% of nonsmokers and 74% of smokers believe it is very important or somewhat important to have smoke-free restaurants.
- → 85% of both smokers and nonsmokers believe it is very important or somewhat important to create separate areas in public places for people to smoke.
- → 71% of nonsmokers and 48% of smokers believe it is very important to have smoke free

Figure 1. How Important Is It To Have Smoke-Free Workplaces?* Not Important Somewhat **Important** 11% Very Important 81% Figure 2. How Important Is It To Have Smoke-Free Restaurants?* Not Important Somewhat 12% **Important** 14% Very Important 74%

Source: 1997 Los Angeles County Health Survey, Tobacco Policy Supplement.

*Percentages are for smokers and nonsmokers combined.

important to have smoke-free bars and nightclubs.

Additional findings:

- → 84% of nonsmokers and 86% of smokers believe that non-smoking ordinances are effective in preventing people from smoking in restaurants, workplaces, or other public places.
- → 95% of nonsmokers and 93% of smokers believe it is very important or somewhat important to reduce or prevent smoking through public education campaigns.

^{5.} The results of the 1997 Los Angeles County Health Survey indicate that 20% of adults >18 years of age currently use tobacco products, including 18% that smoke cigarettes, 2% that smoke cigars, and <1% that use either pipes or smokeless tobacco.

Most Adults Believe That The Tobacco Industry And Celebrity Role Models Are Important Influences In Promoting Smoking Among Youth.

- → 72% of nonsmokers and 60% of smokers strongly agree or somewhat agree that tobacco companies deliberately market their products to minors.
- → 85% of nonsmokers and 89% of smokers strongly agree or somewhat agree that tobacco industry contributions influence elected officials and the way they vote on tobacco policies.
- → 80% of nonsmokers and 75% of smokers feel that cigarette advertising influences minors some or a great deal to start smoking.
- → 81% of nonsmokers and 73% of smokers feel that smoking by actors and actresses in movies and on television influences minors some or a great deal to start smoking.

Most Adults Believe That Tobacco Control Policies Should Be Strictly Enforced. (Figures 5-7)

- → 95% of both smokers and nonsmokers strongly agree or somewhat agree that merchants who knowingly sell tobacco products to minors should be fined.
- → 74% of nonsmokers and 56% of smokers believe there should be stricter penalties on businesses that do not follow non-smoking ordinances.
- → 76% of nonsmokers and 68% of smokers strongly agree or somewhat agree that tobacco companies should have to pay for government health care costs that result from smoking-related illnesses.

Public Views On Cigarette Taxation.

Respondents were told that a pack of cigarettes purchased in California includes a 37-cent state tax⁶ used to fund public health programs and were asked whether they believe this tax should be increased, decreased, or remain the same.

- → 75% of nonsmokers and 48% of smokers reported that they believe this tax should definitely or probably be increased. Only 9% of nonsmokers and 15% of smokers reported that the tax should be decreased.
- → Of those who reported that the tax should be increased, 57% of nonsmokers and 43% of smokers reported that it should be increased one dollar or more per pack of cigarettes.

Figure 3. How Important Is It To Create Separate Areas In Public Places For People To Smoke?* Not Important 15% Somewhat **Important** 15% Very Important 70% Figure 4. How Important Is It To Have Smoke-Free Bars And Night Clubs?* Not Important 34% Somewhat *Important* 20% Very Important 46%

Source: 1997 Los Angeles County Health Survey, Tobacco Policy Supplement.

*Percentages are for smokers and nonsmokers combined.

Discussion

The results of the survey indicate that Los Angeles County adults strongly support current laws that restrict smoking in restaurants, workplaces, bars, nightclubs, and other public places. In addition, most believe these laws are effective in preventing smoking in these settings. Unfortunately, complaints and other reports received by the

^{6.} Prior to the recent passage of Proposition 10 (California Children and Families First Initiative), which resulted in a 50 cents per pack increased tax on cigarettes beginning in January 1999.

Department of Health Services' Tobacco Control Program suggest that these laws are not being universally enforced in the county, especially in some bar settings. Such violations are of particular concern in light of a recent San Francisco study which found that the establishment of smoke-free bars was associated with a significant reduction in respiratory symptoms and improvement in lung function among bartenders in these settings.⁷ In addition, there is a large body of research demonstrating that exposure to secondhand smoke has a wide range of adverse health effects, including a small but measurable increased risk of lung cancer among otherwise healthy nonsmokers.²

The survey results also provide evidence of broad-based support in the county for public education campaigns to reduce and prevent smoking. In California, a statewide anti-tobacco program was initiated in 1989 using revenue generated from increased tobacco excise taxes (Proposition 99). The program has used multiple tobacco control strategies including mass media anti-tobacco campaigns, grants to local health departments and community organizations for targeted anti-smoking interventions, school-based prevention programs, and monitoring and enforcement of anti-smoking laws. During the four years after implementation of the program, cigarette consumption declined 52% faster than during the period preceding the programs. Unfortunately, the rate of decline has slowed in more recent years, suggesting the need for renewed public health efforts.

Most respondents in the survey reported support for increased taxation of tobacco products. This finding is consistent with the recent passage of Proposition 10, the California Children and Families First Initiative, which establishes a 50-cents-per-pack increased tax on cigarettes beginning in January, 1999. This price increase could result in as many as 155,000 fewer smokers, 50,000 fewer smoking-related deaths, and 1.9 billion dollars savings in smoking-related health care costs over the lifetimes of the current Los Angeles County population.9 In addition, the revenue generated from this tax will be used in part to support tobacco prevention activities among youth and women of childbearing age. A further increase in the price of cigarettes of approximately 45 cents per pack is anticipated as a result of the recent settlement of litigation against the tobacco industry instituted by California and most other states. This settlement and resultant price increase will very likely result in a further reduction in the number of persons who smoke.

Although the prevalence of smoking has declined in recent years in the general U.S. population, recent studies indicate that smoking

Figure 5. Merchants Who Knowingly Sell Tobacco Products To Minors Should Be Fined.*

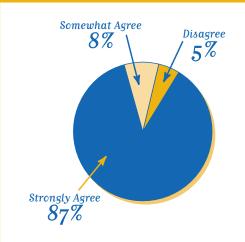


Figure 6. Stricter Penalties Should Be Imposed On Businesses That Do Not Follow Non-Smoking Ordinances.*

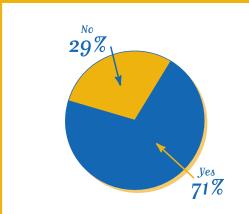
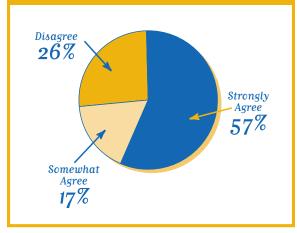


Figure 7. Tobacco Companies Should Have To Pay For Government Health-Care Costs That Result From Smoking-Related Illnesses.*



Source: 1997 Los Angeles County Health Survey, Tobacco Policy Supplement.
*Percentages are for smokers and nonsmokers combined.



^{7.} Eisner MD, Smith AK, Blanc PD. Bartenders' respiratory health after establishment of smoke-free bars and taverns. JAMA 1998;280:1909-1914.

^{8.} Pierce JP, et al. Has the California Tobacco Control Program reduced smoking? JAMA, 1998;280:893-899.

among adolescents is on the rise. 10,11 Reasons for this increase are not entirely clear but one important influence has been the targeted marketing efforts of the tobacco industry. The results of the present survey indicate that most adults in the county believe that tobacco companies deliberately market their products to minors. In

addition, most believe that tobacco advertising and celebrity role models in movies and television influence minors to start smoking. A recent study found that smoking in popular movies has steadily increased in the 1990's and is now comparable to the peak levels seen in the 1960's. ¹² In addition, as in tobacco advertising, smoking in movies continues to be associated overwhelmingly with attractive, youthful characters and other positive imagery.

In summary, the findings of the survey indicate a high level of public support, even among smokers, in Los Angeles County for tobacco control laws that restrict smoking in public places and prohibit sale of tobacco products to minors. The findings also indicate strong public support for aggressive enforcement of these laws. Given the current uneven enforcement of anti-smoking laws in the county, these findings should be used to lobby for more uniformly strong enforcement efforts throughout the county. A majority of residents also support public education campaigns to prevent and reduce smoking, and recognize the role of the tobacco industry and movie industry in promoting smoking, especially among youth. The broad-based public support for tobacco control policies described in this report should be considered by policymakers and communitybased program planners as efforts are undertaken to develop more effective strategies to prevent and reduce tobacco use in the county population.





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Series Editors: Paul Simon, MD, MPH; Cheryl Wold, MPH; Jonathan Fielding, MD, MPH; and Anna Long, PhD, MPH

Data Analysts: Daniel Gera; Meera Ojha, MPH; Magda Shaheen, MD, PhD; and Daniel Magana, MPH

Administrative Support: Sharon Robinson

Senior Consultant: Michael Cousineau, DrPH

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- 9. Tobacco Control Program. Proposition 10: a public health impact report. Los Angeles County Department of Health Services, 1998.
- 10. Centers for Disease Control and Prevention. Tobacco use among high school students: United States, 1997. MMWR, 1998;47:229-233.
- 11. Wechsler H, Rigotti NA, Gledhill-Hoyt J, Lee H. Increased levels of cigarette use among college students: a cause for national concern. JAMA, 1998;280:1673-1678.
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Summary:

LOS ANGELES COUNTY HEALTH SURVEY

- → 92% of nonsmokers and 90% of smokers in Los Angeles County believe it is important to have smoke-free workplaces.
- → 85% of both smokers and nonsmokers believe it is important to create separate areas in public places for people to smoke.
- → 91% of nonsmokers and 74% of smokers believe it is important to have smoke-free restaurants.
- → 71% of nonsmokers and 48% of smokers believe it is important to have smoke-free bars and nightclubs.

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- → 95% of nonsmokers and 93% smokers believe it is important to reduce or prevent smoking through public education campaigns.
- → 95% of both smokers and nonsmokers agree that merchants who knowingly sell tobacco products to minors should be fined.
- → 74% of nonsmokers and 56% of smokers believe there should be stricter penalties on businesses that do not follow non-smoking ordinances.