Overview

The Vermont Department of Health’s Tobacco Control Program (VTCP) and Alcohol and Drug Abuse Programs (ADAP) work with strategic partners and community grantees throughout Vermont to promote tobacco and substance prevention and control policies at the state and local levels. To inform program policy priorities, it is helpful to understand knowledge, attitudes, and support for potential policy options among municipal government and other local opinion leaders.

In 2014, the VTCP sponsored a survey of local opinion leaders in Vermont, conducted by RTI International, to assess knowledge, attitudes, and support on a selection of potential tobacco control policies. In 2017, VTCP partnered with ADAP to co-sponsor a second Local Opinion Leader Survey (LOLS), conducted by JSI Research & Training Institute, Inc. The 2017 LOLS was expanded in scope, including potential policies for tobacco control and potential policies addressing alcohol and non-medical marijuana use. The 2017 LOLS sample was also expanded to incorporate additional types of local leaders.

Survey Methods & Sample

The 2017 LOLS was administered to two samples using phone interviews and an online survey.

- **Core Sample**: comprised of select board chairs, mayors, regional planners, and town managers.
- **Expanded Sample**: comprised of local planners and chambers of commerce (CoC) members and staff.

The sampling frame came from the Vermont League of Cities & Towns, town websites, and the Vermont CoC website. The total 2017 LOLS sample size was 299/460, for a response rate of 65%. Among the 299 survey respondents, 164 (55%) were interviewed via phone and 135 (45%) completed the survey online.

**RESPONSE RATE BY COUNTY**

![Response Rates by County]

**Who responded?**

- Mayors
- Regional planning commission
- Select board chairs
- Town managers
- Chambers of Commerce
- Local planning commission
- Average number of responses by county = 22

2017 Findings

**A MAJORITY OF LOCAL LEADERS ARE RECEPTIVE TO 5 POLICIES***

- Increasing the state tobacco excise tax
- Restricting non-medical marijuana advertising
- Preventing retailers from accepting tobacco coupons
- Restricting alcohol consumption in public places
- Having health promotion language in town and/or regional plans

**COMMON THEMES**

- Most significant community health issues include: Addiction, obesity/nutrition/physical activity, and access to health care/aging/mental health/the impact of poverty on health
- Local opinion leaders support for policy options do not significantly differ by population size of county or local opinion leaders’ perceived level of influence
- Local opinion leaders generally perceived their influence to be greater at the local level than at the state level

*Majority = 50% or more respondents are strongly supportive or somewhat supportive of the policy.
Opinions on Tobacco Prevention and Control Policies

LEVEL OF SUPPORT FOR TOBACCO POLICIES*

• 73% of local opinion leaders support increasing the state tobacco excise tax
  - Reasons include: increased cost for tobacco discourages use, motivates tobacco users to quit, and messages that tobacco is not healthy behavior. Some local opinion leaders also stated that additional tax revenue would be beneficial.
  - Favorability for increasing the state tobacco excise tax is often conditional on the tax revenue being used to offset the societal cost of tobacco use (e.g., fund health care costs, education).
  - 44% strongly support, 29% somewhat support

• 52% of local opinion leaders support preventing retailers from accepting tobacco coupons, a slight decline from the 2014 rate of 56%
  - 39% strongly support, 13% somewhat support

• 47% of local opinion leaders support increasing the minimum age to purchase tobacco products to 21 years, a slight decline from the 2014 rate of 47%
  - 29% strongly support, 18% somewhat support

• 46% of local opinion leaders support making flavored tobacco products illegal**

• 21% of local opinion leaders support restricting the number of tobacco retailers
  - 9% strongly support, 11% somewhat support

NOTES

• Opinions varied by role for tobacco control policies; municipal officials were less likely to favor policies on: raising the legal age of sale for tobacco to 21, restricting the number of tobacco retailers, or preventing retailers from accepting tobacco discount coupons.

• Opinions on tobacco control policies did not vary by county population size.

* Support = strongly support or somewhat support
** = yes or no question on the survey
Vermont Local Opinion Leaders Survey
Opinions on Alcohol Prevention and Control Policies

LEVEL OF SUPPORT FOR ALCOHOL POLICIES*

• 51% of local opinion leaders support restricting alcohol consumption in public places.
  • Local opinion leaders support restricting alcohol consumption where children play, in parks, and at local events.
  • Local opinion leaders expressed that alcohol control policies should be determined at the local based on each community’s situation, not mandated by the state.
  • 25% strongly support, 26% somewhat support

• 46% of local opinion leaders support a 1% local option tax on alcohol sales.
  • Local opinion leaders not in favor of a local option expressed concern on too much taxation already, pushback from residents, unfair to those of lesser means, and negative economic impact.
  • For all alcohol tax policies, about 10% of local opinion leaders consistently said these policies won’t work - people will go elsewhere, such as other towns in Vermont with lower taxes, or notably, to New Hampshire.
  • 25% strongly support, 21% somewhat support

NOTES

• Planners were more likely to favor a policy to restrict or cap the number of alcohol retailers in a community while municipal officials and business people were strongly against this policy.
  • There were no differences of opinion by county population size or leaders’ perceived level of influence.

72% of local opinion leaders feel underage drinking is an important health issue to address in their community.

*Support = strongly support or somewhat support
46% of local opinion leaders feel non-medical marijuana use is an important or very important health issue to address in their community.

LEVEL OF SUPPORT FOR NON-MEDICAL MARIJUANA POLICIES*

- 61% of local opinion leaders support restricting advertising for non-medical marijuana and related paraphernalia, should marijuana be legalized in Vermont.
  - A small group of local opinion leaders were opposed to restrictions on advertising of marijuana products, stating that if it were a legal product sold through retail markets then businesses ought to be able to sell and therefore promote it.
  - 41% strongly support, 20% somewhat support

Viable Prevention and Control Policy Options

Considering survey findings on local opinion leaders level of support for prevention and control policies, salience of issues and contextual factors, the following policy options are candidates for development, support, and adoption.

- **STATE TOBACCO EXCISE TAX.** Significantly increasing tobacco taxes is one of the most effective strategies to reduce tobacco use, especially among youth. With a tax rate of $3.08 per pack of cigarettes, Vermont ranks 6th in the nation for cigarette excise tax. Vermont’s local opinion leaders are aware of the effectiveness of this strategy, and generally receptive to increasing the tax. However, many are concerned that the revenue would end up in the state’s General Fund. Linking revenue gained from tobacco taxes to support tobacco programming and/or healthcare costs associated with tobacco use lends further support for this policy option.

- **RESTRICTING ALCOHOL CONSUMPTION IN PUBLIC PLACES.** Considering the craft beer, wine and spirits industry in Vermont and its contribution to state and local tourism and economy, local opinion leaders are more supportive of local policies to restrict alcohol consumption in public places, such as parks, than they are in restricting number of alcohol retailers or increasing alcohol taxes.

- **RESTRICTING ADVERTISING FOR NON-MEDICAL MARIJUANA AND PARAPHERNALIA.** Possession of non-medical marijuana will become legal in Vermont in July 2018. Considering the likelihood of Vermont moving forward with a plan to tax and regulate the sale of marijuana in the future, and some level of support among local opinion leaders to restrict advertising for nonmedical marijuana and paraphernalia in an effort to restrict promotion of use, this policy option is timely and salient.

*Support = strongly support or somewhat support*