

Tobacco more likely to be sold at pharmacies in poor and Latino communities

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Tobacco products are more likely to be sold in pharmacies located in poor and Latino communities.

(Medical Xpress)—Poverty and the racial makeup of a community are a good indications of whether someone can go into the neighborhood pharmacy and find a pack of Marlboro cigarettes for sale, according to a Rutgers study.

The new research, published in *GIScience and Remote Sensing* by Andrew Peterson, an associate professor in the Rutgers School of Social Work, confirmed a disturbing trend: Tobacco products are more likely to be sold in pharmacies located in poor and Latino communities.

"Pharmacies are a critical component of the health care system and their

role is contradicted by the sale of [cigarettes](#)," says Peterson. "It is against the ethics of pharmacists to sell a product that is among the top preventable causes of death in the world.

Peterson's research, with former Rutgers doctoral student Cory Morton, involved a rigorous analysis of the geographic distribution of pharmacies selling [tobacco](#) products. The study combined administrative data, including [pharmacy](#) licenses and tobacco retail licenses, with U.S. census data and applied advanced geospatial analytic techniques to measure the relationship between people's access to pharmacies that sold these products and their neighborhoods' socio-demographic characteristics. The researchers discovered that the density of pharmacies selling tobacco is higher in poorer neighborhoods and Latino communities. Peterson's team was the first in the country to do this type of analysis.

Peterson commends the recent landmark decision by pharmacy chain giant CVS Caremark to ban the sale of cigarettes starting October 1 at its more than 7,600 stores, a decision that will cause the company to lose \$2 billion in annual revenue. As pharmacies increasingly position themselves as health care providers for everything from flu shots to in-store clinics, Peterson thinks CVS made a strategic business decision that it believe in the long run will be more profitable.

"They are also making a business decision to bet on the future of the [health care](#) industry rather than the future of the tobacco industry," Peterson says.

Peterson's previous research indicated that while most pharmacists didn't think that cigarettes and other tobacco products should be sold, two-third of pharmacies, mostly corporate owned, continued to earn billions in revenue in tobacco sales. Smaller, independently owned pharmacies, however, were more likely to choose to ban its sale.

The researchers' next line of study will be focusing on what it will take for other pharmacies to follow the lead of CVS, and what communities can do to encourage a ban on cigarettes at their local pharmacies.

Peterson and his research team have published seminal research about [tobacco sales](#) and pharmacies in publications including the Journal of Community Psychology and Journal of the American Pharmacists Association.

The team also reports that smoking rates are often lower in communities where there are fewer stores selling [tobacco products](#).

"Cost is an important predictor of substance abuse, and higher costs are associated with a decline in use," says Morton, who is a postdoctoral fellow with the National Development and Research Institute and supported by the National Institute of Drug Abuse, part of the National Institutes of Health.

"There is an increased search cost involved for the consumer who may now have to travel farther to get cigarettes," Morton said. "The cost of gas and of his or her time gets added to the price of the cigarettes, actually making them cost more."

Provided by Rutgers University

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