Author's response to reviews

Title: Why California retailers stop selling tobacco products, and what their customers and employees think about it when they do: case studies

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Response to reviewers

Reviewer One

1. On p.5 the authors could explain why they interviewed both a store owner and an employee? What additional data did they expect the employee to be able to provide (or what grounds were there for expecting a divergence in views)?

We added to page five information on why we interviewed store owners and managers (the people most involved in creating and/or implementing the voluntary tobacco-related policy) as well as employees (in order to obtain the perspective of staff who were more likely to have direct experience with customers and with selling vs. not selling tobacco).

2.Were there any differences between the telephone and f-t-f interviews? Did the data quality vary by interview mode?

We added a sentence to page 6 to indicate that there were no discernible differences in quality between face-to-face and telephone interviews.

3. In a couple of places, I thought ideas in the quotes could have been explored further. As an example, on p.7, the authors list three quotes for abandoning tobacco sales – two of these cite general (public) health reasons (didn’t want to retail cancer causing products) while one noted a personal reason (family members having died from cancers attributable to smoking). The same difference between general and personal motivations is evidence on p.8 and I wondered if it might be worth differentiating between these different reasons?

We made the suggested change to page 7 and 8, drawing attention to the fact that retailers offered both abstract health reasons as well as personal reasons.

4. On p.9 the authors discuss how retailers publicised their decision and I was interested to see that one didn’t, largely because he seemed to fear negative consequences (people might shop elsewhere). It would be interesting to know whether this happened to any extent as I suspect this fear may inhibit other retailers, thus evidence that it is misplaced could be very helpful.

The section immediately following the retailer’s quote about possible negative consequences of ending tobacco sales on page 9 is focused on the perceived impact of the new policy on customers (e.g., gain or loss, number of complaints).

5. The fear of inconveniencing customers also emerges on p.11 in a comment from an employee opposed to the measure. Although the authors didn’t explore this point, I wonder if there is an opportunity for retailers to sell NRT products and for the transition away from tobacco to coincide with a movement towards NRT retailing? I’m not sure of the US regulations around sale of NRT products, but such a move would be consistent with the ‘care for
consumers’ philosophy some participants expressed and may also help counter negative employee perceptions (i.e., stores would offer an alternative, rather than nothing at all). (This point also relates to comments made on p.15, about customers who had attempted to quit following the store’s decision.)

We added a new paragraph to the discussion that touches on this point.

6. I was slightly surprised to read the comment from a retailer who, while committed to the new policy, nevertheless saw it as somewhat ‘nanny statist’ and wondered whether policy moves might need to stress the fact that tobacco is not a normal grocery item (as this store owner stated), but a toxic and lethal product?

We added a new paragraph to the discussion that includes several sentences on ways that tobacco control advocates might ease retailers’ concerns about discontinuing tobacco sales, including pointing out that tobacco is not a normal grocery item, but a toxic and lethal product when used as intended.

7. I was also interested to read that retailers thought tobacco did not fit with their ‘healthy’ products and wondered if they also retailed sweets, carbonated soft drinks and high other high fat, salt and sugar items? Is there an opportunity to promote other public health measures (that might help people live to 100, as a manager suggested)?

We have added a sentence to the “description of stores” on page 7 that indicates that the grocery stores in our sample also sold unhealthy products containing high levels of fat, sugar, and salt. However, given our focus on tobacco sales in our interviews and focus groups, we did not feel that it would be appropriate in the discussion to advocate for stores to also consider ending the sales of unhealthy foods.

8. Could the authors comment on how local community approval for retail outlets (p.14) would be obtained? Is this part of a planning submission process? I was not sure how local residents’ views would be considered in licensing decisions?

We added a phrase to page 16 to indicate that local community approval could be obtained during the planning submission process.

9. In New Zealand, retailers who have taken tobacco products off open display have received awards from the Asthma Foundation and many display these proudly in their stores. They are also listed on the AF website and the AF prepares media releases each time they make a presentation. It might also be worth considering how third party endorsement could be used to promote these retailers.

We added a paragraph to the discussion that mentions possible incentives that tobacco control advocates might offer retailers considering ending tobacco sales, including media coverage.
initiated by tobacco control organizations and endorsements on tobacco control organization websites.

10. California has more progressive tobacco control than New Zealand at present, but I did wonder about whether it was worth considering a progression from removing tobacco from open display to removing it altogether? It may be that such a suggestion would not be useful in California, but it might be in other jurisdictions, where a move to remove tobacco from sale altogether would generate resistance.

We have added a paragraph to the discussion that mentions this possibility as a means of reducing retailer resistance to voluntarily ending tobacco sales.

11. Overall, very interesting, nicely written and thoughtfully conceived MS.

Thank you!

Reviewer Two

This is important research as supply side policy issues in tobacco control are not as well explored in academic literature as demand side policies. This paper helps tobacco control stakeholders better understand how both voluntary and mandated retail sales restrictions can contribute to decreasing tobacco use.

Given the case study approach and exploratory nature of the research, the recruitment process for obtaining participants was appropriate. Both the focus group and interview methods are sound.

Results: Presented in a straightforward and easy to read summary. What is meant by a “high velocity” product? Unfamiliar with this term?

We replaced this possibly confusing term with the phrase “briskly selling” product.

Limitations acknowledged and addressed.

The discussion seem a little bit thin to me – can you explore the issue raised in the results of it being easier on employees to just not sell tobacco? This seems an important argument particularly when retail associations often balk at additional tobacco control regulations in store as making it “too hard” on employees to sell tobacco smoothly and efficiently – how can tobacco advocates reframe this argument to induce grocery stores to no longer sell products?

The reoccurring frame of health and positive marketing should be explored in more depth too – marketing opportunities for grocery stores in particular through earned media – much cheaper than purchasing ad space - possibility of attracting the majority of people and who don’t smoke – even in poor neighbourhoods this is true.
We added a paragraph to the discussion that addresses all of these concerns, highlighting how the potential for making employees’ jobs easier, garnering free earned media, and increasing the patronage of customers who support the policy might be used to encourage other retailers to end tobacco sales.

RATS Qualitative Research Review Guidelines
We added additional information on the following: choice of interview method; why particular categories of interviewees were chosen; who recruited retailers; possible response bias due to our affiliation with a health sciences university; our guarantee to interviewees and focus group participants not to use their names in publications or the names of the stores; why we chose our analytic approach; the basis for which quotes were chosen; our method of reliability checking.

We believe we already adhere to the other categories listed in the guidelines.