

ActionToQuit Interview
Larry Cohen, Prevention Institute

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Larry, please tell us about yourself and what you do at Prevention Institute.

Larry Cohen

I am the founder and executive director of Prevention Institute, which started 18 years ago and has grown into an organization of nearly 50 people in four different locations. The goal of the Institute from the start has been to help people who work in the prevention field do their jobs. We focus on advocacy for prevention and health equity, and are headquartered in Oakland, California.



How long have you been working on tobacco issues and what was the tobacco control environment like early in your career? In particular, what experiences led you to commit yourself to work in tobacco control?

Larry Cohen

A generation ago, everyone smoked - parents, teachers, athletes, movie stars, politicians, doctors. Cigarette companies even had physician endorsers. And smoking was allowed everywhere, without restriction. About 30 years ago, I helped lead a coalition to pass the nation's first regulations to make public spaces smoke-free in all the (18) cities within Contra Costa County, California. It was also the first big anti-tobacco coalition effort and included the American Cancer Society, American Lung Association, and American Heart Association. Our aim was to create smoke-free workplaces, restaurants, and other public places. In those days, preventive health was extremely trivialized, and most anti-tobacco efforts were centered on staffing health fairs and handing out pamphlets. The focus of this coalition was changing tobacco policies and organizational practices, while raising public awareness through media coverage.



Was the Contra Costa County project a success and did it have a ripple effect?

Larry Cohen

Contra Costa County was representative of the U.S. population overall. This meant that if we could successfully pass tobacco control legislation there, then it could also pass in other cities and states across the nation. Our grassroots advocacy effort was so effective that, in the end, only three of 150 local city council members in the county's 18 cities chose to vote "no" to the

proposed smoke-free places measures. Now, the initial policies were conservative and only required 40% of indoor areas to be smoke free. As time went on, other cities and counties began to follow suit and even competed with each other. The 40% smoke-free zones were extended to 50% and then, eventually, to 100% smoke-free indoor air. After the Contra Costa County success, other policy measures were enacted at the state and federal levels, from cigarette tax increases to smoke-free airplanes. A nationwide movement had begun.



Do you have any interesting or colorful stories to tell about your early years in tobacco control?

Larry Cohen

I have one from when I was still working in tobacco education, before the days of policy activities. The American Cancer Society used to have a frog mascot with a slogan: “Kiss Me, I Don’t Smoke.” So, for a media event, my coalition partners asked me to emerge from the Sacramento River wearing a frog suit and pass out anti-tobacco brochures. “A great photo op,” they said. This was one of those pinnacle moments when I realized that, while awareness activities like this might have some value, policy change could take the movement much further. I declined to wear the frog suit.

Another incident: Once I started working in policy, things ramped up. I was offered bribe money and career notoriety by the tobacco industry, and when this failed, I faced intimidation efforts, though I was never overtly threatened. There were more than 20 tobacco lobbyists in California at that time, although California didn’t even grow tobacco. This just goes to show the tobacco industry’s extensive reach and power. Right after we released the proposed policy changes for Contra Costa County, a chief tobacco lobbyist invited me to lunch. He offered several enticements to change my approach, even a job offer at triple my salary, which I declined. During the lunch, the lobbyist began to talk about his son. I asked him how he could live with himself when his work was hurting and killing millions of people, one of whom could be his own child one day. And that ended the lunch meeting.



What can anti-tobacco coalitions do that individuals or organizations alone cannot?

Larry Cohen

Individuals, collaboratives, and government all have important roles in the tobacco control movement. It is critical that citizens concerned about the needless loss of life from tobacco work closely with advocacy organizations. Thirty years ago, many prevention and advocacy groups had difficulty collaborating because they often competed for funding. But even when these organizations are competitors for the charitable dollar, they will work together in tobacco control. As for individuals, possibly the single most important reason we garnered so much support from Contra Costa County city council members was the influence of physicians and other board members from the advocacy organizations. They lived in these communities and were well-known citizens who carried weight with their appeals.



The tobacco product landscape has changed dramatically in the past decade with the proliferation of e-cigarettes and other devices. In your opinion, has the tobacco industry changed?

Larry Cohen

The tobacco industry has opened up many new markets and is worldwide in scope. Some people think this was because of policy setbacks in the U.S., but it was headed in that direction anyway. It greatly concerns me that this well-financed industry now exerts its influence over trade agreements between countries. The tobacco industry has also diversified, in part to portray itself as a legitimate contributor to society. On the other hand, the tobacco control community has been very effective at exposing and discrediting the industry. We have seen success, but we have also slowed down and rested on our laurels. We may have patted ourselves on the back too long and forgotten that the tobacco industry never sleeps. We haven't been as effective in youth prevention, and we haven't been strong enough in protecting low income communities and communities of color. Today, the tobacco industry is even more skilled at its craft than in past decades, predicting the policy climate and adapting. The e-cigarette phenomenon is a good example. E-cigarettes are very attractive to worldwide markets, with ad messages purveying them as healthy and free from secondhand smoke. In the U.S., I think the Centers for Disease Control and Prevention, the Food and Drug Administration, and other agencies have been too slow to respond to the e-cigarette onslaught. We could have pushed back sooner, but now that train is at full speed.



What does the future hold for prevention in general and tobacco control in particular?

Larry Cohen

One out of six dollars in the U.S. is spent on health care, and some say it will soon be one in five. More important is the unnecessary illness, misery and death that could be prevented. The only solution that makes sense financially and morally is to pay greater attention to prevention, keep people healthier, and thus reduce health care costs. Prevention must be well funded, and evidence-informed tobacco control initiatives should be at the top of the list. We must continue to work with philanthropy, which to some degree has “moved on” from tobacco control funding to support other worthy causes like obesity in America. Additionally, we need further focus on tobacco and health inequalities. There has been inadequate attention to providing disenfranchised communities with deliberate support.

The last three decades of tobacco control work provide a wealth of learning which can benefit all health advocates and practitioners. Everyone recognizes that we have had many wins, and have overcome odds and power. Even though we have a long way to go, I am extremely proud of the progress we've made fighting tobacco. We have challenged a giant, well-funded industry and successfully enacted countless policy changes that promote health and save lives from tobacco.