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The findings of this analysis demonstrated a QuIC Evidence Assessment classification as Best, with the strongest potential for a public health impact than the other policies and high levels of evidence quality. Effectiveness for a positive health impact and equity are strengthened because individual jurisdictions (state, county, city, etc.) can design the TRL law that best suits their community. For example, Craigmile et al.[10] found that the best combination of TRL laws were dependent on the community. The authors found that 1000 ft school buffer was more equitable and impactful when based on prevalence of Black residents, but TRL capping laws were more equitable for rural communities where schools and retailers are more likely to already be spaced apart. They also found that tobacco-free pharmacy laws had inequitable impacts.[10] In studies that compounded policy strategies (not necessarily with TRL laws), a greater density reduction was found when tobacco-free pharmacy law and school buffer were combined[8] and limiting cigarette sales to tobacco-only retailers and a retailer buffer enhanced density impact and equalized total purchasing cost across communities.[13] The evidence of the impact to youth smoking prevalence is very promising as well. Enactment of an e-cigarette licensing policy added to the existing TRL law in Pennsylvania resulted in a nine percentage-point reduction in youth e-cigarette use prevalence, which was 5% lower than New York and more than 7% lower than Virginia (neither of which had e-cigarette licensure laws at the time).[18] Furthermore, Astor et al.[15] found that more restrictive laws resulted in significantly lower odds of youth having ever used cigarettes and e-cigarettes, as well as past-30 days use of cigarettes and e-cigarettes. Similarly, Hong et al.[16] found youths in weaker TRL ordinance areas were more likely to report using e-cigarettes. Advocacy campaigns should be feasible, similar to the School and Retail Buffer strategy, several of the studies were performed in areas where these laws were already in place[12,15–19] providing precedence and modelling for campaigns. [See Appendix B for summary table of literature related to Comprehensive TRL strategies and the QuIC Evidence Assessment results]

Conclusion: The evidence, as summarized in this analysis, found that 1000 ft school buffers and 500 ft retailer buffers are impactful policy interventions that would advance the AHA's tobacco endgame goal and contribute to health equity. These two policy interventions are enhanced and can be utilized more effectively when combined with TRL laws that are already advocated for by the AHA. Zoning or stand-alone laws addressing retailer density can be layered on top of comprehensive TRL. [14]

There are legal considerations to weigh when considering these policy interventions, including the Takings Clause under the Fifth Amendment and portions of the Fourteenth Amendment

that there is fairness given to everyone.[20] To the extent possible, it will be important to design state and local laws and regulations that can withstand such legal challenges.

Another legal risk and consideration relates to allowing exemptions to (l 3c1 1Cns th (can)]TJ0.0002 Tc -0

Figure 1: Results of literature search and screening process

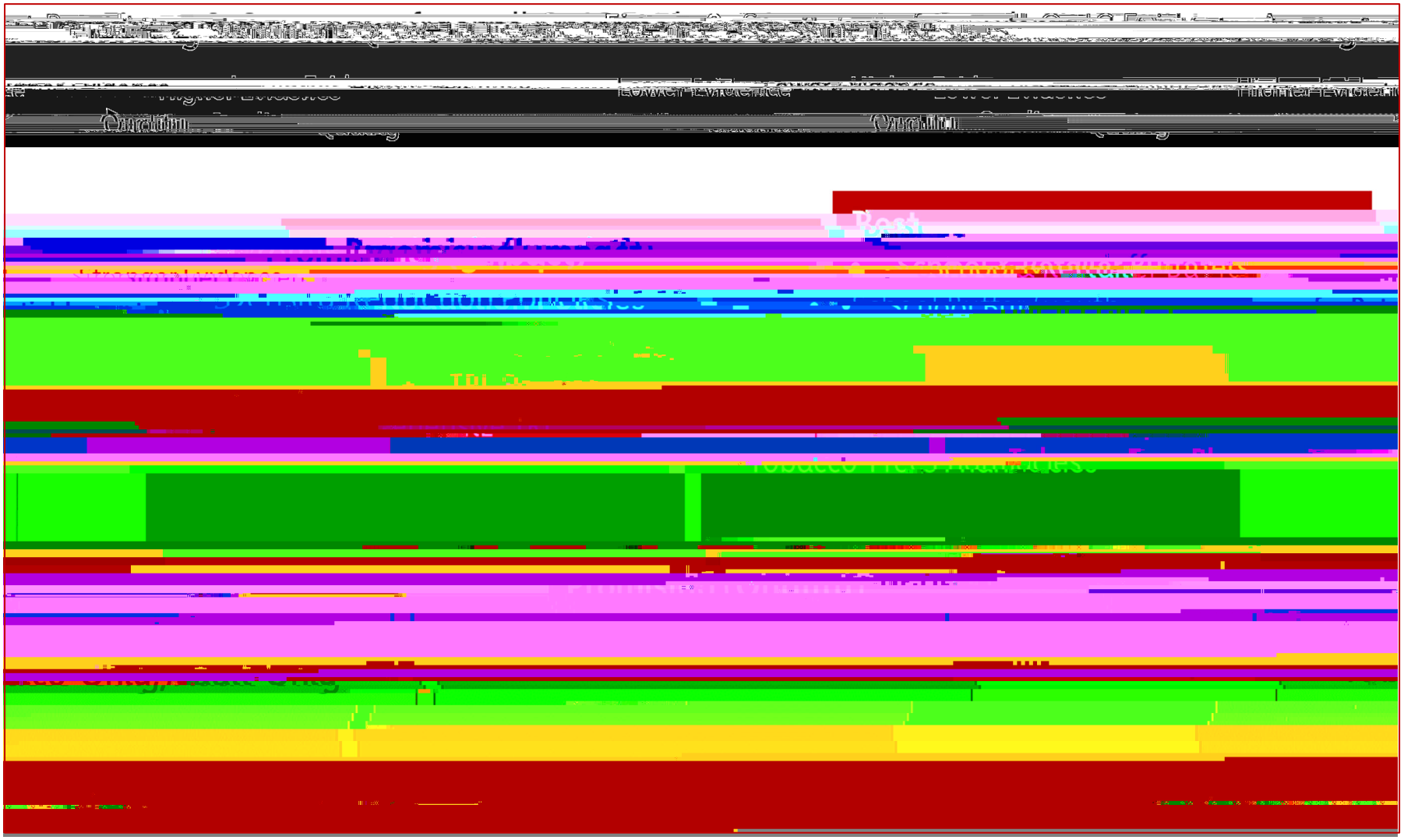

Table 1: Summary of the Equity and Health Impacts, Level of Evidence from QuIC, and AHA Strategic Alignment for Each Tobacco Retailer Strategy Explored

Comprehensive Retail Licensure	7.5/10 pts - This is a strong score. Utilizing more comprehensive approaches (using more than one

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Appendix A: Summary of the QuIC Evidence Assessment for Retail and School Buffers

Myers AE, et al. 2015	School & Retailer	500 ft retailer buffer ↓ density 22.1% (state); 20.8% (16.6% - 27.9%; county). Tobacco-free pharmacy & school buffer ↓ density 29.3% (state); 29.7% (26.3 to 35.6%; county).	Good
Farley SM, et al. 2015	School	Limiting TRL: 54% (non-smokers) & 30% (smokers) in favor; School Buffer: 69% (non-smokers) & 60% (smokers) in favor.	Fair
Luke DA, et al. 2017	School & Retailer	↓density leads to ↓ accessibility by ↑ search and purchase