Smoking Policy: Law, Politics, and Culture

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New York Oxford
OXFORD UNIVERSITY PRESS
1993

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Symbols and Smokers: Advertising, Health Messages, and Public Policy

Michael Schudson

It is widely believed that Madison Avenue is enormously successful in persuading the public to buy what it wants to sell. This belief in the power of advertising is vigorously championed by the advertising industry as it awards itself prizes for creative advertising, as it promotes its services to prospective clients, and as ancillary firms in market research urge their expertise upon the advertising agencies themselves. Cultural critics who mistake the surface glitter of advertising for the heart of what makes a consumer society tick also encourage popular confidence in advertising's efficacy. In the popular view, advertising has almost magical potency (Schudson 1991).

But there is reason to question whether commercial advertising has found a direct route to the hearts and minds of consumers. The clearest testimony to the difficulties of successful advertising is that most advertisers organize their advertising expenses to minimize the amount of *persuading* they expect the advertisements to do. That is, most advertisements are directed to target audiences who already use the product in question; the advertisement tries simply to interest the consumer in an alternative brand of a product they already use. Moreover, most advertising aims to reach especially heavy users of a particular product category. It also seeks to reach consumers at moments when they are most likely to want to use a particular product: soups are advertised in winter, iced tea in summer, toys before Christmas.

Within these limits—that advertisers direct advertising primarily to people who already use a product, particularly people who use a product heavily, especially at times culturally sanctioned as periods of appropriate use—what do advertisers expect to achieve with advertising campaigns? Not very much. They may seek by advertising not to lose their share of a market, or they may hope to modestly increase their share of the market. For example, most new cigarette brands come and go within months. It is not easy to develop a successful new brand for a mature market. In the world of cigarettes, a company needs to gain roughly 0.5 percent of the cigarette market to establish a new brand (Loeb 1983, p. 27). If 50 percent of a population of four hundred people smokes cigarettes, then for a firm to create a successful new cigarette brand it can ignore the two hundred people who do not smoke at all and try simply to convince one of the two hundred smokers to switch to

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The skeptical view of advertising I am suggesting here runs counter to popular mythology about Madison Avenue, but it is consistent with the conventional understanding that sticks and stones break bones but words will never hurt us. The saying that "the pen is mightier than the sword" is arresting precisely because it is incongruous. Certainly in public policy battles for health and safety, the pen of public education seems less forceful than the sticks and stones of legal prohibitions and prosecutions or the carrots and sticks of tax exemptions and taxes (Adler and Pittle 1984). Automobile safety belt usage increased sharply when states imposed penalties for not wearing seat belts but barely inched up over the many years when public service announcements urged people to "buckle up" (U.S. Congress 1985). AIDS awareness programs have been less effective in changing the behavior of targeted groups than expected (Hornik 1988). Health messages in the mass media appear to be less effective than taxation in discouraging alcohol and tobacco consumption (Raftery 1989, p. 1246; Daynard 1988, p. 10; U.S. DHHS, Surgeon General 1989, pp. 474–543). Educational efforts alone did little to reduce illegal tobacco sales to minors, in one two-year trial, until coupled with stepped-up legal enforcement (Feighery et al. 1991).

Even so, public health advocates and government officials often have high hopes that mass-media public-health campaigns will promote public understanding and that bans on alcohol and tobacco advertising will promote public health. Certainly there is strong reason to believe that, even when the effects of isolated health-information campaigns are modest, the growth of medical knowledge about the harmful effects of smoking and the growing diffusion of this knowledge in the general population have over the past several decades been the key reason for the decline in smoking. Moreover, optimism about informational campaigns is partly pragmatic. It is normally easier to sell educational efforts to legislatures or to the public than to enact coercive regulatory measures: closing gay bathhouses or requiring automatically operated seat belts in cars or restricting smoking in public places. Optimism is also based on faith in human rationality and the power of information to influence behavior. If this optimism is justified, it reasonably leads to two different public policies: restricting or banning advertising for dangerous products or designing public-health promotional messages for the mass media on the model of commercial advertising.

Without denying that there may be important reasons to use the mass media for public-health messages, I want to question the underlying premise that commercial advertising is a highly effective activity and an appropriate model for public-health initiatives. I want to suggest that commercial advertising for cigarettes as well as for other products normally has only slight effect in persuading people to change their attitudes or behaviors. I want to suggest, further, that public-health messages about smoking normally face a different set of problems and prospects than commercial advertising. Efforts both to restrict cigarette advertising and to counter it with health education make sense if the expectations of policy makers about these efforts are realistically modest.

The Effectiveness of Commercial Advertising

If the role of advertising is generally as circumscribed as I have suggested, why do big corporations with good accountants and eyes on the bottom line spend so much money on advertising? There are several answers to this. The first and most important answer is: they don't. In most product areas, advertising expenses represent a very small percentage of total expenses in producing and marketing a product. In many product lines, including cigarettes, advertising expenses represent well less than half of the total marketing and sales-promotion expenses. In 1990, tobacco companies spent about four cents (4.2) in advertising for every dollar in cigarette sales. This was more than some familiar advertisers—the advertising-to-sales ratio was 2.8 percent for department stores, but about the same as electric housewares (4.5 percent) and greeting cards (4.1 percent) and household furniture (4.0 percent) and just a little less than hospitals (5 percent) ("Advertising-to-Sales Ratios" 1990, p. 24). To consumers, advertisements are generally the most visible and memorable part of the sales efforts of major corporations, but they are rarely the most important.

The second answer is that corporations believe that the small difference advertising and promotion can make in defending market share and in shifting people among brands of a given product is important. In a large market, a percentage point or two of market share is a large enough difference to have major consequences for bottom-line profits. It may be of little consequence in the greater scheme of things if Coca-Cola's market share grows from 24 percent to 25 percent, but that is a difference of great significance to Coca-Cola. Major advertising for a well-known cigarette brand like Virginia Slims yields it "only" 3 percent of the cigarette market, but that is more than enough for a profitable brand.

A third answer is that corporations do not know why they spend money on advertising. They may be fearful of what might happen if they failed to. They also may derive a set of important indirect and unmeasurable benefits from advertising. Advertising, even if it does not affect the mind of a consumer, may affect the mind of an investor. Investors at annual meetings like to see the latest reel of slick, national television advertisements for products their company produces. Company employees—particularly the company sales force—also are impressed by highly visible national advertising campaigns, and the sales force feels itself supported in the field when national advertising makes their company a household name. And if retailers believe, rightly or wrongly, in the power of advertising, they then stock widely advertised products and brands, consumers then buy what they find in stock, and the retailers' superstitious belief in the power of advertising is in their minds confirmed. These indirect powers of advertising may be a very important consequence of advertising, although they operate regardless of whether consumers are moved by an advertisement to change their way of life. Other indirect influences of advertising could also have significant influence on consumer behavior. For instance, the evidence is now very strong that tobacco advertising in magazines, particularly in popular women's magazines, has swayed editors to avoid publishing articles on the topic of the health dangers of smoking (Warner 1986). These may also be factors that lead tobacco companies to vigorously defend their freedom to

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With respect to cigarettes specifically, there are several sources of evidence about the effectiveness of advertising. I will review what is known from econometric studies, from our own and other nations' experience of advertising bans, and from what can be inferred from general knowledge about both the advertising industry and the character of cigarette consumption.

Econometric Studies

A large number of econometric studies try to model the effects of aggregate advertising on aggregate tobacco sales or consumption (Schmalensee 1972; Hamilton 1972; Schneider et al. 1981; U.S. DHHS, Surgeon General 1989, p. 503). To make a long story short, these studies find either no overall relationship between advertising and sales or a small, statistically significant positive relationship. There are long debates in the literature between those who would like to find no relationship, notably the tobacco industry, which wants to prevent government limitations on advertising, and those who want to find a positive relationship, notably public-health advocates who seek to build a case for government restrictions on tobacco advertising. Whether the results turn out to be no relationship or a small positive relationship does not seem to me a matter of great moment. In terms of a general relationship between cigarette advertising and cigarette smoking, the available econometric evidence is equivocal and the kind of materials available to produce the evidence leave much to be desired.[1]

Evidence from Advertising Bans and Limitations

A second approach to gathering data on the role of advertising in cigarette consumption is to turn to evidence from the American ban on television tobacco advertising as well as evidence from more comprehensive advertising bans in other countries.

In the period 1968 through 1970, cigarette advertising appeared on television along with anticigarette advertising. Beginning in 1971, all tobacco advertising was removed from television. In studies of the effect of the ban on tobacco consumption, the result was at first astonishing: per capita cigarette consumption, which had been declining since 1966, soon after the publication of the 1964 Surgeon General's Report, leveled off and then increased in the first few years after the television advertising ban. The most widely cited study of the effects of the ban explains that the antismoking commercials were much more powerful than the prosmoking commercials. According to this study by James Hamilton, procigarette advertising increased per capita consumption of cigarettes 76 cigarettes per year over the period 1950 to 1970 while the anticigarette advertising from 1968 through 1970 decreased per capita consumption 507 cigarettes per year (Hamilton 1972, p. 401). Others concur that the ban, by eliminating the powerful antismoking commercials, boosted tobacco consumption in the short run, whatever its long-run and more indeterminate effects may be (Schneider et al. 1981; Warner 1979).

Defenders of tobacco advertising point out that in countries with little or no

advertising, people smoke. In communist countries, the growth in cigarette consumption has sometimes been much greater than in the West. This is a telling point against advertising bans only if proponents of advertising bans argue that advertising is the *sole* cause or *primary* cause of smoking. No responsible antitobacco activist holds this view. On the other hand, antitobacco activists who point to downward trends in smoking where advertising bans have been enacted (Norway) are equally unpersuasive. No country with enough political clout to pass an advertising ban has used an advertising ban exclusive of other measures against tobacco consumption (Warner 1986, p. 372). The advertising bans, then, though on the surface offering a natural experiment, provide evidence as difficult to evaluate as econometric data.

Inferences from General Knowledge

In the absence of definitive evidence from econometric studies or evaluation of advertising bans, we can still make reasonable inferences from what is generally known about advertising effects and what is specifically known about how people take up the cigarette habit.

A major issue between the tobacco industry and its opponents is whether advertising is designed to affect a company's market share by stealing consumers of other brands to the company's own brand or whether it is designed to attract new smokers. The tobacco industry regularly claims that advertising affects market share, not the size of the total market, and that advertisements are designed to influence current smokers, not to attract new ones. Opponents of tobacco advertising say this is patently absurd on both empirical and logical grounds (Chapman 1989, p. 1266). Empirically, it is plain that tobacco advertising is placed in media where teenagers and preteens see it. Since almost all smokers begin smoking before they are out of their teens, this seems an obvious attempt to "get them while they're young." Logically, the tobacco market, like any market, has to be renewed as consumers who use the product die off. Since tobacco smoking kills people, the rate of turnover caused by death is higher in this market than in most markets, and so the need to attract new, young consumers is accelerated.

Moreover, opponents of tobacco say, relatively few smokers switch brands in a given year. Luk Joossens, a Belgian researcher and consumer activist writes, "Brand-switching among adult smokers is very limited: the market share of the different brands differs annually, in general, less than 1 percent. Smokers show strong brand loyalty. Adults' smoking habits are well established and their addictive behaviour makes them less receptive to advertising messages" (Joossens 1989, p. 1279). American researchers Joe Tye, Kenneth Warner, and Stanton Glantz write, "In the cigarette business, actual brand-switching is very limited. Cigarettes enjoy one of the most tenacious brand loyalties of any consumer product; in a given year only about 10 percent of smokers switch brands" (Tye et al. 1987, p. 493). Even at that, since just two major cigarette manufacturers in the United States control the lion's share of the market, and each of them produces multiple brands, there is a strong likelihood that brand switching will be between brands produced by the same manufacturer (Tye et al. 1987, p. 494).

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The question raised here is whether advertising has only the power to effect the modest behavioral change of brand-switching or else an influence great enough to produce in a consumer the more significant behavioral change of initiating smoking or perhaps stalling a resolve to quit. How is this question to be settled? It may not be possible to ultimately resolve the matter, but I do think the weight of evidence strongly suggests that, as a general rule, advertising is more likely a factor of importance in reinforcing existing social habits than in stimulating new ones. When it appears that advertising has produced a large behavioral change, chances are that it has in fact only reinforced and symbolized social trends already underway. Some examples may help put this in perspective. The advertising campaign in the late 1920s to attract women to smoking cigarettes and the Virginia Slims cigarette campaign begun in 1968 have been heralded as cases where advertising was largely responsible for producing a dramatic shift in consumer behavior. Yet in both cases—and these are some of the most dramatic examples used to tout the power of advertising—the advertising campaign followed rather than preceded the behavior it supposedly engendered.

Cigarette Sales in the 1920s

In the 1920s, large numbers of women began smoking cigarettes. While their usage represented only 10 to 15 percent of all cigarette consumption by the early 1930s, women before World War I had smoked rarely and had scarcely ever smoked in public, so the change was a dramatic one (Bonner 1926, p. 21). While women had been pictured in cigarette advertising before the late 1920s, they had been pictured as onlookers who might enjoy the aroma of the man's cigarette but there were only intimations, at most, that women themselves might smoke. As late as 1924 the editor of a tobacco trade journal wrote that the industry found the habit of women smoking so novel that "it would not be in good taste for tobacco men as parties in interest to stir a particle toward or against a condition with whose beginnings they had nothing to do and whose end, if any, no one can foresee" (Schudson 1984, p. 192). In 1926, an advertising trade journal held that the tobacco industry was aware of the increasing importance of women in the smoking market but feared a prohibition-like response if it advertised directly to them. Tobacco manufacturers feared stirring up reformers and precipitating a backlash (Bonner 1926).

This changed dramatically within a few years, once the cigarette habit among women of respectable social status was reasonably well established. By 1927, Lucky Strike used famous women opera singers and actresses in advertisements recommending cigarettes and testifying that they were soothing to the throat. By 1928, Lucky Strikes were advertised as a diet-conscious alternative to eating candy: "Reach for a Lucky instead of a sweet." In New York's 1929 Easter Parade, public relations agent Edward L. Bernays arranged for ten women to light up cigarettes as "torches of freedom," and he gloatingly recalls in his autobiographical account of his public relations triumphs that this created a storm of interest and front-page news stories and photographs.

But Bernays was no genius in realizing he could get women smoking in public onto the news pages. Women smoking in public had been on the news pages,

without any public relations impresario at work, for nearly a decade. Several developments made this possible. First, World War I brought women into new roles and new situations. Women war-workers took up the cigarette habit overseas and women working in factories at home took up the habit, too. Second, the war cut off supplies of Turkish tobacco, and milder blends, easier for inexperienced smokers to get used to, began to dominate the market. Third, there was a visible women's movement in the 1920s and women's right to smoke in public became an important symbol of women's equality. Fourth, news coverage of the women's movement, including its battles on the cigarette front, was prominent. Conspicuously placed *New York Times* stories on skirmishes over smoking rules at women's colleges (a topic also very well covered in college newspapers) or front-page stories on conflicts over women smoking on railroad trains, streetcars, or ocean liners were common several years before tobacco companies began picturing women smokers in their ads.

The increasing attention tobacco companies paid to women after 1927 no doubt helped legitimate women's smoking, but did it "cause" women to smoke? The tobacco marketers took advantage of a social change well underway.

Virginia Slims 1968–Early 1970s

Joe Tye, Kenneth Warner, and Stanton Glantz among many others in the public health field, have suggested the Virginia Slims advertising campaign may be related to increased smoking among young women, pointing out that Virginia Slims was introduced to the market in 1968 and began its vigorous and widely noted advertising campaign ("You've come a long way, baby") at the very time (1968–1974) when smoking among teenage girls was increasing. This was especially suspicious because smoking among teenage boys in those same years was decreasing. While Tye, Warner, and Glantz do not assert unequivocally that the Virginia Slims advertised caused the increase in teenage girls' smoking, they certainly leave the implication that they believe it a strong contributing factor (Tye et al. 1987, p. 500). Is this right?

Probably not. Between 1955 and 1966, cigarette smoking increased among American women of all ages from 24.5 percent of all women to 32.3 percent, at a time when smoking decreased among men from 54.2 percent to 50 percent. Using figures for 1968 instead of 1966, the comparison would be a drop for men from 54.2 percent to 47 percent and an increase for women from 24.5 percent to 31.2 percent (U.S. DHHS, Surgeon General 1988, p. 566). Any tobacco marketers reading the evidence of the Public Health Service or their own market reports would have wanted by the mid-1960s to find a way to target women, because women, not men, were the leading edge of growth in the domestic cigarette market. The Virginia Slims campaign followed a growth in cigarette smoking among women, including teenage women. It took advantage of a trend already begun.

The Virginia Slims campaign and the campaigns for several other brands aimed at women attracted some controversy and some protests, especially from feminist groups. More recently, the Virginia Slims sponsorship of athletic events has occasioned public controversy, too. But did Virginia Slims advertising and promotion

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increase smoking among young women? Did it stimulate the trend with which its introduction coincided? Perhaps. I have no evidence that it did not. I would be shocked, indeed, if such a widely noted campaign had no effect at all. But I would be equally surprised to find the Phillip Morris promotional efforts to have anything like the effect of the larger social forces leading women to smoke in this period. These include:

- An increase in women's labor force participation from 35.5 percent in 1960 to 40.8 percent in 1970 to 47.7 percent in 1980. Since women employed in the paid labor force smoke in larger numbers than housewives, this would seem to be a significant factor at least for women eighteen and older (U.S. DHHS 1980b, p. 74).
- Generally increasing affluence and family income through 1973.
- Gradual liberalization of morals and manners, less control of teenagers by parents, and more egalitarian attitudes toward young people, especially women.
- Rapid rise and attention to the "women's movement" in exactly the same period, 1968 to 1974, a movement that seems to have influenced younger women first. As late as 1967, feminist concerns were ridiculed in left-wing social movement circles, but within a very short time thereafter this would not be possible (Chafe 1991, p. 205). In 1962, two-thirds of American women in a Gallup poll said they did not think they were victims of discrimination. In 1974, two-thirds said they were (Chafe 1991, p. 211).

More women entered science and engineering fields and many more women entered traditionally male professions of law, business, and medicine. In the early 1970s, opinion about women's roles was transformed on college campuses. In the 1950s and 1960s, less than 10 percent of entering classes in these professional schools was female; by the mid 1980s, more than 40 percent was. Women represented 10 percent of doctorates awarded in 1971 and 30 percent by the 1980s (Chafe 1991, p. 222).

All these features of women as a market for cigarettes did not go unnoticed by the tobacco industry. Marketers became well aware that women offered them significant marketing opportunities, and they adjusted their product lines and marketing efforts accordingly (Ernster 1985, p. 337). Virginia Slims has been a marketing success, but it seems to be again a case where success comes to marketers who ride the wave of powerful social trends.

Charles Ramond, one-time editor of the *Journal of Advertising Research*, reviewed the literature on the relation of advertising to sales, and concluded that the effect of advertising on sales "is always less than that of population, income and other environmental variables." He adds, "Advertising's effect on sales is almost always less than that of other marketing forces" (Schudson 1984, p. 88). I agree. The opinions I express here, however distant from popular views, are not unusual. They are adapted from the mainstream opinion of economists and others engaged in advertising research, and I think they are almost irresistible given the evidence we have. Commercial advertising is not a sure-fire way to sell an idea or change a

behavior, even a small behavior. Advertising is unpredictable; notably successful advertising campaigns are rare and even these typically result from supporting or reinforcing existing social trends.

Then what is all that advertising for? As Kenneth Warner has observed, it may achieve ends other than the extremely difficult one of initiating new smokers. It may affect people more open to prosmoking messages and more attentive to them than nonsmokers typically are. It may encourage former smokers to start again. It may encourage current smokers to smoke more. It may weaken current smokers' resolve to quit (Warner 1986, pp. 59–60). For smoker and nonsmoker alike, it may help create a sense of the social acceptability of smoking. It *is* evidence, after all, of the social acceptability of smoking. It indicates that smoking can be done legally and publicly. Compare this, for example, to the furtive advertising of condoms or sexual aids. The public advertising of cigarettes greases the cultural skids for smoking.

There is one important feature of cigarette smoking that these general considerations do not confront: almost all smokers become smokers as teenagers. About 85 percent of smokers begin smoking while children or teenagers (Pierce 1991, p. 390). The adult nonsmoker is relatively invulnerable to cigarette advertising. Past the usual point of initiation and past many of the usual reasons for taking up smoking, the adult nonsmoker is likely to be very inattentive to the ads around him or her. (This argument is weaker for nonsmokers who are *former* smokers.) For adults, there is little doubt that cigarette advertisers are indeed seeking to find brand-switchers or to keep their own customers brand-loyal or in other ways to strengthen smokers' allegiance to smoking. They are not proselytizing for new smokers.

But the case with teenagers and younger children may be different. Teenagers are typically less secure in their identities than most groups in the population, and their age-appropriate task is in part to experiment with different adult identities. They are more subject to social pressure and more attuned to advertising than most groups in the population. A Belgian study found that teenagers noticed advertisements more often than adults and were more familiar with cigarette brands than adults (Rombouts and Fauconnier 1988). Teenagers buy the most heavily promoted cigarette brands disproportionately (McNeill et al. 1985, pp. 271–72). It seems likely that advertising helps contribute to the fact that adolescents think a large majority of people their age smoke when, in fact, it is 15 to 30 percent (U.S. DHHS 1980b, p. 285). They "exaggerate the prevalence of smoking, believing smoking is the norm" (Silvis and Perry 1987, p. 369). Almost all adolescents believe smoking is a health hazard but "few believe it is a threat to *their health*. Since most adolescents believe that they can stop smoking whenever they wish, chronic diseases are not seen as a threat" (Silvis and Perry 1987, p. 363).

Tobacco companies insist that their advertising is exclusively directed to maintaining or increasing market share. Critics find this claim preposterous. It is and it isn't. Market share could logically justify cigarettes' substantial promotional budget. At the same time, the industry dies unless children and teenagers start to smoke. The best face one can put on the industry's behavior is that they are seeking to encourage in teens an emotional attachment to a cigarette brand but are hoping they will not start smoking until their eighteenth birthday (and that they will not wait

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No one knows for sure how big a factor cigarette advertising is in leading teens to smoke. That tobacco companies locate advertising in media they know reach large concentrations of teenagers and children is clear, despite industry denials. Recent studies showing that even six-year-olds are familiar with advertising for Camel cigarettes and that Camel has become one of the leading brands for first-time smokers certainly suggests some connection (DiFranza et al. 1991; Fischer et al. 1991; Pierce et al. 1991). The best that could be said for the industry is that it believes advertising to youths has no effect in attracting to smoking people who would not become smokers without advertising. The advertising then simply reproduces for new smokers the "market share" strategy. If the industry assumes that some given percentage of teens will become smokers regardless of advertising, then advertising to teens can be defended as simply an effort to get the teens to adopt a given brand.

This is a dubious but not an absurd argument. It is reasonable to assume that most teens who choose to smoke would do so with or without advertising.

However, can it be asserted with equal assurance that *all* teens who choose to smoke would do so with or without advertising? That would seem rash indeed. It is reasonable to believe that some teens become smokers or become smokers earlier or become smokers with less guilt or become heavier smokers because of advertising. For some teens, surely advertising is a contributing factor to their decision to smoke.

How many is "some"? Twenty percent of teen smokers? Two percent? Two-tenths of a percent? No one knows. But let us assume that cigarette advertising is an important contributing factor to a decision to smoke in just two of every one hundred teens who become smokers. That would mean that advertising is seriously detrimental to the health prospects of twenty thousand minors a year, since about a million minors take up smoking in the United States each year (Pierce 1991, p. 390). Suppose that advertising is a contributing factor to a decision to smoke in just two of every *one thousand* teens who become smokers. That still means advertising represents a significant health danger to two thousand minors a year. Should society not do what it can to protect these two thousand or twenty thousand children this year, or these twenty thousand or two hundred thousand children in the next decade, from the dangers of tobacco?

Toward a Rationale for Public Health Mass-Media Efforts

If advertising can lead smokers to smoke more or if it can turn former smokers into backsliders or if it legitimates smoking or if its power is to be present at the right place at the right time to coax vulnerable teenagers over the edge, then can counter-advertising lure smokers to smoke less? or keep former smokers securely abstinent? or delegitimate smoking? or be at the right place at the right time for the vulnerable teenagers?

While both commercial and public-health advertising may be efforts to persuade the general public to change an attitude or behavior, they are not truly parallel efforts. The cards are stacked against the public-health message in ways that commercial advertising does not have to deal with. This is so in three respects.

First, commercial messages are ordinarily addressed to consumers already favorably inclined toward the product advertised, while health and safety messages are generally addressed to the people "least disposed to listen to their message" (Adler and Pittle 1984, p. 164). A commercial advertisement for a cigarette, for instance, addresses people who are for the most part already addicted to cigarettes. A "smoking is dangerous to your health" message is also addressed to people addicted to cigarettes but, obviously, while the nature of this audience works in favor of the commercial advertisement, it works against the success of the health message. (Ninety percent of current smokers express a desire to quit; this desire is at least some degree of counterforce to the addiction of smokers and may make smokers a more receptive audience for health messages than one would otherwise imagine [Flay 1987, p. 4].)

Second, we conventionally measure the effectiveness of commercial and public-service campaigns differently. The measure for the commercial advertising is straightforward, in principle (in practice, it is rarely possible to isolate the effect of advertising from other causes of sales): if the increased costs of advertising are more than offset by increased income from sales, the ad campaign is a winner. If this means market share increases 1 percent or 0.1 percent, the ad campaign has succeeded. A public-information campaign, on the other hand, that led 1 percent of the target population to buckle their seat belts, or recycle their garbage, or dispose properly of their toxic wastes, or install smoke alarms, or inspect their homes for radon, or consider rationally the cancer risks of chemically sprayed apples, or weigh the costs and benefits of nuclear power plants, would no doubt be judged a failure. Public information campaigns normally seek to affect a substantial segment of the population. (*Should* such campaigns be rated failures? Not if the costs of the campaign were less than the benefits in lives saved and health improved and the money could not have been more effectively spent in some other way.)

Third, commercial advertising has a kind of psychological advantage over public-health communication. Commercial advertising takes the side of the consumer, in a sense, promoting a product and its consumer benefits when they are oriented to desires known to be present in the consumer. Everyone would like a peanut butter that tastes good, although they may differ as to how important this is. Any advertisement that promotes a peanut butter that tastes good or any advertisement that promotes a product that would save the consumer money flatters a sentiment or desire that the consumer has. The consumer is asked simply to consider trying an alternative product to suit present dispositions. The ad does not ask the consumer to change his or her dispositions.

A public-health communication may be different in this respect. The health message pushes the consumer toward a behavior that the communicator claims is in the interest of the consumer. This may well be true—seat belts save lives, smoking cessation saves lives, and presumably people seek long lives. But the communicator, not the consumer, is here defining the consumer's interests, and this is neces-

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sarily paternalistic or preachy, no matter how cautiously it is presented. The commercial advertisement is more often saying "try this, you'll like it" than "do this, it's good for you." It therefore does not have to overcome the resistance that a paternalistic approach will automatically arouse.

Not all differences between commercial advertising and public-health communication make public-health communication the harder task. Messages have greater influence when communicators themselves are highly credible with their audience. Commercial advertising is widely distrusted. Health messages coming from civic organizations or government agencies with strong track records for reliability are more likely to be believed than messages from commercial firms. Nevertheless, the ambitions in public-health messages for changing behavior are so much greater than in commercial advertising that the analogy between the persuasive task of commercial advertising and that of public-health messages is not a good one.

William DeJong and Jay Winsten have argued that pessimism about public-health mass-media campaigns is based on evidence of media campaigns that were too short, that a small proportional success rate may still mean a large numerical success because of the large size of the audience reached, and that recent research suggests media campaigns are successful when properly designed. This means they should carefully identify their target audience, design campaign materials carefully in accord with research on the target audience, key the messages to the audience's current levels of knowledge and existing needs and motives, and make commitments to long-term programs (DeJong and Winsten 1989). Brian Flay's review of antismoking media campaigns supports this view. Flay reviewed a wide range of mass-media antismoking campaigns and concluded that mass-media campaigns, especially using broadcast media, "have produced changes in the smoking behavior of statistically and socially significant, though small, portions of the smoking population" (Flay 1987, p. 1). This is consistent with the apparent success of counteradvertising on television from 1968 to 1970. Flay concludes that mass-media campaigns can create knowledge, attitude, and behavior change; that the more intensive the publicity, the better. A recent public-health campaign in Australia provides support for the view that a well-planned antismoking media campaign can make a difference (Pierce et al. 1990).

Public-health media campaigns may work, but they may also be worth undertaking even without evidence of direct effectiveness. Warning labels may be merited even if there is no easy way to measure effectiveness, even if the effectiveness of the symbols in and of themselves cannot ever be measured, even in principle. This, it seems to me, is the presumption behind most educational efforts. We know, in the end, when education works when, by education, we mean some evident behavioral change: a person learns or fails to learn to swim, a person stops smoking or does not stop smoking. But it is rarely possible to know, even in something so simple as a swimming class, what particular effort or what cumulation of efforts does the trick, overcomes the child's fear of the water or teaches the brain or muscles that a certain pattern of fluttering and floating and floundering can sustain a body aloft in the water. One thing works for one child, another thing works for another child. This is not to say there is no point to general instruction, only that general instruction by itself will not necessarily "take." What does take and when? If swim instructors

knew that, this would be a much easier matter than it is. But does the inefficiency of swim instruction mean that it should be abandoned? More people would drown this way. Fewer people would learn to swim.

Public-health advertising may be worth undertaking not because it is especially effective but because it is inexpensive. It is a bargain-basement strategy in several respects. Relative to other possible interventions, it costs little. It is inexpensive in terms of the time and energy required to arrange it. There are highly qualified professionals at advertising agencies to design an advertising campaign and place the ads in the medium most likely to be cost-effective. An advertising campaign requires no long-term investments. It has very little in the way of sunk costs. It is an intervention that, once begun, can be easily terminated. It can be terminated with little visible human cost, unlike, say, hiring and then having to fire a corps of health-outreach workers.

Health advertising may also be a likely strategy because it may have similar indirect advantages for people in the health professions that commercial advertising has for people in the business world. It gives them a sense of feeling noticed and important. It bucks them up with a sense of their public prominence. It motivates them.

Third, public-health media campaigns do (or can) provide information. They are potentially educational, whether they persuade people to change behavior or not. At a time when the vast majority of the population, including the vast majority of smokers, recognizes that smoking endangers health, the educational value of health advertising would seem limited. But, in fact, people who believe cigarettes are, in general, dangerous may still have very little specific information about what precisely the dangers of cigarettes are. There is evidence that large proportions of the population underestimate the role of smoking in heart disease, do not know that lung cancer is more common now in women than is breast cancer, do not know the dangers of smoking during pregnancy, and underestimate the risks of cigarette consumption relative to other environmental health risks. There remains a large educational job, one that I think the recent glitzy advertising campaign in California did not take into consideration. Even if people do not act on the information they gain from a media campaign, the information gain is not thereby trivial. Many more people believe they should stop smoking than in fact quit successfully, but it is not trivial that their friends and children and other people around them learn from them that they believe their habit to be harmful and would like to give it up. It does not seem to me wise, ever, in a society committed to democratic values, to be overly skeptical of the worth of education.

Policy Options: The Question of an Advertising Ban

An alternative public-health strategy is not to create health messages but to restrict or ban commercial messages that promote dangerous products. Advertising bans have been on the public agenda in one form or another at least since the television advertising ban in 1971. The American Medical Association endorsed a ban on all tobacco promotion in 1985 and the American Cancer Society and American Heart

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Association followed suit in 1986 (Warner et al. 1986, p. 379). There are other proposals besides those for a ban. One is for "tombstone advertising," that is, a prohibition on models, slogans, music, or lifestyle depictions in tobacco advertising, allowing only a simple statement of what the product and brand is and perhaps a display of the package. This would do little good if it led tobacco firms to simply shift more of their marketing dollars to promotion rather than advertising. Another proposal calls for counteradvertising. There are no serious constitutional objections to either of these proposals. Indeed, I see no objections at all. But neither has excited a wave of grass-roots interest.

I am persuaded that normally more speech is better than less, and that First Amendment values should ordinarily prevail. Some in the public-health community are inclined to see the First Amendment issue as a "smoke screen" (Warner 1985; Amos et al. 1991; Minkler et al. 1987). Certainly the tobacco industry's sudden discovery of the value of the First Amendment after decades of using their advertising muscle to discourage free discussion of the dangers of tobacco in popular magazines is an astonishingly shameless hypocrisy. And the Supreme Court's *Posadas* decision seems to leave the road clear to advertising bans on cigarettes.[2] Still, questions of free speech deserve serious consideration.

The Supreme Court in the past two decades has extended First Amendment protection in part, not in full, to commercial speech and has done so, I believe, for generally good reasons. In the *Central Hudson* case, the Court established a sensible test to determine when government can legitimately infringe on commercial speech. The *Central Hudson* test is that if the commercial speech concerns a lawful activity and is not misleading or fraudulent, then it can only be restricted if (a) the government's interest in doing so is substantial, (b) the restrictions help the government attain its interest, and (c) no less-restrictive remedy would serve that interest as well.[3]

The *Posadas* case turned this around. In finding that Puerto Rico was within its rights to prohibit advertising of gambling casinos even while permitting the casinos to operate, the Court specifically mentioned that governmental jurisdictions have been found to have the power to regulate products or activities deemed harmful "such as cigarettes, alcoholic beverages, and prostitution" in a wide range of ways, including not only outright bans on the product or activity but restrictions on "stimulation of its demand."[4] Justice Brennan offered an eloquent dissent, holding that there is no reason to provide commercial speech less protection than other types of speech "where . . . the government seeks to suppress commercial speech in order to deprive consumers of accurate information concerning lawful activity."[5] This dissent would offer some hope to those who would prefer a "tombstone advertising" set of restrictions rather than an outright ban on advertising.

In the case of tobacco, the evidence of the health consequences of smoking provides overwhelming justification of a legitimate governmental interest. Whatever doubts one may have about how effective tobacco advertising is in encouraging and legitimating smoking, it is pointless to argue that restricting or banning tobacco advertising would make *no* difference at all. Banning tobacco advertising would save some lives. Whether there are better measures than an advertising ban to improve public health with respect to smoking is a harder question. Would legisla-

tion requiring tobacco advertisers to contribute a percentage of their advertising budgets to a fund for the production of antitobacco advertisements be a better direction? The evidence on the effectiveness of counteradvertising in 1968 to 1970 is not settled, but it tends to suggest that the counteradvertising was more effective than the commercial advertising. Or it may be that the interaction is exactly what mattered: that the mix of advertising and counteradvertising showed up the hypocrisy of the commercial advertising or simply kept alive a running debate. Since that running debate has plenty of social and cultural support now that it did not have in 1968, it is unlikely that ads and counterads would have the same kind of effect today. The lessons of 1968–1970 (even if they were clear) may not be transferable. Still, it is at least arguable that this is a case where the rule that "more speech is better than less" applies. Counteradvertising may be not only a less restrictive means than an advertising ban to achieve a legitimate governmental objective but it may be more effective.

If we compare the policies of an advertising ban, the provision of counteradvertising, and tombstone advertising regulations, their desirability varies according to what criterion we are applying. In terms of providing the least challenge to First Amendment doctrines, counteradvertising (more speech is better than less) would be the best policy, tombstone advertising next best, and an advertising ban the least desirable. In terms of achieving a governmental objective of public health, we do not have evidence adequate to say whether counteradvertising would prove more effective than an advertising ban or less effective; we could reasonably, but not certainly, presume that tombstone advertising regulations would be somewhat less effective than the alternatives. In terms of the convenience, economy, and effectiveness of enforcement, a total advertising ban would be easier to administer than tombstone advertising regulations or counteradvertising efforts. In terms of political feasibility, I suspect that tombstone advertising regulations would be the easiest to pass, since tombstone advertising offers no significant First Amendment problems, unlike a ban, and, unlike counteradvertising, requires no public expenditure of funds or complicated financial scheme to ensure that the tobacco industry underwrites counterads.

Any of these strategies, I think, would make good public policy, given that the public health is of overriding importance and the restrictions these remedies impose on free speech apply only to commercial speech for a product that kills people when used as directed. There may be a slope here to other products or services (alcohol is the next case to look at), but I do not think it is a very slippery one.

It may be that the advertising ban is the best strategy because its simplicity and boldness may attract and motivate public support. Alternatively, the public may be more effectively mobilized if the symbolic aspects of smoking policy are disaggregated. Instead of one general effort for advertising bans, waged at the federal level and with the First Amendment as a major issue, efforts at state and local advertising restrictions might make more strategic sense. Tobacco advertising on billboards, for instance, represents 13 percent of outdoor advertising revenue in 1989, down from 40 percent in 1979 (Outdoor Advertising Association of America, May 28, 1991 press release). But why should it exist at all? Surely it is a form of advertising easily available to minors that should be entirely eliminated. Since this would be a restriction on speech of the "time, place, and manner" sort, it has smoother sailing on

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constitutional grounds. Or consider the placement of cigarette vending machines in locations accessible to minors. That is another issue that can be separately lobbied and legislated. What about banning the distribution of free samples of cigarettes? Each of these separate efforts takes work, but each is a vivid reminder to public-health workers and their supporters of the hypocrisy of the tobacco industry and the seriousness of the battle at stake.

Conclusions

Because cigarette advertising is a less powerful marketing tool than many people think, banning it is not likely to have a dramatic impact on the prevalence of smoking. Even so, advertising is one of the factors in the environment that encourages children and adolescents to start smoking, and there is ample justification for efforts to find public policy remedies that attack cigarette advertising.

Conceptually, the advertising issue has been separated from other public policy issues. Talking about a cigarette or picturing a cigarette is not the same as thrusting one into the hands of a consumer. But the line between advertising and promotion is wavy and there is a gradation from the billboard to the free sample that all comes out of the same part of a company's budget. On the public-health side, public education is not exclusively a symbolic activity, nor are more coercive or regulatory efforts without significant symbolic dimensions. Even at law, where speech is protected in ways action is not, commercial speech is far from absolutely protected. It is closer to an act of selling than it is to a speech act of advocacy, judging from the tricky distinction the Federal Trade Commission has made in considering its jurisdiction over the tobacco companies' "free speech" ads.

If advertising is less powerful than its critics usually claim, this is no cause to ignore it, and if health education meets with only limited success, this is no grounds for despair. There is good evidence that the American Cancer Society report on smoking in 1953 and the Surgeon General's Report on smoking in 1964 both had very large effects on smoking behavior (Schneider et al. 1981). In 1953, publicity about the dangers of smoking (particularly in *Reader's Digest*, a magazine that does not accept tobacco advertising) led to a decline in smoking and, among the many who still smoked, a sharp swing toward the use of filtered cigarettes. In 1964, publicity led to a sharp decline in smoking. Educational efforts to chip away at the rock of addiction are not always slow. In these instances, dramatic, legitimate, convincing, newsworthy evidence greatly affected both smokers and, in elaborate defensive maneuvers, the tobacco industry. Educational efforts in the mass-media are no panacea, either by themselves or in conjunction with other tobacco control measures, but there are good grounds for a measured, continued faith in the uses of education.

Notes

1. There are overwhelming difficulties in specifying the econometric models.

Time-lag problems. Might the effect of advertising be delayed? This seems plausible but, unfortunately, is recalcitrant to measurement. Should the model estimate the relation of

advertising spending at time t to sales at t + one day? Or t + three months? Or a certain percentage of t + 1 and a different percentage of t + 2 and yet another percentage of t + 3? We know very little about how quickly the effect of advertising "wears out" or whether there might be a "sleeper effect" of advertising or whether "wear out" depends on the quality of the advertisement, the novelty of the product, the season of the year, or what.

Marginal rate problem. Kenneth Warner and colleagues have pointed out that econometric modeling is designed to estimate the value of the next marginal increase or decrease in the independent variable (advertising) on the dependent variable (sales). This may not provide useful information for public policy, especially as the question of banning all tobacco advertising outright is considered (Warner et al. 1986, p. 371). The existing studies that estimate the relationship between advertising and consumption based on data from a time period of relatively high levels of both advertising and consumption are not designed for extrapolation to a time period in which there is no advertising at all. Moreover, if advertising is designed both to affect market share and to increase market size, then "the rational level of advertising expenditure will exceed that which increases aggregate consumption" (Warner 1986, p. 68). If the marginal advertising dollar affects market share, not market size, then any statistical relationship between aggregate advertising and aggregate consumption will be reduced.

Direction of causation problem. Just what is the dependent variable and what is the independent variable? Econometric modeling does not ordinarily sort this out but operates on the common-sense assumption that advertising, designed to have an effect on sales, is the independent variable. Is it? Studies of how businesses actually establish advertising budgets indicate that the actual, real-world relationship is that last year's sales volume may be used as a standard for determining this year's advertising budget (Schudson 1984, p. 17). When business is good, advertising budgets grow; when business is slow, advertising contracts (Horovitz 1991). Thus increases in sales over the years will lead to increases in advertising budgets over the years and a positive relationship will turn up without any evidence that advertising stimulates sales (Boddewyn 1989, p. 1256).

Measurement problems. Do advertising expenditures, invariably accepted in econometric models as an appropriate measure of consumer advertising exposure, fairly represent public exposure to advertising? All models of cigarette advertising and smoking take advertising expenditure to be a plausible index of advertising effectiveness. It may be. But it may not be. It leaves out quality differences, of course. Not all advertising is equally effective; some advertising may even be counterproductive (Warner 1986, p. 67). It also takes no account of the medium of advertising. In the United States since the television advertising ban in 1971, tobacco companies have increased their advertising budgets, moving to larger outlays in magazines, newspapers, and billboards. Still, for this increased expense they reach fewer people than they did with television ads and they reach them in less dramatic and focused ways. "Advertising expenditure" is no more adequate a proxy for advertising reach than it is for advertising quality.

Of course, notice of cigarettes has returned to television in the increased popularity of "movie channels" in cable television that show films where people smoke and in the television broadcast of sporting events at stadiums that have prominent cigarette billboards or in the television broadcast of sporting events sponsored by cigarette companies or cigarette brands. According to one estimate, on NBC's ninety-three-minute 1989 Marlboro Grand Prix, there were 4,997 images of Marlboro signs, 519 of Marlboro billboards, 249 of the Marlboro car, making the brand name visible forty-six of the ninety-three minutes of the telecast (Will 1990). But does this kind of background exposure have less, as much, or more effect than the horde of sixty-second commercials that used to appear on prime-time television before the ban? We have no measure of this.

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variable that should be measured. Tobacco companies have not only redistributed advertising expenses among media but have shifted advertising dollars to promotion, that is, to forms of sales promotion that do not use normal media channels and generally provide the audience not only an image of a product but some tangible reward. Promotion thus prominently includes the distribution of free samples, promotional discounts provided to retailers to display a cigarette brand advantageously, the provision and redemption of coupons, the sponsoring of contests and give-aways, or the sponsorship of public entertainment. Tobacco firms, like other companies, may also pay movie producers for prominently displaying their brand in a film. While advertising represented 75 percent of all advertising and promotional expenditures for cigarettes in 1975, it represented only 32 percent by 1988 ("Cigarette Advertising—United States, 1988" 1990, p. 263).

There is also a problem in measuring tobacco consumption. Most studies use as their measure the total number of cigarettes people consume, but an argument has been made that the better measure, with very different implications for public policy, is the total amount of tobacco people consume. Public-education efforts, notably the Surgeon General's report of 1964, can be shown to have had much greater impact on consumption if one uses total tobacco, rather than total number of cigarettes, consumed (Schneider et al. 1981, p. 609).

2. Posadas de Puerto Rico Assoc. v. Tourism Co. of Puerto Rico, 478 U.S. 328 (1986).

3. Central Hudson Gas & Elec. Corp. v. Public Serv. Comm'n, 447 U.S. 557, 564 (1980).

4. Posadas de Puerto Rico, 478 U.S. at 346.

5. *Id.* at 350 (Brennan, J., dissenting).