

THE *CO* Researcher

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Teens and Tobacco

Do cigarette ads encourage teens to start smoking?

Studies show that 80 to 90 percent of U.S. smokers took up the habit before age 20. No wonder, then, that teenage consumers interest both the tobacco industry and anti-smoking activists. Industry officials say cigarette advertising is aimed only at smokers age 18 and older, and that younger smokers start because of peer pressure. For their part, anti-smoking groups say cigarette ads and promotional campaigns deliberately target youngsters under 18, the legal smoking age nationwide. The struggle between the tobacco industry and its foes now centers on proposed federal regulations that would curb youth-oriented tobacco marketing. However, leading tobacco companies and national advertising groups have filed separate suits seeking to undo the rulemaking package before it can be implemented.



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Teens and Tobacco

BY RICHARD L. WORSFOLD

THE ISSUES

Tobacco companies and public health specialists rarely see eye to eye on anything, but the issue of teen smoking makes both sides see red.

"The problem is, the only people starting to smoke these days are kids," says John P. Pierce, a professor of family and preventive medicine at the University of California-San Diego (UCSD) and co-author of a recent study on the effects of cigarette advertising on young people. "The industry clearly needs newcomers or they're going to go out of business. They've got to be targeting kids. Whether they intend to or not, they've got to focus on them because that's their source [of future smokers]."

"R.J. Reynolds Tobacco Co. believes firmly in its long-held position that 'Kids should not smoke,'" the company said in a brief statement issued last month. "We stand behind our position by offering programs that supplement other youth non-smoking efforts in schools, at retail [outlets] and in the home. These programs . . . reflect the many studies that show the key factors affecting youth smoking to be the influences of peers and family."

The interest in teen and even pre-teen smokers is easy to understand. Studies show that 80 to 90 percent of U.S. smokers started before age 20. The tobacco industry needs a steady flow of young recruits to replace adult smokers who die or quit. By the same token, anti-smoking groups realize that their dream of a "smoke-free America" will remain just that unless teenagers can be persuaded to abstain from tobacco.

For a 15-year period starting in the mid-1970s, the anti-smoking forces seemed firmly in command. From 1977 to 1992, the percentage of high school seniors who smoked one or more cigarettes a day dropped from 28.9 percent to 17.2 percent.¹ Even more



remarkably, the daily smoking rate for African-American seniors fell from 26.8 percent in 1976 to only 3.7 percent in 1992. (See graphs, p. 1068.)

Now, however, the pendulum has begun to swing the other way. Over the past three years, tobacco use has increased among both white and black teenagers. And though smoking rates for both groups remain well below mid-1970s levels, public health officials are worried.

Of particular concern are data showing that the proportional increase in adolescent smoking is greatest among eighth-graders — 13- and 14-year-olds. Between 1991 and 1994, the percentage of eighth-graders who smoke rose from 14.3 percent to 18.6 percent — a 30 percent increase overall. Only about half of all eighth-graders believe smokers run a great risk of harming themselves by smoking a pack or more daily. (See graphs, p. 1070, 1072.)

Researchers cite a variety of reasons for the upsurge in teen smoking. "In addition to their unrealistically low per-

ception of the dangers of smoking, there has been a clear weakening of peer norms against smoking," said Lloyd D. Johnston, program director of the Monitoring the Future Project at the University of Michigan's Survey Research Center. "While the majority [of teens] still say they disapprove of regular smoking, that proportion has been declining steadily since the early 1990s."²

Johnston also pointed to the tobacco industry's advertising and promotional efforts: "Cigarette smoking is continually associated with social success, sexual attractiveness, a healthy demeanor, exciting sporting activities, a cool and tough image for the boys, a slender body and liberated spirit for the girls, autonomy and independence for both sexes. What else could an American adolescent want?"³

The tobacco industry, for its part, vehemently denies that its advertising targets teenagers. It argues that cigarette ads seek to sway adult smokers who are considering switching brands.

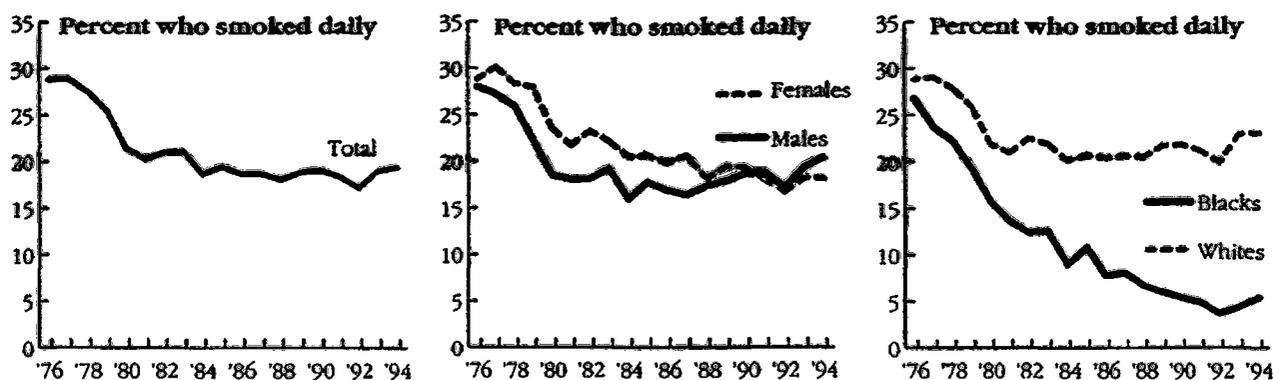
"If you're a non-smoker, the messages in cigarette ads mean nothing to you," says Thomas Lauria, a spokesman for The Tobacco Institute, the industry's trade group. "But if you're a smoker, and you find out from ads that a brand costs 25 or 50 cents a pack less than the one you're using, or it's got more flavor, less tar, you might decide to switch. There's a whole array of product attributes that is communicated through advertising."

Anti-smoking groups stress the health risks of tobacco use, but they have a further concern as well — that teenage smokers will experiment with marijuana and other illegal drugs. Indeed, recent survey data indicate marijuana use by teenagers has been rising along with cigarette use.⁴

That's why tobacco is called a "gateway drug," says John F. Banzhaf III, executive director of Action on Smoking and Health (ASH), a Washington-based group that seeks to protect the

More High School Seniors Are Smoking Every Day

The percentage of high school seniors who smoke one or more cigarettes a day has been rising since 1992. Daily smoking is up even among black students, who for the past 15 years have been far less likely to smoke than whites. Smoking among all seniors is still below what it was two decades ago.



Source: University of Michigan Survey Research Center, *Monitoring the Future Project, 1995*

rights of non-smokers. "Tobacco acts as a gateway "in a number of senses," Banzhaf adds. "For most kids, it's the first illegal drug they use. By illegal, I mean it is against the law for a 12-year-old to buy and use cigarettes, just as it's illegal to buy and use alcohol — to say nothing of marijuana, cocaine and heroin." He makes the further point that "very few people can light up a marijuana cigarette and take a deep drag if they've never smoked tobacco."

Another cause for alarm about teen smokers, Banzhaf says, is that "the earlier they start, the more likely they are to become addicted, and to remain addicted." Moreover, teenagers' bodies "are undergoing changes; they're still growing and developing. Exposure to any toxin is more likely to damage a 10- or 12-year-old, whose body is still developing, than a 21-year-old, whose body is pretty well formed."

To minimize teenagers' exposure to tobacco marketing, the U.S. Food and Drug Administration on Aug. 10 proposed regulations governing the sale and distribution of cigarettes and smokeless tobacco products (snuff and chew-

ing tobacco) to children and adolescents. Among other things, the rules would prohibit cigarette vending machines, free samples, mail-order sales and self-service displays; limit cigarette advertising in youth-oriented publications to a black-and-white, text-only format; and require tobacco companies to set up and finance a \$150-million-a-year public education campaign to warn teenagers about the hazards of smoking. The tobacco industry and advertising trade associations have filed separate lawsuits seeking to overturn the FDA proposals (*see p. 1072*).

At the same time, the tobacco industry is under renewed assault in the courts. Sixty prominent personal-injury law firms from across the country have banded together in the largest product-liability suit in U.S. history. Filed in New Orleans on behalf of one deceased and three living plaintiffs, the suit could eventually embrace as many as 90 million current and former smokers. Four states, meanwhile, have sued tobacco companies seeking reimbursement for publicly funded health-care outlays linked to tobacco-related ill-

nesses. (*See story, p. 1078.*)

History would not seem to be on the plaintiffs' side in any of the court cases. In more than 40 years of tobacco product-liability litigation, cigarette makers never have had to pay damages to any plaintiff. However, leaked tobacco-company documents that have surfaced in recent years may present problems for the defense in the pending round of cases. The reason is that many of the documents seem to contradict or undercut public statements by company officials about tobacco's addictiveness or the industry's ability to manipulate the nicotine content of cigarettes.⁶ Still more internal papers are expected to surface as the suits enter the discovery phase.

No verdicts or settlements are likely for at least several years, giving smokers and non-smokers ample time to ponder the controversy. These are some of the questions being asked:

Is tobacco marketing the main reason why teenagers take up smoking?

Down through the years, the slogans echo: "Reach for a Lucky Instead

Joe Camel Under Attack

Homely yet suave, Joe Camel rivals Bugs Bunny and Donald Duck for cartoon name and image recognition. Since R.J. Reynolds Tobacco Co. made Joe the centerpiece of an ad campaign in 1988, the company's fading Camel brand has become one of the most popular cigarettes among young smokers. Adolescent boys, in particular, are said to view Joe Camel as cool, macho and self-assured — the very traits that many male teenagers fear they lack.

Anti-smoking activists were not amused. In 1992, numerous public health groups petitioned the Federal Trade Commission to declare Joe Camel unfair advertising because he appeals to an illegal market — smokers under age 18. But the commission voted 3-2 in June 1994 not to bar Joe from Camel ads, saying there was not enough evidence to prove he actually causes young people to start smoking.

Anti-smoking groups still view Joe Camel as a public-health menace, however. To buttress their case, they point to a 1991 study suggesting that even very young children recognize the cartoon character. Children ranging from 3 to 6 years old were asked to match each of 22 brand logos displayed on cards to one of 12 products pictured on a game board. Ten logos were from children's products, seven from adult products and five from cigarette brands. Researchers found that Joe's recognition rate ranged from 30 percent among 3-year-olds to 91 percent among 6-year-olds.¹

of a Sweet"; "Blow Some My Way"; "I'd Walk a Mile for a Camel"; "You've Come a Long Way, Baby."

These catch phrases, some of the best known in U.S. advertising history, all were designed to promote a particular brand of cigarette. Sales figures and independent research studies suggest that ad campaigns have helped boost cigarette consumption generally. Even so, opinion remains split on whether cigarette ads play a decisive role in persuading persons under age 18 to smoke.



Anti-smoking groups say children are targeted by ads for Camel cigarettes featuring Joe Camel.

Cigarette companies contend the answer clearly is no. "Finland banned all tobacco advertising in 1978," says Lauria at The Tobacco Institute. "Even so, their youth smoking rate stubbornly stayed the same and then recently went up. I can't explain why that is the case, although I do logically point out that if advertising is such an influence that would have been impossible."

The tobacco industry spends billions on advertising and other forms of promotion for a simple reason, Lauria adds: "Brand imagery is closely

"By the age of 6," noted a 1994 U.S. surgeon general's report, "the face of ... Joe and the silhouette of Mickey Mouse (the logo for the Disney Channel on cable television) were equally well recognized."²

Joe's popularity among youths doesn't stem solely from his aloof and enigmatic mien. Young people respond also to the line of Joe Camel merchandise featured in the Camel Cash catalogue, which many retailers distribute for free. The products include ball caps, tank tops, gym bags, denim or suede jackets, sunglasses and cigarette lighters. All may be obtained only in exchange for a stated number of "C-notes," one of which is tucked into every Camel cigarette pack. Other cigarette brands run similar promotions.

But no cigarette ads aggravate anti-smoking activists as much as the ones featuring Joe Camel. As Mark Pertschuk, a spokesman for Americans for Nonsmokers'

Rights, told the *Los Angeles Times*: "It doesn't take a Ph.D. to tell you that cartoon characters on skateboards are not targeting 35-year-old professional women."³

¹ P.M. Fischer, et al. "Brand Logo Recognition by Children Aged 3 to 6 Years: Mickey Mouse and Old Joe the Camel," *Journal of the American Medical Association*, Dec. 17, 1991, pp. 3145-3148. Also see, "Advertising Under Attack," *The CQ Researcher*, Sept. 13, 1991, pp. 657-680.

² U.S. Department of Health and Human Services, *Preventing Tobacco Use Among Young People: A Report of the Surgeon General* (1994), p. 191.

³ *Los Angeles Times*, Aug. 21, 1995, p. A14. The group is based in Berkeley, Calif.

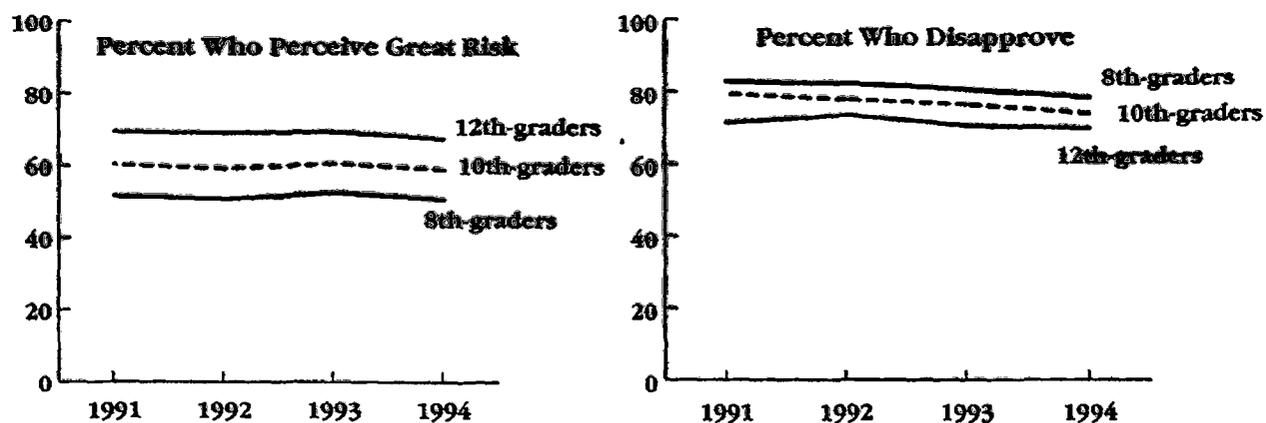
associated with advertising, because cigarettes are very similar to one another." Moreover, he notes, smokers carry their cigarettes with them, typically taking a pack out of a pocket or purse before lighting up. "Other people notice that. Brand identification is not irrelevant to a smoker."

If cigarette advertising has minimal impact on non-smoking adolescents, what does impel them to take up the tobacco habit? "The overwhelming preponderance of data on why non-smoking teens start smoking focuses on peer

Attitudes Toward Smoking

Only about half of all eighth-graders believe smokers run a great risk of harming themselves by smoking a pack or more daily.

The vast majority of teens disapprove of people smoking one or more packs a day, but disapproval ratings have dropped in recent years.



Source: University of Michigan Survey Research Center, Monitoring the Future Project, 1995

pressure," Lauria says. "If anybody else told you [that] but the tobacco companies, it would be taken as gospel. But anti-smoking activists, in their statist zeal, prefer to attack the industry — as opposed to being perplexed by the intricacies of human behavior."

Banzhaf of ASH attributes the recent rise in teen smoking rates to "a tremendous increase in the amount of promotional material" distributed by tobacco companies. "Not advertising — promotion," Banzhaf emphasizes. "Most of the [marketing] money is now going into promotion, not direct advertising."

Promotion includes such things as free samples, price cuts, sponsorship of sports events and marketing of apparel and other items popular with teenagers in exchange for a stated number of empty cigarette packs. "Kids get a desire to own one of these promotional products," Banzhaf says. "Even if they don't smoke, they get in the habit of handling the packs, asking people to give them [empty] packs and so on. That tends to break down

the aversion [to smoking]."

According to a study published in August 1994 by the U.S. Centers for Disease Control and Prevention (CDC), teenagers are significantly more responsive to cigarette advertising than are adults. In 1993, the study noted, Marlboro, Camel and Newport were the three most heavily advertised cigarette brands. While the three brands accounted for 35 percent of total cigarette sales that year, they accounted for 86 percent of cigarette purchases by adolescent smokers. The study acknowledged, however, that "cigarette sales to adolescents constitute a small percentage of the total market."

A more recent study, published this October, concluded that advertising is the dominant influence in persuading teenagers to use cigarettes. "Tobacco marketing is much stronger than peer pressure in getting a youngster to take the first step toward smoking," said UCSD's Pierce, a co-author of the study. "It is what starts adolescents down the slippery slope to addiction."

At the end of elementary school, Pierce said, children "are adamantly anti-smoking." But then "their resolve weakens over the next couple of years, and they start experimenting. We're arguing that tobacco marketing primes the pump, starts the whole process going."

Pierce hastened to add that peer pressure also is a key influence. "We found that you're more likely to be at risk to start smoking if you have other smokers in your family or among your friends," he said. "So we're not saying [peer pressure is] not important. It is important; it's important all the way through [adolescence]. But in the early stages, marketing seems to be more important."

In conducting the study, Pierce and his fellow researchers asked more than 3,500 non-smoking California adolescents a set of yes-or-no questions about cigarette advertising; the objective was to gauge susceptibility to future tobacco use. More than half the children said they were familiar with some cigarette brands and ads, and about one in

five wanted to own a promotional product offered by a tobacco company. On the basis of these and other responses to survey questions, the researchers concluded that, "Overall, one-quarter . . . of adolescent never-smokers were susceptible to smoking."¹¹

According to the study, adolescents exposed to family members or peers who smoked were almost twice as likely as others to begin smoking themselves. But even when peer influence was taken into account, teens deemed receptive to cigarette ads were found to be two to four times more likely to land in the smoking-susceptible group than were those classified as unreceptive.

Survey data showed that ads for Camel cigarettes were more popular by far among teenagers than those for any other brand. Sales data suggested that the Joe Camel marketing campaign, which started in 1988, was largely responsible. (See story, p. 1069.) "In 1987, Camel cigarettes were virtually invisible in the illegal teenage market," the study stated. "However, 18 months later, Camel cigarettes had acquired a market share of 8.1 percent, and national data from 1993 indicate that these cigarettes now represent a 13.3 percent share of the adolescent market."¹²

Lauria at The Tobacco Institute dismisses the California study as "political science" that "was just manufactured as fodder for the FDA's proposed curbs" on cigarette ads the agency feels are aimed at teens. The study was "skewed to force-feed impressions on children and then ask them quickly for a yes or no" response, he contends.

For instance, Lauria notes that the

children were asked whether cigarette ads convey the message that successful people smoke. "Well, successful people do smoke," he says. "You can see David Letterman with a cigar or Christian Slater and Winona Ryder with a cigarette —

when smoking almost disappeared from films," he says. "But now it seems to be making a comeback. You see smoking not just when it's essential to the scene, or when only the bad guys are lighting up. Increasingly, you're seeing the hero and the heroine or other sympathetic characters puffing away in situations where smoking very clearly does nothing to advance the plot."

Johnston at the University of Michigan says he "strongly suspects" that product placement explains the increase in smoking scenes. "The other night, I saw 'Get Shorty,' with John Travolta," he says. "I don't think there was a scene in the entire movie that didn't have at least one person smoking, and sometimes more. Actually, Travolta may be trying to rebuild his career around the smoking character. I don't think he ever was shown without a cigarette in 'Pulp Fiction,' either. So, he alone is a one-man disaster for teenage smoking."

Lauria says there was "absolutely no product placement" by cigarette companies in "Get Shorty," "Pulp Fiction" or "any other movies made in recent memory." That's because the practice was ended by industrywide agreement in 1990. "So if there have been more smoking scenes in the last five years, it has to do with creative license, not industry placement."

Should youth-oriented tobacco marketing be sharply restricted?

Disturbed by the recent rise in adolescent smoking, President Clinton on Aug. 10 announced he was taking steps to counteract the trend. The action took the form of proposed FDA regulations to curb marketing of tobacco products

Can you name the most heavily advertised cigarette brands?

She can.

(Only four percent of children who smoke prefer the three most advertised brands: Marlboro, Camel and Newport.) That's no coincidence.

It takes cigarette advertisements on cartoon ads, billboards, TV, radio and countless other marketing that hit the TV sets, cars, buses to get into the streets.

- Three thousand kids start smoking every day.
- Nearly all adult smokers begin as children.
- One third will die from their addiction.

Tobacco companies are making \$20 billion a year from sales to children and addicting a new generation of consumers.

The nation's top health experts have proposed new limits to keep tobacco marketing from grossing \$20 billion and to make cigarettes less attractive to kids. But industry lobbyists are working to stop these rules.

Let your voice be heard. Write, call or fax to support the proposed limits. And let your Congress members know you support the proposed limits. And let your Congress members know you support the proposed limits.

- Tell the FDA you support the proposed limits. Fax to: Administrator, (301) 458-5151, Room 1-11, 1245 Parklawn Drive, Rockville, MD, 20851.
- Tell your members of Congress that to endanger America's children for tobacco company profits.
- Learn more by calling 1-800-368-4343.

The ad sponsored by the National PTA, American Nurses Association, National Association of Teachers in Public Schools, National Council of Juvenile and Family Court Judges, National Education Association and over 100 other organizations throughout the country.

CAMPAIGN TO TOBACCO FREE Kids

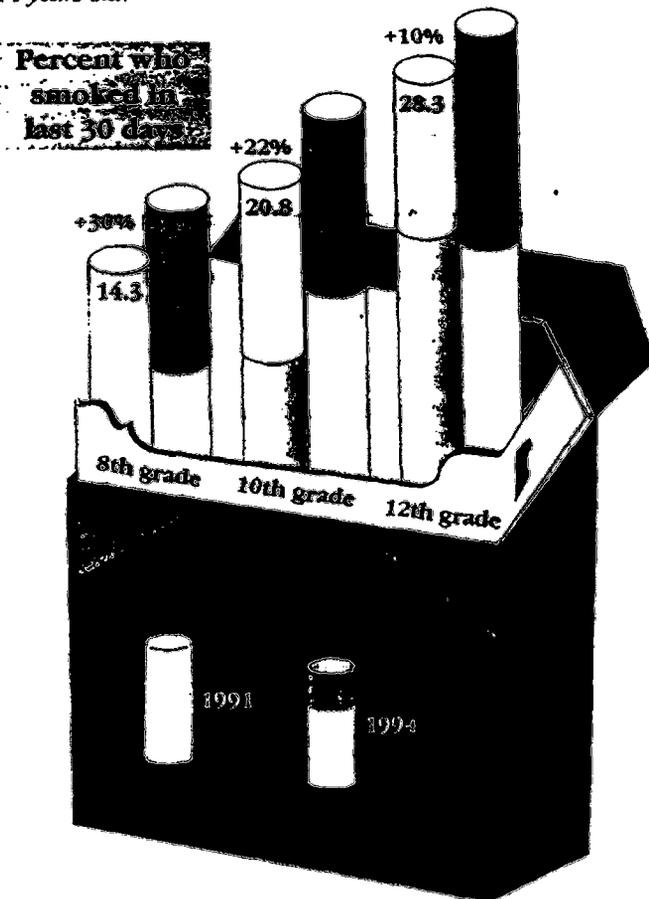
Anti-smoking advertisement from the National PTA and more than 100 other groups urges support for proposed limits on marketing tobacco products to children

and they're not posing for ads, either. We don't use celebrities in cigarette ads; that hasn't happened in decades. But successful people smoke in real-life situations, and an observant kid will notice that."

In this connection, Banzhaf cites an apparent increase of smoking scenes in movies and television shows. "There was a period in the late 1970s and '80s

Teen Smoking on the Rise

The increase was greatest among eighth-graders, who are 13 and 14 years old.



Source: University of Michigan Survey Research Center. Monitoring the Future Project. 1995

to youths under age 18.

"When Joe Camel tells young children that smoking is cool, when billboards tell teens that smoking will lead to true romance, when Virginia Slims tell adolescents that cigarettes may make them thin and glamorous, then our children need our wisdom, our guidance and our experience," Clinton said. "We're their parents, and it is up to us to protect them."¹²

The FDA proposal, issued the same

day, would (1) make 18 the federal minimum age for buying tobacco products; (2) prohibit cigarette vending machines, free samples, mail-order sales and self-service displays; (3) require retailers to verify the age of young purchasers; (4) limit tobacco product ads and labels to which children are exposed to text-only "tombstone" formats; (5) bar the sale or distribution of non-tobacco promotional items bearing brand names; (6) require

tobacco companies sponsoring events such as sports tournaments to identify themselves by corporate, not brand, name; and (7) make the companies establish and fund an ongoing public education campaign to discourage young people from smoking.¹³ FDA Commissioner David A. Kessler said the agency had regulatory authority over cigarettes, since they are medical "devices" under the terms of the Federal Food, Drug and Cosmetic Act.

Not surprisingly, the teen-smoking initiative won plaudits from many scientists, public health officials and anti-smoking activists. "No serious scientist questions the fact that tobacco is the single greatest preventable cause of cancer in the United States," said National Cancer Institute Director Richard D. Klausner. He described Clinton's decision to permit FDA regulation of tobacco products as "without a doubt the most important thing in public health that he will do in his administration."¹⁴

Johnston also hailed the FDA proposals, saying they "would certainly move us in the right direction to reduce the amount of advertising and promotional materials that reach young people. They would remove some of the strongest stimuli that encourage adolescent smoking."

But while "reducing easy access to cigarettes is important," Johnston feels the chief value of the FDA rule package lies in "the symbolic message it sends. It says that we really do care as a society about whether our kids smoke, and that we don't want them to." He adds, "When kids have this product pushed in their face in virtually every corner of the country, it sends them another kind of message — 'Tobacco must not be all that bad, because if it were, adults would protect us from it.' In fact, I've heard youngsters say exactly that."

As was expected, cigarette makers strongly condemned the FDA's proposed rulemaking, portraying it as the first step in a campaign for prohibition of tobacco products. Indeed, Lauria goes

so far as to call the agency's action "an illegal and unconstitutional power grab" by Commissioner Kessler. "FDA hasn't got jurisdiction here," Lauria says. "They never did have jurisdiction here, and if Congress' will prevails, they'll never have jurisdiction."

In a joint motion for summary judgment filed Oct. 4 in U.S. District Court in Greensboro, N.C., the five leading cigarette manufacturers* and a North Carolina advertising agency sought to block implementation of the FDA rules on the grounds outlined by Lauria. "On at least 20 different occasions Congress has rejected legislation that would have granted FDA jurisdiction over cigarettes," the plaintiffs declared. "On each occasion — including at least seven times over the last decade — Congress has decided that FDA should have no such authority."

The advertising industry, which numbers tobacco companies among its top clients, also seeks to defeat the FDA rules package in court. In a complaint filed Sept. 27, six major advertising groups** echoed some of the same arguments embodied in the cigarette makers' plea to the same court. But the advertisers also contended that the FDA regulations would violate their First Amendment rights.

"The objective of the FDA's assertion of jurisdiction over the advertising of cigarettes and smokeless tobacco products is not to

create restrictions or conditions so that cigarettes and smokeless tobacco products can be used safely and effectively," the complaint stated. "The objective . . . is to reduce underage tobacco use by curtailing speech." The advertisers further charged that the FDA's move "is causing substantial irreparable injury to plaintiffs by chilling their constitutionally protected speech." Without judicial

guard to advertising." Advertisers "have no position on whether people should smoke, or whether tobacco should be allowed to be sold or not sold," he says. "Our position is very simple: We believe that if tobacco is a legal product, which it is, it should be allowed to be advertised in a free society. That's what the First Amendment is all about. And while we agree the government should have authority to protect children, we feel it has gone way beyond that legitimate goal by trying to impose restrictions that would make it virtually impossible to advertise to anybody."

Jaffe predicts that the proposed advertising curbs "will create enormous precedents that will impact not just the tobacco companies but makers of any other controversial products," citing high-fat or high-salt foods as potential examples. He adds, "If we use children as the litmus test for what can be expressed through advertising in our society, then we are going to lower public discourse to the level of the sandbox."

The government, in Jaffe's view, is approaching the youth smoking issue from the wrong direction. "We don't stop advertising alcohol, cars or guns because they might fall into the hands of underage users," he says. "Instead, we restrict their sales. If government cracked down on illegal tobacco sales at the point of purchase, that would do more to reduce teen smoking than any conceivable restriction on advertising."

Elizabeth M. Whelan, president of the American Council on Science and Health, a consumer advocacy group in New York, devotes much of her time to what she calls the "cigarette tragedy." But as a conservative Republican, she feels the proposed FDA



HOW TO TALK TO YOUR KIDS ABOUT SMOKING BEFORE SOMEONE ELSE DOES.



Advertisement from the R. J. Reynolds Tobacco Co. offers parents a free 12-page brochure and Youth Education Kit to "help them talk to their kids about smoking."

relief. "plaintiffs will face continued and lengthy uncertainty in entering into contracts and making future editorial decisions regarding advertising of tobacco products."

Daniel L. Jaffe, executive vice president of the Association of National Advertisers, says the FDA rulemaking notice is "the most restrictive proposal in the history of this country with re-

* The companies are Brown & Williamson Tobacco Corp., Liggett Group Inc., Lorillard Tobacco Co., Philip Morris Inc. and R.J. Reynolds Tobacco Co.

** The groups are the American Advertising Federation, American Association of Advertising Agencies, Association of National Advertisers, Magazine Publishers of America, Outdoor Advertising Association of America and Point-of-Purchase Advertising Institute.

regulations are misconceived and heavyhanded. In her view, the best way to discourage smoking within all age groups is to make tobacco companies play by the same liability rules as other industries. The best way to do this, she says, is to have Congress remove the government-mandated warning labels from cigarette packs.

"[A]s a result of the label, tobacco-company lawyers have consistently and successfully argued in court that Congress has pre-empted their responsibility for warning consumers about any diseases that cigarettes might cause," Whelan noted last year. "If we were truly serious about confronting an industry that is literally selling death, we would remove the government warning label and thus strip the tobacco industry of this privileged legal status."¹⁵

If the shield were lifted, Whelan says in a recent interview, the tobacco industry itself would have to inform consumers in detail about the health consequences of smoking. That would mean, in turn, that warning labels on cigarette packs "would be about the size of the New York City phone book." ■

BACKGROUND

Early Ad Campaigns

"Most people don't realize how new the cigarette is," Whelan says. Before the 19th century, the leading tobacco product was snuff — powdered tobacco that could be inhaled through the nostrils, chewed or lodged between the inner lip and gums. Toward the middle of the century, smoking of pipes and cigars increasingly gained favor. And as the 20th century neared, cigarettes began their ascent to the pinnacle of the tobacco market.

Tobacco companies realized early

on that promotion of brand names was crucial to building market share. In 1866, for example, W.T. Blackwell and Co. of Durham, N.C., introduced the Bull Durham brand of cut tobacco. A decade later, Blackwell partner Julian Carr launched a nationwide advertising campaign "in which the Durham Bull itself, rather than the tobacco, was portrayed in anthropomorphic situations, alternating between scenes in which the bull was jovial and boisterous and those where he was serious and determined."¹⁶

Carr was also quick to discern the value of appealing to the youth market. To this end, he had Blackwell's sponsor the 1879 commencement exercises at the University of North Carolina in nearby Chapel Hill. Guests were taken "from hotel to campus with a livery of horses, each of which had attached to it a flag bearing the sign of the bull; the wagons dealt with the matter more directly — they had painted on them the sign 'Smoke Blackwell's Durham Smoking Mixture.'"¹⁷

Another cigarette marketing practice of the period — inserting a picture of a scantily clad woman in each cigarette pack — sparked hostile comment. This "early use of 'soft pornography' as the basis for product promotion was reported to have had young boys scrambling after cigarette packs." John Pierce and Elizabeth A. Gilpin wrote in a recent historical study of tobacco marketing. "There was widespread consternation with what was perceived to be a powerful corrupting influence of the cigarette industry on young boys."¹⁸

World War I is credited with further popularizing cigarette smoking by young men, since free or cut-rate cigarettes were distributed to armed forces personnel. After the war, ad campaigns began targeting young women as well. For instance, American Tobacco Co.'s famous "Reach for a Lucky Instead of a Sweet" slogan reinforced the notion — still prevalent today — that smoking makes it

easier to keep a trim figure.

Many adults, meanwhile, were growing uneasy. As a 1994 U.S. surgeon general's report noted, "From the time of the earliest marketing campaigns, parents, educators and policy-makers worried about the exposure — intentional or not, it was inevitable — of young people to cigarette advertising."¹⁹

But the cigarette ad blitz only grew heavier with the advent of nationwide radio broadcasting in the 1930s. Then and later, tobacco companies sponsored numerous musical radio programs popular with teenagers. The longest-running program of this kind was "The Lucky Strike Hit Parade," which started in 1928 and ended on television in the 1950s. "So popular was this show in 1938," stated the surgeon general's report, "that when its producers introduced a sweepstakes promotion offering free cartons of 'Luckies' for correctly guessing each week's three most popular tunes, the promotion drew nearly 7 million entries per week."²⁰

Health Warnings

A new generation of young fighting men was introduced to smoking through free and discount cigarettes during World War II. After peace returned, civilian cigarette sales resumed their climb.

During the 1950s, though, medical authorities began to warn of the health hazards of smoking. The American Cancer Society adopted a resolution in 1954 to "emphasize to the American people that . . . presently available evidence indicates an association between smoking, particularly cigarette smoking, and lung cancer." Three years later, Surgeon General Leroy E. Burney asserted that "the weight of evidence is increasingly pointing in one direction:

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Chronology

1920s-1930s

Cigarette advertising flourishes in the interwar period, with numerous ad campaigns appealing to young men and — for the first time — young women.

1926

Ads for Chesterfield cigarettes show a young woman saying, "Blow Some My Way." The attempt to make smoking acceptable to women sparks public outrage, but other tobacco companies launch similar campaigns.

1928

Lucky Strike sponsors "The Lucky Strike Hit Parade," a weekly musical radio show popular with young people. The "Hit Parade" successfully makes the transition to television after World War II before leaving the air in the 1950s.

1930s

During the heyday of the Big Band Era, cigarette companies sponsor weekly radio shows featuring Benny Goodman, Glenn Miller, Artie Shaw, Tommy Dorsey and the Andrews Sisters.

1950s-1970s

Mounting concern about the health consequences of smoking prompt action by the federal government.

1954

The American Cancer Society adopts a resolution to "emphasize to the American people that . . . available evidence indicates an association between smoking, particularly cigarette smoking, and lung cancer." Three years later, Surgeon General Leroy E.

Burney asserts that "the weight of evidence is increasingly pointing in one direction: that excessive smoking is one of the causative factors in lung cancer."

Jan. 11, 1964

Surgeon General Luther L. Terry issues a report, *Smoking and Health*, stating that the death rate from lung cancer for male smokers was 10 times higher than among non-smokers. It also says cigarette smoking is "the most important" cause of chronic bronchitis, emphysema and coronary heart disease.

April 27, 1964

Nine leading tobacco manufacturers unveil an advertising code aimed at restricting ads that target consumers under 21 or that contain unsupported health claims.

1965

President Lyndon B. Johnson signs the Federal Cigarette Labeling and Advertising Act, which requires a health warning on all cigarette packages. The law is tightened in 1969 and 1984.

1971

All cigarette commercials are barred from radio and television. Public service messages warning against the health hazards of smoking soon leave the air as well.

1977

Cigarette smoking by U.S. high school seniors, as measured by the University of Michigan's ongoing Monitoring the Future Project, begins a decline that is to last 15 years.

1980s-1990s

The ongoing struggle between

the tobacco industry and anti-smoking groups grows still more intense.

1988

R.J. Reynolds Tobacco Co. launches its "Joe Camel" ad campaign for Camel cigarettes, reversing the brand's sales decline.

1992

Anti-smoking groups petition the Federal Trade Commission (FTC) to prohibit the use of the Joe Camel cartoon character in Camel ads, contending that it induces youngsters under 18 to smoke.

May 12, 1994

Stanton A. Glantz, a professor of medicine at the University of California-San Francisco, receives some 4,000 pages of internal documents from the Brown & Williamson Tobacco Corp., sent by an anonymous source.

June 7, 1994

The FTC confirms that it voted 3-2 a week earlier not to prohibit the use of Joe Camel in Camel cigarette ads.

Aug. 11, 1995

The Food and Drug Administration (FDA) publishes proposed regulations in the *Federal Register* that would curb tobacco advertising and promotional activities directed at youngsters and require manufacturers to establish a \$150-million-a-year public education campaign to discourage children and adolescents from smoking.

September-October 1995

Coalitions of tobacco companies and national advertisers file separate suits in U.S. district court in Greensboro, N.C., seeking to block implementation of the FDA's rulemaking package.

Teens at Risk Even If They Don't Inhale

Discussions of teen tobacco use usually center on cigarette smoking. But teen consumption of smokeless tobacco — chewing tobacco and snuff — also disturbs public health officials. About 11 percent of high school seniors had used smokeless tobacco during the previous 30 days, according to a survey taken in 1994.¹

Chewing tobacco users lodge a wad of loose-leaf tobacco or a plug of compressed tobacco in their cheek; snuff users place powdered or finely cut tobacco between the cheek or lip and gums. In both cases, the user sucks on the tobacco and spits out the resulting brown juice. Studies have shown that the blood of adult smokeless-tobacco users has nicotine levels comparable to those found in smokers.

Consumption of smokeless tobacco varies by region — it's lowest among teens in the Northeast and highest in the South and North Central region. Indeed, a 1994 report on preventing nicotine addiction in children and youth noted that smokeless tobacco use by teens exceeded the youth smoking rate in several states, including Alabama, Colorado, Idaho, Montana, South Dakota and Wyoming.²

According to a 1991 study, high school boys who dipped snuff or chewed tobacco often engaged in other types of risky behavior. The survey found that boys were more likely to report use of smokeless tobacco if they rarely or never wore auto seat belts, frequently got into fistfights, carried a weapon during one or more of the preceding 30 days, used anabolic steroids without a doctor's prescription or had made one or more suicide attempts in the preceding 12 months.³

Some studies have found a link between the use of smokeless tobacco and participation in team sports.⁴ But according to a 1994 U.S. surgeon general's report, "current studies have mixed findings about this possible relationship. . . . Taken together, the current evidence is inconclusive and warrants further investigation that might consider team rules regarding smokeless tobacco use, coaches' use of smokeless tobacco or attitude toward team members' use and parents' degree of involvement in the team."⁵

Regardless of their individual behavior profiles, all smokeless tobacco users expose themselves to serious health disorders. In 1992, the Department of Health and Human Services (HHS) reported that the chief hazards for young dippers and chewers were nicotine dependence, bad breath, receding gums and leukoplakia — a white patch that forms

on soft oral tissue and cannot be scraped off. Longterm users run the risk of developing cancers of the gum, mouth, larynx, pharynx and esophagus.⁶

Several studies have found that smokeless tobacco use is a risk factor for cigarette smoking, and vice versa. As one report noted, "The exchangeability of tobacco use supports the idea that nicotine addiction can be maintained by tobacco from any source."⁷

The best-known adolescent victim of smokeless tobacco was Sean Marsee, a star high school athlete from Oklahoma who regularly dipped snuff. Marsee developed oral cancer as a result, and died in 1984 at age 19. The outcry over his death sparked a nationwide campaign to "snuff out snuff."

That obviously didn't happen, but regulation of snuff and chewing tobacco was tightened in 1986. Health warnings were made mandatory that year on smokeless tobacco packages and print advertisements. In addition, radio and television advertising of the products was banned, just as cigarette commercials had been forced off the air 15 years earlier.

Sales of smokeless tobacco products declined in the late 1980s. By 1991, however, annual consumption in the U.S. had returned to its 1985 level of over 120 million pounds. According to the 1994 U.S. surgeon general's report, the increase in use coincided with an increase in advertising and promotional expenditures starting in 1988. Promotional activities such as sponsorship of entertainment events and gifts given at the point of sale "appear to particularly appeal to male adolescents, even if the smokeless tobacco industry does not explicitly target teens," the report noted.⁸

¹ Results reported in the 1995 Monitoring the Future Project of the University of Michigan's Survey Research Center.

² See Barbara S. Lynch and Richard J. Bonnie, eds., *Growing Up Tobacco Free: Preventing Nicotine Addiction in Children and Youths* (1994), p. 58.

³ The 1991 Youth Risk Behavior Survey, conducted by the Division of Adolescent and School Health of the Centers for Disease Control and Prevention.

⁴ *Ibid.*

⁵ U.S. Department of Health and Human Services, *Preventing Tobacco Use Among Young People: A Report of the Surgeon General* (1994), p. 144.

⁶ The 1992 HHS report *Spit Tobacco and Youth* estimated that 40 to 60 percent of smokeless tobacco users develop gum recession and/or leukoplakia.

⁷ Lynch and Bonnie, *op. cit.* Also see, U.S. Department of Health and Human Services, *op. cit.*

⁸ U.S. Department of Health and Human Services, *op. cit.* p. 363.

Continued from p. 1074

that excessive smoking is one of the causative factors in lung cancer."

A historic turning point came Jan. 11, 1964, with the release of a long-awaited report by the Advisory Committee on Smoking and Health, appointed two

years earlier by Surgeon General Luther L. Terry. The committee's key conclusion was that "Cigarette smoking is a health hazard of sufficient importance in the United States to warrant appropriate remedial action." The panel based its finding on statistical studies showing that

"cigarette smoking is causally related to cancer in men" and that "the magnitude of the effect of cigarette smoking far outweighs all other factors."

Stung by the report, the tobacco industry on April 27 unveiled a voluntary cigarette advertising code aimed

chiefly at ads targeting persons under 21 and unsupported health claims. The code stated that no advertising for newspapers, radio or television could be used until it had been cleared by the code administrator, who had authority to impose fines of up to \$100,000 on any company found in violation of the rules. The regulations barred testimonials by famous athletes or entertainers with a 'special appeal' to younger people and banned cigarette ads from broadcasts or publications meant for persons under 21.

In 1965, Congress joined the fray over smoking and health by approving the Federal Cigarette Labeling and Advertising Act. The law provided that, as of Jan. 1, 1966, all cigarette packages and cartons sold in the United States and its possessions must bear the message, "Caution: Cigarette Smoking May Be Hazardous to Your Health." The requirement applied to imported as well as domestically produced cigarettes. *

The tobacco industry suffered another apparent setback when the Federal Communications Commission (FCC), citing the "fairness doctrine," in 1967 ordered broadcasting stations that carried cigarette commercials to make available a significant amount of time for anti-smoking announcements. As a result, thousands of messages warning of the health hazards of smoking appeared on radio and TV over the next three and a half years. In 1969, cigarette sales fell by more than 12 billion — a bigger drop than immediately after the release of the surgeon general's report. That same year, cigarette manufacturers proposed to end all broadcast advertising.

Legislation approved by Congress in 1970 gave the manufacturers' proposal the force of law, effective Jan. 2, 1971. Shortly thereafter, the FCC

ruled that broadcasters need not continue running anti-smoking messages.

Teen Smoking Trends

The percentage of high school seniors smoking at least one cigarette a day slid from 28.9 percent in 1977 to 17.2 percent in 1992, according to data gathered by the University of Michigan's Monitoring the Future Project. The drop was even sharper among black youngsters, a trend that intrigues researchers on both sides of the smoking issue (*see p. 1082*). Many experts attributed the teen-smoking decline to the disappearance of broadcast cigarette commercials.

That theory seemed less persuasive after the Monitoring the Future Project reported that 19.4 percent of high school seniors were smokers in 1994. One reason for the turnaround, Johnston suggested, is that teens "greatly overestimate their ability to stop smoking once they have begun, so they are making decisions about whether or not to smoke at a very early age, with little or no appreciation of the likely consequences of those decisions."²¹

Patrick M. O'Malley, a colleague of Johnston's, noted that even two years of increased smoking by teens will have lasting consequences. "We know that once a birth cohort establishes a particularly high or low rate of smoking in adolescence, relative to other birth cohorts, it continues to maintain a relatively high or low rate throughout the life cycle," he said. "Thus the higher rates that we are observing now are likely to remain high later in life for these children."²²

Johnston foresees no "immediate reversal" of the current trend. "It's a little like the proverbial battleship," he says. "It'll take time to make it change direction. Also, we have to realize that kids entering the age groups we survey have

already been subjected to years of persuasion by the tobacco industry."

Whelan has first-hand knowledge of smoking patterns among high school seniors. "My daughter just graduated from a private girls school here in New York, and half of the 32 seniors smoked," she says. "I felt a sense of defeat, because these young women had been warned about the dangers of cigarettes since kindergarten. And even so, they smoke. What can I say?"

Whelan acknowledges that the insistent warnings of anti-smoking activists may backfire among teenagers, who often resent adult authority figures. "My daughter once said to me, 'If I hear one more thing about smoking, maybe I should try it. There must be something great about cigarettes if you keep talking about them that much.'" ■

CURRENT SITUATION

Regulatory Proposals

When President Clinton gave the FDA the green light to regulate tobacco marketing aimed at youths, he said smoking-related health hazards compelled him to act. "[C]hildren are especially susceptible to the deadly temptation of tobacco and its skillful marketing," he declared at an Aug. 10 White House news conference. "Today and every day this year, 3,000 young people will begin to smoke. One thousand of them ultimately will die of cancer, emphysema, heart disease and other diseases caused by smoking. That's more than 1 million vulnerable young people a year being hooked on nicotine that ultimately could kill them."

The president conceded that a new

* The Public Health Cigarette Smoking Act of 1969 and the Comprehensive Smoking Education Act of 1984 strengthened the health warning language, and a 1972 consent order of the Federal Trade Commission extended the warning requirement to include cigarette ads.

Showdown in the Courts . . .

In more than 40 years of battling product-liability lawsuits brought by aggrieved smokers, tobacco companies have compiled an impressive record. Not once in that period has any tobacco firm had to pay damages.¹

Anti-smoking groups contend the industry has prevailed because of superior legal firepower. With their deep pockets, these groups say, tobacco companies can afford to outspend and outwait most individual plaintiffs. The companies see things differently, contending that juries and judges have consistently found the defendants' arguments to be stronger.

Now the anti-smoking movement has adopted a new, more broadly based litigation strategy. In February, lawyers representing more than 60 personal-injury law firms from across the country received certification from a federal court in New Orleans to bring a class-action suit on behalf of the late Peter Castano and three living smokers who claim to be addicted to nicotine. Assuming the case goes to trial in the class-action suit, *Castano v. American Tobacco Co. et al.*, could become the largest — and most expensive — product liability suit in the nation's history.²

The defendants have appealed the certification decision. Daniel W. Donahue, deputy general counsel for R.J. Reynolds Tobacco Co., estimates that oral arguments on the appeal will be heard early in 1996 and that an opinion will follow sometime in the spring.

Meanwhile, the governments of four states — Florida, Minnesota, Mississippi and West Virginia — are suing cigarette makers to recover billions of dollars spent to treat Medicaid recipients for smoking-related illnesses. Maryland plans to file a similar suit early next year. If any of the state suits should succeed, others almost certainly would follow.

John F. Banzhaf III, executive director of Action on Smoking and Health (ASH), feels more state cases may be filed in any event. "There could be an inadvertent boost from Congress,

which is still considering so-called tort reform," he says. "So states may figure they can escape any restrictions the federal legislation may contain by acting now."³

In Banzhaf's view, the significance of the *Castano* and state suits "is not limited to what may be won three to six years down the road." More important, he says, the suits "are going to uncover tremendous amounts of documents" from the tobacco companies and "put us in a position where our side can question the other side very completely under oath."

Elizabeth M. Whelan, president of the American Council on Science and Health, has some misgivings about the state suits. "It can be argued," she says, "that if you don't smoke, start going downhill at age 90 and finally expire at 98, you cost the health-care system more than a heavy smoker who dies at 48." Whelan believes the states will have trouble combating that argument.

The *Castano* class-action suit looks "much more promising," she feels, since the Supreme Court ruled in 1992 that the health warning labels on cigarette packs do not totally shield tobacco companies from liability. "If you can prove fraud and misrepresentation, a lawsuit could proceed even with the label in place," she says. "And *Castano* is the first time I've ever seen financial resources for the plaintiffs that possibly match those of the tobacco companies."

Anti-smoking activists regard the thousands of confidential tobacco company documents leaked to researchers and the news media in recent years as a rich source of evidence that tobacco companies deliberately suppressed or distorted findings that cigarettes constitute a health hazard. More than 4,000 such documents, from Brown & Williamson Tobacco Corp., were sent last year by an unknown source to Stanton A. Glantz, a cardiologist at the University of California-San Francisco.

federal regulatory program might strike many people as the wrong way to deal with the issue. Indeed, he said he "would prefer it if we could have done this in some other way." If Congress were to act, "this rule could become unnecessary. But it is wrong to believe that we can take a voluntary approach to this problem."

Asked by a reporter whether there was "any hope for some sort of compromise" on the rulemaking, Clinton said he "had hoped that the tobacco companies would agree to support these restrictions and to put them into law." However, he said he opposed a voluntary plan because "there'd be no

way to enforce it."

According to Lauria, the industry has "never been invited to negotiate with the president. There has been no communication with the White House directly by the tobacco companies." In his opinion, "President Clinton relies very heavily on the standard boilerplate of the anti-smoking activists. It's clear they have his ear and his mouth." And that's why the industry feels its "best recourse is in the court system, which, free from rancor, tends to evaluate complicated issues objectively."

To Jaffe of the Association of National Advertisers, the "most outrageous" segment of the Clinton-FDA

regulatory package is the proposal to make the tobacco companies set up and finance a \$150-million-a-year public information campaign to help curb young people's use of tobacco products. "In effect," Jaffe says, "the government is saying to the tobacco industry, 'We will tax you and take your money and spend it on speaking against your product. We're going to let you be the one who funds speaking out against your product, even though we could ban your product if there was anything false or deceptive in your advertising.'"

Supporters of the proposed regulations retort that the gravity of the situ-

... Tobacco Companies Face Class-Action Suit

The *Journal of the American Medical Association* (JAMA) devoted much of its July 19, 1995, issue to a detailed analysis of the papers. In the words of a JAMA editorial, "The documents show:

- that research conducted by tobacco companies into the deleterious health effects of tobacco was often more advanced and sophisticated than studies by the medical community;

- that executives at Brown & Williamson knew early on that tobacco use was harmful and that nicotine was addictive and debated whether to make the research public;

- that the industry decided to conceal the truth from the public;

- that the industry hid their research from the courts by sending the data through their legal departments, their lawyers asserting that the results were immune to disclosure in litigation because they were the privileged product of the lawyer-client relationship;

- that despite their knowledge to the contrary, the industry's public position was (and continues to be) that the link between smoking and ill health was not proven, that they were dedicated to determining whether there was such a link and revealing this to the public, and that nicotine was not addictive."¹

Banzhaf feels sure many more internal tobacco company documents will come to light as *Castano* and the state cases enter the discovery phase. He says that the *Castano* plaintiffs' attorneys already have paid \$1 million "solely for the purpose of buying a building to store the documents they expect to get."

Banzhaf also senses that the pending suits may not produce all-or-nothing results. "Modern product liability law increasingly recognizes that in many situations, both sides bear some responsibility," he says. "Efforts are made to

apportion the blame in some reasonable way. So, the issue in the current suits is not, 'Should the plaintiffs get a free ride,' but rather, 'Should the defendants bear some responsibility for the enormous costs they impose on individuals, health plans, states, welfare departments and so on.' And you have to figure, considering all the 'crazy' product liability cases that plaintiffs have won lately, that some jury is finally going to say to tobacco, 'enough is enough,' and award damages."

That day has yet to come — and it likely will be long in arriving, if it ever does. Banzhaf confidently predicts that the pending litigation will extend well into the 21st century. "These cases," he says, "are going to make the O.J. Simpson trial look like a 100-yard dash."

¹In 1988, a jury in Newark, N.J., awarded \$400,000 to the family of a deceased smoker, Rose Cipollone. The family claimed that cigarette manufacturers knew cigarettes were dangerous but deceived smokers through their advertisements. The award was overturned in 1990 by the U.S. Court of Appeals in Philadelphia, which held that the federal law requiring warning labels on cigarette packages pre-empted state liability claims. In 1992, the Supreme Court ruled, in *Cipollone v. Liggett Group Inc.*, that the federal labeling law does not protect tobacco companies against all personal-injury suits under state law. That part of the opinion was decided by a 7-2 vote. Then, a plurality of four justices concluded that, for the Cipollones, the act pre-empts the failure to warn and fraudulent misrepresentation claims but does not pre-empt lawsuits based on intentional fraud, misrepresentation or conspiracy. See *The 1991-92 Supreme Court Yearbook*, Congressional Quarterly, 1993, pp. 20-23.

²The companies named in the suit are the American Tobacco Co., Brown & Williamson Tobacco Corp., R.J. Reynolds Tobacco Corp., Philip Morris Inc., Lorillard Tobacco Co., United States Tobacco Co., Liggett Group Inc. and The Tobacco Institute.

³For background on tort reform, see "The Jury System," *The CQ Researcher*, Nov. 10, 1995, p. 1006.

⁴James S. Todd, et al., "The Brown & Williamson Documents: Where Do We Go From Here?" *The Journal of the American Medical Association*, July 19, 1995, p. 256.

ation calls for tough measures. Defending the proposed ban on cigarette vending machines, the FDA noted that the 1994 surgeon general's report on youth smoking had found young people were able to buy cigarettes from the machines 88 percent of the time.

The agency justified banning mail-order cigarette sales on the ground that "current industry practice only asks the consumer to provide a birth date or check [a] box to verify age." And it said cigarette brand-name sponsorship of tennis tournaments, auto races and the like should end because such events "associate tobacco products with excitement and glamour,

and provide a way for tobacco brands to be advertised on television despite the broadcast advertising ban."²³

A Republican Approach

Proponents of curbs on cigarette marketing pitched to minors usually are assumed to be liberals. But in a July 17 open letter to House Speaker Newt Gingrich, R-Ga., Whelan and other members of a group called Concerned Republicans for Science and Public Health asserted that the issue troubles many conservatives as well.²⁴

Smoking is "a physically addictive, life-shortening habit taken up primarily by kids," the letter stated. "Sounds

like a habit conservatives would be loathe to defend and against which they might willingly campaign. Instead, anti-smoking efforts are dominated by well-meaning social engineers and safety alarmists whose expansive agendas all but guarantee that many on the right gravitate to the opposite camp."

What to do? According to the letter, the overriding need is "an anti-smoking agenda consistent with personal freedom, commercial free speech and minimal government — that is, a public health agenda Republicans can embrace." To this end, Gingrich was urged to dissociate himself from the

tobacco industry, openly denounce tobacco ads that target young people, support vending machine bans "where underage access is not restricted" and encourage state and local action to bar cigarette sales to minors.

Above all, the letter called on Gingrich to back efforts to make tobacco companies play by the same liability rules as other industries. "The only way to do this, ironic as it may sound, is to remove the government warning label from cigarettes and let tobacco companies put on whatever warnings they choose — or none at all." The purpose would be "to place the burden of complete warning and disclosure where it belongs — on the industry."

"Elsewhere in American commerce," the letter noted, "manufacturers issue detailed, explicit and even hyperbolic warnings about the risks of their products. They want to be sure no litigant can accuse them of deception. The tobacco industry, by contrast, not only downplays every potential risk, it even denies that nicotine is addictive."

Removing the government warning labels "would force them into a choice: full, ongoing, detailed disclosure to consumers — or the likelihood of huge legal payouts to the victims of cigarette-related disease who successfully sue the tobacco companies."

Spotlight on Smoking

As policy-makers discuss what to do about youth smoking, rival interest groups are placing paid messages in major newspapers across the country. A series of full-page ads by R.J. Reynolds Tobacco Co. stressed the pitfalls of over-regulation. The FDA proposal "will balkan the federal bureaucracy, which will gain unprecedented control over virtually every aspect of the tobacco industry," said a full-page Reynolds ad in the Sept. 26 *Washington Post*.

A similar ad in the Oct. 5 *Post* cau-

tioned that the government "should not replace parents and teachers when it comes to educating our children about smoking, drinking and other important lifestyle decisions." Agreeing that "we must do something" to keep underage children from smoking, R.J. Reynolds declared that, "A proven solution is to teach young children how to resist peer pressure and to enforce the existing laws in 50 states denying children access to cigarettes."

Newspaper ads placed by the Campaign for Tobacco-Free Kids, a coalition of more than 100 public health, education and religious groups, took aim at recent political activity by tobacco companies. "During the first half of 1995, tobacco industry contributions to political parties skyrocketed more than 400 percent," said a Nov. 13 coalition ad on the op-ed page of *The New York Times*. "Tobacco companies gave more than \$1.6 million (\$1.5 million to Republicans), becoming the GOP's largest donor by far." The reason, declared the ad, is that "Tobacco companies are desperately trying to buy opposition" to the FDA's proposed marketing curbs.

Recent scientific studies and news reports also have trained the media spotlight on teen smoking. Two studies released at a mid-October news conference in Washington, D.C., concluded that cigarette advertising does indeed influence 14-to-17-year-old children to take up the tobacco habit. The historical survey by Pierce and Gilpin looked at four periods that coincided with "major marketing campaigns designed to stimulate demand for cigarettes within one gender or the other."⁵

In each case, they concluded, the smoking rate rose within the targeted gender group — but not within the non-targeted group. A second study, also co-written by Pierce, sought to measure teenagers' susceptibility to smoking on the basis of answers to questions on cigarette advertising and exposure to friends and family members who smoked (see p. 1070).

Philip Morris, the nation's largest tobacco company, sought to blunt the teen smoking issue by announcing Aug. 8 that it had begun labeling its cigarette packs and cartons with the warning, "Underage Sale Prohibited." The company also said it would provide free training for retailers on how to request proof of age from customers and ascertain whether the information was correct.

The Philip Morris initiative followed a 1994 policy announcement saying the company would punish stores that sold cigarettes to underage customers. This October, the Minnesota attorney general's office sent Philip Morris police records of 15 retailers caught selling tobacco to minors and asked it to make good on its pledge. The company declined to take immediate action. Philip Morris added, however, that it would withhold certain monthly incentive payments from retailers that sell to teens after next year's contracts are written.

Many parents doubtless were startled by a recent study alleging that *The Weekly Reader*, a publication aimed at grade-school children, ran articles reflecting the tobacco industry's stance on smoking. Edith Balbach and Stanton Glantz, researchers at the University of California-San Francisco, reported that 68 percent of *Weekly Reader* articles they studied contained industry views, while 38 percent carried a clear anti-smoking message.⁶

At the time the *Weekly Reader* articles appeared, between 1989 and 1994, the paper's owner was the largest shareholder in RJR Nabisco, the corporate parent of R.J. Reynolds. Of the smoking articles Balbach and Glantz examined in *Scholastic News*, a similar weekly, 32 percent echoed the industry position and 79 percent warned against cigarette health hazards.

David Adler, a spokesman for K-III Communications, the current owner of *The Weekly Reader*, said Nov. 1 that the University of California study was "wrong" and "subjective." He added, "*The Weekly Reader* is probably more

Continued on p. 1082

At Issue:

Should the government restrict the advertising, promotion, distribution and marketing of cigarettes to teenagers?

PRESIDENT CLINTON

FROM A STATEMENT MADE AT A PRESS CONFERENCE,
AUG. 10, 1995.

adults are capable of making their own decisions about whether to smoke. But we all know that children are especially susceptible to the deadly temptation of tobacco and its skillful marketing. . . .

When Joe Camel tells young children that smoking is cool, when billboards tell teens that smoking will lead to true romance, when Virginia Slims tell adolescents that cigarettes may make them thin and glamorous, then our children need our wisdom, our guidance and our experience. We're their parents, and it is up to us to protect them.

So today I am authorizing the Food and Drug Administration to initiate a broad series of steps all designed to stop sales and marketing of cigarettes and smokeless tobacco to children. As a result, the following steps will be taken:

First, young people will have to prove their age with an ID card to buy cigarettes. Second, cigarette vending machines which circumvent any ban on sales to kids will be prohibited. Third, schools and playgrounds will be free of tobacco advertising on billboards in their neighborhoods. Fourth, images such as Joe Camel will not appear on billboards or in ads in publications that reach substantial numbers of children and teens. Fifth, teens won't be targeted by any marketing gimmicks, ranging from single cigarette sales to T-shirts, gym bags and sponsorship of sporting events. And, finally, the tobacco industry must fund and implement an annual \$150 million campaign aimed at stopping teens from smoking through educational efforts.

Now, these are all common-sense steps. They don't ban smoking; they don't bar advertising. We do not, in other words, seek to address activities that seek to sell cigarettes only to adults. We are stepping in to protect those who need our help, vulnerable young people. And the evidence of increasing smoking in the last few years is plain and compelling.

Now, nobody much likes government regulation. And I would prefer it if we could have done this in some other way. The only other way I can think of is if Congress were to write these restrictions into law. They could do that. And if they do, this rule could become unnecessary. But it is wrong to believe that we can take a voluntary approach to this problem. And absent congressional action, and in the presence of a massive marketing and lobbying campaign by cigarette companies aimed at our children, clearly, I have no alternative but to do everything I can to bring this assault to a halt.

THE ECONOMIST

FROM AN EDITORIAL IN THE ISSUE OF AUG. 19, 1995.

The [Clinton administration has] decided to regulate nicotine as an addictive and harmful drug (which it is). Beginning from that premise, they would, among other things, require cigarette advertisements on billboards and in most magazines to be in youth-unfriendly black and white, with no pictures; ban cigarette brands from sponsoring entertainment or sporting events; and require tobacco companies to spend \$150 million a year on anti-smoking campaigns aimed at teenagers. For present purposes, leave aside, as many European countries have done, the conflicts these measures create with freedom of speech. That apart, does this new "war" on teenage smoking make practical sense?

It is certainly true that smoking is hazardous to the health. So is eating lots of fat, or riding motorcycles (which are 16 times deadlier than cars). A liberal society normally lets people take foolish risks, provided the risk-takers pay the costs and assume them knowingly. In the case of smoking, they do. Kip Viscusi, an economist at America's Duke University, recently had the most comprehensive look to date at who pays for America's tobacco habit. He concludes, as others have done, that smokers pay their own way. What they cost in medical bills, fires and so on, they more than repay in pensions they do not live to collect and nursing-home care they never use. Tobacco taxes in America are now more than high enough to cover any residual costs of second-hand smoke. Far from harming society, American smokers hurt only themselves.

But surely the case is different with teenagers? Apparently not. Most people — smokers and non-smokers — overestimate the dangers of smoking by a factor of two or more. Teenagers, it turns out, have an even more exaggerated view of smoking's perils than grown-ups do. Even among American 8-year-olds, 97 percent know that smoking causes cancer and shortens life, and the vast majority know it is hard to stop. If teenagers smoke, that is not because they are ignorant. Perhaps their judgment about smoking is poorer than their elders' — but even that is unclear. Mr. Viscusi finds that teenagers are as likely to act, or not act, on their knowledge about smoking as are adults.

Requiring drug companies — including cigarette makers — to divulge the harmful effects of their products is a good thing. So is forbidding sales to minors, who should have their parents' permission to smoke. However, spending millions of scarce dollars to educate people who demonstrably do not need further educating is rather less sensible. . . .

Instead of treating cigarettes like other addictive drugs, let Americans treat other addictive drugs like cigarettes and alcohol: publicize the risks, tax the users and ban sales to minors. Then leave people to make their mistakes, and to learn.

FOR MORE INFORMATION

Action on Smoking and Health, 2013 H St. N.W., Washington, D.C. 20006; (202) 659-4310. ASH distributes information about smoking hazards and the rights of non-smokers.

Association of National Advertisers, 155 E. 44th St., New York, N.Y. 10017; (212) 697-5950. ANA, a coalition of national advertising groups, opposes the Food and Drug Administration's proposed tobacco advertising regulations on First Amendment grounds.

Monitoring the Future Project, Survey Research Center, University of Michigan, Ann Arbor, Mich. 48106-1248; (313) 763-5043. The center has been studying smoking patterns among American teenagers since the mid-1970s.

The Tobacco Institute, 1875 Eye St. N.W., Suite 800, Washington, D.C. 20006; (202) 457-4800. The institute provides information on the tobacco industry, but does not comment on current litigation.

Continued from p. 1080

influential than any other entity in discouraging children from smoking. . . . It's absurd to think that *The Weekly Reader* is pro-smoking."²⁷

The publishing giant Knight-Ridder Inc., whose 26 newspapers include the *Miami Herald* and *Philadelphia Inquirer*, recently announced it had issued guidelines allowing, but not requiring, its publications to reject cigarette ads that seem to target children and teenagers. The company said it adopted the policy in response to proposals submitted at its last shareholders' meeting by the Interfaith Center on Corporate Responsibility, a New York-based group that promotes "socially responsible" investment.

Commenting on the move, Knight-Ridder President John Fontaine said: "On the one hand, [cigarettes] are legal products, and lots of legal products are advertised in newspapers that people don't like, including the content in personal classifieds. On the other hand, there's a growing concern about the health implications of young people smoking."²⁸

Blacks' Smoking Drops

In-depth research is just getting under way on a subject that fascinates all

parties to the teen smoking debate — why cigarette use among black youngsters has fallen so far below the rate for white youths. Whatever the reason turns out to be, "We want to bottle it, so we can sustain it for black teens and pass it along to white teens," said Michael Eriksen, director of the CDC's Office on Smoking and Health.²⁹

The disproportionate drop in smoking among African-American youths is all the more striking in view of the volume of cigarette ads targeting black neighborhoods. According to the Department of Health and Human Services, "Billboards advertising tobacco products are placed in African-American communities four to five times more often than in white communities."³⁰

Sherry L. Mills, a medical officer at the National Cancer Institute, conducted focus groups in five cities* in late 1994 and early this year in an effort to determine why black youngsters were tuning out cigarette ads. Each group consisted of about a dozen black 12-to-18-year-olds, including smokers and non-smokers.

A key finding, says Mills, is that "there is a strong parental influence in black teenagers' decision not to smoke." Although the parents themselves may be smokers, "they're tell-

ing their kids not to smoke. And for some reason we can't yet pinpoint, the kids are listening to that — even though it's counterintuitive to typical teenage behavior. The most common remark we heard was, 'My mother would kill me if she caught me smoking a cigarette.'"

Some commentators have speculated that many black teens don't have enough disposable income to buy cigarettes on a regular basis. But Mills says that's not the case. "They have money to spend, just like every other kid does. They're simply choosing not to spend it on cigarettes. They know that bad things will happen to you if you do."

In addition, focus group participants viewed smoking as "a white activity." They pointed out that white teens like to smoke and drink beer at parties, but black teens don't. "They'd rather dance and mingle," Mills says.

Asked to speculate on why smoking is more prevalent among white than black teens, focus group members said they sensed that cigarettes are "much more tolerated" in white homes. "They felt that white parents made cigarettes more accessible to their children, either through buying or sharing, and did not warn their kids not to smoke," Mills says. "They also said they didn't think any white kids would get in really big trouble if their parents found out that they smoked."

Johnston points to another possible reason for smoking's unpopularity among black teens. "An awful lot of black youngsters, especially boys, are involved with sports of some kind," he notes. "And needless to say, smoking and sports don't go together very well. So that could be a factor."

The CDC has agreed to fund research on smoking by African-American teens, so more definitive data could emerge before long. One goal of the research, Mills suggests, might be identifying "what aspects of behavior in the community and the home

* Greensboro, N.C.; Kansas City, Kan.; Los Angeles, Calif.; New Orleans, La.; and Washington, D.C.

could be stressed" to reinforce black youths' aversion to smoking.

Pierce suspects that the tobacco industry is trying to reposition its products among African-Americans. "That's why we're starting to see an increase in smoking by black youngsters," he says. "The worst thing that could happen to the companies would be to have one entire population group turning away from their product." ■

OUTLOOK

New Worries

Anti-smoking activists are heartened by the stories about smoking trends among black teens, but Whelan at the American Council on Science and Health cautions that they could be used to weaken the movement.

Already, she notes, "There are editorials that say, 'We don't need government intervention.' The editorials go on to argue, 'Look at what happened in the black community. Teenage smoking fell without government regulation. So let's figure out a way.' You see? They're saying that this decline occurred despite the tobacco industry's \$6 billion in ads and promotion, that it's a cultural thing, and that parents can handle the situation by themselves. It's a very interesting rejoinder."

In this connection, Pierce observes that the tobacco industry has long displayed agility in adjusting to sudden changes in market conditions. Cigarette sales slumped after radio and television advertising was banned from the airwaves in 1971, but rebounded shortly afterward as industry marketing outlays were shifted away from advertising and toward promotion.

In Pierce's view, that scenario will be played out again if the FDA's proposed curbs on youth-oriented ciga-

rette marketing take effect. He foresees a slowing in the rate of increase in teen smoking, or possibly even a decline, "until the industry can come up with another effective way to get at kids." He adds, "They're not voluntarily going to leave kids alone."

"We're going to have to revisit the youth smoking issue again in a few years — no question about that," Pierce says. The FDA rules package represents "a piecemeal solution, a start," Pierce feels. "It's not a final answer."

Experience suggests aggressive anti-smoking campaigns also can do just so much, Pierce adds. He cites Australia and Canada, where the top third or bottom third of cigarette packs bear a stark, black-and-white message, such as "Smoking Kills." An Australian opinion survey showed that most smokers approved of the no-nonsense warning. "It didn't make a lot of them stop smoking, though," Pierce says.

The proposed FDA regulations may not offer a final solution, but in Banzhaf's opinion, they are a worthy goal to pursue. Children would still manage to get their hands on cigarettes under the FDA regulations, he acknowledges. "But if we could knock the teen smoking rate down by 10 or 20 percent, that would be important: it would be very important." ■

Notes

¹ The figures were compiled by the ongoing Monitoring the Future Project of the University of Michigan's Survey Research Center. The center defines a smoker as a person who smoked one or more cigarettes a day during the previous 30 days.

² Quoted in a University of Michigan news release, July 17, 1995.

³ *Ibid.*

⁴ For background, see "Preventing Teen Drug Use," *The CQ Researcher*, July 28, 1995, pp. 657-680.

⁵ Banzhaf also is a professor of public interest law at George Washington University.

⁶ For background, see "Regulating Tobacco," *The CQ Researcher*, Sept. 30, 1994, pp. 841-864.

⁷ Centers for Disease Control and Prevention, "Changes in the Cigarette Brand Preferences of Adolescent Smokers — United States, 1989-1993," *Morbidity and Mortality Weekly Report*, Aug. 18, 1994, p. 579.

⁸ Nicola Evans, et al., "Influence of Tobacco Marketing and Exposure to Smokers on Adolescent Susceptibility to Smoking," *Journal of the National Cancer Institute*, Oct. 18, 1995, pp. 1538-1545.

⁹ Remarks at news conference in Washington, D.C., Oct. 17, 1995.

¹⁰ Evans, *op. cit.*, p. 1540.

¹¹ *Ibid.*, p. 1545.

¹² Opening remarks at a White House news conference, Aug. 10, 1995.

¹³ The deadline for public comment on the FDA proposals is Jan. 2, 1996.

¹⁴ Quoted in *The Washington Post*, Aug. 16, 1995, p. A17.

¹⁵ Letter to the editor of *The New Yorker*, May 16, 1994.

¹⁶ Jordan Goodman, *Tobacco in History: The Cultures of Dependence* (1993), p. 100.

¹⁷ *Ibid.*, pp. 100-101.

¹⁸ John P. Pierce and Elizabeth A. Gilpin, "A Historical Analysis of Tobacco Marketing and the Uptake of Smoking by Youth in the United States: 1890-1977," *Health Psychology*, November 1995, p. 5.

¹⁹ U.S. Department of Health and Human Services, *Preventing Tobacco Use Among Young People: A Report of the Surgeon General*, 1994, p. 166.

²⁰ *Ibid.*, p. 167.

²¹ Quoted in a University of Michigan news release, July 17, 1995.

²² *Ibid.*

²³ U.S. Department of Health and Human Services, "Children and Tobacco: The Problem" (Aug. 10, 1995, fact sheet).

²⁴ In the letter to Gingrich, they describe themselves as a group of independent Republican physicians and scientists.

²⁵ Pierce and Gilpin, *op. cit.*, p. 1.

²⁶ Balbach and Glantz' findings were presented Oct. 31 at the American Public Health Association's annual meeting in San Diego.

²⁷ Quoted by Howard Kurtz in *The Washington Post*, Nov. 2, 1995, p. C1.

²⁸ Quoted in *The Wall Street Journal*, Nov. 14, 1995, p. B1.

²⁹ Quoted in "Hooked on Tobacco: The Teen Epidemic," *Consumer Reports*, March 1995, p. 145.

³⁰ U.S. Department of Health and Human Services, "Facts on African-Americans and Smoking," undated.

Bibliography

Selected Sources Used

Books

Goodman, Jordan, *Tobacco in History: The Cultures of Dependence*, Routledge, 1993.

Arguing that tobacco "is best understood in historical terms," Goodman contends that "The cigarette is the result of a complex process of cultural accretion of which changes in cultivation, production and marketing are an essential part. Any attempt to eradicate tobacco from our lives, however well-meant, will founder unless the complexity of its cultural significance is recognized."

Articles

Centers for Disease Control and Prevention, "Reasons for Tobacco Use and Symptoms of Nicotine Withdrawal Among Adolescent and Young Adult Tobacco Users — United States, 1993," *Morbidity and Mortality Weekly Report*, Oct. 21, 1994.

This study states that, in 1992, "approximately two-thirds of adolescent smokers reported that they wanted to quit smoking, and 70 percent indicated that they would not have started smoking if they could choose again. Most adults probably could be prevented from becoming tobacco users if they could be kept tobacco-free during adolescence."

Evans, Nicola, et al., "Influence of Tobacco Marketing and Exposure to Smokers on Adolescent Susceptibility to Smoking," *Journal of the National Cancer Institute*, Oct. 18, 1995.

Evans and her co-authors assert, among other things, that "Tobacco marketing may be more effective in promoting the general product category than in promoting the particular brand of cigarettes." They came to that conclusion because, in their survey sample, "the preferred brand of purchase was Marlboro, yet the cigarette advertisements most favored by adolescents were those for Camel."

Glantz, Stanton A., et al., "Special Communications" (six related articles on internal documents from the Brown & Williamson Tobacco Corp.), *Journal of the American Medical Association*, July 19, 1995.

This long special section of *JAMA* consists of articles by academic researchers analyzing the import of approximately 4,000 pages of leaked documents from Brown & Williamson Tobacco Corp.: a response by the company; and an editorial in which the American Medical Association "reminds physicians, the public and politicians that the damning evidence against tobacco makes opposition to its use a pressing, nonpartisan public health issue."

Pierce, John P., and Elizabeth A. Gilpin, "A Historical

Analysis of Tobacco Marketing and the Uptake of Smoking by Youth in the United States: 1890-1977," *Health Psychology*, Vol. 14, No. 6, 1995.

Pierce and Gilpin examine the impact of four separate cigarette ad campaigns — two targeting males and two targeting females. They found that "marked increases in the rate of smoking intake in the particular gender group targeted by these campaigns were coincident with the beginning of each. Such an effect was not observed among the non-targeted gender."

Zegart, Dan, "Breathing Fire on Tobacco," *The Nation*, Aug. 28-Sept. 4, 1995.

Zegart, a freelance writer and reporter, traces the background of *Castano v. American Tobacco Co. et al.*, a potentially mammoth class-action suit against tobacco companies pending in New Orleans. "As two armies of lawyers gird for battle . . . the issue of youth targeting is a mystery weapon that could decide the outcome," he writes. "The difference between a sinister ad campaign and making the youth charge stick in court is considerable. But somewhere in the dark world of cigarette company memos, there just could be a folder of proof."

Reports and Studies

U.S. Department of Health and Human Services, *Preventing Tobacco Use Among Young People: A Report of the Surgeon General*, 1994.

This 314-page report, issued during the surgeon generalship of Joycelyn Elders, surveys the history, epidemiology and health consequences of tobacco use by adolescents, as well as efforts of tobacco companies to promote their products and campaigns by anti-smoking groups to prevent tobacco use by the young. "The direct effects of tobacco use on the health of young people have been greatly underestimated," Elders states.

U.S. Food and Drug Administration, *Nicotine in Cigarettes and Smokeless Tobacco Products Is a Drug and These Products Are Nicotine Delivery Devices Under the Federal Food, Drug and Cosmetic Act*, August 1995 (published in the *Federal Register*, Aug. 11, 1995).

The FDA presents a detailed rationale for its claim of authority to regulate tobacco products. In sum, the lengthy document argues, "the evidence before the agency demonstrates that cigarettes and smokeless tobacco products are intended to affect the structure and function of the body. Accordingly, the record before the agency demonstrates that cigarettes and smokeless tobacco products are drug delivery systems whose purpose is to deliver nicotine, a drug, and, hence, are devices under the [Federal Food, Drug and Cosmetic] Act."

The Next Step

Additional information from UMI's Newspaper & Periodical Abstracts database

Clinton Administration/FDA Proposals Aimed at Teen Smoking

"The attack on teen-age smoking," *The New York Times*, Aug. 11, 1995, p. A28.

An editorial praises President Clinton for backing a regulatory campaign to curb the sale and promotion of cigarettes to young people.

Clmons, Marlene, "FDA sees carding as key deterrent to teen smoking," *Los Angeles Times*, Aug. 11, 1995, p. A27.

If the new restrictions on cigarettes work as the government intends, a teenager trying to buy a pack of cigarettes would be asked for identification, making cigarettes less accessible and desirable and possibly providing the landmark health measure that President Clinton has proclaimed.

Clmons, Marlene, "Legal battle looms over rules to curb teen smoking," *Los Angeles Times*, Aug. 12, 1995, p. A24.

The impending legal battle between the FDA and the tobacco industry over the possible regulation of cigarettes is examined.

Freedland, Jonathan, "Clinton targets teen smoking," *Guardian*, Aug. 11, 1995, p. 10.

On Aug. 10, 1995, President Clinton unveiled a list of measures aimed at reducing teenage smoking.

Hilts, Philip J., "FDA head calls smoking a pediatric disease," *The New York Times*, March 9, 1995, p. A22.

FDA Commissioner David A. Kessler said on March 8, 1995, that smoking was fundamentally a pediatric disease because most addiction to tobacco begins among teenagers. Kessler outlined a program to prevent young people from becoming addicted to nicotine that would include restricting access to tobacco products and possibly banning certain kinds of advertising.

Manning, Anita, "Industry sues over teen smoking effort," *USA Today*, Aug. 11, 1995, p. A1.

President Clinton's authorizing the FDA to regulate nicotine as a drug in order to curb teen smoking was challenged quickly with a lawsuit by tobacco companies and advertisers who are questioning the legality of the move.

Morehouse, Macon, "Some say restrictions won't make dent in teen smoking," *Atlanta Journal Constitution*, Aug. 13, 1995, p. H6.

Georgia has one of the tougher state laws aimed at stopping teenagers younger than 18 from lighting up, but

as is the case across the U.S., enforcement is lax. This troubling trend is explored.

Mowbray, Rebecca, "Businesses saw anti-smoking handwriting on the wall," *Los Angeles Times*, Aug. 11, 1995, p. D1.

Many businesses said on Aug. 10, 1995, that they have already made sure that they are not hooked on tobacco revenue, after President Clinton expressed his support for plans to curb and regulate teenage smoking. Cigarette vending machines are one casualty of anti-smoking campaigns.

Savage, David G., "Ex-tobacco lobbyist joins Clinton in fight on smoking," *Los Angeles Times*, Aug. 13, 1995, p. A21.

The White House stepped up its campaign against tobacco on Aug. 12, 1995, as a former tobacco industry lobbyist who is dying of throat cancer, Victor Crawford, joined President Clinton to urge young people to stay away from cigarettes.

Schwartz, John, "Top cancer scientists join crusade on teen smoking," *The Washington Post*, Aug. 16, 1995, p. A17.

Just days after being sworn in as director of the National Cancer Institute, Richard D. Klausner and his boss, NIH Director Harold E. Varmus, joined the Clinton administration's campaign against teenage smoking. They signed a letter urging Clinton to take on the powerful tobacco industry.

"Teen smoking: President right to take message to tobacco country," *Detroit News & Free Press*, Aug. 13, 1995, p. F2.

A *Detroit Free Press* editorial opines that President Clinton is correct to bring his plan to stop teen smoking to tobacco country. Clinton visited North Carolina to launch a new phase of the program.

"Teen smoking," *The Wall Street Journal*, Aug. 25, 1995, p. A8.

An editorial examines President Clinton's campaign to reduce teen smoking, saying that although the president's new efforts will likely score political points, his specific proposals would be further government-imposed nuisances, whose chief direct effect will be to make millions of a few more lawyers.

Decrease in Smoking Among Black Teens

Hilts, Philip J., "Black teen-agers are turning away from smoking, but whites puff on," *The New York Times*, April 19, 1995, p. C10.

According to a study being reported on April 19, 1995,

in the *Journal of the National Cancer Institute*. African-American teenagers have largely eliminated smoking from their lives, while white teenagers are still taking up the habit at high rates. Researchers say the difference is due to a change in attitude and social norms. By 1993, only 4.4 percent of black teenagers took up regular smoking, compared with 22.9 percent for whites.

Husted, Amanda, "Study: Black teens are cautious about smoking," *Atlanta Constitution*, April 25, 1995, p. B8.

Black teenagers are a lot more careful about taking care of their health than white teens when it comes to the use of tobacco products, a report in the *Journal of the National Cancer Institute* says.

"New study reveals black teen-agers have kicked the smoking habit, while whites remain hooked," *Jet*, May 8, 1995, p. 23.

A recent survey indicates that black teens have nearly eliminated smoking from their behavior, while white teens remain hooked on cigarettes. Figures from 1993 show that only 4.4 percent of black teens began smoking that year, as compared with 22.9 percent of white teens who began smoking regularly.

Impact of Advertising/Marketing on Teens

Kong, Dolores, "Studies link tobacco marketing to smoking among the young," *Boston Globe*, Oct. 18, 1995, p. 10.

Cigarette advertising has more influence on whether adolescents start smoking than does having friends or family members who smoke, according to a new study.

Levy, Doug, "Teen smoking rises; Propped up by ads," *USA Today*, July 20, 1995, p. A1.

A University of Michigan study found that smoking among eighth-graders jumped 30 percent from 1991 to 1994. The researchers attribute the increase in part to advertising and lower prices. Other survey results are related.

Zielinski, Graeme, "Smoking teens deride ads' power," *Chicago Tribune*, July 21, 1995, p. C2.

Most Chicago teens said the idea to smoke did not come from tobacco industry advertising, it was more the lure of friends who smoke and the fact that they believe it is "cool."

International Issues

Clayton, Mark, "Canada steps up anti-smoking measures," *Christian Science Monitor*, Aug. 17, 1995, p. 7.

The growth in smoking among Canadian teenagers is discussed. The percentage of teens who smoke jumped from 23 percent in 1991 to 27 percent in 1995. The restrictions placed on cigarettes by the Canadian government are noted.

De Vries, Hein, "Socio-economic differences in smoking: Dutch adolescents' beliefs and behaviour," *Social Science & Medicine*, August 1995, pp. 419-424.

Smoking is more frequent among those who have a low rather than a high socio-economic status. The present study confirms that this is also true for Dutch adolescents.

Symonds, William C., "Warning: Cigarette bans do not curb teen smoking," *Business Week* (Industrial/Technology Edition), Aug. 28, 1995, p. 35.

The effectiveness of a ban on cigarette smoking can be evaluated from the example of Canada's anti-smoking campaign. Canada did have a decline in teenage smoking, but it appears to have more to do with its stiff cigarette taxes than the effects of the advertising ban itself.

Wasson, Nicola, "Where smoking is still seemly," *USA Today*, Sept. 5, 1995, p. A6.

At a time when the White House is targeting teen smoking and Americans have all but ostracized smokers to the sidewalk, more than one-third of Japan's adults smoke, including 60 percent of men and 15 percent of women. Percentages of adult male and female Japanese smokers are compared for 1970, 1990 and 1994, and the percentage of Japanese men and women who smoked in 1992 is compared with percentages for both sexes in France, Germany the U.K. and the U.S.

Smokeless Tobacco

"Dipping into nicotine content in snuff," *Science News*, May 13, 1995, p. 9.

Two recent studies suggest that companies manipulate nicotine delivery in moist snuff, the smokeless tobacco that's tucked between the cheek and gum. A wide range of pH values and nicotine amounts were found in moist snuff.

Husted, Amanda, "Smokeless tobacco use increasing among teenagers, CDC study says," *Atlanta Constitution*, April 16, 1993, p. F4.

According to the latest report on smokeless tobacco from the CDC, use of smokeless tobacco among teens is increasing while holding steady among adults.

Squires, Sally, "Smokeless tobacco use still alluring to teens," *The Washington Post*, April 6, 1993, W16.

The growing use of smokeless tobacco, such as chewing tobacco and snuff, among children and teenagers is discussed. An epidemic of oral cancer deaths has been predicted by researchers in the next couple of decades unless steps are taken to halt the use of smokeless tobacco by youths.

Teen Smoking

Carman, Diane, "Parents have best shot at discouraging teen smoking," *Denver Post*, Aug. 19, 1995, p. E1.

Carman, noting steps President Clinton and Denver

Mayor Wellington Webb have outlined to stop teenagers from smoking cigarettes, says parents probably have the best chance of keeping teens from taking up the habit.

"Denver joins fight against epidemic of teenage smoking," *Denver Post*, Aug. 21, 1995, p. B7.

An editorial discusses Denver Mayor Wellington Webb's proposals to help reduce the epidemic of teenage smoking in summer 1995.

Guttman, Monika, "Why teens refuse to give up smoking," *U.S. News & World Report*, Aug. 7, 1995, p. 7.

Peer pressure is one of the primary reasons why teenagers refuse to give up smoking, even though many know that smoking is detrimental to their health. Organized efforts to reduce teen smoking and reasons why they will prove to be largely ineffective are discussed.

Hendrick, Bill, "Smoking appeals to world-weary teens, some say," *Atlanta Constitution*, Aug. 23, 1995, p. E3.

Hendrick says that, according to psychologists, a key reason more teenagers are smoking is a sense of hopelessness about the future; a feeling that there's not much of a future to look forward to.

Kittredge, Clare, "States try to snuff out teen smoking," *Boston Globe*, Oct. 1, 1995, p. 81.

Maine and New Hampshire have come out with tough laws trying to prevent teenagers from smoking. In New Hampshire, anyone age 12 to 17 caught buying, smoking or possessing cigarettes faces a court summons, up to a \$100 fine, community service and anti-smoking classes.

Price, Stephanie, "Crystal Lake is out to snuff teen smoking," *Chicago Tribune*, Sept. 21, 1995, p. MC1.

The Crystal Lake, Ill., City Council passed a tough smoking ordinance that requires retailers to obtain a \$50 tobacco license if they want to sell cigarettes, and it also requires manual or electronic locks on cigarette vending machines.

Rusche, Sue, "Congress turns its back on teen smoking, drinking," *USA Today*, Aug. 30, 1995, p. A13.

Rusche says that just when teen-age drinking and drug use are rising again, the House is dismantling the infrastructure that reduced adolescent drug use by two-thirds between 1979 and 1992.

Teen Smoking Rates

Carey, Anne R. and Web Bryant, "USA Snapshots: More white teens smoking," *USA Today*, July 17, 1995, p. D1.

According to the American Lung Association, white males and females in grades 9-12 report frequent cigarette use (1-20 or more in 30 days), 15.0 percent and 15.8 percent respectively, while 8.0 percent of Hispanic males and 5.7% of Hispanic females smoke frequently and 4.5 percent of black males and 1.9 percent of black females

smoke frequently.

Hwang, Suecia L., "Teenage smoking on rise, particularly among the youngest, U.S. study finds," *The Wall Street Journal*, July 20, 1995, p. B7.

Cigarette smoking among high school students is on the rise, and the younger the smokers, the more dramatic the increase, according to a major new survey funded by the National Institute of Drug Abuse. The report, an annual survey of drug use among U.S. high school students by the University of Michigan's Survey Research Center, found that the number of eighth-graders who said they lit up in the previous month soared 30 percent in a three-year period, from 14.3 percent in 1991 to 18.6 percent in 1994.

Roan, Shari, "Jump in teen smoking sparks furor," *Los Angeles Times*, Oct. 4, 1995, p. E1.

Six years after California launched a youth anti-smoking campaign, a new analysis shows that smoking rates among teenagers bulged after holding steady for three years straight. Among California children 12 to 17, 10.9 percent reported smoking recently.

Struman, Maryann, "Smoking rates rise, especially among young teens," *Detroit News & Free Press*, July 20, 1995, p. D5.

According to a study released by the University of Michigan, more children and teen-agers across the U.S. are smoking. The largest increase was among 13- and 14-year-olds, which rose 30 percent between 1991 and 1994.

Women and Smoking

"CDC: Women who started smoking young can't give it up," *American Medical News*, March 13, 1995, p. 9.

A CDC study indicates that three-quarters of women who take up smoking as teenagers will find it too difficult to quit later. Only 2.5 percent of all smokers quit each year.

Dreher, Nancy, "Women and smoking," *Current Health*, April 1995, pp. 16-19.

Women who smoke put themselves at a far greater risk for developing cancer, heart disease and a life of breathing difficulties than those who do not smoke. Health risks that affect women who smoke are detailed.

Lerner, Sharon, "If we've come such a long way, why are we still smoking?" *Ms.*, May 1995, pp. 22-27.

Although overwhelming evidence shows that smoking causes disease, the number of female smokers, especially the young, continues to increase. The reasons that many women do smoke are examined.

Back Issues

Great Research on Current Issues Starts Right Here...Recent topics covered by *The CQ Researcher* are listed below. Before May 1991, reports were published under the name of *Editorial Research Reports*.

MAY 1994

Traffic Congestion
Women's Health Issues
Mutual Funds
Political Scandals

JUNE 1994

Education and Gender
Gun Control
Public Land Policy
Nuclear Arms Cleanup

JULY 1994

Dietary Supplements
Public Opinion and Foreign Policy
Crime Victims' Rights
Birth Control Choices

AUGUST 1994

Genetically Engineered Foods
Electing Minorities
Prozac Controversy
College Sports

SEPTEMBER 1994

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Regulating Tobacco

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Blood Supply Safety
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Religion in America

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MARCH 1995

Death Penalty Debate
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Democracy in Africa
Environmental Movement at 25

APRIL 1995

Abortion Clinic Protests
Dieting and Health
Combating AIDS
Rethinking Affirmative Action

MAY 1995

Assisted Suicide Controversy
Overhauling Social Security
Learning to Read
Mandatory Sentencing

JUNE 1995

Combating Infectious Disease
Property Rights
Repetitive Stress Injuries
Regulating the Internet

JULY 1995

War Crimes
Highway Safety
Combating Terrorism
Preventing Teen Drug Use

AUGUST 1995

Job Stress
Organ Transplants
United Nations at 50
Advances in Cancer Research

SEPTEMBER 1995

Catholic Church in the U.S.
Northern Ireland Cease-Fire
High School Sports
Teaching History

OCTOBER 1995

Quebec's Future
Revitalizing the Cities
Networking the Classroom
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