'Condemned to Repeat?': Research on the History and Dirty Politics of the Tobacco Pandemic

Ruth E. Malone, RN, PhD, FAAN
Helen Nahm Lecture
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Department of Social & Behavioral Sciences
University of California, San Francisco
Other research colleagues

- Lisa Bero
- Erika Froelicher
- Gina Intinarelli
- Jill Jarvie
- Joshua Yang
- Laura Tesler
- Nathaniel Wander
- Janine Cataldo
- Carol McGruder
- Keith Haddock
- Carlos Poston
Mentors & Guides

• Patricia Benner
• Lisa Bero
• Charlene Harrington

• Kit Chesla
• Hal Luft
• Drummond Rennie
• Claire Brindis
• Wendy Max
• Virginia Oleson
• Adele Clarke
• Stan Glantz

• Simon Chapman

• Carroll Estes
• Kenneth Warner
• Bob Newcomer
• Steve Schroeder
• Stella Aguinaga Bialous
• Linda Sarna
• Howard Pinderhughes
• All my SBS colleagues
• And so many others…
Administrative Staff

Regina Gudelunas

Doug McCracken

Cynthia Mercado-Scott

Christie Chu

Brandee Woleslagle

Teena O'Brian
Family

Terry, Grace, and Joel Sayre

Eliana and Hannah Frye
Funders

- UCSF/Mt. Zion Cancer Center
- California Tobacco-Related Disease Research Program (TRDRP)
- National Cancer Institute (NCI), NIH
- National Institute on Drug Abuse (NIDA), NIH
My Parents
Ancestors
How has the narrative of the cigarette as a normal consumer product been created and sustained, and how can it be deconstructed?
Figure 1: Annual Adult per Capita Cigarette Consumption and Major Smoking and Health Events—United States, 1990-1998—Source of data: US Department of Agriculture, 1986 Surgeon General’s Report.
“The conscious and intelligent manipulation of the organized habits and opinions of the masses...harness old social forces and contrive new ways to bind and guide the world.”
One half of all smokers will die from their smoking

40 year British Physician Study, BMJ 1994; 309: 901-911
Trends in Per Capita Consumption of Various Tobacco Products – United States, 1880-2006

Source: Tobacco Situation and Outlook Report, U.S. Department of Agriculture, U.S. Census

Note: Among persons ≥ 18 years old.
Beginning in 1982, fine-cut chewing tobacco was reclassified as snuff.
Industrially produced epidemic
Uncovering the Industry
www.legacy.library.ucsf.edu

• Confluence of technologies and funding
• Now more than 80 million pages
• Documents, videos and other material
• 1920s-present
• Full-text searchable
Within the 18-34 market, there are only 3 identifiable "demographic" growth sectors:

A. Ethnic Smokers (Blacks/Hispanics)

B. The "Less Educated" Smoker

C. Women Smokers, who will be the subject of a separate section
INSIGHTS INTO THE AFRICAN-AMERICAN CONSUMER MARKET

Direct Marketing to Multicultural Marketers
March 23-24, 1998

Burrell/DFA Advertising
A DIVISION OF BURRELL COMMUNICATION GROUP

100 FIFTH STREET, 11TH FLOOR NEW YORK, NEW YORK 10011
(212) 252-1320 - FAX (212) 252-3915
E-MAIL: smilk@burrelldfa.com
How marginalized groups are characterized and targeted

- **1998-1999**  Cigar Use in African American Youth. UCSF/Mt. Zion Cancer Center
- **2000**  Tobacco Industry Targeting of African Americans. California Tobacco Related Disease Research Program (TRDRP)
- **2001**  Tobacco Industry Targeting of Gays and Lesbians. R01, National Cancer Institute/NIH
- **2002**  Bayview-Hunters Point Partnership Toward Smoking Cessation. TRDRP
- **2003**  Protecting the ‘Hood Against Tobacco (PHAT) Project. TRDRP
- **2007**  Tobacco industry targeting of older persons. TRDRP
“Special Markets”

• People of color
• LGB
• Military
• Women
Racialized Geography, Corporate Activity, and Health Disparities: Tobacco Industry Targeting of Inner Cities

Valerie B. Yerger, ND
Jennifer Przewoznik, MSW
Ruth E. Malone, PhD, RN, FAAN

Abstract: Industry has played a complex role in the rise of tobacco-related diseases in the United States. The tobacco industry’s activities, including targeted marketing, are arguably among the most powerful corporate influences on health and health policy. We analyzed over 400 internal tobacco industry documents to explore how, during the past several decades, the industry targeted inner cities populated predominantly by low-income African American residents with highly concentrated menthol cigarette marketing. We study how major tobacco companies competed against one another in menthol wars fought within these urban cores. Little previous work has analyzed the way in which the inner city’s complex geography of race, class, and place shaped the avenues used by tobacco corporations to increase tobacco use in low-income, predominantly African American urban cores in the 1970s–1990s. Our analysis shows how the industry’s activities contributed to the racialized geography of today’s tobacco-related health disparities.

Key words: Smoking, tobacco industry, African Americans, racial disparities, inner city geography.

Despite significant reductions in overall smoking rates in the United States, smoking among poor, less educated, and underserved populations remains higher than among the general population.3,15 For example, prevalence rates for low-income African Americans have been reported to range from 33% to 59%,6–13 compared with 21% for the general population.13 Tobacco company advertising and promotion are associated with increased cigarette consumption; their presence and pervasiveness serve as external cues to smoking.11 Tobacco companies have strategically targeted marginalized communities,11–13 who may have limited information about specific and relative health risks of smoking and few social supports and resources such as tailored cessation programs.24–29 Tobacco-related diseases have hurt lower-income urban communities,
### Distribution of Sample Cigarettes

<table>
<thead>
<tr>
<th>Date</th>
<th>Employee Name/Dept.</th>
<th>Function</th>
<th>Quantity in Packs</th>
</tr>
</thead>
<tbody>
<tr>
<td>10/12/90</td>
<td>N.C. Local Public Health Mgmt. Support Supervisor's</td>
<td>Annual Meeting favors</td>
<td></td>
</tr>
<tr>
<td>10/18/90</td>
<td>Nate Hall per Ron Smith</td>
<td>M.C.U. Class Reunion</td>
<td>200</td>
</tr>
<tr>
<td>10/19/90</td>
<td>Tommy Childers</td>
<td>Greensboro Area Convention favors</td>
<td></td>
</tr>
<tr>
<td>11/29/90</td>
<td>Peter Vanstory per Dr. Spears</td>
<td>Mental Health Assoc.-Gso.</td>
<td>100</td>
</tr>
<tr>
<td>12/14/90</td>
<td>J.C. Tuttle - Making</td>
<td>Gso. Urban Ministry Soup Kitchen</td>
<td>140</td>
</tr>
<tr>
<td>12/18/90</td>
<td>Bobby McHone - Maintenance</td>
<td>Homeless Shelter-Gso.</td>
<td>100</td>
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<tr>
<td>12/18/90</td>
<td>Bobby McHone - Maintenance</td>
<td>Homeless Shelter-Gso.</td>
<td>100</td>
</tr>
<tr>
<td>12/6/90</td>
<td>James M. Dixon - Maintenance</td>
<td>Gso. Elks Lodge Fall Charity</td>
<td>300</td>
</tr>
<tr>
<td>12/11/90</td>
<td>Ron Price</td>
<td>Burlington/Alamance Jaycees</td>
<td>150</td>
</tr>
<tr>
<td>12/14/90</td>
<td>Ron Price</td>
<td>Wesley Hall of Alamance</td>
<td>400</td>
</tr>
</tbody>
</table>

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Bates: 87810958 (1991)

**Organizations with tobacco ties**

- 100 Black Men of America
- A. Philip Randolph Foundation
- Coalition of Black Trade Unionists
- Congressional Black Caucus
- Joint Center for Political and Economic Studies
- National Association for the Advancement of Colored People (NAACP)
- National Association of Black Journalists
- National Bar Association
- National Black Caucus of State Legislators
- National Black Chamber of Commerce
- National Black MBA’s Association
- National Black Media Coalition
- National Black Police Association
- National Coalition of 100 Black Women
- National Conference of Black Mayors
- National Council of Negro Women
- National Newspaper Publishers Association
- National Urban League, Inc.
- Operation PUSH (Rainbow/PUSH Coalition)
- Opportunities Industrialization Centers of America
- Southern Christian Leadership Conference
- Tuskegee Airmen
- United Negro College Fund (UNCF)
Organizations with tobacco ties

- Alpha Kappa Alpha
- Alpha Phi Alpha
- American Association for Affirmative Action
- Associated Black Charities
- Association of Minority Enterprises of New York
- Black Elected Democrats of Ohio (Ohio Legislative Black Caucus)
- Black Expo USA
- Black Women in Publishing
- Conference of Negro Business and Professional Women
- Congressional Black Caucus Foundation
- Dallas Black Chamber of Commerce
- Delta Sigma Theta
- Florida A&M University
- Georgia Association of Black Elected Officials
- Georgia Legislative Black Caucus
- International Association of Black Professional Fire Fighters
- Jackie Robinson Foundation
- Kappa Alpha Psi
- Louisiana Legislative Black Caucus
- Massachusetts Legislative Black Caucus
- Meharry Medical College
- Michigan Black Legislative Caucus
- National Association of Black & Minority Chambers of Commerce
- National Association of Black County Officials
Organizations with tobacco ties

| National Association of Black Social Workers | National Organization of Black Law Enforcement Executives |
| National Association for Equal Opportunity in Higher Education | National Political Congress of Black Women |
| National Association of Market Developers | National United Affiliated Beverage Association |
| National Association of Women Business Owners | New York State Black, Puerto Rican, and Hispanic Legislative Caucus |
| National Bankers Association | North Carolina A&T State University |
| National Black Child Development Institute, Inc. | North Carolina Association of Minority Business |
| National Black Republican Council | Omega Psi Phi |
| National Business League | Phi Beta Sigma |
| National Conference of Black Lawyers | South Carolina Legislative Black Caucus |
| National Dental Association | Tennessee Caucus of Black State Legislators |
| National Minority Supplier Development Council | United Black Church Appeal |

It's like a savings account. The analogy is an important thing. One has to keep on making deposits into the savings accounts. Goodwill deposits, deposits of getting to know people, deposits of listening to their problems, deposits of gently bringing them along about what our problems are and how our problems impinge upon their livelihood, their well-being, their economic futures and so forth. And you make those deposits in the savings account so that when you have to make a withdrawal, the bank balance is there. You can
Ties with the Black Press

- 1995 Philip Morris Email
  - “With all the advertising we offer them, they will run any editorial we like.”

“If You Know You Exist, It’s Just Marketing Poison”:
Meanings of Tobacco Industry Targeting in the Lesbian, Gay, Bisexual, and Transgender Community

Elizabeth A. Smith, PhD, Katherine Thomson, BA, Naphtali Offen, BS, and Ruth E. Malone, PhD, RN

Tobacco use is the leading preventable cause of death in the United States. Lesbian, gay, bisexual, and transgender (LGBT) individuals are particularly at risk. For example, one study showed that smoking rates among LGBT women (those either identifying as LGBT or reporting same-sexual contact) were nearly triple those among women overall (32.5% vs 11.0%); LGBT men’s smoking rate was 50% higher than that of men overall (27.4% vs 19.1%), and the rate among transgender individuals was 30.7%. Elevated smoking rates in the LGBT community may be related to social disadvantage, discrimination, and the prominence of the bar culture as a means of socializing. Smoking is frequently depicted in magazines targeted toward LGBT groups, in both editorial imagery and advertising.

Marketing to specific communities is commonly referred to as targeting. It is generally assumed that whether targeting is positive or negative depends on what is being promoted. Advocates “target” audiences with health promotion messages. However, advocates and communities also object to “targeted” advertising promoting unhealthy products.2–5 The targeting concept has been used for mobilization; for instance, in 1990, African Americans in Philadelphia successfully derailed RJ Reynolds’s plan to target Uptown cigarettes to African Americans.6

Despite the term’s resonance, we are aware of only 1 previous study exploring how targeting is perceived by the group or groups being targeted. Consistent with advocates’ assumptions and the Uptown experience, the results of that study showed that tobacco companies plan to target African Americans involved anger and intentions to quit smoking and share information about tobacco industry targeting with others.5

Targeted corporate advertising and consumerism can be used to communicate and enhance social identities.5 However, corporations also have been identified as structural causes of disease.6 Identifies defined through consumption can encourage communities to accept corporate presence even when it promotes products, such as tobacco, that are injurious to health.

In the United States, political gains in the LGBT community have developed in parallel with the community’s representation in consumer culture.6 In the early 1990s, tobacco companies were among the first large corporations to advertise in LGBT publications and offer sponsorship and philanthropy to LGBT organizations.26 Some in the LGBT population viewed this development with alarm, whereas others perceived it as indicating increased acceptance.27 We sought to increase understanding of the perceptions of the LGBT community regarding tobacco industry targeting and to assess whether, as with the African American community, exposure to evidence of such targeting has the potential to mobilize the community for tobacco control.

METHODS
Design and Eligibility
Between May 2003 and October 2004, we conducted 19 focus groups (unmoderated group interviews useful in exploring variability in poorly understood phenomena) in Raleigh, North Carolina; Houston, Texas; Manhattan and the Bronx, New York City, New York; and San Francisco, California. Sites were selected to include participants of different ethnicities from different geographic and tobacco control policy environments.27 Groups were conducted in both Manhattan and the Bronx to ensure racial/ethnic diversity in the sample. To be included in the study, individuals had to self-identify as LGBT, be fluent in English, and be 18 years or older.

In Raleigh, pilot groups were conducted at a national gay men’s health conference; all other groups were conducted at LGBT community centers. One pilot group included male-smokers and non-smokers. Thereafter, groups were organized according to gender and smoking status (based on reported tobacco use during the preceding year) to maximize participant comfort. Participants were recruited through e-mail announcements, advertisements placed in LGBT newspapers, and fliers distributed in LGBT neighborhoods, community centers, and bars; they were paid $40 for taking part in the study.

Procedures
Two researchers, trained in facilitating focus groups, used a standardized protocol with a
SMOKIN’

Marlboro men kick butt in Fallujah

FULL STORY: PAGES 6-7
personnel. The result of our lobbying efforts was that the Department decided to institute a smoking education program instead of banning smoking or increasing the price of cigarettes sold in commissaries, exchanges and ship stores. We were also successful in delaying implementation of the

1986 Smoking Cessation Program

Last year we concentrated on mitigating the Department's attack on smoking incidence by military personnel. The result of our lobbying efforts was that the Department decided to institute a smoking education program instead of banning smoking or increasing the price of cigarettes sold in commissaries, exchanges and ship stores. We were also successful in delaying implementation of the Army's more rigorous smoking cessation regulations, thus dissuading other services from following suit. In recent action, the Defense Department modified its directive by stepping up its smoking cessation goals and by targeting family members who smoke. The Department is required to issue a report in June 1987 regarding the success of its anti-smoking program. If the services appear to be meeting the ten percent smoking reduction goal, it may be deemed that no further anti-smoking measures may be required. However, as was the case last year when the Senate considered (and rejected) raising the price of cigarettes in commissaries, etc., certain members of Congress may decide to attempt to raise the prices regardless of the Department's success.

Other Publications re US Military Tobacco Control


Is the World's Most Powerful Military Defenseless Against Big Tobacco?

Cigarettes kill more soldiers and sailors than wars do, and cost taxpayers billions. Yet Congress keeps shooting down the Pentagon’s efforts to snuff them out.

—By Michael Mechanic | Thu May 22, 2014 6:00 AM EDT
The “anti-tobacco industry” (ATI)

Those organisations and individuals clearly identified as having opposing interests are:

W.H.O.
U.I.C.C.
Medical Associations
Government Health Departments
Individual Scientists
Anti-smoking Organisations
Consumer Protection Groups
How the tobacco industry counters public health

- 2002  Tobacco Industry Responses to Industry-Focused Campaigns. TRDRP
- 2003  Responses to Public Health Campaigns. R01, National Cancer Institute/NIH
- 2004  Tobacco Industry Influence on the U.S. Military. R01, NCI
- 2013  Barriers to effective tobacco control policy implementation in the US military. R01, NIDA/FDA
- 2013  Investigating institutional influences on tobacco control. R01, NCI
Tobacco Industry Surveillance of Public Health Groups: 
The Case of STAT and INFAC

Ruth E. Malone, RN, PhD

Public health advocates increasingly focus attention on the tobacco industry's role as "the vector of the tobacco epidemic" and highlight industry behaviors that undermine public health and raise ethical concerns. Industry-focused campaigns are effective in changing views of tobacco use, but the study described in this article shows that such a strategy may also invite aggressively conducted industry surveillance.

Many businesses use "competitive intelligence" to learn about their competitors. For example, it is common for companies to request competitors' publicly filed business reports, to attempt to learn about sales, or to conduct analyses of competitors' products. However, tobacco industry intelligence gathering extends beyond other cigarette companies to include tobacco control organizations, which the industry calls "aegis." Although such groups are not cigarette "companions," they do compete with the industry for public opinion and the ear of policymakers, and thus they are perceived as a threat. In this article, evidence from internal tobacco industry documents is used to describe how the industry responded to 2 such groups, STAT (Stop Teenage Addiction to Tobacco) and INFAC (formerly the Infant Formula Action Coalition), both of which were active during the 1990s in drawing public and media attention to industry behaviors.

METHODS

Data were collected from tobacco industry internal documents released as a result of the Minnesota Tobacco Settlement and other legal cases. Tobacco Institute (http://www.tobaccoinstitute.com), R.J. Reynolds (http://www.rjrtinc.com), and Philip Morris (http://www.pmoinc.com) documents. Web sites were searched for combined text fields such as "anil," "intelligence," and public health group names, including STAT, INFAC, DO遗传 (Doctors Urged to Card, and others. Searches of the Minnesota Tobacco Documents Depository were also conducted. Searches took place between January 1, 2001, and January 19, 2002, and involved systematic "snowball" searching techniques, as described elsewhere. Data used included internal letters, memorandums, reports, and other documents. Findings were assembled chronologically into a narrative case study.

RESULTS

1988: STAT is Formed

STAT, founded in 1985 by Stanford MBA and activist Joe Tye, was almost immediately perceived as a threat by the industry. A grassroots group focused on the industry's targeting of children, STAT was well organized and media savvy. The first issue of STAT-News reported that STAT was "beginning a major project to analyze, catalog and index the documentation that is being generated as a result of tobacco products litigation," threatening further public exposure of potentially embarrassing industry documents.

The industry responded quickly. At the Tobacco Institute, the industry's public relations organization, A.H. (Annie) Duffin, vice president and director of publications, sent a terse message, apparently to her assistant: "Please start a file on this STAT group. And please run a complete search on Joe B. Tye." Duffin advised colleagues that STAT had "implications for the industry in both legislative and litigative areas," describing its plans for a study with DOCA on cigarette purchasing by minors and noting that the organization was selling copies of an anti-tobacco industry book, "Sixty Years of Deception." This intelligence gathering had several purposes. In 1988, a Tobacco Institute public affairs division operational plan proposed "keeping the Institute in the driver's seat through 'knowledge of anti-smoking announcements before the fact.'" Betsy Anneau of R.J. Reynolds public affairs attached a list of industry critics to a memorandum sent to Herb Ovom in 1987. Snowden presented several talks focusing entirely on tobacco control "untidbits, apparently accompanied by slides with photographs of tobacco control activists and researchers. Intelligence could be used to 'discredit' public health groups, as recommended in a 1989 INFOTAB (the industry's international intelligence and research agency) report, A Guide for Dealing With Anti-Tobacco Pressure Groups, which advised executives to "discredit the often important activists of the tobacco control coalition—ideally through third parties (emphasis in original)."
Competitive Intelligence: Four Eras

- 1981-1992: International Tobacco Information Center (INFOTAB)
- 1992-1998(?): Tobacco Documentation Centre (TDC)
- 1998-now: Third parties+ NEW intelligence operations

Sunrise Strategy #1
Fair Play

Proactively deal with the Anti’s to reduce their effectiveness at controlling the agenda and to restore balance to the debate.

Exacerbating conflicts

Our Fourth Strategy focuses on efforts to cause dissention within the ATI.

1) As the tobacco company that is seeking "reasonable solutions to complex problems" we want to reach out to members of the ATI where we can potentially establish Common Ground -- such as on the issue of preventing youth access to tobacco products.

2) We also want to enhance internal conflicts that already exist within the ATI -- and possibly encourage some new ones.
1990s: U.S. tobacco industry faced challenges

- FDA attempts to regulate cigarettes/nicotine
- Multiple state lawsuits
- Smokefree laws
- Tobacco control activism
- Critical media coverage
Tobacco executives before Congressional hearing, 1992:

“I believe that nicotine is not addictive.”
“Today we’re viewed as untrustworthy…”

...not credible and insincere. To be successful over time, our actions must result in a sustainable perception of trustworthiness, credibility, and sincerity.” (1998)

and whether it is addictive, we will refrain from publicly debating these issues other than in forums in which we are required to do so.

One might look at our situation and conclude that our corporate reputation is beyond hope. Obviously, we disagree but we also realize that our rehabilitation will require us to be both patient and judicious. Again, the objective of PM 21 is to craft and deliver messages that will better inform the public about the people, products and principles of Philip Morris. The spirit of our effort must be balanced with humility, diplomacy, conviction and respect. Today, we’re viewed as untrustworthy, not credible and insincere. To be successful over time, our actions must result in a sustainable perception of trustworthiness, credibility and sincerity.

It’s easy to dislike an institution that is routinely vilified and is synonymous with a product that is highly controversial. It becomes much more difficult to dislike a company when you become aware of its human side. Further, when a company that you’ve historically viewed with contempt presents itself to you in a manner that is contrite, humble and aware of its own shortcomings, you’re inclined to give it the benefit of the doubt.
Good afternoon.

From a Corporate Affairs perspective, our objective over the plan period is to shape a political, regulatory and attitudinal environment around the world, particularly in the United States.

“…we must attain a much greater degree of … ‘corporate normalcy.’ … Our goal is to be seen as a normal corporation. … We must be given permission by society to exist and to prosper.”

Our stakeholders – investors, employees, business partners, legislators, regulators, opinion leaders, critics and the general public. Our goal is to be seen as a normal corporation, one with legal, regulatory and public opinion challenges to be sure, but with challenges that are manageable and do not threaten the legitimacy and even the survival of the Company. In other words, we must be given permission by society to exist and to prosper.

(PAUSE)
Tobacco industry re-invention


Marketing Philanthropy
“Compartmentalizing” Feelings: Product vs Company

Stage 3: Advertising

Strategy

How the Advertising Works...

- When the advertising works, it gives consumers a reason to compartmentalize their feelings about PM...

PM makes tobacco products, *but* they have a stake in something that’s personally important to me.

“When the advertising works, it gives consumers a reason to compartmentalize their feelings about PM.”
Exception: West Coast

• Those holding favorable opinion of PM ↓ from 34% to 27% in 2001
• Attributed to “aggressively anti-tobacco ads” there
California: Calling out the Tobacco Industry

- Social norm change
  - --re smoking
  - --re tobacco industry
Corporate Responsibility Taskforce Kick-off Meeting
• draft working documents *
CRT’s goal

“Our goal is to redefine the role of a corporation in American society, … to deal with our product issues and figure out how to deliver social value on a large scale.”
The big WHY?

This discussion goes back to the “Why”? What is our positive contribution to society?

“How” do we exist?
The Dilemma

• “Creating social value starts with the product, yet, except to the smoker, there is no perceived social value to our product (And smokers’ perceptions may vary).”

--Senior Manager

http://legacy.library.ucsf.edu/tid/qcp10c00
Social value consensus

• “It is not an "it" but ... an on-going process of attempting to increase the positive and decrease the negative impacts of our Footprint.”

But wait....

• “Our contribution to social value is our license to operate which is our return to shareholder.”
CRT’s fit

“The Big WHY”: Philip Morris’s Failed Search for Corporate Social Value

Patricia A. McDaniel, PhD, and Ruth E. Malone, RN, PhD

Corporate legitimacy, the public’s general perception that a company’s actions are consistent with shared norms of appropriate behavior, enables corporations to maintain their operating licenses and status as publicly sanctioned institutions. When public approval is threatened, reduced, or withdrawn, however, a legitimacy crisis occurs: a corporation’s practices become something to be addressed and perhaps modified significantly in response.2 As delegitimation of the tobacco industry and denormalization of tobacco use reconfigure the social meaning of tobacco, the tobacco industry faces legitimacy crises beyond those experienced intermittently by most other corporate entities.2–4 In light of the deadly, addictive nature of its products and the tobacco industry’s now well-documented history of deceit, legitimacy crises may be particularly difficult for tobacco companies.5

We examined executive deliberations at Philip Morris USA in 2000 to 2002 as the company’s leadership sought to restore legitimacy through a formal corporate social responsibility commitment.2 We identified the archives and used their contents to inform our analysis.13 The evolution of this process at executive levels of the largest US tobacco company suggests that tobacco companies face not only ongoing external public relations concerns, but also internalized legitimacy struggles that may create openings for policy innovation to address the tobacco epidemic more effectively on the supply side.

METHODS

Litigation against the tobacco industry has resulted in release of more than 13 million previously undisclosed industry documents now archived at the University of California, San Francisco library in a full-text searchable electronic repository.2 We initially searched the archives with broad search terms (e.g., corporate responsibility) and used retrieved documents to identify more specific search terms. We identified 150 Philip Morris documents, spanning 2000 to 2002. More detailed information on tobacco industry documents and search strategies is available elsewhere.14

We analyzed documents with an interpretive approach. In this type of historical analysis, “the focus of attention is on meaning. . . . Each document is reviewed carefully and the ‘taken-for-granted’ assumptions and viewpoints of the author(s) drawn out.25-26’ Consistent with the analytic tradition within which we were working, we specified no preanalytic conceptual schema.27-29 To develop this interpretive account, one of us (P.A.M.) reviewed all documents, and both authors reviewed selected key documents and took detailed notes. We relied on iterative reviews and discussions of documents and notes to identify common themes and charts of meaning.30

RESULTS

When Mike Saymanzyyk became Philip Morris’s chief executive officer in late 1997, he concluded that Philip Morris was “out of alignment with society’s expectations of a socially responsible company.”31 He based this conclusion on the then-numerous state lawsuits seeking to recover from tobacco companies Medicaid costs related to tobacco-caused disease.32 Placating public opinion and a Food and Drug Administration effort to regulate nicotine as a drug may also have been considerations.32-33 Saymanzyyk quickly moved to reframe Philip Morris’s mission from a singular focus on being successful to a focus on being “responsible, effective, and respected.”33

In early 2000, 16 Philip Morris employees explored this mission and future societal and business trends.34-35 Two identified trends
Tobacco industry denormalization (TID)

- Reversal of the process of industry normalization promoted by the cigarette manufacturers for decades

--Gar Mahood, Canadian Nonsmokers’ Rights Association, 2004
Evidence for TID as tobacco control intervention

Tobacco industry denormalisation as a tobacco control intervention: a review

Ruth E Malone, Quinn Grundy, Lisa A Bero

ABSTRACT

Objective To conduct a review of research examining the effects of tobacco industry denormalisation (TID) on smoking-related and attitude-related outcomes.

Methods The authors searched PubMed and Scopus databases for articles published through December 2010. We included all published, peer-reviewed TID studies that measured smoking-related outcomes and attitudes toward the tobacco industry. Exclusion criteria included: non-English language, focus on tobacco use rather than TID, perceived ad efficacy as sole outcome, complex program interventions, and a separately measurable TID component.

Results Of 68 studies examined, 32 met the inclusion criteria. The majority of studies suggest that TID is effective in reducing smoking prevalence and initiating quitting. Evidence is mixed for some other outcomes, but some of the divergent findings may be explained by study designs.

Conclusions A robust body of evidence suggests that TID is an effective tobacco control intervention at the population level that has a clear exposure–response effect. TID may also contribute to other tobacco control outcomes not explored in this review (including efforts to ‘directly erode industry power’), and thus may enhance public support and political will for structural reforms to end the tobacco epidemic.

INTRODUCTION

Population level interventions have demonstrated...
US Surgeon General has identified tobacco industry as a cause of the tobacco epidemic

• “the tobacco epidemic was initiated and has been sustained by the aggressive strategies of the tobacco industry, which has deliberately misled the public on the risks of smoking cigarettes.”

Second of 10 Major Conclusion:
2014 USSG Report on Health Consequences of Smoking
Why is the single most deadly consumer product ever made still sold on [almost] every street corner?
Retailers ending tobacco sales

“Over all the years when people complain from special interest groups to me, ‘Why do you sell this kind of meat?’ and, ‘Why do you sell this kind of fish?’ ... My stock answer used to be, ‘If I’m going to decide what consumers should buy and they shouldn’t buy at our store, ... I would start with cigarettes.’... My father died from emphysema. ... I just got to thinking that, boy, I sure said this a lot of times over the years, and in talking with my partner, we said, ‘Yeah, you know what? It’s our store and it’s our business. If we don’t want to sell them, you know, we don’t have to sell them.’”

Conclusion: Narrating the tobacco ‘endgame’

- US Surgeon General’s 50th Anniversary Report
- Cancer Research UK (report forthcoming)
- WHO Euro Regional meeting
Imagining things otherwise: new endgame ideas for tobacco control

Ruth E Malone

Where are we going in tobacco control long-term, and how will we get there? This issue of Tobacco Control features three new contributions to the growing ‘endgame’ literature with possible answers to those questions. Big picture radical ideas that seek to propel the tobacco control movement more quickly towards a time when the global tobacco disease pandemic that began in the 20th century will be ended. Could the multitude of social structures and institutions that sustain the tobacco problem be unlinked? Could altered market forces—price controls, supply controls—render tobacco less attractive to those who profit from continuing to addict new generations? Could there come a time when cigarettes—the world’s most deadly consumer product ever made—will no longer be commercially sold? Can a stake someday be driven through the heart of the tobacco industry?

Endgame thinkers are the visionaries of the tobacco control movement. Early contributions in this literature, many of which were first published in this journal, included Bland’s regulated market model; Callard, Thompson and Collishaw’s work on restructuring the industry so that it was incentivised to reduce consumption; and calls for phasing out smoked tobacco products through various approaches. Others in this broad genre of work include Chapman’s call for licensing smokers, work on nicotine and other types of ingredient regulation to render cigarettes less or non-addictive, and other ‘big picture’ ideas. Increasingly, the idea that tobacco control is fundamentally a systems problem is becoming a part of global discussions. More tobacco control programme successes also suggest that changing what tobacco use (and the tobacco industry) means is foundational to ending the global pandemic. In this issue, Gilmore and colleagues argue that regulating prices of tobacco through capping of manufacturers’ prices could reduce tobacco industry market power by eliminating manufacturers’ ability to disguise price increases and achieve higher profits. As they point out, in higher-tax western countries, the industry’s profits are increasing despite declining sales—profits that are then available to the industry to further promote tobacco use in the emerging markets of low-income countries. The thoughtful argument by Gilmore et al. extends ongoing conversations about innovative approaches to the tobacco market and offers an incentive for governments to act: an increased share of the money.

Kho and colleagues propose a unique idea: end tobacco sales for those born after a certain date. Rather than focusing on preventing tobacco sales to minors, with the implicitly attractive ‘forbidden fruit’ message such approaches cannot avoid, the authors argue that their proposal to end sales to anyone born after the year 2000 would minimise immediate impact on stakeholders and allow time for transition, while being entirely congruent with the tobacco industry’s assertions that they now seek to market only to existing smokers and not to youth. Interestingly, the authors’ preliminary work suggests strong public support for such an idea. Of course, Singapore is somewhat unique in its regulatory climate, but the idea offers a fresh perspective on ‘youth access’. Addressing issues of supply is the focus of the proposal by Thomson et al. for a ‘sinking lid’ on the commercial supply of tobacco, with quotas reduced gradually over a period of 10 years. Government-run auctions, such as those which have been used for other types of products, would draw manufacturers to bid for a gradually decreasing amount of tobacco. If successful, they argue, such a system would increase the price of tobacco, contributing to reduced consumption. Combined with demand-reduction measures, such an approach could radically alter the tobacco control landscape within a country. Could any of these latest big picture ideas really work? Perhaps not immediately, but they inspire us all to think beyond the next smoke-free ordinance or tobacco quitline. Perhaps they could not work in one country, but could be done in another—in one with more easily controlled borders, for example, in the New Zealand case, or in a country generally supportive of government regulation, as in the UK and Singapore.

It was through such visionary thinking that we began to understand that the suffering and death tobacco causes is not merely a problem of poor individual health behaviour choices, but of the rise of an entire industry focused on aggressively promoting deadly addictive products. It was through visionary thinking that we began to question whether breathing the smoke from others’ cigarettes might be harmful to non-smokers. It is visionary thinking, combined with skilled advocacy, that pushes governments to act more decisively to protect the public and to rein in the activities of tobacco companies

Every person who becomes newly involved in the tobacco control movement, whether as an activist, researcher, programme planner or health professional, remembers that first moment of realising: it doesn’t have to be this way. Often, that realisation is coupled with the notion that cigarettes should just be banned, and incredulity that it has not already been done. Then, seasoned veterans explain the interlocking political, physiological, legal and economic webs that constrain such policy change. But the first step towards breaking through those webs is to rediscover our ability to imagine things otherwise.

The public may be more ready for radical changes than most policymakers recognise. Studies suggest there may be fairly strong support for ending tobacco sales. Earlier work drawing on tobacco industry documents showed that the industry’s own survey data from the early 2000s in the US suggested that a majority wished ‘there were some way to eliminate cigarettes’, supported banning cigarette advertising and felt that “the right and responsible thing for cigarette companies to do would be to phase out the cigarette business”. Imagining things otherwise helps us see how to head towards where the public (and any rational person whose livelihood does not depend upon the tobacco status quo) already sees we should eventually go. But
So...what *is* an ‘endgame’?

- *Initiatives designed to change/eliminate permanently the structural, political and social dynamics that sustain the tobacco epidemic, in order to achieve within a specific time an endpoint for the tobacco epidemic.*
“You can’t…” It will fail catastrophically

- Spectre of prohibition
- Organized crime/illicit trade
“You can’t…” Legal product, restricting freedom

• But...freedom to..? Or freedom from?
“You can’t…”

We have to have a good replacement product before we could possibly stop cigarette sales.
• But...millions have quit successfully and there are wider variety of cigarette, nicotine and other replacements available now than ever before

• Replacements not required before banning other deadly and dangerous products from market
“You can’t...”
Public would never stand for this
Wish there was some way to eliminate cigarettes 68%

Right and responsible thing to do… go out of business 59%
Australia: adults’ support for phasing out of cigarettes in the future

• 71% of adults in Victorian study said it would be “a good thing” if there came a day when cigarettes were no longer for sale in retail outlets in Australia

• 57% of current smokers agreed

• More than half of all adults said retail sales should be phased out within 10 years; over 40% smokers agreed

Hayes L, Wakefield MA, Scollo MM. Public opinion about ending the sale of tobacco in Australia. Tobacco Control 2013 [Epub ahead of print].
• Have nonsmoking sections in restaurants
• Ban smoking on airplanes
• Have smokefree workplaces
• Ban tobacco advertising
• Have smokefree bars (and pubs!)
Elements of a new narrative

• Industrially produced epidemic
• Fundamentally defective product
• Tobacco industry not like other businesses
• Alternatives exist that are less deadly
• Existing measures, even if wildly successful, not sufficient to end epidemic
• Public, including smokers, very supportive
Uses of our Work--Examples

- WHO FCTC Guidelines
- US Surgeon General’s Report
- US Dept of Justice Racketeering Case
- Community Advocacy & Programs
- Organizational Advocacy, Congressional Hearings
- Ethics Guidelines for IRBs and CBPR
- US Military Initiatives
- Members of team serving TEROC, TRDRP
Imagining things otherwise