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Authors
Smith, Elizabeth A
McDaniel, Patricia A
Malone, Ruth E

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Leadership Perceptions of Endgame Strategies for Tobacco Control in California

Elizabeth A. Smith, Ph.D.

Patricia A. McDaniel, Ph.D.

Ruth E. Malone, R.N., Ph.D., F.A.A.N.

Department of Social & Behavioral Sciences
School of Nursing
Box 0612
University of California, San Francisco
San Francisco, CA 94143
(415) 502-5238

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Abstract

Objective: To explore the perspectives of key stakeholders regarding advancement of the

tobacco endgame in California.

Design: Interviews and focus groups exploring participants' knowledge of the tobacco endgame

concept, their reactions to four endgame policy proposals (banning tobacco sales, registering

smokers, retailer reduction, and permanently prohibiting tobacco sales to all those born after a

certain year ["tobacco-free generation"]), and policy priorities and obstacles.

Participants: Interviews with 11 California legislators/legislative staff, 6 leaders of national

tobacco control organizations, and 5 leaders of California-based organizations or California

subsidiaries of national organizations. Focus groups (7) with professional and volunteer tobacco

control advocates in Northern, Southern, and Central California.

Results: Advocates were more familiar with the endgame concept than legislators or legislative

staff. All proposed endgame policies received both support and opposition, but smoker

registration and banning tobacco sales were the least popular, regarded as too stigmatizing or

too extreme. The tobacco free generation and retailer reduction policies received the most

support. Both were regarded as politically feasible given their focus on protecting youth or

regulating retailers and their gradual approach. Concerns raised about all the proposals

included the creation of black markets, and the potential for disparate impacts on

disadvantaged communities.

Conclusions: Participants' willingness to support novel tobacco control proposals suggests that

they understand the magnitude of the tobacco problem and have some appetite for innovation

despite concerns about specific endgame policies. A preference for more gradual approaches

suggests that taking incremental steps toward an endgame policy goal may be the most

effective strategy.

Introduction

For decades, tobacco was regarded as a problem of individual behavior. Public health has now identified the tobacco industry as the vector of the epidemic,[1,2] suggesting that broader interventions are needed to achieve a tobacco "endgame." Endgame proponents call for moving beyond persistent tobacco *control* toward an explicit, time-delimited plan to achieve a tobacco-free future.[1,3-9] Various proposals to achieve an endgame have been advanced, including limits on retailers;[10-14] prohibiting tobacco sales to anyone born after a certain year;[15,16] and prohibiting tobacco product sales.[8,9,17]

Among US states, California may be uniquely positioned to achieve a tobacco endgame, due to state tobacco control program success in changing public views of tobacco and the tobacco industry,[18] public support for stronger policies, and dedicated resources. Tobacco control advances have frequently originated at the local level, but recently, with few local precedents, the state legislature raised the minimum age of tobacco purchase from 18 to 21.[19] Understanding the perspectives of key stakeholders is essential for planning the tobacco endgame in California; however, their views about endgame strategies have not been explored. Our research examined how California policymakers, tobacco control advocates and leaders of national and California-based tobacco control organizations view tobacco endgame strategies.

Methods

The study was approved by the University of California, San Francisco's Committee on Human Research. We agreed to keep confidential participants' names.

Recruitment

Legislators

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Using purposive sampling, we identified 19 California state legislators (13 Assembly, 6 Senate) who had been recent sponsors of tobacco control legislation. We contacted them by email to explain the study's purpose and request an interview, making follow-up telephone calls to those who did not respond. If legislators declined the interview, we asked to speak to a legislative staff member with health policy expertise. We considered staff acceptable stand-ins, since they are involved in crafting policy, including researching, analyzing and summarizing issues.[20] Offices of 11 legislators agreed to participate. We interviewed 4 legislators (3 Assemblymembers, 1 Senator), and 7 legislative staff (6 focused on health policy, 1 on communications; 6 Assembly, 1 Senate). Five legislators (and their staff) declined to participate (2 Assembly members, 3 Senators), two legislators recommended contacting legislative staff who failed to respond to repeated emails and calls, and one legislator did not respond.

Leadership of tobacco control organizations

Drawing on personal knowledge and past research,[21] we identified a purposive sample of 15 national tobacco control and health voluntary organizations and networks with a stated interest in tobacco control. Eight were focused on minority populations. The first author attempted to telephone leaders (president, vice president, or director) of all organizations; however, 3 (all focused on minority populations) were inactive and neither past leaders nor successor organizations could be located. Among remaining organizations, after being informed of the nature of the study, 11 agreed to to telephone interviews; 1 declined. Of the 11, 5 were California-based.

Volunteer and professional California tobacco control advocates

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To obtain the views of local volunteer and professional California tobacco control advocates, we conducted seven focus groups, four in Northern California (2 in San Francisco, 1 in San Mateo, and 1 in Oakland), two in Southern California (Los Angeles), and one in Central California (Bakersfield). We recruited participants using the authors' and colleagues' professional networks, augmented by a "snowball" approach, in which professional advocates recruited others (professional or volunteer) active with their organizations.

Procedures

Interviews

Recorded telephone interview (20-60 minutes long) were conducted with legislators (or staff) and leaders, using a standardized interview guide. All three authors conducted at least one interview. Questions explored participants' knowledge of the tobacco endgame concept, their reactions to four endgame policy proposals (table 1), their thoughts on how to prioritize them, and likely obstacles to implementation. Interviews took place from January-April 2017.

Focus groups

Focus groups were conducted by EAS and PAM with California advocates. In each group, after informed consent and demographic data were obtained (see Table, Supplemental Digital Content 1, available at: TBD, for demographic data), the four endgame policies (table 1) were described to participants. Written "ballots" asked how likely participants would be to vote for each proposal if it were on the California ballot. Participants were asked to discuss their thoughts about the proposals. After discussion, participants were again given "ballots" gauging their support for each proposal. Participants received a $40 gift card for participation. Focus groups were conducted from May 2016-March 2017.

Analysis

Recorded interviews and focus group discussions were professionally transcribed. We used the software package NVivo9 for data management, and analyzed data qualitatively by coding for recurrent themes and iteratively reviewing clusters of coded text. "Ballot" results were tabulated and categories collapsed (e.g., "definitely yes" and "probably yes" combined). Because legislators and staff had very different levels of knowledge about and approaches to tobacco control policy development, we analyzed their interviews separately; leaders (interviews) and advocates (focus groups) were analyzed together.

Results

Legislators/staff

Endgame concept/proposals

Most legislators and legislative staff were unfamiliar with the endgame term. Each proposal received some support, but the tobacco sales ban was least popular, rejected as too extreme or politically unfeasible. For example, one legislator stated: "I think people look at [alcohol] Prohibition and they go, 'Well, that was a failure.'…People [will] be smuggling [tobacco], etc., and…it could become a locus for crime." The smoker registration proposal was also unpopular, regarded as too "Big Brother-ish," particularly in the current political climate.

Priorities

The tobacco-free generation (TFG) and retailer reduction proposals were most often identified as likely priorities for California. TFG was appealing because it drew easily defensible distinctions between current and future smokers. It did not "take something away" from current smokers; instead, "it's focused on young people who haven't started yet and will never

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know the difference." Those who supported retailer reduction saw it as the most feasible or "least controversial" of the proposals, since it would be less obtrusive than smoker registration and more gradual than a sales ban, giving people time to "adapt" and find "other ways to access tobacco" or "stay away from it altogether." One suggestion was to add a component to eliminate the over-saturation of tobacco retailer licenses in particular (i.e., low income) neighborhoods.

Obstacles

Legislators and staff identified several obstacles to enacting the proposals, including the political clout of the tobacco industry. Tobacco manufacturers would "mobilize people in the community using their money" to "push back" on any of these proposals. Tobacco retailers were reliable opponents of bills they perceived to threaten their livelihoods. Some legislators and staff also believed that recent tobacco control legislation (five laws passed in 2016) would dampen enthusiasm for additional measures. However, one staffer argued that those successes created "an opportunity….[I]f we already took these steps, then we can definitely move forward."

Local versus state action

All interviewees agreed that the legislature would be likelier to act on an endgame proposal if similar policies passed at local levels first; however, they also agreed that the state took the initiative to raise the tobacco purchase age to 21 (as only four localities had introduced this measure). Staffers explained that California liked to show leadership, particularly compared to other states. One noted: "We take care of our constituents in a way that other [states]

don't," while another said that other state legislatures sometimes called for policy advice,

"because the nation turns to California."

Advocates (focus groups)

Ballots

Table 2 indicates how likely focus group participants indicated they would be to vote for

each proposal if it were on the California ballot, both before and after discussion. Smoker

registration and banning tobacco sales received the most "no" votes, with support declining

slightly after discussion, while TFG and retailer reduction received the most "yes" votes, with

support increasing slightly after discussion.

Advocates (focus groups) and leaders (interviews)

Heard of endgame

Participants were asked whether they had heard of the tobacco endgame concept. In 3

focus groups, most had not; in the other 4, most had. Participants in Los Angeles focus groups

equated the concept with the TFG proposal. Others spoke more generally, saying the endgame

meant "to prevent people from smoking, or stop selling tobacco, period," or to "eventually

[get] to no one smoking." Among interviewees, all had heard of the endgame idea, and some

had seriously engaged with it. For example, one leader reported participating in endgame

discussions with thought leaders, reading endgame-related material in the Surgeon General's

report,[22] and having organizational conversations. Participants also observed that the idea

meant different things to different people.

There was also variation in attitudes toward the endgame idea. One advocate

commented, "Until there is the political will to put the tobacco industry really in its place,

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then…this is just another pie in the sky." Others found the concept inspiring, calling it a "good goal." One said, "just hearing the words 'end game' made me start thinking…that's what we need to be talking to people about."

Smoker registration: approach

Smoker registration was the least popular proposal. Participants described it as "criminalizing," "villainizing," "stigmatiz[ing]" or "demoniz[ing]" smokers. One participant objected that it would make it difficult for sick smokers to sue tobacco companies, who could argue that they were not liable because "you [smoker] clearly knew exactly how hazardous the products were because you signed on and agreed to get [a smoker's] license." Another suggested that, far from "criminalizing" smokers, the policy meant the state was "formally sanctioning certain people smoking," calling this "a pretty untenable position."

Smoker registration: impact

Numerous participants suggested that making smokers register might serve to more firmly establish their identities as smokers, inhibiting quitting. Black markets were also perceived to be a downside. Numerous participants thought some people would get a license just to illicitly resell tobacco. Participants noted that the proposal wouldn't affect the problem of second- and third-hand smoke.

Ban tobacco sales: approach

Some advocates thought banning tobacco sales could be popular with the public. "People do say, 'If it's that bad, it should be illegal,'" one participant said, suggesting a media campaign that asked, "why is it a crazy idea to…ban the sale of tobacco?" Another thought it was "like banning the industry.…I think that people could rally around that." However, most

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participants were more skeptical. A leader recalled examples "where a community…moved too

quickly…and got a lot of backlash." That could "set us back on all of the other policy fronts."

Many participants predicted that banning sales would encounter powerful opposition. Some

said tobacco companies would take legal action, while others thought the proposal conflicted

with American values and would inspire opposition against the "nanny state, overregulation,

big government, etc."

Ban tobacco sales: impact

Only a few participants predicted any positive results from prohibiting sales. One said,

"You would dramatically change the landscape because if you can't legally sell a product, you

can't advertise [it]." The most common objection to banning sales was that it would inevitably

lead to black markets, with cigarettes becoming "an illegal drug. Then they'll start having to

traffic it and bring it from other countries." This scenario made lack of penalties for possession

problematic for some, as there was no disincentive not to try to buy cigarettes elsewhere.

Some invoked the history of U.S. alcohol prohibition: "Banning sales is…a prohibition approach,

which I just don't think is effective."

TFG: Approach

Participants described TFG as politically "palatable," "marketable," and "doable." Much

of this enthusiasm came from its youth focus, emphasizing prevention rather than behavior

change. As one participant explained, "the easiest way to change behavior is to not to have to."

Others recalled that raising the age of tobacco purchase to 21 was possible because there was

less "pushback" from youth, either because they couldn't vote or because there were fewer

younger smokers. One participant saw the proposal as aimed at the tobacco industry: "[It]

makes me very happy to think of [the industry] saying, 'How dare you take away the right of a

14-year-old to…buy [tobacco]!'"

Other participants found it problematic that there would be some adults who could

purchase tobacco and others who could not. For example, one described the "biggest

challenge" to the proposal as the different set of rights that accrued to people who are

separated by only "days, in terms of their birthdates." Another anticipated "this nanny state

criticism [that]…the industry would jump on." Some expressed concern that enforcement might

center on purchasers rather than retailers.

TFG: impact

The major objection to the TFG proposal was the continued legal availability of tobacco

products. Participants predicted that the supposedly tobacco-free generation would acquire

cigarettes from "older sibs." This familial link could perpetuate inequities with "some kids…still

smoking because…people in their households smoked." Families in demographics with low

tobacco use prevalence would see that behavior reinforced, while tobacco use would be further

concentrated among others, exacerbating health disparities.

Some participants foresaw resistance, with young people rebelling against being "told

what to do," particularly because youth were "notorious" for wanting to do "even more" the

activities they were prohibited from doing. However, others anticipated a cultural shift, with

young people thinking "We're cool. We don't want to be like the older generation…They all

smoke."

Retailer reduction: focus

Participants saw retailer reduction as "the most politically viable" proposal, one that went "to the root cause of the problem." The 10-year time frame was also a plus. Retailer reduction would work well with outlet density restrictions and retailer caps, and "Just limiting the availability" was "less intrusive on people's rights." Many suggested modifications such as selling tobacco in tobacco- or adult-only stores. One concern raised by several participants was that retailer reduction be equitable, beginning with "those communities that are hardest hit, most concentrated with tobacco permits… have the most advertising."

Focusing on sellers was appealing: "You're going after the person who's selling the products versus the person who's addicted." However, one leader pointed out that "retailers are…the strongest, most effective opponents of tobacco control measures." Some participants sympathized with retailers. One thought retailers might be "entitled to some compensation" for lost business. Others disagreed, arguing that it was a "privilege" for retailers to sell tobacco; using "economic principles" to underscore "that we are not giving tacit approval for them to do it forever" was a good strategy.

Retailer reduction: impact

Some participants thought retailer reduction would result in reduced consumption. Several noted the inconvenience it imposed, with tobacco no longer available "on every corner." Youth might be particularly affected, as they "will be less likely to be able to go two or three miles" for cigarettes. Reducing retailers would also affect community norms about tobacco use and reduce enforcement costs.

Other participants were unconvinced. One participant predicted that making purchase less convenient would cause smokers to buy cartons rather than single packs of cigarettes,

potentially increasing the number of cigarettes smoked. As with other proposals, numerous

participants believed that retailer reduction would result in black markets. This, in turn, could

have disparate impacts, with "priority populations" suffering most.

Leaders (interviews only)

Priorities

Leaders were asked what endgame approaches should be California priorities. Of the

policies presented, retailer reduction was mentioned as the first step: after it was

implemented, "maybe we can think about banning tobacco." Another popular policy option

"that could be done tomorrow" was banning menthol. Combining approaches was also

possible: "Combine the tobacco free generation [with] the [tobacco] 21, and you can only get

mentholated tobacco products at [adults only] establishments. Now you've got a state that's

going to easily see youth initiation decline."

Organizational role

Almost all participants saw a role for their organizations in planning an endgame, even

those who disliked the ideas presented. The two most critical of endgame discussions were

concerned about impacts on their communities, and suggested that their organizations' input

could minimize this. One said his group's role should be "to educate about what works in

reducing tobacco disparities and what can potentially harm communities." Some advocates

stressed that their organizations should be involved in the development of new policy

directions: "We want to be…part of the discussion and part of determining whether it's smart

to move forward or not." Some representatives of national groups thought their central offices

might not be as enthusiastic as they were about endgame activities. One advocate commented

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that the national organization thought, "it's a little bit premature." But another thought they "would definitely be supportive."

Conflict with/complement other priorities

Several respondents were concerned that focus on endgame strategies would conflict with their organizational priorities. Some did not think the proposed strategies were taking on the right target. One said, "It's really trying to eliminate access to tobacco….And that…is not going to address the issue," which was to reduce the inequities that led to tobacco use. Others thought focusing on known approaches was a better way to proceed. Some worried that focusing on endgame proposals might leave behind communities that were already trailing in tobacco control advances.

Other participants asserted that endgame ideas could complement their current priorities: "We only have so much effort. Why not have that same amount of effort going towards moon shots?" Others were more specific. Retailer reduction "is a priority already," noted one leader. Another also mentioned specific policies: "Increasing the purchasing age is something that's definitely on our policy agenda….[TFG] is one that…organizations like ours I think would take a serious look at [and] limiting the number of retailers."

Priority populations

Several respondents emphasized that endgame approaches should be chosen with the participation of priority populations. "What's really important," noted one, "is to really begin to engage other folks that are impacted by commercial tobacco…and those include communities of color. It includes LGBT communities. It includes other priority populations." Another highlighted "the mental health community, the prison population, the military population,"

stressing that "we maybe need to figure out a little bit more strategy for dealing with those populations" because "we're not going to get to zero unless we're actually really addressing…the reasons why they're still smoking." She continued that without this work, "talk about endgame is maybe premature.…[W]e can't just ram it down their throats."

California

California was regarded as a good place to attempt an endgame strategy. "It's definitely within reach in California," said one participant. "[Tobacco control success in 2016] puts California as a leader." However, others warned of being overconfident: "If we don't have the…ability to get California to raise its tax by another $2.00 [beyond the recent $2.00 increase], why is it we think that the California legislature will prohibit sales of cigarettes to anybody born after the year 2000?"

Discussion

While a variety of opinions about endgame proposals were expressed by participants, and all proposals had supporters and opponents, in interviews with legislators and balloting among advocates, TFG and retailer reduction received the most support. This did not necessarily indicate that participants fully endorsed these policies. In focus groups, for example, there was lively debate about the potential drawbacks and pitfalls of both proposals. Yet individuals who raised criticisms or saw problematic aspects of these proposal were still willing to "vote" for them. This may suggest that advocates perceived a need for new approaches to tobacco control, even if they did not appear to be ideal. A broader public, not as concerned about tobacco, and voting in a real-world situation, would likely not be so forgiving. The

criticisms raised by participants suggest some potential approaches and pitfalls for advocates who want to advance endgame policies.

One of the problems that all types of respondents foresaw for all approaches was the development of black markets. These were seen as problematic and inevitable if cigarettes ceased to be widely available. The idea of black markets would also likely be exploited by opponents of endgame policies, including the tobacco industry. Some response to this fear will be necessary for the advancement of any endgame approach.

A second, related, theme was social justice. There was concern that enforcement of the smoker's license, and to a lesser degree TFG, would focus on smokers. This led to fears of over-policing, particularly of marginalized populations, with officers using "smoking without a license" or similar violations as an excuse to surveil and harass people. (The predicted black markets were also perceived to both disproportionately impact these communities, and to create likely targets for policing.) To overcome this fear, any attempt at policies such as these should present them as retailer-focused.

Another social justice issue was how and in what ways implementation of such policies might affect marginalized populations. Some participants felt that TFG might further concentrate tobacco use among populations who currently have high prevalence rates, by giving young people continued access to cigarettes through family and friends. Others pointed out the necessity of implementing a retailer reduction scheme equitably, so that as fewer retailers were permitted they were not concentrated in particular communities.

A third theme was a preference for more gradual policies. Both retailer reduction (posited to take 10 years) and TFG (allowing current legal smokers to continue indefinitely)

were perceived as more feasible than policies that would abruptly change the availability of tobacco. These gradual approaches have the downside of continuing to permit tobacco use, which some advocates also pointed out. However, it may be easier to gain support for them if a long lead time makes them appear more moderate.

The preference for gradual policies suggests that advocating that localities (or the state) take incremental steps toward an endgame policy goal may be the most effective strategy to achieve an endgame. For example, if the goal were achieving an endgame through retailer reduction, interim steps might include reducing retailers through buffer zones, eliminating retailer types (e.g., pharmacies), and retailer caps. As these incremental policies are implemented, social expectations about where or whether tobacco should be sold or should be used may change, much as public support for smokefree laws tends to increase after their passage.[23-27] A history of successful policy implementation and changing norms may, in turn, lay the groundwork for additional (or less gradual) endgame-oriented policy changes. This positive feedback process may support endgame approaches even in jurisdictions lacking California's strong history of tobacco control.

Limitations

This was a qualitative, exploratory study, whose small sample size, while consistent with our exploratory aims, limits our ability to generalize our findings to the entire California legislature, or to all tobacco control advocates or leaders. The opinions expressed may also be preliminary, given that the endgame ideas discussed were often new to participants and not the subject of widespread media or public attention. Such initial insights are valuable, however, from a group familiar with state and local tobacco control policymaking.

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Implications for policy and practice

- The fact that all four endgame proposals received some support suggests that the magnitude of the tobacco problem and the need for innovative policy solutions to address it are well understood.

- As discussions about an "endgame" proceed, it will be important to include the perspectives of priority populations, and to define a believably achievable endpoint.

- Advocating that localities (or the state) take incremental steps toward an endgame policy goal may be the most effective strategy.

- Seeing such incremental policies as steps toward a longer-term endgame goal could energize advocates, keep coalitions focused on policy improvements, and enhance the "policy competition" environment, whereby states and counties attempt to lead or keep up with the policy developments of their neighbors.

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Table 1. Endgame policy proposals presented

Endgame proposal	Description
A. Banning tobacco sales	The state would ban the sale of cigarettes. There would be no penalty for possessing cigarettes or smoking them.
B. Smoker registration	In order to smoke legally, people would have to be of smoking age, pass a test about the dangers of smoking, and pay a fee. Smokers would receive a "smart card" that would let them buy a certain number of cigarettes per week (users could choose the amount up to a maximum; higher amounts would cost more than lower amounts). Smokers would buy cigarettes from authorized stores. Smokers could reduce their weekly amount (if they wanted to cut down), or give up their registration (if they quit). Upon giving up their registration, ex-smokers would get back all fees.
C. Reducing the number of tobacco retailers	The state gives stores a license to sell cigarettes. Now, there is no limit on the number of licenses. In this proposal, the number of licenses available would be reduced each year, with available licenses to be distributed by lottery. In 10 years, the state would stop providing licenses altogether.
D. Tobacco-free generation	Sales of cigarettes would be barred to those born after 2000. Current smokers would continue to be able to buy cigarettes but those born after 2000 would never be able to legally buy them. Smoking would be "aged out."

Table

Table 2: Votes on four endgame proposals by focus group participants (N=44)

	Pre-discussion			Post-Discussion		
	Definitely/ Probably Yes	Definitely/ Probably No	No data/ Don't know	Definitely/ Probably Yes	Definitely/ Probably No	No data/ Don't know
Smoker registration	25	15	4	22	20	2
Ban sales	29	12	3	27	14	3
Tobacco-free generation	32	6	6	34	6	4
Retailer reduction	40	3	1	43	0	1

Supplemental Digital Content 1: Characteristics of focus group participants (N=44)

		N	%
Gender			
	Male	21	47.7
	Female	23	52.3
Race			
	American Indian/Alaska Native	2	4.5
	Asian	5	11.4
	Native Hawaiian/PI	1	2.3
	Black/African American	13	29.5
	White	11	25.0
	More than one	6	13.6
	No data	6	13.6
Ethnicity			
	Hispanic/Latino	9	20.5
	Not Hispanic/Latino	32	72.7
	No data	3	6.8
Tobacco use			
	Use tobacco now	2	4.5
	Use tobacco ever	19	43.2
	Use e-cigarettes now	2	4.5
	Use e-cigarettes ever	7	15.9