Support for a ban on tobacco powerwalls and other point-of-sale displays: findings from focus groups

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Abstract
This study uses focus group data to document consumer perceptions of powerwall and other point-of-sale (POS) tobacco displays, and support for a ban on tobacco displays. Four focus groups were conducted in 2012 by a trained moderator. The study comprised 34 adult residents of New York State, approximately half with children under age 18 years living at home. Measures used in the study were awareness and perceptions of powerwall and other POS displays, and level of support for a ban on tobacco displays. Analysis focused on perceptions of powerwall and other POS displays, level of support for a ban on tobacco displays and reasons participants oppose a display ban. This study documents a general lack of concern about tobacco use in the community, which does not appear to be associated with support for a ban on POS tobacco displays. Although all participants had seen tobacco powerwalls and most considered them to be a form of advertising, participants were divided as to whether they played a role in youth smoking. Additional research is warranted to determine what factors individuals weigh in assigning value to a ban on POS tobacco displays and other tobacco control policies and how educational efforts can influence those assessments.

Introduction
Numerous studies link exposure to point-of-sale (POS) tobacco advertising and product displays with tobacco use. For example, among youth, POS exposure is associated with tobacco brand recall and perceived availability of cigarettes [1], susceptibility to smoking [2, 3], greater likelihood of experimentation [4], greater likelihood of initiation [5, 6] and higher odds of smoking [7, 8]. Among adults, POS tobacco advertising is linked with unplanned or impulse purchases [9–12] and—among former smokers—with the urge to start smoking again [8, 13]. Recent studies that examine the independent effects of powerwall displays suggest that eliminating powerwalls would reduce youth and adult tobacco purchases [14, 15]. This body of evidence suggests that restrictions on POS advertising including powerwalls would have a substantial influence on youth and adult smoking.

‘Powerwall’ is a marketing term used to describe large displays of merchandise within a retail setting that promote categories of products or draw consumers deeper into the store [16]. A tobacco powerwall is the cigarette-lined wall behind the registers in a retail setting [17–22]. Investigators within the tobacco control community point out that powerwalls function as POS advertising and that this is likely their intended purpose, given that the quantity of cigarettes stocked in the powerwall exceeds consumer demand [17, 18]. Interviews
conducted with retailers across the United States indicate that many have contracts with tobacco companies, outlining payments in exchange for product displays that meet very specific requirements in terms of space allocation and placement [23].

The US public is open to some restrictions on tobacco marketing. For example, data from the 2009 International Tobacco Control United States Survey indicate that 67% of US adults believe ‘tobacco companies should not be allowed to promote cigarettes at all, but merely make them available to adults who want to smoke them’ [24]. A nationally representative survey conducted in 2011 found that fewer than one half of US adults believe tobacco should be sold with no display restrictions in grocery stores (46%) and pharmacies (43%) [25]. Among adults who favored restrictions, 30% supported tobacco sales in grocery stores and 26% in pharmacies if products were hidden, whereas 24% and 31% respectively believed tobacco should not be sold in these venues at all [25]. A series of cross-sectional surveys conducted from 2010 to 2012 indicate that a majority of adult residents of New York City support 11 of 14 tobacco control policies examined, with nonsmokers demonstrating greater support for policy in each case ($P < 0.05$) [26]. This study shows that, in 2012, 57% of respondents overall, including 39% of smokers and 60% of nonsmokers, supported a ban on tobacco displays in the retail environment [26].

New York State has a robust, multi-component tobacco control program, including a quitline and other cessation services, mass media, a community program of funded adult and youth organizations and research and evaluation [27]. In 2011, the state smoking rate among high school students (assessed every 2 years) was 12.6% [28]. The national smoking rate for high school students is 15.8% [29]. With its comprehensive tobacco control program well established, New York has been a pioneer in efforts to reduce the level of tobacco product marketing at the point-of-sale. In 2005 its funded community organizations began asking local retailers to adopt voluntary policies to reduce or eliminate tobacco product advertising in their stores. However, despite these efforts the percentage of New York retailers with interior or exterior tobacco advertising remained unchanged; at 96.3% in 2005 and 94.9% in 2009 [30]. The program modified its approach in 2009 to leverage the new opportunities afforded by the Family Smoking Prevention and Tobacco Control Act (FSPTCA), which enable localities to regulate the time, place and manner of tobacco product marketing and sales [9]. Rather than continuing to advocate for voluntary retailer policies, the community program focused on educating the public and local policy makers about the need for local laws to reduce youth exposure to tobacco advertising in the retail environment. The public education plan focused on three ‘model policies’ to reduce the influence of POS advertising: (i) a ban on all POS tobacco displays including powerwalls; (ii) a ban on selling tobacco products near schools and (iii) limiting the number of tobacco retailers within New York communities.

In 2012, at the time of this study, the New York Tobacco Control Program had conducted 2 years of focused efforts to educate the public and policy-makers about the need for local laws to address tobacco advertising at the point of sale. Messaging to build demand for POS policies focused on the ubiquity of tobacco product marketing in the retail environment (in 2011, 82% of New York retailers had powerwall displays covering at least half of the area behind the checkout counter [31]) and the relationship between exposure to POS marketing and youth smoking. However, despite these efforts, the percentage of New York adults supporting the program’s model policy on POS displays did not increase significantly during this period. For example, in 2010 the proportion of New York adults that supported a policy to prohibit tobacco product displays was 45.7%, whereas in 2011 it was 45.2% [28, 32]. It is worth noting that although Farley et al. [26] find greater support for a POS ban in New York City, their estimates also remained statistically unchanged from 2010 (59%) to 2011 (61%). To better understand why support for this policy was not increasing, we conducted focus groups to explore public perceptions of tobacco
product marketing at the point of sale and reactions to the program's educational messages. We hope this study will serve as a blueprint for other states and communities as they begin the process of assessing and building support for meaningful POS regulation.

Methods

Sample and procedure

The protocol and instruments for this study were submitted to RTI International’s Institutional Review Board and granted an exemption from review, because the interview procedures did not permit identification of individuals and because disclosure of individuals’ responses could not reasonably place the individuals at risk of criminal or civil liability or be damaging to the individuals’ financial standing, employability or reputation. Participants were recruited from the Greater Albany, New York, area by a professional marketing firm. We directed the marketing firm to recruit participants who were approximately representative of the adult population of New York in terms of education, age, smoking status and race/ethnicity. We further asked that approximately equal numbers of men and women be recruited and that half of the participants have children under 18 years living in the household, as unpublished analyses suggested that adults with a child in the household were more likely than non-parents to support public health policies. The facility administered a screener developed by RTI as the basis for documenting participant characteristics and to determine whether a participant was invited to be in the study. Before the focus groups began, participants read and signed an informed consent form.

All focus groups lasted ~90 min. An experienced interviewer led the discussion using a semistructured interview guide, which focused on perceptions of youth smoking as a problem in their community; awareness of and thoughts about tobacco industry POS marketing and awareness of and thoughts about policies for reducing POS marketing. Two members of the research team, a note taker and a senior researcher, observed the discussion from behind a one-way mirror. Both team members took in-depth notes. All discussion was video recorded. Participants were provided a $75 incentive at the conclusion of the discussion to thank them for their participation and compensate them for travel costs.

Analyses

Video recordings were reviewed by the moderator and note takers. When participant comments captured by the video recordings were not already part of the written record, they were added at this time. The moderator and note takers also verified that the written record accurately described the verbal comments and nonverbal behaviors of participants. Qualitative analysis was conducted by two researchers who reviewed both the video recordings of the focus groups and the in-depth notes. Using the interview guide as a framework for analysis, the researchers summarized participant comments, including points of agreement and disagreement within the group. Focal points were awareness and perceptions of youth smoking, powerwall and other POS advertising, level of support for a ban on tobacco displays and key reasons for opposing a tobacco display ban. After the draft analysis was completed, it was reviewed and edited by the senior researcher.

Results

Participant characteristics

This study is based on data provided by 34 adult residents of New York State (Table I). Four focus groups were conducted. Two of the focus groups consisted of parents with children aged 18 years or younger living at home; the other groups consisted of participants without children at home. For the sake of this study, the groups will be referred to as ‘parents’ and ‘non-parents’, although non-parents may include individuals with no children, with adult children or with children under 18 years of age living in another location.
As shown in Table I, participants included approximately equal numbers of current smokers, former smokers and never smokers. The sample was equally split by gender and was well distributed by age and education. The sample was largely white. Census Bureau data from 2011 show that there was a higher proportion of White individuals in the focus group sample (79%) than in the state (72%) [33]. Half of the participants had children under age 18 years living at home.

Comparison of the parent and non-parent focus groups shows that the age of participants who were non-parents were concentrated in the 30–49 years age range, whereas the ages of those who were parents of children living at home were more widely distributed (Fig. 1). In terms of education, the parent group was well distributed and skewed slightly toward lower education. Distribution of education in the non-parent group was skewed markedly toward college-level education. Differences between the parent/non-parent groups were not likely meaningful in terms of gender, race/ethnicity or smoking status.

### Awareness and perceptions of youth smoking

Nearly all participants expressed some concern about youth smoking in their communities, but a majority did not think it was a widespread or serious problem. Few reported seeing youth smoking in public, and a majority held parents responsible for their children’s decisions about smoking. For example, one participant talked about the ‘foundation’ set by parents that may enable a young person to reject an offer of a cigarette: ‘Ultimately, the kids are going to be in a situation where a peer is smoking a cigarette, and there’s going to be some kind of moment of truth where we’re not there so that hopefully if you’ve set that foundation, the chances of them trying it are minimized’. Consistent with this

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sentiment, several parents of younger children indicated they were not concerned their own children would start smoking because they have talked to their children about the dangers of smoking. In other words, they viewed the problem of youth smoking as one that did not directly affect their family.

Awareness and perceptions of powerwall displays and other POS advertising

All focus group participants reported having seen powerwall displays in stores, including convenience stores and gas stations. Participants considered the powerwall display a form of advertising, saying that it made the products more attractive and ‘extremely visible’. Many participants believed that the purpose of the powerwall is to grab consumers’ attention and encourage impulse purchases. One participant voiced the opinion, ‘They try to make it look like it’s for the convenience of the cashier, but really it’s showing every single different kind you can buy and advertisements too’.

Participants were divided as to whether exposure to powerwall displays influence smoking behavior. Parents were more likely than non-parents to believe that youth notice and are influenced by powerwall displays. One participant expressed the concern that exposure to powerwalls among underage youth may influence them in later years, saying, ‘They can’t buy it then, but subconsciously down the road when they turn 18, they’ll remember what they saw in the store’. Several participants believed powerwall advertising would have no influence, or would not play an important role, in youth tobacco use behavior.

A number of participants expressed the belief that powerwall displays influence smoking behavior by establishing social norms. For example, participants said, ‘When they show so many [cigarettes], it looks like its ok to purchase [them]’; and ‘Stock number[s] [are] so high makes it seem like more people are buying them, so you won’t feel stigma when you go and pick up a pack’. Several participants felt that powerwalls would make smoking appear normative and acceptable to youth specifically, and one
expressed the idea that the powerwall location, behind the counter, made tobacco seem grownup and potentially enticing to kids. Imagining a young person’s response to a tobacco powerwall, one participant exclaimed, ‘Everybody must smoke, look at them all. There’s so many!’

Participants had different perspectives on whether powerwall displays are more or less influential than other forms of POS advertising, such as signage. Many participants—especially parents—felt that powerwalls would likely have a greater influence on youth smoking than signage because of their ubiquity and the large number of products shown. Other participants thought signs and posters may have a greater effect because they glamorize smoking, are often placed at a child’s eye level and because powerwall displays are too ‘busy’ and do not focus on a single brand. A few participants noted that powerwall displays and signage complement one another, with signage often placed on doors or outward facing windows, and the powerwall display carrying the message into the retail environment.

**Support for a ban on tobacco displays**

A policy to ban tobacco displays would prohibit all retailers from displaying any tobacco product and would eliminate powerwalls. Although no such policy has been implemented in the United States, retailers in countries that have implemented such policies have responded by storing tobacco products in cupboards or behind curtains [17]. A majority of focus group participants reported having seen this practice in local stores that have voluntarily placed cigarettes out of sight. Most participants could name the stores in which they had seen this (Price Chopper and Hannaford).

Support for a ban on tobacco displays differed markedly by parental status. Parents were more likely than non-parents to support a ban on tobacco displays and to believe that a ban would reduce youth smoking. However, several parents noted that, in the face of a display ban, tobacco companies would likely expand permissible forms of POS advertising, such as signs. For this reason, they felt that a display ban may be ineffective unless other forms of POS advertising were also banned. Among those who were not sure a display ban would reduce youth smoking, several felt it was ‘worth a shot’, and that it would be appropriate to implement the policy first and evaluate its effectiveness later.

Many non-parents disliked the display ban policy, and were more likely than parents to believe that such a policy would be ineffective in terms of reducing youth smoking. Several participants expressed the idea, ‘If kids want to smoke, they’ll find out a way to do it’. Some participants wondered whether keeping cigarettes out of sight might increase their appeal among youth by making them ‘a forbidden fruit’. One participant believed that a display ban would be helpful for someone who is trying to quit smoking, but less useful for preventing youth from starting to smoke.

Non-parents cited two reasons for disliking the display ban policy: (i) concerns about negative effects on retailers and (ii) concerns about government overreach and the ‘slippery slope’ of governmental regulation, including the sense that regulation may interfere with one’s ability to make personal choices. For example, one participant expressed the concern that retailer sales would decline if they could not advertise their products—‘I think it’s ridiculous that you can’t display what you’re trying to sell’—and another wondered if a display ban might encourage smokers to buy their cigarettes online. Several participants thought a display ban would represent government overreach; they wondered what the government would ban next; ‘where the line would be drawn’. One participant described a display ban as a loss of freedom, saying, ‘Our choices shouldn’t be taken from us’. At least one participant who was opposed to the policy said he would nevertheless support it if it were a voluntary action.

Overall, the level of support for the tobacco display ban was greater than for two other ‘model policies’ explored in the focus groups: a ban on tobacco product sales near schools, and a limit to the number of tobacco retailers within a community. Lack of support for these policies was rooted in philosophical objections, logistical concerns and the perception that they would be ineffective.
Several participants described these policies as unfair and unethical, because stores that could not sell tobacco under them would lose their ‘biggest source of income’. Several participants expressed the concern that, having enacted such policies, the government would move to ban alcohol and junk food. One comment that appeared to sum up the issue for several participants was, ‘I’m not a tobacco fan, but I don’t trust the government regulating commerce like that’. Logistical concerns focused on the government oversight participants felt would be required to enforce the policies. Those who questioned the effectiveness of the policies suggested that youth would simply buy cigarettes elsewhere.

Discussion

Participants in these focus groups did not consider youth smoking to be a widespread or serious problem within their community. Most participants held parents responsible for their children’s decisions about smoking, and parents with young children believed that their children were not—and would not become—at risk for smoking. This finding was somewhat surprising, as at least one-third of New York adults have consistently identified tobacco use as among the most important health problems in their community [28]. This finding also has implications for communications to raise awareness about the relationship between exposure to tobacco product marketing and youth smoking: if youth smoking is not considered a widespread or serious problem, there is little incentive for the public or policymakers to be concerned about its causes.

All focus group participants reported having seen powerwalls and, in general, considered the powerwall display a form of advertising. However, participants were divided as to whether powerwall displays influence youth smoking behavior. Parents were more likely than non-parents to believe that youth notice and are influenced by powerwall displays, and to support a ban on tobacco displays. Resistance to the display ban and other policies that would reduce the level of tobacco marketing at the POS was rooted in philosophical objections, logistical concerns and the perception that they would be ineffective. Participants who did not support these policies described them as unfair and unethical, questioned the government oversight that would be required to enforce them and suggested that youth would simply buy cigarettes elsewhere. These findings are consistent with past studies which find that ‘anti-government sentiment and polarization’ [34], political views [35] and beliefs about the role of government in public health [36] affect support for public health and tobacco control policy. They are also reminiscent of the arguments against smoking bans in bars and restaurants, which focused on the perceived negative economic impact of such policies on businesses [35].

This study is subject to several limitations, chief among them the potential biases associated with focus group research as a result of small sample size, moderator effects, group dynamic and interpretation of qualitative data. Findings are based on a limited amount of qualitative data collected in a single city in New York State. The conclusions drawn from these data are not generalizable to the general public of the United States, New York State or even the city of Albany.

Despite these limitations, this study provides potentially important insights into public support for tobacco control in general and for policies to restrict POS marketing specifically. Previous research indicates that the belief ‘tobacco use is a serious problem in my community’ predicts support for smoke-free laws [36]. In contrast, this study does not find that concern about tobacco use in the community is associated with support for POS policy. Quantitative research is warranted to better understand the relationship—if any—between concern about youth smoking in the community and support for tobacco control policy. Furthermore, this study finds that although all participants had seen powerwalls and most considered them to be a form of advertising, participants were divided in their assessments of whether exposure to powerwalls played a role in youth smoking. Participants who did not have young children living at home were more likely
than other participants to discount the influence of powerwalls and POS advertising, as were those who expressed concerns about the economic impact of an advertising ban on business.

These findings suggest the possibility that respondent assessments of the relationship between POS advertising and youth smoking take into account the perceived costs and benefits of POS policy to themselves and their communities. In other words, the pertinent question is not simply whether individuals acknowledge a relationship between tobacco advertising and youth smoking, but whether they consider that relationship strong enough and that outcome negative enough to warrant implementation of a POS advertising ban, which they associate with other negative outcomes, such as government overreach and a negative effect on business. In short, this study suggests that support for a ban on tobacco displays may rest on a complex valuation of costs and benefits that are not well understood at this time. Additional research is warranted to determine what factors individuals weigh in assigning value to a ban on POS tobacco displays and other tobacco control policies and how educational efforts can influence those assessments.

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Conflict of interest statement

None declared.

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