

State Legislators Vary in Their Attitude Toward Tobacco Control

Attitudes of state legislators toward tobacco and tobaccocontrol policies

SUMMARY

From 1993 to 1995, researchers at University of North Carolina at Chapel Hill conducted a three-state research study to assess state legislators' intentions to support or oppose tobacco-control legislation, and determine how such intentions are influenced by legislators' demographic characteristics, their knowledge of and attitudes toward tobacco control, and their perception of and contact with lobbyists on tobacco-related issues.

The project was part of the Robert Wood Johnson Foundation's (RWJF) national program *Tobacco Policy Research and Evaluation Program*.

Key Findings

The study found that:

- Most state legislators believe tobacco is addictive and that cigarette advertising targets adolescents.
- More than 75 percent stated that they would support a measure to enforce laws preventing tobacco sales to youth.
- Legislators have positive attitudes toward lobbyists for nonprofit health organizations and state medical societies regarding tobacco issues.

Funding

RWJF supported this project through a grant of \$325,724.

THE PROBLEM

State legislation is an increasingly important avenue for tobacco-control policies designed to decrease tobacco consumption, but there is little research into the determinants of such legislation. Every state has adopted one or more laws designed to limit tobacco use, with almost 200 tobacco-control bills in 37 states introduced in 1992 alone.

Despite strong public support for these legislative initiatives, most states have little success in establishing comprehensive tobacco-control legislation. This project investigated the factors that influence adoption or rejection of state tobacco-control laws.

THE PROJECT

The primary objective of this three-state research study was to assess state legislators' intentions to support or oppose tobacco-control legislation, and determine how such intentions are influenced by legislators' demographic characteristics, their knowledge of and attitudes toward tobacco control, and their perception of and contact with lobbyists on tobacco-related issues.

Interviews were completed with 84 percent (444 of 529) of all state legislators who were serving in North Carolina, Texas, and Vermont at the time of the interviews in May and October 1994. These states were chosen to represent a spectrum of tobacco-control laws, dependence on tobacco income, demographic composition, and health status measures.

A data set was established that included information on legislators' intentions to vote on various tobacco-control initiatives (excise taxes, youth access to tobacco, clean air initiatives, and preemption provisions that prevent localities from increasing the level of stringency of state laws by passing their own ordinances); their attitudes about tobacco products, advertising, legislation, and lobbyists; and personal tobacco use habits. In addition, the data set contained information on constituent demographics, campaign contributions, and voting record on tobacco-related legislation.

FINDINGS

- Legislators' personal tobacco use patterns did not differ significantly among states, with 18 percent reporting some use of tobacco products. 50 percent of the legislators had at least one close family member or friend who had died from a smoking-related disease.
- Most legislators believe tobacco is addictive, although there were differences among the states: 82 percent from Vermont, 70 percent from Texas, and 56 percent from North Carolina believe that people who smoke cigarettes do so mainly because they are addicted to nicotine.
- 79 percent from Vermont, 65 percent from Texas, and 42 percent from North Carolina agreed with the statement that environmental tobacco smoke can cause lung cancer in nonsmokers.
- More than 75 percent of legislators stated that they would support measures to enforce laws preventing tobacco sales to youth. The enforcement mechanisms described included unannounced annual inspections of all merchants, merchant education programs, and a fine of \$100 for failure to comply with the law.

- Support for increasing state tobacco excise taxes, assuming a need to raise revenue, varied significantly by state and tax scenario. A majority of Texas and Vermont legislators supported some increase (10 cents or 25 cents) in the state cigarette excise tax; 43 percent of North Carolina legislators would support a 10-cent increase if revenues were directed toward farmer diversification. Ongoing research is needed to determine the optimum tobacco pricing strategies to decrease tobacco consumption while maintaining legislative support.
- 75 percent of the legislators did not believe that smoking in indoor public places was a personal right.
- In 1993–94, there were 13 registered tobacco lobbyists in North Carolina, 7 in Texas, and 14 in Vermont. There were 3 registered nonprofit health lobbyists in North Carolina, 3 in Texas, and 6 in Vermont. North Carolina had 5 registered medical society lobbyists, Texas had 16, and Vermont had 3.
- Almost all legislators reported that medical society and nonprofit health organization lobbyists were credible on tobacco issues and slightly more than half believed that these lobbyists were important sources of information. This is in contrast to their beliefs about tobacco lobbyists: 86 percent in North Carolina, 68 percent in Texas, and 53 percent in Vermont believed that tobacco lobbyists are credible on tobacco issues; 42 percent in North Carolina, 26 percent in Texas, and 19 percent in Vermont believe tobacco lobbyists are an important source of information on tobacco issues. Overall, three to four times more legislators said they could be persuaded on tobacco issues by medical society and nonprofit health lobbyists than said they could be persuaded by tobacco lobbyists.
- In 1993–94, the proportion of state legislators receiving contributions from tobacco political action committees (PACs) was 38 percent in North Carolina, and 12 percent in Texas; the proportion of legislators receiving contributions from health professional PACs was 86 percent in North Carolina and 87 percent in Texas. In Vermont, by contrast, and in keeping with the relative absence of interest group contributions in state legislative or campaigns during the period surveyed, only one state legislator received any money from a tobacco PAC and only four received money from a health professional PAC.
- Health professional PACs gave campaign contributions to more state legislators, and gave higher amounts on average, than tobacco PACs. Medical societies, however, have a diverse legislative agenda, and tobacco control is not necessarily a priority.
- Legislators reported less contact with medical society lobbyists than tobacco lobbyists about tobacco issues. Overall, 58 percent of legislators reported any face-to-face contact with medical society lobbyists, 72 percent with nonprofit health lobbyists, and 72 percent with tobacco lobbyists during the 1993–94 legislative session. When asked to evaluate the amount of contact with lobbyists on tobacco-related issues, 26 percent stated that they had too little contact with nonprofit health

lobbyists compared with 11 percent who stated that they had too little contact with tobacco lobbyists.

Research Limitations

The legislator interviews in this study were conducted before the 1994 elections, when, in a major political shift, Republicans assumed a majority in many legislatures around the country, including North Carolina. Therefore, according to the principal investigator, these findings may overstate the support for tobacco control among current state legislators.

The principal outcome measure was voting intentions rather than votes. However, there was a strong relationship between legislators' survey responses regarding their voting intentions and subsequent voting behavior in the one state—Vermont—where a vote on a tobacco-control issue (cigarette excise tax) took place during the 1995 legislative session.

Communications

The project director edited a January 1995 special issue of the *North Carolina Medical Journal* in which several articles based on this study appeared. Articles reporting the study findings were also published in *American Journal of Public Health, Tobacco Control* and *Health Psychology* in 1997. See the Bibliography for details.

AFTERWARD

An outgrowth of this project was the implementation of similar research by independent investigators at the Ontario Tobacco Research Council, who are examining factors influencing tobacco-related legislation on a provincial and national basis in Canada. In addition, investigators at the University of Kentucky, who are researching the processes by which legislators from tobacco states legislators form their opinions about tobacco use and approaches to tobacco use prevention.

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