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Tobacco Explained...The truth about the tobacco industry...in its own words

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Tobacco Explained...The truth about the tobacco industry...in its own words

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Tobacco Explained...The truth about the tobacco industry...in its own words

Abstract

Thousands of internal tobacco industry documents released through litigation and whistleblowers reveal the most astonishing systematic corporate deceit of all time. What follows is a survey of the documents, 1,200 relevant and revealing quotes grouped under common themes.

Chapter 1 Smoking and health
Publicly the industry denied and continues to deny that it is clear that smoking causes lung cancer - yet it has understood the carcinogenic nature of its product since the 1950s. It is now clear that the industry’s stance on smoking and health is determined by lawyers and public relations concerns.

Chapter 2 Nicotine and addiction
Until recently the industry has denied its product is addictive. Most recently it has used a definition of addictiveness so broad that it encompasses shopping and the Internet. Internally, it has known since the 1960s that the crucial selling point of its product is the chemical dependence of its customers. Without nicotine addiction there would be no tobacco industry. Nicotine addiction destroys the industry’s PR and legal stance that smoking is a matter of choice.

Chapter 3 Marketing to children
The companies deny that they target the young. The documents reveal the obvious - that the market of young smokers is of central importance to the industry. Many documents reveal the companies’ pre-occupation with teenagers and younger children - and the lengths they have gone to in order to influence smoking behaviour in this age group.

Chapter 4 Advertising
The industry maintains that advertising is used only to fight for brand share and that it does not increase total consumption - academic research shows otherwise. The documents show that advertising is crucial in nurturing the motivation to smoke by creating or projecting the positive
values, such as independence, machismo, glamour or intelligence, erroneously associated with the product.

Chapter 5 Cigarette design The documents show that the companies initially hoped to make safer cigarettes, but then abandoned the enterprise when it recognised that this would expose their existing products as ‘unsafe’. The industry has deliberately promoted ‘low-tar’ cigarettes knowing that they would offer false reassurance without health benefits. It has manipulated nicotine and introduced additives to change the delivery of nicotine. It recognises the cigarette as a drug delivery device.

Chapter 6 Second-hand smoke The industry is challenged by second-hand smoke in two ways. First, measures to protect non-smokers will reduce the opportunities to smoke and contribute to its social unacceptability. Second, the ‘freedom to smoke’ arguments are confounded if non-smokers are harmed. The industry has refused to accept the now overwhelming consensus regarding the harm caused by second-hand smoke - instead it has denied and obfuscated, and sought to influence debate by buying up scientists on a spectacular scale.

Chapter 7 “Emerging markets” Faced with reducing levels of smoking in the West and an insatiable need for money, the companies have moved aggressively into developing countries and Eastern Europe. The documents reveal an arrogance and fanaticism that has imperialist echoes.
Tobacco Explained
The truth about the tobacco industry
...in its own words

Tobacco Explained was originally developed and written by Clive Bates and Andy Rowell for the London-based Action on Smoking and health (ASH).

It has been adapted for World No Tobacco Day. For further details and hundreds of additional extracts from tobacco industry papers visit ASH at: http://www.ash.org.uk/papers/tobexpld.html and WHO's comprehensive Tobacco Free Initiative resources at: http://www.who.int/toh .
Summary

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Chapter 7 “Emerging markets”  Faced with reducing levels of smoking in the West and an insatiable need for money, the companies have moved aggressively into developing countries and Eastern Europe. The documents reveal an arrogance and fanaticism that has imperialist echoes.

Two views of the tobacco industry
Taken together the documents challenge the tobacco industry’s cosy explanation of itself - as the supplier of a legal product used for a widely-enjoyed social habit by adults who are fully aware of the risks and choose to take them to experience the pleasures.

Instead a much darker explanation emerges: it is a predatory industry whose market dynamics demand that it recruits young people. It does this by deploying vast promotional expenditures to create, communicate and amplify a set of positive values associated with the product. Once the glamour phase subsides, nicotine addiction takes over making the customer dependent on the product and securing a profitable cash flow. Trapped by nicotine addiction, the smoker is subject to a variety of sub-lethal illnesses which culminate in a one in two probability of death through smoking-related disease. The smoker’s death means a replacement customer must be found - and the cycle begins again.

Facts and realities the tobacco industry must accept

Justification for taking strong measures against the tobacco industry must be based on facts and realities that command wide assent. Ten ‘facts and realities’ justified by the tobacco industry’s own documents, are set out below. The industry should now be required to admit these:

1. That smoking causes many kinds of cancer, heart disease and respiratory illnesses which are fatal for many sufferers. The industry still does not publicly accept that smoking causes lung cancer.

2. That annual global death toll caused by smoking is 4 million. By 2030, that figure will rise to 10 million with seventy percent of those deaths occurring in developing countries.

3. That nicotine is the most important active ingredient in tobacco; that the tobacco companies are in the drug business; the drug is nicotine and that the cigarette is a drug delivery device. The industry maintains it is a simple consumer goods industry.

4. That nicotine is physiologically and psychologically addictive, in a similar way to heroin and cocaine - rather than shopping, chocolate or the Internet. The overwhelming majority of smokers are strongly dependent on nicotine and that this is a substantial block to smokers’ quitting if they choose to. The industry still maintains that nicotine is not addictive in the sense used here.

5. That teenagers (13-18) and children (<13) are inherently important to the tobacco market and that companies are competing for market share in these age groups. The industry maintains that its business is only focussed on adults.

6. That advertising increases total consumption as well as promoting brand share. The industry flatly denies this.

7. That advertising is one (of several) important and interlocking ingredients that nurture smoking behaviour among teenagers and children. The industry denies its advertising influences the smoking behaviour of children.

8. That current formulations of low tar cigarettes create false health reassurance and offer little or no health benefit. The industry has either not publicly accepted this or argued that it never claimed any health benefits.

9. That second-hand smoke is a real public health hazard, including causing childhood diseases such as asthma, bronchitis, cot-death and glue ear, and is a cause of lung cancer and heart disease in adults. The industry has mounted a major disinformation campaign in this area.

That the tobacco industry has the normal duty of any manufacturer to ensure that it does not market a defective product and that its products are as safe as possible.
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1 Smoking and health

“A demand for scientific proof is always a formula for inaction and delay and usually the first reaction of the guilty ... in fact scientific proof has never been, is not and should not be the basis for political and legal action”

An example of (private) candour from a scientist at the tobacco company BAT (S J Green 1980)

1.1 Summary

At the beginning of the fifties, research was published showing a statistical link between smoking and lung cancer. At the same time the tobacco industry’s own research began to find carcinogens in smoke and began to confirm the relationship between smoking and cancer. This posed a serious problem for the industry: whether to admit to the health problems and try and find marketable solutions, or whether to basically deny everything.

In the face of mounting damning evidence against their product, the companies responded by creating doubt and controversy surrounding the health risks, whilst at the same time by responding to the growing public concern by putting filters on cigarettes and promising research into the health effects of smoking. They lulled the smoking public into a false sense of security, because, whilst this had the hallmarks of responsible companies acting in the public interest, it was actually a public relations strategy to buy time, at the expense of public health.

Many of the internal documents reveal that the industry was trying to look responsible in public, but privately was out to convince the public that smoking was not harmful. Despite decades of evidence to the contrary, and millions of deaths caused by tobacco, the industry still largely maintains that the case against the cigarette is unproven.

• In the early fifties, research is published showing a statistical link between smoking and lung cancer. At the same time the industry’s own research begins to find carcinogens in smoke and starts to confirm the relationship between smoking and cancer.

• By the late fifties industry scientists had privately accepted the association between smoking and lung cancer, believing it to be one of cause and effect. Thirty years later, the majority of the industry still publicly denies the causation theory – with one exception – the US manufacturer Liggett, who broke ranks in 1997, much to the dismay of the other tobacco majors.

• Beginning in the late fifties, and certainly by the mid-sixties, industry scientists were urging their executives to admit to the problem and solve it, arguing that there were commercial opportunities to exploit. Research was undertaken into the “safe cigarette” (see separate section), but it soon fell under the influence of the lawyers, who successfully argued that a company could not produce a “safe” product, because this would imply that its other products were dangerous.

• One all-encompassing fear of the American companies that had repercussions on their British counterparts was the threat of litigation. This affected what the companies researched in private and what they said in public.
In the US, industry research was taken over by the lawyers and then most in-house research facilities were closed down, or in the case of Philip Morris, partly secretly moved to Germany. American companies pressurised their British counterparts not to publish incriminating research. As one memo says: “Ignorance is bliss”.

By the early sixties, lawyers for the industry recognised the health problem – and put forward the radical step of a voluntary warning on packs to be used as a safety device in case of litigation. This was accepted as the way forward by the late sixties.

By the early seventies, internally the industry began to reassess their inflexible attitude on causation, as they believed it was damaging their credibility. The lawyers’ rigid attitude on causation has dismayed many industry scientists, but the industry maintains that the causation theory is unproven.

Publicly the companies’ overriding policy has been to argue that they are not qualified to comment on the health consequences of smoking, but when they do so to create confusion and “keep the controversy open”. This has been done by, on the one hand denying the existing evidence, whilst on the other demanding absolute proof of causation and calling for more research. This research, much of which has been covertly funded by the tobacco industry, is designed to look at other causes of cancer and to water down the evidence linking smoking and disease. For example, the industry statements are peppered by fudging comments such as “no clinical evidence”, “no substantial evidence”, “no laboratory proof”, “unresolved”, and “still open”. Nothing has been “statistically proven”, “scientifically proven”, “or “scientifically established”. There is no “scientific causality”, “conclusive proof”, or “scientific proof”.

It is still the case in 1998 that tobacco company representatives will not give a straightforward ‘yes’ to the question ‘does smoking cause lung cancer, yes or no?’

1.2 What is known - key facts on smoking and health

In the UK, the Health Education Authority estimates that 121,000 people per year die prematurely as a result of smoking (1995 figure).

Causes are divided as follows:
- 38% Cancer (of which two thirds are lung cancers)
- 34% Heart and circulation disease
- 28% Respiratory illness

This death toll is six times higher than the total (19,892) arising from road accidents (3,647), poisoning and overdoses (1,071), all other accidental deaths (9,974), murder and manslaughter (448), suicide (4,175), and HIV infection (577) in the UK (1996 figures).

One in two long-term smokers will die prematurely as a result of smoking - half of these in middle age.

The average loss of life expectancy among those that die prematurely from smoking in developed countries is 16 years of life.

World-wide, approximately 3 million die prematurely per year as a result of smoking - on current trends this would rise to 10 million per year by 2030. In the European region of the WHO, 1.2 million people die prematurely each year.
• Cigarette smoke contains over 4,000 chemicals, many are known to be toxic, carcinogenic or mutagenic.

1.3 What the industry knew and what it said

1.3.1 Early-mid 1960s: the birth of the problem

**Independent research shows there is a problem**

Dr. Richard Doll and Professor Bradford Hill publish an article in the *BMJ*, which states that there is a:

“real association between carcinoma of the lung and smoking.” \[1952\]

The US journal *Cancer Research* publishes details of experiments undertaken by Dr. Ernest Wynder on mice, which show that 44 per cent of animals whose skin was painted with smoke condensate developed cancerous tumours. Wynder notes that the

“suspected human carcinogen has thus been proven to be a carcinogen for a laboratory animal.” \[1996\]

**Tobacco companies seem to accept it**

“Studies of clinical data tend to confirm the relationship between heavy and prolonged tobacco smoking and incidence of cancer of the lung.” \[RJR, 1953\]

**Respond with public relations**

Companies are advised they need a two-pronged PR attack to “get the industry out of this hole.” \[Hill and Knowlton, 1953\]

Leading PR firm Hill & Knowlton are hired:

“We have one essential job -- which can be simply said: Stop public panic ... There is only one problem – confidence, and how to establish it; public assurance, and how to create it. . . . And, most important, how to free millions of Americans from the guilty fear that is going to arise deep in their biological depths – regardless of any pooh-poohing logic – every time they light a cigarette.” \[Hill and Knowlton, 1953\]

**Tobacco companies start the denials**

The US tobacco industry responded to the public concern by producing the ‘Frank Statement to Cigarette Smokers’, which sets the tone for the next few decades:

“Distinguished authorities point out:

1. That medical research of recent years indicates...
many possible causes of lung cancer.

2. That there is no agreement among the authorities regarding what the cause is.

3. That there is no proof that cigarette smoking is one of the causes.

4. That statistics purporting to link smoking with the disease could apply with equal force to any one of many other aspects of modern life. Indeed the validity of the statistics themselves are questioned by numerous scientists.” (TIRC, 1954)

An early draft of the Frank Statement, includes the following text, which is struck out before publication:

“"We will never produce and market a product shown to be the cause of any serious human ailment … The Committee will undertake to keep the public informed of such facts as may be developed relating to cigarette smoking and health and other pertinent matters."" (Tobacco Industry Research Committee, December, 1953)

"I have come to the conclusion that the statistical evidence does point to a causal relationship between tobacco smoking and lung cancer, but that there are important qualifications. There is no precise evidence of how tobacco smoking causes lung cancer or indeed of the extent to which one causes the other.” (Minister of Health, 1954).

“there still isn’t a single shred of substantial evidence to link cigarette smoking and lung cancer directly.” (RJR, 1954)

1.3.2 Mid-late 1950s: what about the honest response?

Alan Rodgmen, a chemist for RJ Reynolds, argues that:

"Since it now well-established that cigarette smoke does contain several polycyclic aromatic hydrocarbons, and considering the potential and actual carcinogenic activity of a number of these compounds, a method of either complete removal or almost complete removal of these compounds from smoke is required.” (Cited in Dirty Business, 1998)
An internal BAT memo describes work underway at BAT’s laboratories in Southampton, using code words for lung cancer “ZEPHYR”:

“As a result of several statistical surveys, the idea has arisen that there is a causal relationship between ZEPHYR and tobacco smoking, particularly cigarette smoking. Various hypothesis have been propounded one of which is that ‘tobacco smoke contains a substance or substances which may cause ZEPHYR’.  

BAT scientists visited the US for a study tour that included visits to Philip Morris, American Tobacco, Liggett and several research institutions. They found a consensus:

“With one exception the individuals with whom we met believed that smoking causes lung cancer; if by ‘causation’ we mean any chain of events which leads finally to lung cancer and which involves smoking as an indispensable link.”  

Evidence is building up that heavy smoking contributes to lung cancer”, writes a scientist at Philip Morris, who then articulates the benefits for the company if only they could find the.. “intestinal fortitude to jump on the other side of the fence admitting that cigarettes are hazardous. ‘Just look what a wealth of ammunition would be at his disposal’ to attack the other companies who did not have safe cigarettes.”  

 Imperial Tobacco: “I state that in our considered opinion there is no proof at all that smoking causes lung cancer and much to suggest that it cannot be the cause.”  

Consulting firm Arthur. D. Little, working for the US Liggett company reviews the results of seven year’s research work:

“There are biologically active materials present in cigarette smoking. These are

a) cancer causing
b) cancer promoting
c) poisonous
d) stimulating, pleasurable and flavourful.”  

1.3.3 Early-mid 1960s: enter the lawyers

Consulting firm Arthur. D. Little, working for the US Liggett company reviews the results of seven year’s research work:

“There are biologically active materials present in cigarette smoking. These are

a) cancer causing
b) cancer promoting
c) poisonous
d) stimulating, pleasurable and flavourful.”  

(Arthur D. Little, 1961)
Worried tobacco scientists want to find a solution

Alan Rodgman, a research chemist with RJ Reynolds writes that the company is publicly denying a link between smoking and cancer in public, whilst the company’s own research shows there is a link.

“What would be the effect on this company of not publishing these data now, but being required at some future date to disclose such data, possibly in the unfavourable atmosphere of a lawsuit? ... It is recommended that the Company’s management recognise that many members of its Research Department are intensely concerned about the cigarette smoke-health problem and eager to participate in its study and solution.” (RJR, 1962)

UK and US evidence accumulates

The Royal College of Physicians issues the first major report on “Smoking and Health”, which concludes:

“Cigarette smoking is a cause of lung cancer and bronchitis ... cigarette smoking is the most likely cause of the recent world-wide increase in deaths from lung cancer.” (RCP, 1962)

The First Report of the US Surgeon-General, “Smoking and Health”, concludes:

“Cigarette smoking is causally related to lung cancer in men; the magnitude of the effect of cigarette smoking far outweighs all other factors.” (US Dept. of Health, 1964)

Lawyers suggest warnings to offset against liability

“I have no wish to be tarred and feathered, but I would suggest the industry might serve itself on several fronts if it voluntarily adopted a package legend such as ‘excessive use of this product may be injurious to health of susceptible persons’ ... This is so controversial a suggestion - indeed shocking - that I would rather not try to anticipate the arguments against it in this note but reserve my defence.” (Brown and Williamson, 1963)

Lawyers must be put in charge

The strategy became increasingly defensive and early talk of safer cigarettes and scientific solutions to the problem gave way to denial and a legal approach:

“The main power on the smoking and health situation undoubtedly rests with the lawyers ... the U.S. cigarette manufacturers are not looking for means to reduce the long-term activity of cigarettes.” (P Rogers, G Todd, 1964)

The public

Following the US Surgeon General’s report of January 1964, a Philip Morris

Smoking and health
director dismissed the findings:

“We don’t accept the idea that there are harmful agents in tobacco.” (Philip Morris, 1964)

1.3.4 Mid-late 1960s: but fixing the problem means admitting it

According to a memo taken by Brown and Williamson, Janet Brown an attorney with American Brands argued in favour…

“of the long established policy to ‘research the disease’ as opposed to researching questions more directly related to tobacco … first, we maintain the position that the existing evidence of a relationship between the use of tobacco and health is inadequate to justify research more closely related to tobacco, and, secondly, that the study of the disease keeps constantly alive the argument that, until basic knowledge of the disease itself is further advanced, it is scientifically inappropriate to devote the major effort to tobacco.” (Brown and Williamson, 1968)

Philip Morris Vice President Helmut Wakeham, writes about a ‘gentleman’s agreement,’ under which the companies had agreed to refrain from conducting in-house biological experiments on tobacco smoke:

“We have reason to believe that in spite of gentlemans [sic] agreement from the tobacco industry in previous years that at least some of the major companies have been increasing biological studies within their own facilities.” (Philip Morris, undated c. 1965)

Carl Thompson from Hill and Knowlton writes a letter on the best angles for the industry magazine, *Tobacco and Health Research*:

“The most important type of story is that which casts doubt in the cause and effect theory of disease and smoking. Eye-grabbing headlines were needed and “should strongly call out the point – Controversy! Contradiction! Other Factors! Unknowns!” (Hill and Knowlton, 1968)

Helmut Wakeham, Head of Research and Development of Philip Morris, writes:

“Let’s face it. We are interested in evidence which we believe denies the allegations that cigarette smoking causes disease.” (Philip Morris, 1970)
problems
...and continue the public denials

“No case against cigarette smoking has ever been made despite millions spent on research ... The longer these tests go on, the better our case becomes.”  
(PHILIP MORRIS, 1968)

1.3.5 Early-mid 1970s: denial and denial of responsibility

The General Manager of Research at Gallaher Limited writes a memo to the Managing Director, regarding the work that Auerbach had undertaken on beagles:

“We believe that the Auerbach work proves beyond all reasonable doubt that fresh whole cigarette smoke is carcinogenic to dog lungs and therefore it is highly likely that it is carcinogenic to human lungs ... the results of the research would appear to us to remove the controversy regarding the causation of the majority of human lung cancer ... to sum up we are of the opinion that the Auerbach’s work proves beyond reasonable doubt the causation of lung cancer by smoke.”  
(GALLAHER, 1970)

... but Gallaher publicly denies these findings in 1998

Gallaher responded to the revelation of document above in March 1998 in a press release:

“Gallaher considered this published research. The internal memo, now made public, was an initial reaction. Gallaher subsequently discounted the views expressed in that memo.”  
(GALLAHER, 1998)

No explanation is offered for why Gallaher does not accept this work - or the conclusion of its top research scientist. Imperial Tobacco, followed up with more fudge:

“Any document like this has to be seen in the context of the many, many documents on the subject. One would need to look at all of them to put things in context.”  
(IMPERIAL TOBACCO, 1998)

Two months after the beagles – the Mouse House is closed

The RJ Reynolds Biological Research Division, which is called the “Mouse House” is abruptly closed. One of the leading scientists recalls:

“We felt we were on the road to making a discovery of a cause and effect relationship to a clinical disease ... I think the company’s lawyers felt that the type of work we were doing was potentially damaging to the company itself and policy was that that wouldn’t happen and that was the Legal Department’s policy.”  
(RJ REYNOLDS SCIENTIST, speaking on BBC TV, 1993)
Evidence is so great it is time to change tack on causation

A “strictly confidential” internal BAT document says

“While in the past it has seemed good sense for the industry to contest the validity of all the evidence against smoking (and may still be necessary to avoid damages in lawsuits), there is little doubt that the inflexibility of this attitude is beginning to create in some countries hostility and even contempt for the industry among intelligent, fair-minded doctors … it is thought that we should reconsider our basic answer on causation.” (BAT, 1970)

…the “we are not doctors” stance is not working

Dr Green from BAT writes:

“I believe it will not be possible indefinitely to maintain the rather hollow ‘we are not doctors’ stance and that, in due course, we shall have to come up in public with a more positive approach towards cigarette safety.” (BAT, 1972)

…and it was only ever PR anyway...

A memo from Fred Panzer of the US Tobacco Institute says:

“It is my strong belief that we now have an opportunity to take the initiative in the cigarette controversy, and turn it around. For twenty years, this industry has employed a single strategy to defend itself on three major fronts – litigation, politics and public opinion. While the strategy was brilliantly conceived and executed … it is not – nor was it intended to be – a vehicle for victory. On the contrary, it has always been a holding strategy, consisting of

- Creating doubt about the health charge without actually denying it.
- Advocating the public’s right to smoke, without actually urging them to take up the practice.
- Encouraging objective scientific research as the only way to resolve the question of health hazard.” (Tobacco Institute, 1972)

Meanwhile the public denial continues

“It is our opinion … that the repeated assertion without conclusive proof that cigarettes cause disease – however well-intentioned – constitutes a disservice to the public.” (Brown and Williamson, 1971)
1.3.6 Mid-late 1970s: recognition that there is no easy way out

*We have retreated behind impossible demands for “scientific proof”*

“The industry has retreated behind impossible demands for ‘scientific proof’ whereas such proof has never been required as a basis for action in the legal and political fields ... It may therefore be concluded that for certain groups of people smoking causes the incidence of certain diseases to be higher than it would otherwise be ... A demand for scientific proof is always a formula for inaction and delay and usually the first reaction of the guilty.” *(BAT, 1976)*

*Publicly: “we are not doctors”*

Imperial Tobacco shrugs and stands by the ‘we are not doctors’ ploy:

“As a company we do not make, indeed we are not qualified to make, medical judgements. We are therefore not in a position either to accept or to reject statements made by the Minister of Health.” *(Imperial Tobacco UK, 1975)*

*So the denials continue*

“None of the things which have been found in tobacco smoke are at concentrations which can be considered harmful. Anything can be considered harmful. Apple sauce is harmful if you get too much of it.” *(Philip Morris, 1976)*.

1.3.7 1980s: dig in and brazen it out

*Industry wrestles with its credibility gap*

A secret BAT document shows that:

“The company’s position on causation is simply not believed by the overwhelming majority of independent observers, scientists and doctors ... The industry is unable to argue satisfactorily for its own continued existence, because all arguments eventually lead back to the primary issue of causation, and at this point our position is unacceptable ... our position on causation, which we have maintained for some twenty years in order to defend our industry is in danger of becoming the very factor which inhibits our long term viability ... On balance, it is the opinion of this department that we should now move to position B, namely, that we acknowledge ‘the probability that smoking is harmful to a small percentage of heavy smokers’ ... By giving a little we may gain a lot. By giving nothing we stand to lose everything.” *(BAT, 1980)*
Whilst the evidence accumulates

Another authoritative report from the US Surgeon General:
"Cigarette smoking is the chief, single, avoidable cause of death in our society, and the most important public health issue of our time." (Report of Surgeon-General 1982)

...but the public denials continue

"The view that smoking causes specific diseases remains an opinion or a judgement, and not an established scientific fact." (Tobacco Institute of Hong Kong, 1989)

1.3.8 1990s: blanket denial

Damning legal opinion

US Judge Sarokin rules in the tobacco case *Haines v. Liggett Group* that:
"All too often in the choice between the physical health of consumers and the financial well-being of business, concealment is chosen over disclosure, sales over safety, and money over morality. Who are these persons who knowingly and secretly decide to put the buying public at risk solely for the purpose of making profits and who believe that illness and death of consumers is an apparent cost of their own prosperity. As the following facts disclose, despite some rising pretenders, the tobacco industry may be the king of concealment and disinformation." (1992)

We don’t smoke that s***

An actor promoting RJ Reynolds products asks an RJR executive why he does not smoke. He is told:
"We don’t smoke that s***. We just sell it. We just reserve the right to smoke for the young, the poor, the black and the stupid." (Cited in, *First Tuesday*, ITV 1992)

Ex-industry scientist says its time for the truth

Anthony Colucci, a former scientist with RJ Reynolds, states:
"I’m a scientist who says: ‘It’s about time they quit this charade. I’m sick and tired of the way they distort and ignore the science. It’s time for them to tell the truth ... They had a responsibility early on to tell what their own researchers were finding out. Instead, they ignored it and made a mockery of it. I think it’s time for the tobacco industry to say: This stuff kills people. We know that. Smoke at your own risk.’" (1992)
But the denials continue into 1998 and under oath

Murray Walker, Vice President and Chief Spokesperson for the Tobacco Institute, testifying at the Minnesota Trial:

“We don’t believe it’s ever been established that smoking is the cause of disease.” (M. Walker 1998)

Geoffrey Bible, Chairman of Philip Morris, testifies at the Minnesota trial:

“I’m unclear in my own mind whether anyone dies of cigarette smoking-related diseases.” (Cited in Pioneer Press 1998)

…and fudging continues in the press

John Carlisle of the Tobacco Manufacturers Association is questioned in a magazine:

Question: Does it [smoking] cause lung cancer?

John Carlisle: “There’s no shortage of statistics: it’s extraordinary the amount of research that has gone into our product and the many and varied opinions that people hold about it.” (UK TMA, 1998)

…and to the BBC the industry still will not give a straight answer

Following the release of a 1970 memo showing that Gallaher accepted that smoking caused lung cancer, John Carlisle of the TMA is interviewed on BBC Radio’s flagship Today programme.

Question: “What would it take to convince you that tobacco can be harmful, Mr Carlisle, if this doesn’t?”

John Carlisle: “Well, I … one cannot pull out just one report which has been leaked to a national newspaper and say this is the evidence we have been waiting for.”

Apparently Mr. Carlisle has not noticed numerous reports of the Royal College of Physicians and US Surgeon General, and is still waiting for evidence.

Question: “But Mr. Carlisle this is absolutely conclusive evidence that, apart from what the research shows, that Gallahers has concealed conclusive knowledge about the harmful effects of tobacco for all those 30 years.”

John Carlisle: “… There is no such thing as conclusive evidence when you are talking about such a vast subject.”
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2 Nicotine and addiction

"...the entire matter of addiction is the most potent weapon a prosecuting attorney can have in a lung cancer/cigarette case. We can't defend continued smoking as 'free choice' if the person was 'addicted'."

The Tobacco Institute in 1980, revealing why the industry consistently refuses to accept that nicotine is addictive - its legal defences would be wrecked and its 'freedom to smoke' arguments would be defeated.

2.1 Summary

Beginning in the early sixties, industry documents discuss the addictive nature of nicotine, and recognise that the primary reason for people to continue smoking is nicotine addiction. The documents show that the industry believes nicotine to be a drug. “We are in the business of selling nicotine - an addictive drug” one lawyer wrote as far back as 1963. The documents are peppered with statements about the pharmacological or psychopharmacological effects of nicotine - its effect on the brain or central nervous system.

Publicly the industry has maintained that nicotine is not addictive – culminating in Congressional hearings in 1994 when seven Chief Executive Officers of American tobacco companies all testified that nicotine is not addictive. The industry has always said publicly that nicotine was important for taste or flavour – not addiction.

By the early seventies, industry lawyers were worried that the “free choice” argument the industry was using to defend smoking was being negated on the grounds of addiction, and could have implications for litigation against the industry.

In the seventies and eighties, industry researchers investigated the addictiveness of nicotine, on, amongst others, monkeys and rats. In the experiments, animals became dependent on nicotine – but the lawyers normally took over the control of the results.

In the US, the industry, knowing that without nicotine in them, cigarettes would not be a viable product, became terrified that the Food and Drug Administration would regulate cigarettes as a drug, and hence regulate tobacco and nicotine content. In the early eighties, BAT at least, was considering becoming involved in the marketing of other nicotine delivery systems, but decided against the move because it feared that it might heighten the chances of FDA regulation.

In the late nineties, as many internal documents showing that cigarettes are addictive reach the public domain, the companies have responded by trying to fudge and change the definition of addiction - which they now apply to such activities as shopping or the Internet. In 1997, Liggett broke ranks and became the first company to admit that “smoking is addictive”. Many companies still openly deny that nicotine is addictive.
2.2 What is known - key facts about nicotine addiction

- A UK Government scientific committee said in March 1998: “Over the past decade there has been increasing recognition that underlying smoking behaviour and its remarkable intractability to change is addiction to the drug nicotine. Nicotine has been shown to have effects on brain dopamine systems similar to those of drugs such as heroin and cocaine.” (SCOTH, 1998)

- “Dependence on nicotine is established early in teenagers’ smoking careers, and there is compelling evidence that much adult smoking behaviour is motivated by a need to maintain a preferred level of nicotine intake…” (SCOTH, 1998, Ibid.)

- Withdrawal from smoking can be observed as causing irritability, difficulty in concentrating, anxiety, restlessness, increased hunger, depression and a pronounced craving for tobacco. The fact that this can be attributed to nicotine, rather than behavioural aspects of tobacco use is shown by the consistent finding that withdrawal symptoms are relieved by nicotine replacement (patches, gum etc) but not by a placebo (patches, gum etc that do not contain nicotine).

- Despite a high proportion (c. 70%) of smokers that say they would like to quit, cessation rates are low - two studies showed less than 5% of those attempting to stop maintained complete abstinence for 6 months. Only a third managed to abstain for 2 days. Nicotine replacement therapy approximately doubles the chance of successful cessation.

- There is no universally accepted definition of addiction and the scope of characteristics included varies, but the WHO gave a reasonable definition in 1969: “A state, psychic and sometimes also physical, resulting from the interaction between a living organism and a drug, characterised by behavioural and other responses that always include a compulsion to take the drug on a continuous or periodic basis in order to experience its psychic effects, and sometimes to avoid the discomfort of its absence. Tolerance may or may not be present.”

- Smokers are compelled to smoke by addiction to nicotine but the harm is largely done by the 4,000+ other chemicals in the tar and gases produced by burning tobacco. It is this combination that makes tobacco so deadly.

2.3 What the industry said and what it knew

2.3.1 Early to mid 1960s:

What the chief scientist said

Sir Charles Ellis, from BAT

“…smoking is a habit of addiction …nicotine is … a very fine drug.” (BAT, 1962)

What the lawyers said

17 July: Addison Yeaman from Brown and Williamson:

“Nicotine is addictive. We are, then, in the business of selling nicotine, an addictive drug.” (Brown and
Williamson, 1963)

Tobacco industry scientists

“The habitual use of tobacco is related primarily to psychological and social drives, reinforced and perpetuated by the pharmacological actions of nicotine on the central nervous system.”

(Research for BAT, 1963)

2.3.2 Mid-late 1960s:

What the BAT scientists said

“It may be useful, therefore, to look at the tobacco industry as if for a large part its business is the administration of nicotine (in the clinical sense).”

(BAT, 1967)

“Smoking is an addictive habit attributable to nicotine and the form of nicotine affects the rate of absorption by the smoker.”

(BAT, 1967)

What the Philip Morris scientists found and said

RD Carpenter from Philip Morris writes a report on “RJ Reynold’s Biological Facilities” stating that:

“Reynolds has developed an inhalation smoking device [which] is being used to expose rats to cigarette smoke ...the rats have become habituated to the smoke.”

(Philip Morris, 1969)

The Vice President for R&D explains 'why one smokes':

“the primary motivation for smoking is to obtain the pharmacological effect of nicotine. In the past, we at R&D have said that we’re not in the cigarette business, we’re in the smoke business. It might be more pointed to observe that the cigarette is the vehicle of smoke, smoke is the vehicle of nicotine, and nicotine is the agent of a pleasurable body response.”

(Philip Morris, 1969)

2.3.3 Early-Mid 1970s:

What the scientists said at their conferences

“Sir Charles [Ellis of BAT] started the meeting by saying that he had first brought out the concept that we are in a nicotine rather than tobacco industry.”

(BAT, 1971)

William Dunn Jr. of Philip Morris:
“The cigarette should be conceived not as a product but as a package. The product is nicotine … Think of the cigarette pack as a storage container for a day’s supply of nicotine … Think of a cigarette as a dispenser for a dose unit of nicotine. Think of a puff of smoke as the vehicle of nicotine … Smoke is beyond question the most optimised vehicle of nicotine and the cigarette the most optimised dispenser of smoke.”

(Philip Morris, 1971)

Scientists recognise that without nicotine there is no industry

“If, as proposed, nicotine is the sine qua non of smoking, and if we meekly accept the allegations of our critics and move toward reduction or elimination of nicotine in our products, then we shall eventually liquidate our business. If we intend to remain in business and our business is the manufacture and sale of dosage forms of nicotine, then at some point we must make a stand.”

(RJR, undated)

Lawyers warn that free choice arguments may be undermined

February: Ernest Pepples, Brown and Williamson’s counsel:

“Addiction – Some emphasis is now being placed in the habit-forming capacities of cigarette smoke. To some extent the argument revolving around “free choice” is being negated on the grounds of addiction. The threat is that this argument will increase significantly and lead to further restrictions on product specifications and greater danger in litigation.”

(Brown and Williamson, 1973)

Industry scientists find more evidence

“Monkeys can be trained to inject themselves with nicotine for its own sake, just as they will inject other dependence-producing drugs e.g. opiates, caffeine, amphetamine, cocaine … The absorption of nicotine through the lungs is as quick as the junkie’s ‘fix’.”

(Brown and Williamson's research review, 1973)

Experiments on rats showed that:

“dependence of nicotine is related to the stressfulness of the situation.”

(Brown and Williamson, 1974)

2.3.4 Mid–late 1970s:

What the marketing people worried

August: An advertising conference undertaken for Brown and Williamson examines the goals of how to

“market an ADDICTIVE PRODUCT in an ETHICAL MANNER.”
A 1979 BAT document assesses the role of addiction and its importance in any search for a product that would replace tobacco:

“We are searching explicitly for a socially acceptable addictive product involving:

- a pattern of repeated consumption
- a product which is likely to involve repeated handling
- the essential constituent is most likely to be nicotine or a direct substitute for it
- the product must be non-ignitable (to eliminate inhalation of combustion products and passive smoking).” (BAT, 1979)

High profits arise because the customer is dependent on the product

“We also think that consideration should be given to the hypothesis that the high profits additionally associated with the tobacco industry are directly related to the fact that the customer is dependent upon the product.”

“Looked at another way, it does not follow that future alternative 'Product X' would sustain a profit level above most other product/business activities unless, like tobacco, it was associated with dependence.”

Ethical problems of addiction recognised

“That being the case, one must question the ethics and practical possibilities of society/medical opinion permitting the advent of the new habituation process.” (BAT, 1979)

2.3.5 Early-Mid 1980s:

What the scientists said

Dr Green, from BAT:

“It has been suggested that cigarette smoking is the most addictive drug. Certainly large numbers of people will continue to smoke because they can’t give it up. If they could they would do so. They can no longer be said to make an adult choice.” (BAT, 1980)

A memo by BAT scientists:

“BAT should learn to look at itself as a drug company rather than as a tobacco company.” (BAT, 1980)

What the

Victor DeNoble of Philip Morris undertook experiments on rats who had nicotine
industry scientists found injected directly into their hearts. The results showed that the rats would administer a further dose of nicotine by pushing a lever.

“Nicotine has properties of a drug of abuse. It has properties of drug addiction …This [The results] was completely contradictory to the industry’s position that nicotine is in cigarettes for taste. We know they [the rats] pressed the lever because of the drug effects on the animals brain. We also know from studies that if the substance was cocaine or morphine or alcohol the rates would continue to press the lever. We found the same in nicotine.” (Philip Morris, quoted on Dispatches, Channel 4, 1996)

2.3.6 Mid to late 1980s:

Too uncomfortable to quit

“Why do people smoke? … to relax; for the taste; to fill the time; something to do with my hands … But, for the most part, people continue to smoke because they find it too uncomfortable to quit.” (Philip Morris, 1984)

What the US Surgeon General declared

The US Surgeon General officially declares that:

“cigarettes and other forms of tobacco are addicting”. The pharmacological and behavioural processes are “similar to those that determine addiction to drugs such as heroin and cocaine.” (1988)

Industry responds with denials

The Tobacco Institute argues: “claims that cigarettes are addictive contradict common sense … An escalation of antismoking rhetoric … without medical or scientific foundation.” (TI, 1988)

2.3.7 The 1990s

What the industry said privately

“Different people smoke for different reasons. But the primary reason is to deliver nicotine into their bodies. Nicotine is an alkaloid derived from the tobacco plant. It is a physiologically active, nitrogen containing substance. Similar organic chemicals include nicotine, quinine, cocaine, atropine and morphine.” (Philip Morris, circa. 1993)

Publicly, nicotine adds

Brennen Dawson, Vice President, Tobacco Institute says “Nicotine is essential. It has taste. It has what’s called a mouth
Nicotine and addiction

US tobacco CEOs testify under oath before Congressional Health and Environment Subcommittee:

Thomas Sandefur, Chief Executive of Brown and Williamson says: "I do not believe that nicotine is addictive."

William Campbell from Philip Morris: "I believe nicotine is not addictive."

James Johnston, RJ Reynolds: "And I too believe that nicotine is not addictive."  

After stepping down, Ross Johnson, ex-Chief Executive of RJ Reynolds, is asked by the Wall Street Journal whether nicotine is addictive:

"Of course it’s addictive. That’s why you smoke the stuff." (Cited in Wall Street Journal 1994)

Martin Broughton, Chief Executive BAT: "We have not concealed, we do not conceal and we will never conceal ... we have no internal research which proves that smoking ... is addictive."  

A Philip Morris Position Statement:

"Those who term smoking an addiction do so for ideological -- not scientific -- reasons."  

To an editorial in the Observer, which argued that nicotine is addictive, Dr Chris Proctor from BAT responded:

"Addiction is an emotive subject and it is certainly possible to define the term broadly enough to include smoking ... The public’s understanding has changed significantly over recent decades ... The current definition is more colloquial, reflected in terms like ‘chocoholic’ and ‘Addicted to love’ as in a recent movie. This colloquial definition is all inclusive and certainly applies to the use of many common substances that have familiar pharmacological effects to cigarettes, such as coffee, tea, chocolate and cola drinks."  

When asked in a magazine interview, John Carlisle of the TMA (UK) adopts the new fudging approach:

Question: "Is nicotine addictive?"

Carlisle: The definition of addiction is wide and varied.
People are addicted to the Internet. Others are addicted to shopping, sex, tea and coffee. The line I would take is that tobacco isn't addictive but habit forming." (TMA, 1998)
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3 Marketing to children

If the last ten years have taught us anything, it is that the industry is dominated by the companies who respond most to the needs of younger smokers.

(Imperial Tobacco, Canada)

3.1 Summary

Publicly the tobacco companies have always maintained that they do not target youth, but the market logic of selling to teenagers is overpowering - teenagers are the key battleground for the tobacco companies and for the industry as a whole. Their response has been that peer pressure is the most important aspect in children smoking. But internal documents sharply contradict this, by showing that they set out to aggressively advertise to youth, and even manipulate peer pressure to make people smoke their brand.

The industry knows that very few people start smoking in the teenage years, and if you can “hook” a youngster early on they could well smoke your brand for life. Indeed, independent surveys show that approximately 60 per cent of smokers start by the age of 13 and fully 90 per cent before the age of 20. This is the paradox of the cigarette industry – it is both socially and legally unacceptable to advertise to under-age teenagers and children – yet it is to this precise age group that it has to advertise to in order to survive.

The documents show that the tobacco industry:

- Examined young people as young as five – some studies did not even set a lower age limit. As one executive says “they got lips, we want them”.
- Thought about using honey and comic strip, as well as advertising, to entice youngsters to smoke.
- Looked at ways of preventing teenagers from quitting.
- Undertook studies how to manipulate pubescent/teenage anxieties into making people smoke. Examined the attitudes, aspirations, and lifestyles of the young and how to exploit them. One document says the company needs to “Create a Living Laboratory”.

The documents also show that:

- Marketing executives set out to present cigarettes as part of adulthood initiation - an illicit pleasure, which like sex, is one of a few initiations into the adult world.
- Advertisers set out to equate cigarettes with rebellion, self-expression, self-confidence, independence, freedom, adult identity, masculinity for boys and femininity for girls.
- Two of the most successful advertising campaigns: Marlboro’s Cowboy and RJ Reynolds’ Old Joe Camel pitched their appeal directly to youth.
- The companies advertised in sports magazines and sponsored motor racing as new ways to market to youth.
3.2 What is known - key facts about marketing to children

- Cigarette advertising reaches children as young as three. In one study, six year olds were as familiar with Joe Camel as Mickey Mouse. Other studies have found that Joe Camel appeals more to kids than adults.

- Children were most aware of the cigarette brands that are most frequently associated with sponsored sporting events on TV.

- Nine year old children are receiving the positive message from cigarette advertisements at the age when they are most likely to try their first cigarette.

- The most commonly remembered brands by 11 year olds are the most heavily advertised.

- In one study, a third of the 10- and 11-year-olds and more than half of the secondary school children were able to name cigarette brands and sponsored sports.

- Advertising campaigns targeted at older teenagers and young adults are likely to present qualities which younger teenagers find attractive.

- Teenagers consume the cigarettes that most dominate sports sponsorship.

The great fallacy promoted by the industry is that by avoiding marketing that is childish, they are somehow avoiding an appeal to children. In fact, advertising to children and teenagers works precisely because it identifies smoking with adulthood. The teenage years are a time of great aspiration and insecurity, smoking can become a badge or signifier of certain positive values - these are remorselessly nurtured by tobacco industry marketing.

3.3 What the industry said and what it knew

3.3.1 The late 1950s:

‘Hitting the youth market’

A Philip Morris Executive writes that “hitting the youth can be more efficient even though the cost to reach them is higher, because they are willing to experiment, they have more influence over others in their age group than they will later in life, and they are far more loyal to their starting brand.” (1957)

The cowboy - out to capture youth men’s fantasy

Philip Morris starts using the Cowboy image on its commercials, because the image “would turn the rookie smokers on to Marlboro .. the right image to capture the youth market’s fancy ..a perfect symbol of independence and individualistic rebellion”

As one executive who worked on Marlboro recalled “When you see teenage boys - people the cigarette companies aren’t supposed to be targeting in the first place - going crazy for this guy, you know they’re hitting their target.”
3.3.2 Late 1960s:

**Teenage women also lured**  
Philip Morris produces Virginia Slims, a cigarette targeted exclusively at women, running the slogan: “You Have Come Along Way Baby”. Within six years of the Slims launch, the percentage of teenage women who smoked had nearly doubled (1968).

**Youth share**  
A report for Philip Morris identifies that over 15 per cent of female smokers aged 15, and 23 per cent of male smokers aged 15, smoke Marlboro (Philip Morris, 1969).

**A cigarette means I am no longer my mother’s child**  
A draft report to the Board of Directors of Philip Morris states:

> “a cigarette for the beginner is a symbolic act. I am no longer my mother's child, I'm tough, I am an adventurer, I'm not square … As the force from the psychological symbolism subsides, the pharmacological effect takes over to sustain the habit” (Philip Morris, 1969)

3.3.3 Early-Mid 1970s:

**Lower age limit keep at 14**  
An internal RJR document outlines that:

> “the lower age limit for the profile of young smokers is to remain at 14” (RJR, 1971)

**RJR recognises the need to appeal to youth**  
Claude Teague, Assistant Chief in R&D at RJ Reynolds, writes a paper: “Some Thoughts About New Brands of Cigarettes for the Youth Market”:

> “At the outset it should be said that we are presently, and I believe unfairly, constrained from directly promoting cigarettes to the youth market … if our company is to survive and prosper, over the long term we must get our share of the youth market… Thus we need new brands designed to be particularly attractive to the young smoker, while ideally at the same time appealing to all smokers … Perhaps these questions may be best approached by consideration of factors influencing pre-smokers to try smoking, learn to smoke and become confirmed smokers.”

**RJR analyses the psychology of youth smoking**  
Teague continues:

> “thus a new brand aimed at the young smoker must somehow become the ‘in’ brand and its promotion should emphasise togetherness, belonging and group acceptance, while at the same time emphasising individuality and ‘doing one’s own thing’. The teens and early twenties are periods of intense psychological stress, restlessness and boredom. Many social awkward situations are encountered. The
minute or two required to stop and light a cigarette, ask for a light, find an ash tray, and the like provide something to do during periods of awkwardness and boredom … The fragile, developing self-image of the young person needs all of the support and enhancement it can get … This self-image enhancement effect has traditionally been a strong promotional theme for cigarette brands and should continue to be emphasised … A careful study of the current youth jargon, together with a review of currently used high school American history books and like sources for valued things might be a good start at finding a good brand name and image theme. This is obvious a task for marketing people, not research people.\textsuperscript{7} (RJR, 1973)

Need to counter programmes designed to stop young smoking

A Confidential Memo from Brown and Williamson’s Assistant General Counsel, outlines:

“salient problems now facing the cigarette industry”, which includes “increased educational programmes to prevent young, non-smokers taking up the practice of smoking.”\textsuperscript{8} (Brown and Williamson, 1973)

Use comic strip

A RJR document articulates that:

“In view of the need to reverse the preference for Marlboros among younger smokers, I wonder whether comic strip type copy might get a much higher readership among younger people than any other type of copy. It would certainly seem worth testing a heavy dose of this type of copy in a test market to get a research reading on percentage of readership and copy recall.”\textsuperscript{9} (RJR, 1973)

Study as young as 12

The Philip Morris Marketing Research Department highlight how a "probability sample of 452 teen-agers ages 12–17” finds that 13 per cent smoke an average of 10.6 cigarettes per day and how "the data from the study are consonant with the findings of other such studies, both at Philip Morris and without.”\textsuperscript{10} (Philip Morris, 1973)

Increase share of young as they represent tomorrow’s cigarette business

A RJR marketing plan for 1975 outlines “Key Opportunity Areas” to

“Increase our young adult franchise … in 1960, this young adult market, the 14–24 age group, represented 21% of the population … they will represent 27 % of the population in 1975. They represent tomorrow’s cigarette business. As this 14–24 age group matures, they will account for a key share of the total cigarette volume – for at least the next 25 years … Thus our advertising strategy becomes clear for our established brands:
Direct advertising appeal to the younger smokers ... For Winston, we’ve followed this strategy in developing the new ‘candid’ advertising campaign .. it is especially designe [sic] to appeal to young adults ..”

(RJR, 1974)

Young smokers are of pre- eminent importance

A Brown and Williamson document, entitled “The New Smoker” outlines how the

“The younger smoker is of pre-eminent importance: significant in numbers, ‘lead in’ to prime market, starts brand preference patterning... But frustrating to reach: values and behaviour at variance with rest of the population, sceptical, intense peer pressure, public policy difficulties ... Study the Market and Customer, maintain a continuing dialogue with the ‘New’ Smoker ..behaviour patters – what they do; Attitudes– what they think; Directions – where they’re headed; ... Explore and Implement; Create a ‘Living Laboratory” ³. (Brown and Williamson, 1974)

Direct advertising to appeal to young

An internal RJR document outlines its primary “Marketing Goals” for 1975. These include

“Increase our Young Adult Franchise: 14–24 age group in 1960 was 21% of the population; in 1975 will be 27%. As they mature, will account for key market share of cigarette volume for next 25 years ... We will direct advertising appeal to this young adult group without alienating the brand’s current franchise”³. (RJR, 1974)

Target 15 year olds

A Brown and Williamson document highlights that the

“Target audience for the sampling effort on KOOL King Size” includes both Men and Women in the 15–24 age group.”³ (Brown and Williamson, 1974)

3.3.4 Mid-late 1970s:

Young adult smokers means young smokers

An internal Brown and Williamson memo outlines that

“when describing market categories and target audiences we use references such as 'young smokers’, ‘young market’ ‘youth market’ etc ...in the future when describing the low-age end of the cigarette business please use the term 'young adult smoker’ or ‘young adult smoking market’”³. (Brown and Williamson, 1975)

Marlboro’s growth rate due to young smokers

A report by a Philip Morris researcher Myron E. Johnston to the head of Research at Philip Morris, Robert B. Seligman outlines that:

“Marlboro’s phenomenal growth rate in the past has been
attributable in large part to our high market penetration among young smokers ... 15 to 19 years old . . . my own data, which includes younger teenagers, shows even higher Marlboro market penetration among 15-17-year-olds ... Marlboro smokers, being on the average considerably younger than the total smoking population, tend to have lower than average incomes ... the decline in the popularity of Marlboro Red among younger smokers will probably continue and, thus, further reduce its rate of growth." (Philip Morris, 1975)

Brown and Williamson’s Advertising Objective for Viceroy is to

“Communicate effectively that Viceroy is a satisfying, flavourful cigarette which young adult smokers enjoy, by providing them a rationalisation for smoking, or, a repression of the health concern they appear to need”7.

(Brown and Williamson, 1976)

A RJR document outlining “Planning Assumptions and Forecasts for the period 1976-1986” outlines that:

“Evidence is now available to indicate that the 14-18-year-old group is an increasing segment of the smoking population. RJR-T must soon establish a successful new brand in this market if our position in the industry is to be maintained over the long term”.8. (RJR, 1976)

An internal RJR memo entitled “Share of Smokers by Age Group”, includes “Younger Smokers”:

“From a Corporate standpoint, Philip Morris posted a 4 point gain among 14-17 year old smokers (RJR and BROWN AND WILLIAMSON each lost 2 points).”9. (RJR, 1976)

A Brown and Williamson document highlights how the

“third major opportunities for KOOL Super Lights gains could come from full taste 85 smokers and from starters. Young (age 16-25) males account for a disproportionate amount of both these segments ... KOOL has the highest attraction rate (along with Marlboro) for new starters in the full taste menthol and non-menthol segments”.10. (Brown and Williamson, 1977)
Position brand to appeal to lifestyle – then let nicotine take over

A working paper prepared for Imperial Tobacco (Canada) recognises the transition from glamour to addiction.

“At a younger age, taste requirements and satisfaction in a cigarette are thought to play a secondary role to the social requirements. Therefore, taste, until a certain nicotine dependence has been developed, is somewhat less important than other things.” (1977)

Learn how smoking begins,

The purpose of Project 16 (Imperial Tobacco Canada) is outlined:

“Since how the beginning smoker feels today has implications for the future of the industry, it follows that a study of this area would be of much interest. Project 16 was designed to do just that – to learn everything there was to learn about how smoking begins, how high school students feel about being smokers, and how they foresee their use of tobacco in the future.”

Peer pressure is important at 11, but may want to quit by 17

The summary of the findings of Project 16 are that:

“There is no doubt that peer group influence is the single most important factor in the decision by an adolescent to smoke … Serious efforts to learn to smoke occur between ages 12 and 13 in most case [sic] … However intriguing smoking was at 11, 12, or 13, by the age of 16 or 17 many regretted their use of cigarettes for health reasons and because they feel unable to stop smoking when they want to. By the age of 16, peer pressure to initiate others to smoking is gone.” (1977)

Marlboro dominates youth

A Philip Morris memo states that:

“Marlboro dominates in the 17 and younger age category, capturing over 50 percent of the market.” (Philip Morris, 1979)

3.3.5 Early-Mid 1980s:

Today’s teen is tomorrow’s regular customer

A Philip Morris researcher Myron E. Johnston sends a memo to Robert B. Seligman, then Vice President of research and development at Philip Morris in Richmond:

“It is important to know as much as possible about teenage smoking patterns and attitudes. Today's teenager is tomorrow's potential regular customer, and the overwhelming majority of smokers first begin to smoke while in their teens ... it is during the teenage years that the initial brand choice is made: At least a part of the success of Marlboro Red during its most rapid growth period was because it became the brand of choice...
among teenagers who then stuck with it as they grew older ... We will no longer be able to rely on a rapidly increasing pool of teenagers from which to replace smokers through lost normal attrition ... Because of our high share of the market among the youngest smokers, Philip Morris will suffer more than the other companies from the decline in the number of teenage smokers”.

The report analyses data for smokers as young as 12-24. (Philip Morris, 1981)

Joe Camel ads reach children as young as three

The Journal of the American Medical Association finds that adverts for Joe Camel are effective in reaching children. In one study more than half of the children aged three to six who were presented with a variety of products matched the Joe Camel logo with a photo of a cigarette. Six year olds were found to be nearly as familiar with Joe Camel as Mickey Mouse. The study finds that when children were shown Joe Camel adverts, 96 per cent correctly identified the brand, compared with only 67 per cent of adults.

Starters disbelieve the dangers until addicted

A report for Imperial Tobacco of Canada states:

“Starters no longer disbelieve the dangers of smoking, but they almost universally assume these risks will not apply to themselves because they will not become addicted. Once addiction does take place, it becomes necessary for the smoker to make peace with the accepted hazards. This is done by a wide range of rationalisations ... The desire to quit seems to come earlier now than before, even prior to the end of high school. In fact, it often seems to take hold as soon as the recent starter admits to himself that he is hooked on smoking. However the desire to quit, and actually carrying it out, are two different things, as the would-be quitter soon learns ... the single most commonly voiced reasons for quitting among those who had done so was ... sports.” (1982)

Then sports are a reason for quitting

A RJR report, entitled “Young Adult Smokers: Strategies and Opportunities” states that:

“Younger adult smokers have been the critical factor in the growth and decline of every major brand and company over the last 50 years. They will continue to be just as important to brands/companies in the future for two simple reasons: The renewal of the market stems almost entirely from 18-year-old smokers. No more than 5 percent of smokers start after age 24. The brand loyalty of 18-year-old smokers far outweighs any tendency to switch with age ... Once a brand becomes well-developed among younger adult smokers, ageing and brand loyalty will eventually transmit that strength to older age brackets ... Brands/companies which fail to attract...
their fair share of younger adult smokers face an uphill battle. They must achieve net switching gains every year to merely hold share... Younger adult smokers are the only source of replacement smokers... If younger adults turn away from smoking, the industry must decline, just as a population which does not give birth will eventually dwindle.”

[The only thing not explained here is how the smoking behaviour and brand loyalty of 18 year olds is created - only by reaching them at an earlier age.]

Young are critical to our long term performance

The report continues… “Younger adult smokers are critical to RJR’s long term performance and profitability …because of the sensitivity of the younger adult smoker market, brand development / management should encompass all aspects of marketing mix and maintain a long-term, single minded focus to all elements – product, advertising, name, packaging, media, promotion and distribution …Marlboro’s key imagery was not masculinity, it was younger adult identity/belonging – the brand for average younger adults, popular and acceptable among younger adult friends, not ‘too different’.” (RJR, 1984)

Motor racing is a fast, trendy sport for the young

Gordon Watson, General Manager of BAT in Hong Kong on sponsorship of the Macau Grand Prix:

“We’re not handing out money for nothing. We have gone into this very thoroughly and the entire JPS publicity is built around motor racing, seen as a fast, exiting, trendy sport for the young and, if you like, the young at heart. That’s who we are aiming at in the local market and early indications are that we’re on target”.

(South China Morning Post, 1984)

Smoking is for grown-ups

RJR runs a series of adverts aimed at telling children that smoking is for “adults”:

“We don’t advertise to children ... First of all, we don’t want young people to smoke. And we’re running ads aimed specifically at young people advising them that we think smoking is strictly for adults ... Kids just don’t pay attention to cigarette ads, and that’s how it should be.” (RJR, 1984)

Children most aware of brands with greatest sports sponsorship

A study published in the Health Education Journal finds that:

“children were most aware of the cigarette brands which are most frequently associated with sponsored sporting events on TV ...This demonstrates that the TV sports sponsorship by tobacco manufacturers acts as cigarette advertising to children and therefore circumvents the
3.3.6 Mid-late 1980s:

**Need brands to appeal to young**

Minutes from a meeting of BAT’s Tobacco Strategy Review Team reveal, under “Competition with Marlboro/ Brand Strategies”:

“Marlboro is particularly strong in attracting young smokers and it was important to have brands which appealed to this group … It was agreed that, in competing against Marlboro, the market segment at which a particular Group brand was being directed should be carefully defined and all aspects of the promotion and marketing should be clearly targeted on the chosen customer group.” (BAT, 1985)

**Target 13 year olds**

An internal RJR memo examines “Project LF Potential Year 1 Marketing Strategy”,

“Project LF is a wider circumference non-menthol cigarette targeted at younger adult male smoker (primarily 13–24 year old Marlboro smokers).” (RJR, 1987)

**60% start smoking by 13 years - 90% before they are 20**

A study into Tobacco Advertising and Consumption by Joe Tye, Kenneth Warner and Stanton Glantz remarks that:

“Approximately 60 per cent of smokers start by the age of 13 and fully 90 per cent before the age of 20. These statistics translate in to the need for more than 5,000 children and teenagers to begin smoking every day to maintain the current size of the smoking population.” (1987)

**Industry dominated by companies who respond to young – need to re-establish image**

Imperial Tobacco’s (Canada) marketing plan states:

“If the last ten years have taught us anything, it is that the industry is dominated by the companies who respond most to the needs of younger smokers. Our efforts on these brands will remain on maintaining their relevance to smokers in these younger groups in spite of the share performance they may develop among older smokers … Re-establish clear distinct images for ITL brands with particular emphasis on relevance to younger smokers. Shift resources substantially in favour of avenues that allow for the expression and reinforcement of these image characteristics”.

The document defines “target groups” for various brands as “men 12–17” and “men and women 12–34” (Imperial Tobacco Canada, ~1987-8)

**Welcome Joe**

RJR introduce Joe Camel, a new cartoon character. A survey, commissioned by the
US Centre For Disease Control finds that the highest increase in youth smoking between 1980-1988 is the year that Joe Camel is introduced. (1988)

3.3.7 The 1990s:

Joe Camel appeals more to kids than adults
A study in The Journal of the American Medical Association finds that Joe Camel appeals far more to children than adults. Thirty per cent of three year olds and 91 per cent of six year olds knew that Joe Camel was connected with cigarettes. The researchers found that: “Old Joe, the cartoon character promoting Camel cigarettes had the highest recognition rate among the tested cigarette logos. ...Market researchers believe that brand awareness created in childhood can be the basis for product preference later in life. It has been shown that children prefer the brands they see advertised. ...The children in this study demonstrated high recognition rates of brand logos for products that are targeted to both children and adults ...cigarette advertising no longer appears on television and very young children cannot read. Yet by the age of 6 years, Old Joe is as well recognised as Mickey Mouse.” (1991)

Sponsorship is designed to stop teens quitting
Another study published in The Journal of the American Medical Association, finds: “...The tobacco industry’s sponsorship of sporting events, such as the Camel Superiors motorcycle race, should be seen in relation to its need to discourage teenagers from quitting.

...Our study provides further evidence that tobacco advertising promotes and maintains nicotine addiction among children and adolescents. A total ban of tobacco advertising and promotions, as part of an effort to protect children from the dangers of tobacco, can be based on sound scientific reasoning.” (1991)

Old Joe must go
In response, the journal Advertising Age publishes an editorial saying that “Old Joe must go”.

RJ Reynolds’ James Johnston responds that “advertising is irrelevant to a young person’s decision to smoke”.

So much evidence that sponsorship is advertising that affects kids
A review of “Direct Tobacco Advertising and its Impact on Children” in the Journal of Smoking Related Diseases concludes that “There is now so much evidence that children identify sports sponsorship and brand-stretching as cigarette advertisements, and that advertisements aimed at adults...”
have an even greater effect on under-age children, that statements from the tobacco industry that it does not advertise to children are irrelevant.” (1992)

**I was a scam – selling an image to young boys**

Dave Goerlitz, lead model for RJ Reynolds for seven years, says his marketing brief was to “attract young smokers to replace the older ones who were dying or quitting ...I was part of a scam, selling an image to young boys. My job was to get half a million kids to smoke by 1995” (Sunday Times, 1992)

**Candy cigarettes**


**Reg getting through to kids**

A survey undertaken by the Centre for Social Marketing, University of Strathclyde, and published in the *BMJ* finds that Embassy’s Regal Reg campaign “was getting through to children more effectively than it was to adults and held most appeal for teenagers, particularly 14-15 years old smokers. It clearly contravened the code governing tobacco advertising, which states that advertising must not appeal to children more than it does to adults, and it may have had a direct impact on teenage smoking” (BMJ)

**Reg dropped**

Imperial Tobacco drops the Embassy Regal “Reg” campaign.

**Joe is attractive to kids**

Ex-Philip Morris executive said:

“You don’t have to be a brain surgeon to work out what’s going on. Just look at the ads. Its ludicrous for them to deny that a cartoon character like Joe Camel is attractive to kids” (Readers Digest, 1993)

**Average age start smoking is 14 and heavily advertised brands are the most smoked**

An article published by the US Department of Health and Human Services *Morbidity and Mortality Weekly Report* states “Approximately three million US adolescents are smokers, and they smoke nearly one billion packs of cigarettes each year. The average age at which smokers try their first cigarette is 14 ½ years, and approximately 70% of smokers become regular smokers by age 18 years ...Of the 1031 current smokers aged 12-18 years interviewed in 1993, 70% reported they usually brought their own cigarettes ...Marlboro, Camel and Newport were the most frequently purchased brands for 86 % of the adolescents ... The three most commonly purchased brands among the adolescent smokers were the three most heavily advertised brands in 1993. In 1993, Marlboro, Camel and Newport ranked first, second, and third, respectively, in advertising expenditures”. (1994)

**Smoking is for grown-ups says**

Philip Morris runs adverts aimed at “informing” children that smoking is for adults:

“No one should be allowed to sell cigarettes to minors.

35 Marketing to children
Minors should not smoke. Period. That is why Philip Morris developed a comprehensive programme to prevent sales of cigarettes to minors”.

A study carried out by the University of California finds that tobacco advertising is a stronger factor than peer pressure in encouraging under 18 children to smoke. One of the authors, Dr. Pearce, says: “It is not that children see an ad and start smoking, but seeing the ads and handling the cigarette packets and the promotional gifts lessens their resistance, weakens their resolve, so later on they will be somewhat more willing to accept a cigarette from a peer when it is offered.” (New York Times, 1995)

Rance Crain, Editor-in-Chief, Advertising Age: “Cigarette people maintain peer pressure is the culprit in getting kids to start smoking and advertising has little effect. That’s like saying cosmetic ads have no effect on girls too young to put on lipstick. Don’t brand preferences start forming early on?” (New York Times, 1995)

Terence Sullivan a sales rep in Florida for RJ Reynolds: “We were targeting kids, and I said at the time it was unethical and maybe illegal, but I was told it was just company policy”.

Sullivan remembers someone asking who exactly were the young people were that RJR were targeting, junior high school kids or even younger. The reply was “They got lips? We want them”.

US tobacco company, Liggett, becomes the first company to acknowledge that the tobacco industry markets to ‘youth’, which means “those under 18 years of age, and not just those 18–24 years of age.” Liggett also promises to “scrupulously avoid any and all advertising and marketing that would appeal to children and adolescents” (1997)

The Cancer Research Campaign reveals that boys are twice as likely to become regular smokers if they are motor racing fans: “This is damning evidence that tobacco sponsorship encourages young boys to take up smoking and that sponsorship encourages brand recognition.” (1997)

A study published in the Journal of the American Medical Association provides “the first longitudinal evidence to our knowledge that tobacco promotional activities are causally related to the onset of smoking”. According to the authors it “provides clear evidence that tobacco industry advertising and promotional activities can influence non-susceptible never-smokers to start the process of becoming addicted to cigarettes … our data establish that the influence of
tobacco promotional activities was present before adolescents showed any susceptibility to become smokers... we estimate that 34 per cent of all experimentation in California between 1993 and 1996 can be attributed to tobacco promotional activities”54. (1998)

Andrew J. Schindler, President and CEO of RJ Reynolds testified at the Minnesota trial. Shown RJR documents that had targeted children, he said:

“'I'm embarrassed for the company. We don't track 14-to 17-year-olds today. I think it is wrong, frankly stupid and unnecessary. It certainly doesn't happen today. We shouldn't be discussing 14-year-olds in any way, shape or form”55. (1998)
3.4 References

4. M.E. Johnston, Confidential Note Re Marlboro Market Penetration by Age and Sex, 1969, 23 May (Minnesota Trial Exhibit 2555).
9. R. J Reynolds, No Title, 1973, 12 April (Minnesota Trial Exhibit 24,144).
17. Documents were placed in the record of the Hearings before the House Commerce Committee Sub-Committee in Oversight and Investigations, on "Cigarette Advertising and the HHS (US Department of Health and Human Services) Anti-Smoking Campaign", 1981, 25 June, Serial Number: 97-66.
19. T. Key, Share of Smokers by Age Group, 1976, 12 August (Minnesota Trial Exhibit 12,238).
27. RJ Reynolds, “Young Adult Smokers: Strategies and Opportunities”, 1984, 29 February (Minnesota Trial Exhibit 12,579).


37 *Positive Health*, Lady Killer, 1992, Summer.


4 Advertising

I am always amused by the suggestion that advertising, a function that has been shown to increase consumption of virtually every other product, somehow miraculously fails to work for tobacco products.

Emerson Foote, former Chairman of McCann-Erickson, which handled US$20m of tobacco industry accounts expressing incredulity at the claim that tobacco advertising has no impact on the number of cigarettes smoked and, hence, the harm caused.

4.1 Summary

The first cigarette advertisements unashamedly pushed either reduced risk, health reassurance or even health “benefits” of smoking a specific product. By the forties, these were being criticised for being deceptive – and by the fifties the most successful advert of the modern era, the Marlboro Man, had been born.

In the sixties, manufacturers were using adverts to deny that their products caused cancer. The tobacco industry has repeatedly asserted that banning advertising would be an infringement of “commercial free speech”, but has never answered the criticism that much of its advertising was misleading.

The industry maintains that the only reason for advertising is to make current smokers switch brands, it does not effect overall consumption, nor entice youngsters to start smoking – the undeniable evidence that the industry targets youth is in a separate section.

As cigarettes adverts were banned on television, first in the UK and then in the US, companies looked to sponsorship of arts and sport to circumvent the bans. They have adopted the same line for sponsorship as advertising – it does not affect overall consumption.

The industry also introduced “brand stretching” as ways of circumventing bans on advertising and sponsorship in the early 1980’s and still uses the concept to this day. Earlier this year BAT announced a new Formula One racing team, to be called British American Racing.

In June 1998, the European Union will pass a directive banning tobacco advertising, sponsorship and promotion in a staged phase-out by 2006.

4.2 What is known - key facts on advertising and smoking

- The most comprehensive study of the link between advertising and tobacco consumption was published in 1993 by Chief Economic Adviser to the Department of Health, Dr. Clive Smee. After reviewing 212 ‘time series’ correlating advertising spending and total tobacco consumption, Smee concluded “The balance of evidence thus supports the conclusion that advertising does have a positive effect on consumption.” Smee also examined in detail the effects of tobacco advertising bans in four countries and found that banning advertising resulted in reductions in consumption of 4%-9% in the countries surveyed. He concluded: “In each case the banning of advertising was followed by a fall in smoking on a scale which cannot be reasonably attributed to other factors.”
• A meta-analysis of econometric findings from time series research found a positive association between advertising expenditure and cigarette consumption. The study showed that a 10% increase in advertising expenditure would lead to a 0.6% increase in consumption.

• The US Surgeon General in his 1989 report highlighted the difficulties in designing studies that prove the point definitively, but concluded: “the collective empirical, experiential and logical evidence makes it more likely than not that advertising and promotional activities do stimulate cigarette consumption.” The Surgeon General suggests seven ways in which tobacco advertising operates to encourage smoking:

US Surgeon General - how advertising affects consumption

1. By encouraging children or young adults to experiment with tobacco and thereby slip into regular use
2. By encouraging smokers to increase consumption
3. By reducing smokers’ motivation to quit
4. By encouraging former smokers to resume
5. By discouraging full and open discussion of the hazards of smoking as a result of media dependence on advertising revenues
6. By muting opposition to controls on tobacco as a result of the dependence of organisations receiving sponsorship from tobacco companies
7. By creating through the ubiquity of advertising, sponsorship, etc. an environment in which tobacco use is seen as familiar and acceptable and the warnings about its health are undermined.

4.3 What the industry said and what it knew

4.3.1 1920s-1930s

Physicians and athletes

Lucky Strike advertisements claim that

“20,679 physicians have confirmed the fact that Lucky Strike is less irritating to the throat than other cigarettes” and that “Many prominent athletes smoke Luckies all day long with no harmful effects to wind or physical condition”. (1929)

Nose and throat

“Philip Morris – a cigarette recognised by eminent medical authorities for its advantages to the nose and throat”. (1939)

4.3.2 1940s:

Throat irritation

The latest Philip Morris advert says: “Inhaling need not mean throat-irritation for you”. (1942)
More doctors
RJ Reynolds runs an advert in Life Magazine “More Doctors Smoke Camels Than Any Other Cigarette” (Life Magazine, 1946)

No irritation
The latest Camel advert says: “Not one case of throat irritation due to smoking Camels!” (1949)

4.3.3 1950s:

Deceptive advertising
The US Federal Trade Commission declares RJRs’ adverts to be false and deceptive. For example, claims that smoking Camels

“renews and restores bodily energy” were “clearly false and deceptive, there being in tobacco smoke no constituent which could possible create energy” (1950)

Massive female and young adult market
United States Tobacco Journal concludes:

“A massive potential market still exists among women and young adults, cigarette industry leaders agreed, acknowledging that recruitment of these millions of prospective smokers comprises the major objective for the immediate future and on a long term basis as well” (1950)

Health protection
Lorillard advertises Kent by stating:

“If you think you are among those sensitive smokers – if you worry about the harmful effects of smoking ...No other cigarette approaches such a degree of health protection and taste satisfaction.” (1952)

Enter the Marlboro Cowboy
The Marlboro Cowboy is chosen to advertise Marlboro cigarettes, “because he is close to the earth. He’s an authentic American hero. Probably the only one. And it worked”.

The advertising agent responsible said “We asked ourselves what was the most generally accepted symbol of masculinity in America.”

Deceptive advertising
The US House Government Operations Committee says the industry has “deceived” the public through their advertising of filter-tip cigarettes:

“Unfortunately, the much publicised health protection – that is, less nicotine and tar – was an unpublicised causality. The filter cigarette smoker is, in most cases, getting as much or more nicotine and tar from the filter than he would get from the regular cigarette the advertisers have persuaded him to abandon – for his health’s sake” (1958)
4.3.4 1960s:

**FTC Unfair and Deceptive Advertising**

The US Federal Trade Commission publishes its proposed “Trade Regulation Rule for the Prevention of Unfair or Deceptive Advertising and Labelling of Cigarettes in Relation to the Health Hazards of Smoking.” To allay anxiety on the hazards of smoking, the cigarette manufacturers have made no effort whatever, and have spent nothing, to inform the consuming public of the mounting and now overwhelming evidence that cigarette smoking is habit-forming, hazardous to health, and once begun, most difficult to stop. On the contrary, the cigarette manufacturers and the Tobacco Institute have never acknowledged, and have repeatedly and forcefully denied, that smoking has been shown to be a substantial health hazard.

**TV ads banned**

Cigarette advertising is banned on the television in 1965 in Britain.

**Warnings**

US cigarette labelling law passes Congress, requiring health warnings on packets.

**Smoking is the hallmark of integrity**

A “strictly confidential” report by two scientists Francis Roe, an independent tobacco consultant, and M C Pike, states:

“Advertising aims to do precisely the opposite from that which we suggest parents, doctors and teachers should be doing: [...] Ultimately, it is hardly to anybody’s advantage to ignore the true facts of the relationship between smoking and health, and the government should be pressed to take action at least against this type of advertising.” (~1965)

**Ads should say no scientific evidence of causation**

Brown and Williamson’s Vice President, J.W. Burgard, writes to Tiderock Corporation, the company’s PR company:

“I think we should give immediate attention to the possibility of running ads stating, in effect, that there is no scientific evidence of a causal relationship between smoking and lung cancer.” (Brown and Williamson, 1967)

**Project Truth: Defending Free Speech**

Advertising Agency Post-Keyes-Gardener starts work on Project Truth for Brown and Williamson, an advertising campaign aimed at decision makers, shifting the argument from undercutting the science to one of “rights”. Under the heading “Who’s Next?” the Agency prepares an ad and booklet saying:

“The cigarette industry is being maliciously, systematically lynched. Who is to say it won’t happen elsewhere? It’s more than cigarettes being challenged here. It’s freedom. We will continue to bring to the American people the story of the cigarette and any other legal product based upon truth and taste. We believe that free speech and fair play are both the heritage and
promise in our society of free and responsible enter-prise. (1969)

4.3.5 1970s:

**TV ads banned**

On the 1st January 1971, cigarette advertising is banned from television in the US.

**Advertising effects sales**

A study by the Centre for Industrial Economic and Business Research at the University of Warwick into “Advertising and the Aggregate Demand for Cigarettes: An Empirical Analysis of a UK Market” concludes that: “Our results suggest that advertising has had a statistically significant effect on the expansion of sales ... The ability of advertising to influence decisions not only in the current period but also in future periods causes the ten per cent increase in it [advertising] to lead to an eventual 2.8 per cent increase in sales.” (1972)

**Sponsorship no effect**

Imperial: “Our experience is that sponsorship has no effect on the total size of the cigarette market.” (1976)

**Resist restrictions**

A BAT Board Plan on Smoking and Health stipulates that “we should resist restrictions on media advertising but should recognise at the same time that an intransigent attitude could hasten a total ban.” (BAT, 1976)

**Editors silenced by ad spend**

A survey shows that advertising expenditures also prevent hostile editorial comment. “In magazines that accept cigarette advertising, I was unable to find a single article, in seven years of publication, that could have given readers any clear notion of the nature and extent of the medical and social havoc being wreaked by the cigarette smoking habit ... advertising revenue can indeed silence the editors of American magazines” (1978)

**Beam into a banned country**

BAT executives attend a five day conference on marketing. “As advertising bans tend to fall unevenly on countries within regions, companies should explore the opportunities to co-operate with one another by beaming TV and radio advertising into a banned country.” (BAT, 1979)

**Explore non-tobacco products to communicate house name**

...Opportunities should be explored by all companies so as to find non-tobacco products and other services which can be used to communicate the brand or house name, together with their essential visual identifies. This is likely to be a long-term and costly operation, but the principle is nevertheless to ensure that cigarette lines can be effectively publicised when all direct forms of communication are denied.” (BAT, 1979)
4.3.6 1980s:

**Activities**

Imperial’s “Player’s Filter Creative Guidelines” for the year stipulate that:

“the activity shown should be one which is practised by young people sixteen to twenty years old, or one that those people can reasonably aspire to in the near future.” (Imperial Tobacco, 1981)

**Portrait award**

Chairman of Imperial Tobacco, Andrew Reid, explains the reasons behind his company’s sponsorship of the “Imperial Tobacco Portrait Award”:

“For a number of years we have felt strongly committed to supporting the arts because the cultural life of this country has greatly influenced the way in which we, as a nation, have developed. It also gives us in the tobacco industry an opportunity to make contacts outside the industry – an activity which greatly enhances the everyday running of our business.” (1981)

**Targeting the black community**

A marketing plan for RJR outlines that:

“The majority of blacks ... do not respond well to sophisticated or subtle humour in advertising. They related much more to overt, clear-cut story lines”.

**Kim sports wear**

The Kim Top line range of sportswear, is launched just before Wimbledon. The US tennis star, Martina Navaratilova wins Wimbledon in Kim colours.

**Smoky Rambo**

The actor Sylvester Stallone agrees to smoke Brown and Williamson cigarettes in five upcoming movies, including Rhinestone Cowboy, Godfather III, Rambo, 50/50 and Rocky IV, for $500,000. Brown and Williamson later terminates the contract due to disappointing results. (1983)

**Cinema pull-out**

Brown and Williamson discuss pulling out of the practice of placing cigarettes in movies because, in part,

“the use of any cigarette by a movie hero advertises all cigarettes. So let the competitors help advertise our brands in this way.” (1983)

**Rationale for sports sponsorship**

Wayne Robertson, RJR:

“We’re in the cigarette business. We’re not in the sports business. We use sports as an avenue for advertising our products ... We can go into an area where we’re marketing an event, measure sales during the event and measure sales after the event, and see an increase in sales.”

**No influence unless you are**

Clive Turner, Tobacco Advisory Council, states the not-so-obvious:

“Certainly no tobacco advertising is concerned with
a smoker encouraging non-smokers to start or existing smokers to smoke more and it seems blindingly obvious that, unless you are a smoker, tobacco advertising or sponsorship has absolutely no influence whatsoever in persuading or motivating a purchase" (1986)

Rise in consumption due to advertising

Leading industry journal, *Tobacco International*, runs an article on cigarette consumption in Greece which states:

“the rise in cigarette consumption is basically due to advertising.” (1987)

An oversight

Philip Morris notices the hostage to fortune and responds, saying that

“the tobacco industry’s position in advertising is that it may influence the choice of one brand over another but has no effect on consumption …I am sure the statement in question was merely an oversight, but in the current climate of attempts to ban tobacco advertising in nearly all our major markets, it is certainly not helpful if critics can quote a tobacco industry trade journal to support their claims.” (1987)

Sales increase by 84 %

Lotus team manager, Peter Warr, talks about the effect of RJR’s investment in the Lotus Formula One team:

“The Brazilian market was a small one for Camel but since the Brazilian Grand Prix its sales have increased by 84 per cent” (1987)

Shallow insult

David Abbott, Chairman of ad agency Abbott Mead Vickers, says:

“I think arguments like shifting brands are just insulting in their shallowness. There is no other category where you can spend between £70 million and £100 million and not have an effect in protecting or increasing the market. I think advertising has certainly slowed down the rate of decline. It has certainly helped to introduce new smokers, be they women or be they in the Third World. The other thing about cigarette advertising, I do think it makes it more difficult for health education in that it makes the Government’s attitude more ambivalent.” (1988)

Cigarette industry talks complete nonsense

Advertising Executive Emerson Foote, former Chairman of the Board of McCann-Erickson, which handled $20 million in tobacco accounts:

“The cigarette industry has been artfully maintaining that cigarette advertising has nothing to do with total sales. This is complete and utter nonsense. The industry knows it is nonsense. I am always amused by the suggestion that advertising, a function that has been shown to increase consumption of virtually every other product, somehow
miraculously fails to work for tobacco products”

**How do you sell death?**

Fritz Gahagan, once a marketing consultant for five tobacco companies offers insight into his business:

“The problem is how do you sell death? How do you sell a poison that kills 350,000 people per year, a 1,000 people a day? You do it with the great open spaces ... the mountains, the open places, the lakes coming up to the shore. They do it with healthy young people. They do it with athletes. How could a whiff of a cigarette be of any harm in a situation like that? It couldn’t be — there’s too much fresh air, too much health — too much absolute exuding of youth and vitality — that’s the way they do it.”

**Joe Camel**

RJR launches a $75 million a year promotional campaign, the cartoon “Joe Camel”, said to “appeal younger, male smokers, who had been deserting Camel in droves”.

**Cigarettes are a Licence to Kill**

At the opening hearing of the US Subcommittee of the Committee on Energy and Commerce of the House of Representatives, it is disclosed that the cigarette companies spread “their message in ways that do not appear even to be advertisements such as paying to have cigarettes in the movies ...for example, Philip Morris paid $42,000 in 1979 to have Marlboro cigarettes appear in the movie ‘Superman II’ and paid $350,000 last year to have the Lark cigarette appear in the new James Bond movie ‘Licence to Kill’ ...Philip Morris told us in 1987 and 1988 it supplied free cigarettes and other props for 56 different films.”

**Express feminine independence**

December: An American advertising account executive for a leading feminine cigarette brand states

“We try to tap the emerging independence and self-fulfilment of women, to make smoking a badge to express that.”

**6000 logos**

A study published in the *New England Journal of Medicine* finds that during the 1989 Marlboro Grand Prix in the US on 16 July 1989 which was broadcast for 94 minutes, the Marlboro logo was seen or mentioned 5933 times, on 49 per cent of the air-time.

**4.3.7 1990s:**

**Turned round free fall**

Due to the Joe Camel campaign, Camel’s share of sales among 18- to 24 year olds has increased from 4.4% to 7.9%. One analyst says

“Before the [Joe Camel] campaign, the brand was in free fall. The turnaround has been miraculous”.
Tobacco companies spend $8 billion a year on advertising, promotions and sponsorships in America and Europe. (1992)

Clive Turner, Tobacco Manufacturers Association:

“Advertising is all about which company gets the biggest market share. It’s nothing to do with persuading young people to smoke.” (1997)

Tessa Jowell, UK Minister of State for Public Health, speaking after the Queen’s speech announces that the government intends to ban tobacco advertising:

“The Government is fully committed to banning tobacco advertising. This is an essential first step in building an effective strategy to deal with smoking.” (1997)

Gareth Davies, Chief Executive of Imperial Tobacco, says of Labour’s proposed advertising ban:

“Obviously I am very much against anything that tries to reduce consumption of a legal product that is used by adults … an advertising ban will do nothing to reduce consumption.” (1997)

A spokesperson for Gallahers responds to the Government’s announcement on tobacco advertising:

“There are plenty of ways of marketing products without advertising. We have strong brands that we have built up over the years and they will continue to be promoted.” (1997)

Clive Turner, Executive Director of the Tobacco Manufacturers’ Association:

“Can you really imagine that a non-smoker watching a piece of sponsored sport is then going to rush out and start smoking? It’s ludicrous to make such a suggestion. The Government’s prime objective is to reduce consumption. If a ban on advertising comes, that objective will not be reached. It’s as simple as that.” (1997)

RJ Reynolds drops the cartoon, Joe Camel, from its advertising. (1997)

The Committee for Monitoring Agreements on Tobacco Advertising and Sponsorship finds 30 direct breaches of the industry’s voluntary advertising code. (1997)

It is revealed that BAT is thinking of circumventing the EU ban of cigarette advertising and sponsorship by legally promoting their cigarette brand names in new ranges of coffee products. The scheme is already being tested in Kuala Lumpur. Says the shops manager in the Malaysian capital:

“Of course this is all about keeping the Benson and Hedges brand name to the front. We advertise the Benson and Hedges Bistro on television and in the newspapers. The idea is to be smoker-friendly. Smokers associate a coffee
with a cigarette. The are both drugs of a type.”

BAT confirms it is also looking at selling Lucky Strike clothing, John Player Special Whiskey and Kent travel (1998)

EU votes for a ban

The European Parliament votes to ban all tobacco advertising, sponsorship and promotion in stages by 2006 and thereby ensures the advertising directive will pass.
The tobacco industry announces that it will mount a legal challenge to the directive. (1998)
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5 Cigarette design: additives, low-tar and 'safe' cigarettes

Should we market cigarettes intended to re-assure the smoker that they are safer without assuring ourselves that indeed they are so or are not less safe? ... Are smokers entitled to expect that cigarettes shown as lower delivery in league tables will in fact deliver less to their lungs than cigarettes shown higher?"

BAT in 1977 expressing worries about marketing low-tar cigarettes, which the industry knew offered false health reassurance without real health benefits.

5.1 Summary

By the late fifties, through the sixties and seventies, the industry scientists were grappling with trying to find a “safe cigarette”. The challenge was to reduce tar levels for health reasons, whilst maintaining similar or raised nicotine levels to keep customers hooked. Scientists struggled with the problem that, although they should reduce nicotine on health grounds, too little nicotine would help people wean themselves off cigarettes. By the late seventies, scientists were concerned that nicotine would have to be reduced so low that most smokers would stop smoking tobacco… but that threat never materialised.

By the mid-sixties, concern over the health effects of tobacco was so great that the tobacco companies begin looking at alternative nicotine delivery systems. Industry consultants and scientists warned that because of carcinogens produced by the burning of tobacco, it would never be possible to find a completely “safe” cigarette. By the seventies, the scientists believed that they could still partially solve the problem and that a “safe” cigarette was still the key to the industry’s future.

Also beginning in the mid-sixties, Philip Morris begins using ammonia in its cigarette production. Ammonia transforms nicotine from a bound state to a free one, where it can be more rapidly absorbed by the smoker. Ammonia technology is now widely used through the industry.

By the late sixties companies were consciously defining “health orientated” cigarettes which had reduced biological activity compared to those termed “health reassurance”, which were marketed to reassure the customer about their health claims but actually offered no significant health benefit.

By the early seventies companies were discussing ‘compensation’, whereby a smoker adjusts their smoking pattern in order to get a specific level of nicotine – therefore a smoker using a low tar product “compensates” for the low nicotine delivery by smoking more, an effect not replicated in the official machine measurements. By the end of the decade, industry researchers were even postulating that “the effect of switching to a low tar cigarette may be to increase, not decrease, the risks of smoking”.

By the mid-seventies, scientists at the US company Liggett had developed a cigarette with a significantly reduced health hazard – however the research was taken over by the lawyers and the product was never marketed.
By the early eighties, other company researchers were told they could never market a “safe cigarette” because that would imply that other cigarettes were dangerous.

In the eighties and early nineties, Brown and Williamson even started examining growing genetically engineered tobacco designed to double the nicotine in the plant.

In the nineties tobacco companies have repeatedly denied manipulating the levels of nicotine in cigarettes.

5.2 What is known - key facts on low tar and safe cigarettes

• It is impossible to remove or avoid the harmful substances that are created by the burning of dried organic material such as tobacco. The ‘safe’ cigarette - at least one that is smoked - is impossible.

• Compared to regular brands on the market today, low tar cigarettes do not deliver significant health benefits - despite much lower official tar yields. Smoking behaviour is determined largely by the smoker’s need to consume nicotine and maintain a satisfactory blood/nicotine level. With low tar cigarettes, smokers can adopt a range of ‘tricks’ to ensure they take in the nicotine they need, even if the cigarette is supposed to be low in tar and nicotine when smoked by a machine. Since tar intake is closely linked to nicotine intake, the tar exposure also increases. This effect is known as ‘compensation’ and has been extensively documented in the scientific literature and well understood by the tobacco industry for over twenty years.

• The addition of alkali such as ammonia increases the availability of ‘free nicotine’ and increases the nicotine ‘hit’ (and hence addictiveness) for a given nicotine content.

• There are around 600 additives that are permitted to be added to cigarettes in the UK. These are mostly approved as food additives. Though they are likely to break down to different products when burnt, there is no separate testing under conditions of combustion and inhalation.

5.3 What the tobacco industry said and what it knew

5.3.1 Mid-Late 1950s: scientists recognise the problem

In the beginning the scientists and the lawyers were optimistic

A scientist at Liggett remarks:

“if we can eliminate or reduce the carcinogenic agent in smoke we will have made real progress.” (Liggett, 1954)

A Hill and Knowlton memo quotes a tobacco company lawyer as saying

“Boy! Wouldn’t it be wonderful if our company was first to produce a cancer-free cigarette. What we could do to the competition.”
Whoever is first to reduce tar will take the market

A Philip Morris scientist acknowledges the health problem:

“Evidence is building up that heavy smoking contributes to lung cancer.”

He then recommends an…

“all-synthetic aerosol to replace tobacco smoke, if necessary … I know this sounds like a wild programme, but I’ll bet that the first company to produce a cigarette claiming a substantial reduction in tars and nicotine … will take the market.” (Philip Morris, 1958)

But there is a big problem if nicotine is reduced

Even at this early stage, the underlying imperative of nicotine is understood and factored into product design thinking. A BAT scientist writes:

“Reducing the nicotine per cigarette might end in destroying the nicotine habit in a large number of consumers and prevent it ever being acquired by new smokers.” (BAT, 1959)

5.3.2 Early-Mid 1960s: the search for the safe cigarette

Scientists discuss reducing carcinogens in smoke

Senior Philip Morris scientists look into the possibility of a

“‘Medically Acceptable Cigarette’, which will take seven to ten years because it will require a major research effort, because carcinogens are found in practically every class of compounds in smoke.” (Philip Morris, 1961)

And manipulating levels of nicotine

It is clear that the companies regarded the product as a drug delivery device, which could deliver nicotine according to a design. The nicotine level of Brown and Williamson’s cigarettes

“…was not obtained by accident …we can regulate, fairly precisely, the nicotine and sugar levels to almost any desired level management might require.” (BAT, 1963)

PR strategy and safe cigarette strategy in conflict

The PR problem with safer cigarettes is that they are an admission that what came before was more dangerous – something that was denied:

“When the health question was first raised we had to start by denying it at the PR level. But by continuing that policy we had got ourselves into a corner and left no room to manoeuvre. In other words if we did get a breakthrough and were able to improve our product we should have to about-face, and this was practically impossible at the PR level.” (BAT, 1962)
Begin looking at other products for nicotine delivery

BAT begins the search for a new form of nicotine delivery - Project Ariel - which uses a water-based nicotine aerosol:

“The main objective of Ariel is to achieve the physiological response of normal cigarettes, and it was suggested that the line of attack [should be] a close comparison of the chemical state of nicotine in the tobacco extract and the smoke.”\(^{(BAT, 1964)}\)

5.3.3 Mid to late 1960s:

Maximum nicotine minimum tar

Head of R&D at Brown and Williamson tours UK research laboratories:

“Their approach seems to be to find ways of obtaining maximum nicotine for minimum tar.”\(^{(BAT, 1965)}\)

Ammonia used to increase nicotine ‘hit’

By increasing the alkalinity, ammonia makes more of the nicotine ‘free’ and therefore increases the effect of a given quantity of nicotine in the cigarette. According to RJ Reynolds, Philip Morris begins using ammoniated sheets this year and concludes:

“increased use of the sheet periodically from 1965 to 1974. This time period corresponds to the dramatic sales increase Philip Morris made from 1965 to 1974”\(^3\). (RJR, undated)

BAT notes the importance of pH

A report by BAT’s Research Department found that

“nicotine retention appears to be dependent principally on smoke pH and nicotine content”\(^4\).

We have a problem – there will never be a safe smoke

Consultants to BAT conclude that a completely safe cigarette is unlikely:

“Because known carcinogens are produced from such a wide variety of organic materials during the process of pyrolysis, it is most unlikely that a completely safe form of tobacco smoking can be evolved.”\(^5\). (F Roe, M Pike, 1965 or 1966)

‘Low tar’ cigarettes may give low readings on machine, but high doses to smokers

The Canadian Tobacco Industry accepts low tar readings on machines:

“human smokers differ greatly in the frequency and intensity of their puffing and the amount of each cigarette they smoke. Thus there may be little relation between the figures reported from the machine and the actual exposure of any given smoker with any given cigarette”\(^6\). (1969)

Health reassurance versus health

D R Green from BAT expounds what will become a key distinction - cigarettes that appear less harmful versus cigarettes that are less harmful:

“Although there may, on occasions, be conflict between
benefits saleability and minimal biological activity, two types of product should clearly be distinguished, viz: A health-image (health reassurance) cigarette. A health-orientated (minimal biological activity) cigarette, to be kept on the market for those customers choosing it. "(S. Green 1968)

5.3.4 Early – Mid 1970s:

Safe smoking is still the future "The ‘safer’ cigarette is in my view the key to the industry’s future." \( ^{18} \) (BAT 1971)

Make nicotine more effective Liggett researches adjusting pH levels with the "eventual goal of lowering the total amount of nicotine while increasing the effect of the nicotine." \( ^{19} \) (Liggett, 1972)

We can reduce tar and ‘reassure’ customers cigarettes are healthy "Manufacturers are concentrating on the low TPM [total particulate matter] tar and Nicotine segment in order to create brands ...which aim, in one way or another, to reassure the consumer that these brands are relatively more “healthy” than orthodox blended cigarettes." \( ^{20} \) (BAT 1971)

Let the Government make the health claim A BAT document on “Smoking and Health”, says that “the industry should however never put itself in the position that by offering to publish tar/nicotine figures it is implying that some cigarettes are ‘safer’. If there is to be any suggestion of this, it must come from the government.” \( ^{21} \) (BAT, 1970)

‘Marketable’ cigarettes versus ‘safer’ cigarettes “This is what our management really expects R&D to do. Things like marketable low tar and nicotine cigarettes ...The question as to whether such cigarettes are really safer does not matter ... even our Health people wonder whether low tar and nicotine cigarettes are a good idea. I think the researches going on into the smoker’s response to such modified cigarettes comprise genuine inquiry in the smoking and health field, examining what I call the ‘involuntary moderation’ concept of a safer cigarette.” \( ^{22} \) (BAT 1971)

5.3.5 Mid to late 1970s:

‘Light’ does not actually mean "Marlboro Lights cigarettes were not smoked like regular Marlboros. In effect, the Marlboro 85 smokers in this
less study did not achieve any reduction in smoke intake by smoking a cigarette (Marlboro Lights).” (Philip Morris 1975)

And lower nicotine levels might wean smokers off the habit

“There is a danger in the current trend of lower and lower cigarette deliveries – i.e. the smoker will be weaned away from the habit. If the nicotine delivery is reduced below a threshold ‘satisfactory’ level, then surely smokers will question more readily why they are indulging in an expensive habit.” (BAT 1977)

So we will just manipulate the pH

“As the pH increases, the nicotine changes its chemical form so that it is more rapidly absorbed by the body and more quickly gives a ‘kick’ to the smoker.” (J McKenzie 1976)

And just carry on reassuring the customer

A marketing paper for BAT states:

“All work in this area should be directed towards providing consumer reassurance about cigarettes and the smoking habit. This can be provided in different ways, e.g. by claiming low deliveries, by the perception of low deliveries and by the perception of ‘mildness’.” (P Short 1977)

However filters are just a con

Brown and Williamson’s lawyer:

“In most cases, however, the smoker of a filter cigarette was getting as much or more nicotine and tar as he would have gotten from a regular cigarette. He had abandoned the regular cigarette, however, on the grounds of reduced risk to health.” (E Pepples 1976)

And we are conning people about low tar

One tobacco scientist concludes

“the effect of switching to low tar cigarette may be to increase, not decrease, the risks of smoking.” (P Lee for BAT, 1979)

And is it really ethical anyway

A scientist at Liggett asks:

“Is it morally permissible to develop a safe method for administering a habit-forming drug when, in so doing, the number of addicts will increase?” (Liggett, 1978)

5.3.6 Early to Mid 1980s:

Independent A study in the American Journal of Public Health finds that if smokers block the holes of
low-tar cigarettes, this could increase toxic by-products of smoke by up to 300 per cent. This illustrates smokers’ pronounced control over nicotine administration and their ability to achieve high doses from ‘low’ cigarettes. (*American Journal of Public Health*, 1980)

A scientists employed by Philip Morris on the safer cigarette programme, recalls that:

“They lawyers said we couldn’t say it – we couldn’t make a ‘safe cigarette’ because that implies that the cigarettes the manufacturers make aren’t safe, and that would make the company liable so the programme was shelved.” (Cited *Dispatches*, Channel 4 1996)

The Surgeon General concludes that there is

“no such thing as a safe cigarette.” (J Richmond 1981)

“B&W will undertake activities designed to generate statements by public health opinion leaders which will indicate tolerance for smoking and improve the consumer’s perception of ultra low ‘tar’ cigarettes (5 mg or less). The first step will be the identification of attractive scientists not previously involved in the low delivery controversy who would produce studies re-emphasising the lower delivery, less risk concept.” (Brown and Williamson 1982)

“Compensatory smoking – This is also a particularly tricky subject. On the one hand it is commercially sensitive. On the other, it must be in the interest of the industry to get data and speak out against those who claim that the low delivery programme is misleading in that smokers compensate for the low deliveries.” (BAT, 1983)

“we can disturb the status quo either directly or indirectly … addition of nicotine/salts/derivatives to the blend, increase/decrease nicotine availability through pH manipulation.” (BAT 1984)

Patrick Sheehy, the head of BAT, objects to a proposal for a safe cigarette:

“I cannot support your contention that we should give a higher priority to projects aimed at developing a ‘safe’
cigarette (as perceived by those who claim our current product is ‘unsafe’) either by eliminating, or at least reducing to an acceptable levels, all components claimed by our critics to be carcinogenic.”

[...] “In attempting to develop a ‘safe’ cigarette you are, by implication in danger of being interpreted as accepting that the current product is ‘unsafe’ and this is not a position that I think we should take.” (BAT, 1986)

**Stop quitters quitting**

“Quitters may be discouraged from quitting, or at least kept in the market longer, by either of two product opportunities noted before. A less irritating cigarette is one route (Indeed, the practice of switching to lower tar cigarettes and sometimes menthol in the quitting process tacitly recognises this). The safe cigarette would have wide appeal, limited mainly by the social pressures to quit.” (Creative Research Group, 1986)

**5.3.8 1990s:**

**Low tar advertising is misleading**

“It has been argued for several years that low tar and ultra-low tar cigarettes are not really what they are claimed to be … the argument can be constructed that ULT advertising is misleading to the smoker . Smokers of low yield cigarette adjust their smoking manoeuvre to obtain some desired level of nicotine and therefore concomitantly increase their tar intake.” (RJR, c. 1990-91)

**Carry on controlling nicotine**

RJ Reynold’s stated goal is to “develop a viable process for the total control of nicotine in product.” The ‘Basis’ behind this is “It is in the best long term interest for RJR to be able to control and effectively utilise every pound of nicotine we purchase.” (RJR 1991)

**FDA: Evidence companies control nicotine**

US FDA Commissioner, David Kessler says that there is “mounting evidence” that tobacco companies control levels of nicotine. (P Pringle 1998)

**BAT claims it does not**

The fact that the tobacco companies are manipulating nicotine brings the greatest threat of all - that regulatory agencies such as the FDA will start to treat the product like a drug
and regulate every aspect of its production and marketing.

BAT denies doctoring cigarettes, stating that

“**There is no way we add anything to enhance the nicotine.**”

(BAT 1995)

The CEO of RJ Reynolds:

“We do not increase the level of nicotine in any of our products to ‘addict’ smokers.”

(RJR, 1998)

**BAT admits its “Light” products may not be any safer**  
The tactic adopted to market ‘low-tar’ cigarettes was and remains to avoid explicit health claims, and to rely on the implicit health claims created by the mandatory machine-measured tar and nicotine yields - even though these are thoroughly misleading as measurements of health impact.

“We have been taking note of public health concerns by developing “lighter” products, but “we cannot promote these products as ‘safer’ cigarettes because we simply don’t have sufficient understanding of all the chemical processes to do so.”

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6 Second-hand smoke

All allegations that second-hand smoke is injurious to the health of non-smokers, in respect the social cost of smoking as well as unreasonable demands for no smoking areas in public places, should be countered strongly.

BAT recognising the threat posed by second-hand smoke, in 1982.

Environmental tobacco smoke (ETS) is the tobacco industry’s term for second-hand smoke.

6.1 Summary

At the beginning of the seventies, people within the tobacco industry recognised second-hand smoke as an increasing problem.

By the late seventies, the industry started forming smokers’ rights organisations, and setting up front groups to defeat proposed restrictions on smoking at work or in public places. The companies have maintained that they are defending the freedom of choice, but these organisations have really operated as tobacco industry proxies. Where there is a division between the interests of smokers and the interests of tobacco companies (cessation, nicotine addiction, warnings etc) these groups have favoured their paymasters.

By the late seventies, industry research showed that there were harmful constituents in smoke – whilst denying there was any problem in private, they tried to reduce the quantity and composition of side-stream smoke (the smoke given off at the end of a burning cigarette). Some low side-stream products entered the market in the late nineties.

Just as the companies have done with the health impact of smoking, the companies have set out to misled the public about the dangers of second-hand smoke, and to create a controversy about the health implications of second-hand smoke.

By the beginning of the eighties there was increasing epidemiological evidence that second-hand smoke posed a serious threat to the health of non-smokers, and increased the risk of lung cancer.

By the late eighties, Philip Morris and lawyers acting on its behalf set up a covert programme in Europe to recruit scientists to counter the negative publicity surrounding second-hand smoke.

In the early nineties, measures included setting up supposed independent foundations looking at Indoor Air Quality, and the publications of articles, books and research designed to confuse the issue of second-hand smoke and create a false controversy over the dangers of sick-building syndrome.

6.2 What is known - key facts about second-hand smoke

- Second-hand smoke is a cause of lung cancer and, in those with long term exposure, the increased risk is in the order of 20-30%. This means that several hundred lung cancer deaths per year in the UK can be attributed to second-hand smoke.
• Non-smokers living in a household with a smoker have an overall 23% increased risk of heart disease.

• Parental smoking is responsible for at least 17,000 admissions to hospital each year of children under the age of five.

• Mothers who smoke double the risk of sudden infant death syndrome (cot death).

• Second-hand smoke has been found to be a risk factor for asthma, middle ear infection, bronchitis and pneumonia in children. Among adults, in addition to lung cancer and heart disease, exposure to second-hand smoke has been associated with nasal cancer, exacerbation of cystic fibrosis, decreased lung function and cervical cancer.

6.3 What the tobacco industry said and what it knew

6.3.1 Early to mid 1970s:

**Anti-smoking attack**

A Brown and Williamson lawyer senses the threat posed by second-hand smoke:

“"The anti-smoking lobby is using the issue of the alleged health effect of smoking on the non-smoker to generate media publicity. This trend has been growing since 1970… There is no medical evidence concerning the health effect of passive smoking. The real purpose is symbolic to make smoking socially unacceptable and by limiting the public areas where it is permitted."

(Brown and Williamson, 1973)

6.3.2 Mid-late 1970s:

**Respond with a smokers’ rights campaign**

“RJ Reynolds is planning to strike back at the increasing number of anti-smoking crusades in the nation by launching its own smokers’ rights campaign."

The Chairman of the Board of RJR says:

“"The publication will deal with the so-called public smoking issue, the latest tactic by anti-smoking groups in their effort to do irreparable damage to the tobacco industry."

(Tobacco Reporter 1976)

**Research points to health problems in smoke**

Scientists at BAT replicate an experiment carried out by Carl Becker from Cornell University showing that glycoproteins [which can induce allergic reactions] were present in tobacco smoke. A scientist

“explained that … Beaker’s findings in relation to the presence of glycoproteins in mainstream and side-stream smoke had been confirmed."

(J Esdterle 1977)

Further BAT research highlights that: “… there is concern over the level
of nitrosamines in foodstuffs. This explains in part the
tenability to the presence of nitrosamines in tobacco
of, particularly, the levels in side-stream smoke.
The latter is a potential threat to the currently held view
by many authorities that passive smoking does not
constitute a direct hazard.” (S Green 1978)

But publicly we
maintain its just
an annoyance

BAT: “In our view this [second-hand smoke] appears to be
an area of exaggerated concern ..the question is not really
one of a health hazard but perhaps more of an annoyance.”
(BAT 1977)

Front
organisations
established...

Brown and Williamson and the other leading US tobacco companies defeat Proposition
5, the California Clean Indoor Air Act of 1978, by forming a front organisation called
“Californians for Common Sense.” (E Pepples 1978,1979)

it could
threaten our
viability – need
medical
evidence to
refute claims

The Roper Organisation conducts a study for the US Tobacco Institute:
"what the smoker does to himself may be his business, but
what the smoker does to the non-smoker is quite a different
matter … This we see as the most dangerous development yet
to the viability of the tobacco industry that has yet
occurred … The strategic and long run antidote to the
passive smoking issue is, as we see it, developing and
widely publicising clear-cut, credible, medical evidence
that passive smoking is not harmful to the non-smoker’s
health." (1978)

6.3.3 Early-Mid 1980s:

Independent
evidence says
second-hand
smoke a
serious risk

An article is published in Science, concludes that;
"ETS presents a serious risk to the health of non-smokers.
Since this risk is involuntary, it deserves as much
attention as outdoor air pollution." (J Repace, A Lowrey 1980)

The BMJ publishes a major epidemiological study by Takeshi Hirayama that concludes
non-smoking women married to smokers were more likely to develop lung cancer than
non-smoking women married to non-smokers.

Privately B&W
accepts the
evidence

Brown and Williamson’s corporate counsel, writes about the Hirayama study, saying that
both German and British scientists paid by the tobacco industry had reviewed the work
and
"they believe Hirayama is a good scientist and that his
non-smoking wives publication is correct.” (J Wells 1981)

But we need to counter allegations strongly

“All allegations that passive smoking is injurious to the health of non-smokers, in respect the social cost of smoking as well as unreasonable demands for no smoking areas in public places, should be countered strongly.” (BAT, 1982)

Need to reduce side-stream and undertake research

“BAT’s strategy is to develop cigarettes with reduced side-stream emissions and/or reduced smell and irritation. Conduct research to anticipate and refute claims about the health effects of passive smoking.” (W Irvin 1983)

6.3.4 Mid – late 1980s:

Independent evidence accumulates:

The US Surgeon General, Dr. Everett Koop, publishes a report stating that “it is certain that a substantial proportion of the lung cancers in non-smokers are due to ETS exposure” (1986)

In the UK, a Government advisory committee maintains that second-hand smoke increases the non-smokers’ risk of developing lung cancer by 10-30 per cent. (1988)

BAT mounts defensive scientific challenge

“Another important issue affecting acceptability [of smoking] is passive smoking. Our current initiatives are to challenge the whole area of ‘low risk epidemiology’. There are reputable external experts who believe that this is a highly imprecise science and we are finding means for them to express their concerns.” (BAT, 1986)

And suggests going on the pro-smoking offensive

BAT discusses: “a more direct public relations/political campaign might need to be mounted, primarily based on protecting the rights of smokers.” (BAT 1989)

The covert Whitecoat Programme

US lawyers working for Philip Morris and the US Tobacco Institute, begin setting up a “European Consultancy Programme” to counter proposed restriction on second-hand smoke. The underlying theme is to covertly recruit scientists or “Whitecoats” to work on Philip Morris’ behalf, who will defend smoking and try and convince people that second-hand smoke is harmless. Code-named “Whitecoat” its “end goals” are:

Resist and roll back smoking restrictions

Restore smoker confidence.

The ‘pre-requisites’ are

Reverse scientific and popular misconception that ETS is
harmful

Restore social acceptability of smoking.” (J Rupp 1988)

**Sick-building smoke-screen**

BAT strategy review says: “work being funded by the Tobacco industry in the USA on Environmental Tobacco Smoke (ETS) was being funded jointly by Philip Morris and RJ Reynolds rather than by the Tobacco Institute. BROWN AND WILLIAMSON had put money into privately funded projects at the University of Kentucky and was active in promoting work on ‘sick-buildings’ to research the degree to which radon and air conditioning systems were important contributors to environmental health hazards.” (BAT 1988)

**And the denials continue**

“No conclusive proof exists to support the claim that exposure to environmental tobacco smoke in public places is a health risk to non-smokers.” (The Tobacco Institute 1989)

**6.3.5 1990s:**

**Major covert consultancy operation**

An internal industry memo summarises the status of the “European Consultancy Programme”:

“Our consultants have created the world’s only learned scientific society [Indoor Air International] addressing questions of indoor air quality ...Our EC consultants have formed a consulting group called ARIA (Associates for Research in Indoor Air) ... One of our consultants is an editor of this very influential British medical journal, and is continuing to publish numerous reviews, editorials and comments on ETS and other issues ...One consultant is, for example, the advisor to a particularly relevant committee of the House of Commons.” (Covington and Burling 1990)

**Independent evidence accumulates**

The US EPA concludes that second-hand smoke is a Class A carcinogen, estimating that second-hand smoke is responsible for 3000 lung cancers annually among non-smokers, whilst contributing up to 300,000 cases annually of respiratory illness in infants and children younger than 18 months. (Tobacco Control 1993)

The Report of the Scientific Committee on Tobacco and Health (SCOTH) is published:

“Passive smoking is a cause of lung cancer and childhood respiratory disease. There is also evidence that passive smoking is a cause of ischaemic heart disease and cot death, middle ear disease and asthmatic attacks in children.” (1998)
An editorial in *Tobacco International* states:

“Communism is about the absence of choice, which is why it failed; smoking is about the freedom of choice, which is why it survives.” (Tobacco International, 1998)

Philip Morris runs a series of adverts in Europe stating that the dangers from second-hand smoke are less than those from eating cookies or drinking milk. The Advertising Standards Authority rules that the Philip Morris campaign

“gave the misleading impression that passive smoking had been proved to pose less danger to the health of UK consumers than the five activities cited by the advert.”

(R Oram 1998)

The tobacco industry is accused of “foul play” for misrepresenting the findings of an unpublished WHO report. Chris Proctor, Head of Research at BAT, claims that the report:

“confirms what we and other scientists have long believed that while smoking in public may be annoying to some non-smokers, the science does not show that being around a smoker is a lung-cancer risk.”

(*the Guardian*, 1998)

WHO issues a press release to deny that it is suppressing research and that

“passive smoking causes lung cancer.”

(WHO 1998)

John Carlisle, of the Tobacco Manufacturers Association:

“There is no statistical evidence linking passive smoking to lung cancer.”

(*The Independent*, 1998)
6.4 References

3 Royal College of Physicians, Smoking and the Young, 1992.
16 BAT Board Guidelines, Public Affairs, 1982, April (Minnesota Trial Exhibit 13.866).
22 J. P. Rupp, Letter to B. Brooks, Covington and Burling, 1988, 25 January; Proposal for the Organisation of the Whitecoat Project, No Date (Bates No: 2501474296)
7 “Emerging markets”

“They have to find a way to feed the monsters they’ve built. Just about the only way will be to increase sales to the developing world.”

Ex tobacco company employee, R Morelli, explaining the importance of the developing countries to the industry.

7.1 Summary

With smoking rates declining or peaking in the mature markets of the west, the transnational cigarette companies have looked to expand their international operations, especially in Eastern Europe and Asia, but also Latin America and Africa.

They have exploited the recent opening up of countries that were once closed for trade because of political reasons, such as Central and Eastern Europe, and the former Soviet Union.

The American companies, with the help of their Government, have used economic muscle – and the threat of sanctions - to open up countries in Asia, such as Taiwan and Japan.

They have set out to exploit low smoking rates by women in many areas.

The companies have been trying to gain entry into China: with some 300 million smokers, China remains, for the tobacco companies, the prize. Industry executives talk about thinking about China as the limits of space or of defying the imagination. There is evidence of companies being involved in smuggling cigarettes into China.

The industry has been accused of employing double standards in advertising - especially in targeting youth, sex, the glamour of western lifestyles – in the difference of tar/ nicotine levels between developed and developing countries.

7.2 What is known - key facts about the move into developing countries

If there are no dramatic changes in cessation rates, no new interventions, and if children start smoking at expected rates, then the current 1.1 billion smokers in the world are predicted to rise to 1.64 billion by 2025. The death toll on current trends, shown below, reflects the lag between increasing smoking levels and onset of disease - effectively developing countries started later.

<table>
<thead>
<tr>
<th></th>
<th>Present</th>
<th>By 2030</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Developed countries</strong></td>
<td>2 million</td>
<td>3 million</td>
</tr>
<tr>
<td><strong>Developing countries</strong></td>
<td>1 million</td>
<td>7 million</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td>3 million</td>
<td>10 million</td>
</tr>
</tbody>
</table>
In developing countries, women will be a particular focus as smoking rates are currently much lower among women than among men. Prevalence of smoking among women in developing countries could rise from the current 8% to 20% by 2025.

7.3 What the tobacco industry said and what it knew

Feeding the monster
An ex-tobacco employee interviewed by Marketing Week, says:
“They have to find a way to feed the monsters they’ve built. Just about the only way will be to increase sales to the developing world.” (R Morelli 1998)

A bright future in the developing world
Tobacco Reporter says:
“Tobacco use in the developed nations will trend down slightly through the end of the century, while in the developing countries use could rise by about three percent annually... A bright picture indeed! Not a smoke-free society, but continued growth for the tobacco industry.” (Tobacco Reporter, 1998)

So we should not get too depressed because this industry is consistently profitable
“We should not be depressed simply because the total free world markets appears to be declining. Within the total market, there are areas of strong growth, particularly in Asia and Africa; there are new markets opening up for our exports, such as Indo-China and the Comecom countries; and there are great opportunities to increase our market share in areas like Europe... This industry is consistently profitable. And there are opportunities to increase that profitability still further.” (BAT, 1990)

Even if we do have to look elsewhere
Steven Goldstone, RJR Nabisco Chairman:
“The international tobacco business has become an increasingly important source of earnings for RJR Nabisco and can be the most significant driver of our future tobacco earnings growth.” (Tobacco Reporter, 1998)

Like Asia
You know what we want”, says a tobacco executive
“we want Asia.” (Quoted in Unhealthy Alliance, 1998)

Using what ever means necessary
“The US government conducted three investigations on unfair tobacco trading practices of Japan, Taiwan and Korea... between 1985–1988, the United States’ Trade Representative (USTR) threatened these nations with sanctions on goods they exported to the US unless US
cigarette companies were given free access to their markets. No other US agricultural product received the same attention and all three nations capitulated to the US’s demands. \[G Connolly, 1998\]

**Taiwan and Japan are opened up.**

Both Taiwan and Japan yield to American pressure and open up their domestic markets to international brands, mainly American. A survey finds that in 1984 - two years before the markets was opened up - in Taiwan’s capital city, Taipei, 26% of boys and 15% of girls had tried smoking. By 1990, the figures were 48% for boys and 20% for girls. Smoking amongst Tokyo women increases from 10 per cent in 1986 to 23 per cent in 1991 [1993].

**...teen smoking rates increased, too**

Rothmans Public Affairs Manager, Rothmans Exports:

“\textit{It would be stupid to ignore a growing market. I can’t answer the moral dilemma. We are in the business of pleasing our shareholders. We have a very strong feeling that if no one had heard of cigarettes in Timbuktu, then a Rothmans billboard would not mean anything. All we are doing is responding to a demand.}” [J Sweeney 1988]

**So what if smoking increases - We can’t answer morals – we just please shareholders**

Rothmans representative in Burkina Faso, Chris Burrell:

“\textit{The average life expectancy here is about forty years, infant mortality is high: the health problems which some say are caused by cigarettes just won’t figure as a problem here.}” [J Sweeney 1998]

**And health really isn’t an issue**

Matthew Winokur, Director of Philip Morris-Asia, talking about overseas markets, “\textit{if people are going to smoke, why shouldn’t they be able to choose American cigarettes.}” [Cited by L Heise 1988]

**And why shouldn’t they smoke our brands**

Michael Parsons from Philip Morris

“\textit{The demand for Marlboro is phenomenal. Its like saying: ‘What is the potential market for Levi jeans? Probably every second adult in Russia’.}” \[The Observer, 1992\]

**They want to smoke them**

“\textit{Until recently, perhaps forty per cent of the world’s smokers were locked behind ideological walls. We’ve been itching to get at them ... That’s where our growth will come from.}” \[The Observer, 1992\]

**Its lucky that communism collapsed**

Emerging markets
And the wall came down

May: Andreas Gembler, President of Philip Morris Europe:

“When the wall came down in 1989, there were tens of millions of consumers opening up to Philip Morris. If we hadn’t reacted the way we did, by now the train would have gone. We would have seen its end lights.”

(Institutional Investor, 1996)

Its trench warfare out there

November: “ Thomas Marsh, RJ Reynold’s Regional President, says of Eastern Europe:

“Its trench warfare. Hand to hand combat. We talk with each other on certain issues of mutual interest, such as smoking and health issues, advertising restrictions, things like that. We have industry associations where we sit down and act like perfect gentlemen – and then we leave the meeting and go out and battle in the streets again.”

(The Observer, 1992)

Let’s not lose sight of the goal

Sir Patrick Sheehy says that BAT is

“striving for greater global reach … These are the most exciting times that I have seen in the tobacco industry in the last forty years.”

(Tobacco Reporter, 1991)

And with over 300 million smokers, there is one prize left

Rene Scull, Vice President, Philip Morris Asia:

“No discussion of the tobacco industry in the year 2000 would be complete without addressing what may be the most important feature on the landscape, the China market. In every respect, China confounds the imagination.”

The limits of space

Robert Fletcher, Rothmans Regional Public Affairs Manager:

“Thinking about Chinese smoking statistics is like trying to think about the limits of space.”

(Window magazine, 1992)
7.4 References

4 Talk to TMDP, Chelwood, 1990, August.
6 Quoted in L. Heise, Unhealthy Alliance, World Watch, 1988, October, p20.