

EMORY UNIVERSITY

The Carter Center

1641 North Decatur Road
Atlanta, Georgia 30322
404/329-4340

July 2, 1985

To Alan Blum

Three years ago we established the Carter Center of Emory University to address some of the most important issues that face our nation. With the help of President Gerald Ford, Henry Kissinger, Cy Vance, Dean Rusk, William Ruckelshaus, Robert McNamara, Dr. Ed Brandt, Dr. Bill Foegen, Ambassador Anatoly Dobrynin and other American and foreign leaders we have begun work on Middle East peace, U.S.-Soviet relations with an emphasis on arms control, national health policy, human rights, and global environmental problems. The essence of our work will be the analysis of complicated issues and the constructive resolution of disputes or differences.

In September we will convene the first symposium designed to evolve specifically the most effective approaches to resolving important differences. After a great deal of consideration by America's foremost experts on conflict resolution, we have decided to assess the subject of tobacco and its production, distribution and consumption.

Our purpose is not to attempt to negotiate or resolve the issue, but jointly to explore cooperative approaches that might benefit all who must deal with this shared concern.

The symposium will be small and its participants will be carefully selected. We want only those who can speak with knowledge and authority on the subject. We will convene at Callaway Gardens, near Atlanta, in a private setting designed to encourage a full, yet discreet, exchange of ideas. I will be present throughout the sessions to insure that the tone of the discussions is positive and constructive.

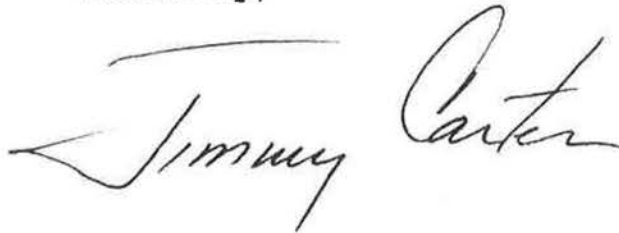
I am inviting persons representing a wide range of interests such as growers, manufacturers, distributors, advertisers, elected agricultural officials, public health specialists, and citizens' groups. These participants will meet privately from Sunday afternoon, September 8, through Tuesday afternoon, September 10. A group of nationally recognized, qualified professionals in conflict resolution has agreed to assist in these discussions.

One of the inevitable products of this conference will be the opportunity for participants to develop relationships with individuals whose viewpoints are quite different from their own. You can make a significant contribution to our discussions, and it is important to me for you to attend the symposium.

I have asked my assistant, Dayle Powell, to contact you within the next two weeks. She will give you a more complete briefing about the symposium and receive your suggestions on how our effort can be most productive.

We hope that you will be able to join us in what should be an exciting and mutually beneficial symposium.

Sincerely,

A handwritten signature in cursive script, reading "Jimmy Carter". The signature is written in dark ink and is positioned to the right of the word "Sincerely,".

Dr. Alan Blum
Editor
New York State Journal of Medicine
Post Office Box 5404
Lake Success, New York 11042

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1641 North Decatur Road
Atlanta, Georgia 30322
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NEW YORK STATE
JOURNAL OF MEDICINE

JUL 30 1985

July 25, 1985

Dr. Alan Blum
Editor
New York State Journal of Medicine
Medical Society State of New York
Post Office Box 5404
Lake Success, New York 11042

Dear Dr. Blum: *Alan,*

We are pleased that you are going to attend the Carter Center's symposium in September. To facilitate planning, we are including information for you, and asking that you give us certain information.

Callaway Gardens Lodging

Located 70 miles south of Atlanta, Callaway Gardens resort and world-famous Gardens are set on 2,500 acres of Georgia woodlands. Callaway Gardens maintains four golf courses, 19 lighted tennis courts, raquetball courts, 13 lakes and 17 miles of scenic trails.

You will be living in the Country Cottages complex. Please be sure to review the enclosed brochures for more details. Cost of accommodations will be paid for by the Carter Center. This cost will include expenses for all meals. You will be responsible for incidental room charges, recreational fees, bar bills, and miscellaneous incidentals. Unfortunately, we will not be able to provide accommodations for spouses or assistants.

Transportation

The Carter Center will reimburse round trip tourist class air fare, or mileage expense. We will also provide ground transportation to and from the Atlanta Airport and Callaway Gardens. Please contact Gateway South Travel Account Executive Rhee Nelson to make all transportation plans. Ms. Nelson's toll free phone number is 1-800-438-0038. Participants traveling within Georgia should call collect 404-588-1188.

Schedule and Registration

The Schedule of Events and Symposium Objectives are enclosed to provide an indication of the general structure of the symposium. We would like to emphasize that the atmosphere will be relaxed and informal. Participants are requested to dress informally for all events including meals.

It is not necessary that you prepare any speech materials since participants will not be called upon to present any formal speeches. However, for our background reading and staff briefings, it would be helpful to have copies of any position papers or other materials you may have which summarize your role or position with respect to tobacco.

For our administrative purposes, we have enclosed a registration form. Please return this as soon as possible. Additionally, we request that you send us a short biographical sketch and a photograph by August 15, 1985.

We are enclosing portions of a book by Roger Fisher called Getting to Yes. Mr. Fisher is renowned for his publications on conflict resolution techniques. Reading the enclosure will give you a general idea of the principles of negotiation.

We truly look forward to your active participation in this symposium. If I may be of any assistance, do not hesitate to call.

Sincerely,



Dayle E. Powell, J.D.
Assistant to President Carter

Enclosures

Alan
I am looking forward to seeing you
at "Camp Callaway". Thanks for
being a sounding board for my
problems.

DEP

OBJECTIVES

There are six objectives of the series of symposia to be conducted by the Carter Center on Conflict Resolution. They are: 1) to provide a forum for the parties involved in important disputes to examine those disputes and work toward cooperative resolution processes, 2) to inform the parties of a range of cooperative dispute resolution processes, 3) to develop an ongoing forum or mechanism for the parties' work on the issues, and to provide technical assistance, follow-up, and to encourage ongoing relationships between the parties, 4) to develop and refine models for conflict resolution, 5) to assess the symposia as part of a long range Carter Center research effort on conflict resolution, and 6) to test models for future Carter Center activities in conflict resolution.



THE CARTER CENTER OF EMORY UNIVERSITY

SEPTEMBER 8 - 10, 1985

Symposium on Creative Approaches to
Resolution of Conflict in Modern Society: Tobacco

Sunday, September 8, 1985

- Noon - 4:30 p.m. Registration and check-in
- 4:30 - 5:30 p.m. Reception hosted by President Carter
and Mrs. Carter. (Azalea Hall)
- 5:30 - 7:00 p.m. Dinner (Azalea Hall)
Welcome, President Carter
Introduction of Staff and Participants
- 7:00 - 9:15 p.m. Introduction to Symposium and Agenda
James Laue presiding (Laurel Hall)
- I. DEFINING THE ISSUES
Plenary and Small Groups:
Issue Analysis and Development of
Consensus
- 9:30 p.m. Informal Gathering Near Swimming Pool

Monday, September 9, 1985

- 7:30 - 8:30 a.m. Breakfast (Flower Mill Restaurant)
- 8:30 - 10:00 a.m. Plenary (Laurel Hall)
Review and Rank Issues
- 10:00 - 10:30 a.m. Break
- 10:30 - 2:30 p.m. II. MEDIATING THE ISSUES
Task Groups (including lunch)
Facilitators:
1. Michael Keating
2. William Spencer
3. Richard Salem
- 2:30 - 5:30 p.m. BREAK

4:30 - 5:30 p.m. (photo opportunity)	Wine and Cheese Reception with President and Mrs. Carter. (Pool area; Laurel Hall if rain)
5:30 - 7:30 p.m.	Plenary (Laurel Hall) Task Group Reports and Assessment Unresolved Issues Developing Tomorrow's Agenda
7:30 - 10:00 p.m.	Dinner (East Farm Barn Georgia-style Cookout)

Tuesday, September 10, 1985

7:00 - 8:00 a.m. CHECK OUT	Breakfast (Flower Mill Restaurant)
8:00 - 9:00 a.m.	Plenary (Laurel Hall) Review Negotiation and Mediation Processes
9:00 - 12:30 p.m.	III. NEGOTIATING THE ISSUES Task Groups 1, 2, and 3.
12:30 - 1:30 p.m.	Lunch in Task Groups
1:30 - 4:00 p.m.	Plenary (Laurel Hall) Task Group Reports and Assessment Next Steps on the Issues Closing Remarks, President Carter
4:30 p.m.	Shuttle Departs for Atlanta Airport



- Imports and Tobacco Program
- Economics
 - Family farm
 - Health Care Costs
- Health
 - Medical Care Costs
- Rights and Responsibilities
 - Choice
- Youth
- Public Awareness
 - Education
 - Advertising
 - Press
 - Research
 - Behavior Modification

- Carry abt health & ec. welfare of people in soc.
- Nobody is satisfied with status quo
- All concerned & subj of tobacco
- All expressed need to have their positions/sits understood
- All want to solve "problem"
- Health problems that need addressing

I think you're
are going to smoke
regardless

Compete
collaborate
compromise
avoid
accommodate

DEFINING THE ISSUES - Small Groups

Sunday Evening, September 8, 1985

1. **Dick Salem, Dan McGillis, Staff**
Dr. Rob Amler, Centers for Disease Control
Scott Ballin, American Heart Association
Commissioner Jim Graham, North Carolina
G. Bernard Midden, Farmer-Kentucky
Dr. Don Shopland, Federal Office on Smoking & Health
Representative Lindsay Thomas, Georgia
2. **Bill Spencer, Peggy Herrman, Staff**
Commissioner David Boswell, Kentucky
Mike Kerrigan, Smokeless Tobacco Council
Dr. Bob McKenna, American Cancer Society
John Oates, American Heart Association
Dr. Richard Richards, Doctors Ought To Care
3. **Mike Keating, Beverly Schaffer, Staff**
Dr. James Callahan, National Cancer Institute, NIH
Matt Dykes, Farmer-Kentucky
Robert Froman, U. S. Burley Producers
Commissioner Tommy Irvin, Georgia
Dr. Don Millar, National Institute on Smoking & Health
4. **Edith Primm, Paul Cohen, Staff**
Dr. Alan Blum, New York Journal of Medicine
Commissioner Mason Carbaugh, Virginia
Dr. Lois Ellison, American Lung Association
Hart Hudson, Farmer-Virginia
Collins Killburn, Council of Churches, N. C.
Fred Waters, Burley Political Action Committee
5. **Janet Rifkin, Staff**
Bob Flaig, Farmer-Kentucky
Dr. Burns Jones, North Carolina Health Council
Matt Myers, Coalition on Smoking or Health
Robert Nash, Georgia Farm Bureau
Jim White, Staff Assistant to Senator Gore, Tn.

**GROUP ONE
AZALEA HALL**

**Mike Keating - Facilitator
Jack Etheridge - Assistant
Beverly Schaffer - Researcher**

1. Robert Froman
President
U. S. Burley Producers
2. Representative Lindsay Thomas
Georgia
3. Commissioner Tommy Irvin
State of Georgia
4. Dr. Rick Richards
National President
Doctors Ought To Care
(Medical College of Georgia)
5. Collins Kilburn
Council of Churches
North Carolina
6. Hart Hudson
Farmer
7. G. Bernard Midden
Farmer
8. Dr. Burns Jones
North Carolina Health Council
9. Scott Ballin
American Heart Association
10. Dr. Don Shopland
Federal on Smoking and Health

GROUP TWO
COTTAGE #2227

Bill Spencer - Facilitator
Edie Prim - Assistant
Peggy Herrman - Researcher

11. Mike Kerrigan
Smokeless Tobacco Council
12. Commissioner Mason Carbaugh
Virginia
13. Commissioner David Boswell
Kentucky
14. Matt Myers
Coalition on Smoking OR Health
15. Dr. Bill Foege
Centers for Disease Control
16. Bob Flaig
Farmer
17. Robert Nash
Georgia Farm Bureau
18. James Callahan
National Cancer Institute, NIH
19. Dr. Don Millar
National Institute on Smoking and Health
Centers for Disease Control
20. John Oates
American Heart Association
(Vanderbilt University School of Medicine)

**GROUP THREE
COTTAGE #2117**

**Dick Salem - Facilitator
Janet Rifkin - Assistant
Dan McGillis - Researcher**

21. Matt Dykes
Farmer
22. Jim White
Staff Assistant to Senator Gore
23. Dr. Bob McKenna
American Cancer Society
24. Dr. Rob Amler
Centers for Disease Control
25. Fred Waters
Burley Political Action Committee
26. Commissioner Jim Graham
North Carolina
27. Dr. Alan Blum
New York Journal of Medicine
28. Dr. Lois Ellison
American Lung Association
29. Robert Barrett
Hewlett Foundation

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Representative
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Washington, D.C. 20515

Mr. Fred Waters
Executive Secretary
Burley Political Action Committee
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Carrollton, Kentucky 41008

Staff Assistant James W. White
Office of Senatore Gore
393 Russell Senate Office Building
Washington, D. C. 20510

In Practice

Conflict Resolution Symposium Derails a Potential Tobacco "War"

Dayle E. Powell

According to the U.S. Surgeon General, tobacco is responsible for the deaths of over 330,000 Americans each year from such causes as heart attacks, strokes, cancer, lung disease, infant mortality, and house fires.¹ It is the single leading cause of premature death in the United States. The growing of tobacco, however, is one of the major cash crops of several U.S. states and, in the opinion of many Americans, the consumption of tobacco is, and should remain, strictly a matter of personal choice.

How then does one balance the interests of the smoker, the nonsmoker, the tobacco industry, health care providers, and a government that is interested both in the health of its citizens and the preservation of free enterprise? The staunch anti-smoking crusader would say that the answer is simple: Stop smoking at all costs, through legislation, education, and regulation of the industry. Tobacco industry representatives (and civil libertarians) might counter by focusing on the individual's right to choose, the economic benefits generated by the business, and the tradition of free enterprise. Is it possible to resolve such conflicts in a manner that will satisfy—or at least mollify—these numerous, often diametrically-opposed interests? Are there useful processes that could be applied in this conflict, as well as in other major "yes-and-no" disputes facing contemporary society, such as abortion, the death penalty, etc.?

One such effort took place in September of 1985, when a small group of leading antagonists on the issue of the production, sale, and consumption of tobacco met together at a woodsy mountain retreat in Georgia over a period of three days. The goal of these meetings—which were staffed by a group of mediators skilled in conflict resolution processes—was not to resolve, or even attempt to resolve, the many issues related to the tobacco controversy. Participants in these meetings maintained positions that were unchangeable, and

converts from one position to another were highly unlikely. Rather, the purpose of the session was to empower the parties *themselves* to work toward resolution of those issues that could be negotiated, and to do so through negotiation processes that may be more cost-effective and timely than litigation, lobbying, and traditional bargaining.

One indication of the level of intensity and volatility among this group of antagonists is the fact that a near fistfight erupted at the swimming pool on the first day of the program. It was not a promising beginning to the Carter Center's inaugural conflict resolution symposium. However, in a very short period of time, formerly bitter enemies on the tobacco issue began to try working collaboratively on possible solutions to mutual problems. In fact, many have credited the Georgia symposium with paving the way for a compromise agreement on the "Smokeless Tobacco Act," a controversial piece of legislation then pending in the U.S. Congress which would ban all television and radio advertising for smokeless tobacco products² as well as require health care warnings on the labels of such products. In February of 1986, some six months after the symposium, President Reagan signed the Smokeless Tobacco Act into law with hardly a ripple of the storm of controversy the legislation had been expected to generate. How the Georgia meeting happened, the design of the symposium, the activities that followed it, and an explanation of why this particular program may have "worked" are the subjects of this article.

Background

In 1984, the Carter Center—which also houses the Carter Center of Emory University, the Jimmy Carter Library, the Task Force for Child Survival, the Global 2000 organization, and the Carter-Menil Foundation—conducted a health policy study called "Closing the Gap." This initiative sought to identify the leading causes of premature death and illness in the United States and to look for specific interventions to reduce the gap that exists between scientific knowledge and the application of that knowledge in individual lives. Scholars involved in the "Closing the Gap" project cited tobacco as public health enemy number one. According to one of the "Closing the Gap" speakers, the number of deaths resulting from the use of tobacco each year is equivalent to the number of people who would die if three jumbo jets crashed, killing all passengers aboard, every single day of the year.

Recent governmental moves to limit or eliminate the public use of tobacco products, as well as pending litigation in many states on questions of product liability, are creating even further divisions between smokers and non-smokers, tobacco advocates, and abolitionists. These factors are also contributing to the need for a more rational decision-making process for the parties to the conflict.

Against the advice of this author, who thought the alcohol question was a far more manageable first case for the Carter Center to undertake, President Carter decided to focus on tobacco as the inaugural work of the Center's program on conflict resolution. For him tobacco represented even more of a challenge than alcohol. Parties to the conflict surrounding the consumption of alcohol, he reasoned, were already making great strides in cooperation. The same could not be said for the conflict over tobacco. So tobacco was the chosen subject. The lines were clearly drawn. The next questions were: Could we get the parties to come, and how should the effort be designed?

Dayle E. Powell is a Fellow and Director of Conflict Resolution Programs at the Carter Center of Emory University, One Copenhill, Atlanta, Georgia 30307. The Center, founded by former U.S. President Jimmy Carter, is a nonprofit, nonpartisan institution focusing on conflict resolution, human rights, international affairs, and health policy.

Our research efforts identified the leading manufacturers of tobacco products in the U.S.,³ prominent spokespersons for the industry, secretaries of agriculture for the four top tobacco-growing states, a number of tobacco farmers or distributors, and members of the Congress from tobacco areas. On the opposite side of the controversy, representatives were chosen from the Cancer, Heart and Lung Associations, D.O.C. (Doctors Ought to Care, an anti-tobacco activist group), key health researchers, and public policy specialists, among others.

An effort was made to secure numerically balanced participation on both sides of the controversy. There were also certain differences in education or sophistication among the participants, and these factors were taken into account in the design of the process.

A team of trained mediators was called in to staff the symposium. This effort was led by James H. Laue, Lynch Professor of Conflict Resolution at George Mason University and executive director of The Conflict Clinic, Inc., assisted by William Potapchuk, associate director of the Clinic. Mediation "teams"—consisting of facilitators, co-facilitators, and researchers—worked with the participants in each of three small groups.⁴ The teams were present at all plenary sessions and led small "breakout" sessions in mediated problem-solving. The researchers took no part in the process of the breakout sessions, but monitored the group continuously to observe critical turning points in their interaction and to capture data on the process.

The design for the symposium was essentially a teaching model. Parties to a real conflict would jointly define their own issues, then work through simulated negotiations, mediations, and other exercises, to learn how escalation of conflicts deprives parties of the power to control their destinies.

The Dispute Resolution Process

The symposium began with a get-acquainted reception by the swimming pool. A Carter Center intern found that one of his first tasks was to step between a doctor and tobacco distributor just as the two were literally coming to blows. This initial flare-up was the only open hostility and, once it was vented, the two settled into the structure of the symposium. Each was a valuable participant.

The first evening had three objectives: to become acquainted, to define the issues on which the participants would focus, and to rank order the issues. The dialogue which began at the poolside reception continued over an informal dinner. Each participant and staff member was asked to introduce himself or herself to the group and tell about his or her background with respect to tobacco. A friendly competition developed as one after another tried to demonstrate the longest connection with burley or flue-cured crops. A stout member of the process team took top prize, however, when he introduced himself as a "burly Irishman." Since he had been burly since birth, he claimed the victory.

In the first plenary session that evening, the participants were asked to set their own agenda. To do this, they were divided into small groups that were balanced numerically and by issue orientation. Working in various corners of the large plenary room, using a single facilitator, each small group was asked to define the issues they wanted to discuss. In the small groups' reports to the plenary session, it became apparent that several issues were considered important by all the groups. The parties were asked to consider which among the many possible issues they had defined were the ones that: (1) were important to most or all of

those present; (2) probably could be negotiable; (3) possibly could yield some progress in the short run; and (4) were susceptible to open and frank discussions. The lists were then quickly winnowed, narrowing to several issues the original menu of 27. Chief among them were questions of tobacco imports, marketing and consumption by youth, the economic plight of tobacco farmers, price supports, and alternative crops. A process of rank ordering was then used to determine the order of focus for these few issues, and the groups were ready to begin.

The symposium design focused most of the parties' efforts on working in parallel task groups. Each group, using a triad of professionals, would be working on the same issues and utilizing similar processes. For example, group one was taught how the single issue of tobacco imports could be affected by alternative processes of conflict resolution. The model was one of first allowing the parties to role play a negotiation based on that issue, followed by a debriefing in which they were encouraged to share their impressions with each other. Then, they were taken through a mediation exercise on the same issue, with a member of the process team serving in the role of mediator. With time permitting, they were also taken through other problem-solving exercises on the issue. In a different location, groups two and three were going through similar exercises. However, each group's exact process was unique due to the style of the mediation teams and the personalities of the groups.

The parties in each of the parallel work groups quickly came to realize that, as the level of conflict escalated, it became necessary to involve third parties to either help them resolve their dispute (mediate) or resolve the dispute for them (arbitrate). Most complained that such intervention caused them to lose control of the outcome of the dispute. Their destinies were literally being placed in the hands of strangers. Even if the third parties were unbiased "neutrals," the participants saw the advantage in maintaining control over the outcome, resolving their differences where possible before they escalated to the point of requiring outside involvement (negotiation).

A surprising degree of uniformity resulted from the parallel work group sessions. Indeed, without knowing what the other groups were doing, each of the task groups came to consensus on certain of the issues at about the same time as the others. In their report to the plenary at the closing session, there was consensus on several issues:

1. All agreed that it is in everyone's best interest to help the tobacco farm family and keep control of the growing of tobacco in their hands, rather than large conglomerates. Neither health interests nor the interests of the U.S. tobacco growers are compromised in principle by maintaining a viable tobacco program and by requiring imported tobacco to meet U.S. production standards.
2. Minors should not use tobacco, nor should tobacco companies market their products toward minors. There should be a program of education for minors about the health consequences of tobacco use.
3. Imports of tobacco products should be restricted.
4. The participants favored a tobacco price support quota system which would ensure a minimum price to farmers who did not overproduce. The tobacco interests supported this idea to ensure profitability. The health interests supported it because of the correlation between the cost of tobacco and the number of consumers, particularly young consumers.

Results of the Symposium

For many years, whenever the U.S. Congress addressed questions involving the tobacco industry, there were massive lobbying efforts, lawsuits, delays, and generally "win-lose" outcomes for all parties. This was not the case with the "Smokeless Tobacco Act" legislation pending in the fall of 1985 that would require the placement of strong health warnings on smokeless tobacco products and ban advertisements for them in any form of electronic media. The seeds for this remarkable compromise can be traced to the Carter Center symposium, which was attended by two key stakeholders in the pending legislation—the head of the Smokeless Tobacco Manufacturers' Association and the Director of the Coalition on Smoking OR Health.

The spirit of collaborative problem solving that had worked so well at the tobacco symposium was seen by these stakeholders as presenting a rare window of opportunity with a potential for a breakthrough on the legislation. This author and William Spencer of Interaction Associates were asked to continue to work with the parties in Washington to pursue a negotiated settlement on the bill.

A member of the Congress donated office space for a neutral meeting site. Thereafter, meetings were held with the principal members of the opposing camps to explore common ground.

In the Washington follow-up, it quickly became apparent to the parties that a negotiated settlement was in the best interest of both sides. The manufacturers knew they would face piecemeal state legislative efforts that would be quite costly if they defeated federal attempts to require uniform warning labels. Moreover, they saw the requirements of warning labels as a potential affirmative defense in any product liability lawsuit. The health coalition recognized that efforts to fight the manufacturers state-by-state would also be costly and tie up staff for years. When both sides saw winnable outcomes easily within their reach, they were able to put aside past problems and reach a compromise on the pending bill.

The resulting passage of the Smokeless Tobacco Act of 1986 banned all advertisements from television and radio, required disease-specific warning labels to be prominently displayed on all smokeless tobacco products, and required that such warnings be periodically rotated. A *Washington Post* article published on January 15, 1986, referred to the "unusual alliance" on this legislation between the tobacco industry trade association and the anti-tobacco health coalition. Unusual perhaps—but not surprising when one considers the months of negotiations that took place prior to and concurrently with the congressional debate.

In a letter to President Carter following the negotiations, Matthew L. Meyers, the director of the Coalition on Smoking OR Health, commented:

...Your efforts... played an important role as a catalyst in beginning the negotiation process and in focusing the negotiations... The Carter Center can look at this legislation as the successful culmination of a process begun by you.

Some Principles

Why did the tobacco symposium succeed? Were there factors present that can be replicated in future efforts? Some of the factors contributing to the positive resolution in this case would include the following:

(1) *The Convener.* It might be argued that having a former United States President serve as the symposium convener was the single factor that most contributed to the likelihood of the program's success. Certainly there were parties present for whom the attraction of a several-day retreat with President Carter was stronger than the invitation to learn about collaborative processes. However, there were also invited parties who declined to attend because the Carter Center's previous health policy work was viewed as biased against their interests. These parties were representatives of the cigarette companies. Issues were also raised about policies of the Carter Administration with respect to tobacco.

Clearly, the convener should be someone with the authority and the credibility to get the parties to the table (in this case, the classroom). A convener should be chosen whose profile or expertise on the subject under discussion is high enough to be equal to or better than the members of the group. Obviously, in complex international issues, persons of world stature would be potential conveners. In selecting the convener, however, the negatives must also be weighed. Does the candidate have a past history on the issue? Is there a potential political difficulty with the highly visible convener? On balance, if the convener's ability to get the parties to the table outweighs any negative considerations then one is probably best advised to use that convener. The role of the convener is certainly flexible enough that in cases where the negatives are significant, he or she can neutralize such factors by working on an effective design for the initiative. A convener with significant negative factors might serve in such a functional role.

(2) *The Environment.* The woodsy retreat environment for the tobacco symposium was strategically chosen to focus, isolate, and liberate the participants. While it is not suggested that this is a necessary factor in successful resolution of conflict, the choice of the setting is an important one. Where possible, it is beneficial to remove disputing parties from their normal workaday lives to a protected environment that can help to transform their behavior, changing how the parties dispute. It does not follow that a "trip to the woods" is a requirement, merely that a positive environment can contribute to positive outcomes. When parties are not bombarded with everyday demands and distractions (i.e., telephones and televisions), they are free to focus their undivided attention on the issues. This can occur in a hotel room, a corporate conference room, or other location. But, an effort should be made to provide a calm, relaxed, reflective environment.

(3) *The Teaching Model: Teaching Rather Than Resolving.* Prior to the symposium, the mediation staff discussed at great length whether the primary objective would be to teach processes of conflict resolution or to attempt to resolve the tobacco issues. The final decision—to focus on teaching—was determined primarily by the relatively short time available for the symposium, less than three days. It seemed unrealistic to begin to tackle such complicated issues with so little time. However, it seemed quite possible to teach collaborative processes effectively within the time constraints.

We did not see the selection of the teaching model as a rejection of a resolution model. It was viewed as being analogous to the pre-mediation groundwork found in the "Track II diplomacy" of international relations. This initial step of getting the parties to the table seemed likely to—and did—produce later

opportunities for resolution efforts. Had a mediation initiative been attempted at the outset, its likelihood of success would probably have been adversely affected by the lack of time. What was learned was that the parties have the power within themselves to resolve conflicts when they possess the necessary knowledge about process. Their understanding of the advantage of keeping their issues within their control—of resolving problems before they escalate—was critical to their request for follow-up assistance. Had a process been forced on uninformed parties, it likely would have failed.

It was significant that at the same time that the pro-tobacco parties were learning how to define issues, negotiate, mediate and more, they were working side-by-side with the pro-health interests. This joint teaching model gave the participants an opportunity to work in tandem while focused on something other than their inherent differences of opinion. They shared common concerns of needing to understand new terminology, adjusting to a different environment and working with unfamiliar processes. These shared experiences at the symposium helped them begin to focus on a common problem: how to learn and apply principles of conflict resolution. As each side began to comprehend the advantages of utilizing alternative dispute resolution techniques, it was much easier for them to turn to the parties on the other side of the aisle to begin their actual application. Had a unilateral teaching model been chosen, the possibility of resolution would have been significantly reduced.

(4) *Empowerment of Parties.* Throughout the tobacco symposium, efforts were made to give the parties the ability or power to resolve their conflicts. This empowerment was evidenced in various ways. First, the selection of the teaching model showed respect for their ability to adopt and utilize effective processes once they were understood. Second, the balancing of the disputants was done in a way not only to keep the "score" numerically even, but to give the same weight to the opinion of a tobacco farmer as to a scientific expert. This balancing of power permitted the parties to view each other as equals, some for the first time. Perhaps the greatest act of empowerment was in letting the participants select the issues and set the priorities for working on these issues. The staff came with no predetermined agenda of issues and was prepared to respond to whatever the parties determined. Recognizing that this placed the responsibility squarely on their own shoulders, the group rose to the occasion and, indeed, seemed excited by the prospect. Some commented that it was the first time they had ever attended a meeting where the agenda was completely open and left to the direction of the attendees.

Conclusion

While it is, of course, very satisfying to see measurable results from a conflict resolution initiative, the immeasurable byproducts of the symposium are no less important. All who were present will never forget the evening at dinner when a preeminent cancer surgeon diagnosed skin cancer on the face of the oldest tobacco farmer and offered to fly across country to help treat him. The doctor who had earlier almost resorted to blows when the symposium began, made a commitment to visit North Carolina and see the plight of tobacco farm families firsthand.

In debriefing the symposium's design and outcomes, many of the participants expressed desires that such processes could be used more routinely. Value

was seen in having meetings throughout the country to teach such skills and model the processes of alternative dispute resolution. One member of the Congress even expressed a desire that training be offered on Capitol Hill, so that all members could benefit from becoming better at resolving disputes.

What the tobacco symposium participants experienced is not unique. It demonstrates the positive experiences that can occur when people in conflict are empowered to resolve their differences in ways that uplift them and result in mutual gain. Instead of focusing on each other as enemies, their creative powers were focused on common problems and redirected; they were then able to design creative solutions.

NOTES

1. Koop, C.E. (1986). *The Health Consequences of Involuntary Smoking: A Report of the Surgeon General*. Rockville, Md.: U.S. Department of Health and Human Services, Centers for Disease Control.

2. Smokeless tobacco includes moist snuff, dry snuff, plug, and chewing tobacco.

3. While representatives of manufacturers of smoking tobacco products were invited to attend the symposium, all declined. The Smokeless Tobacco Manufacturers Association was represented by one of its top officials.

4. Serving as facilitators were William J. Spencer, Interaction Associates, Cambridge, Mass.; Michael Keating, Pawtucket, R.I., and Richard Salem, Evanston, Ill. The co-facilitators were: Jack Etheridge, Emory University, Atlanta, Ga.; Edie Primm, Justice Center, Atlanta, Ga.; and Janet Riskin, University of Massachusetts at Amherst. Serving as researchers were: Margaret Herrman, Carl Vinson Institute, University of Georgia, Athens, Ga.; Daniel McGillis, Harvard University, Cambridge, Mass.; and Beverly Schaffer, Emory University, Atlanta, Ga.



With Thanks to
Alan Blum -
Jimmy &
Rosalynn
Carter





JIMMY CARTER

September 20, 1985

To Dr. Alan Blum

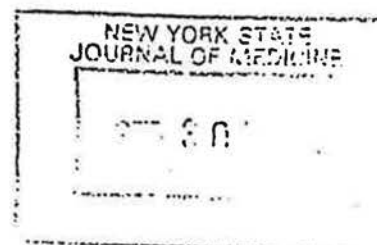
Please accept my thanks for participating in the Carter Center's first symposium on conflict resolution. I hope that the strength of the emerging friendships and substantive consensus continues to develop. I appreciate your thoughtful remarks and value your contribution to our work.

The success of the meeting was largely due to the willingness of the parties to put aside official titles and deal with each other as individuals.

I was personally moved by the genuineness of the spirit of cooperation. Our meeting at Callaway Gardens will be an experience long remembered by all of us.

Sincerely,

Dr. Alan Blum
Editor
New York State Journal of Medicine
Medical Society State of New York
Post Office Box 5404
Lake Success, New York 11042



THE CARTER CENTER OF EMORY UNIVERSITY

DR. ALAN BLUM

Creative Approaches to Resolution of Conflict in Modern Society: Tobacco

SEPTEMBER 1985
ATLANTA, GA.

EMORY UNIVERSITY

The Carter Center

1641 North Decatur Road
Atlanta, Georgia 30322
404/329-4340

October 16, 1985

Alan Blum, M.D.
Editor, New York State
Journal of Medicine
420 Lakeville Road
P.O. Box 5404
Lake Success, N.Y. 11042

Dear Alan,

You are such a dear. First, the adorable peanut complete with smiley face and now, the wonderful letter to President Carter about the tobacco symposium. Twice in two weeks you have really made my day. I am wondering what you are going to pull out of your hat next?

I hope to be seeing you in Washington in November at the APHA meeting. I am informed that you are going to be on the program concerning the brown plague. If so, I will look forward to another informative presentation, complete with slides about the perils of tobacco.

You don't happen to be going to the San Francisco meeting of the Society for Prospective Medicine? If so, I will be seeing you from coast to coast.

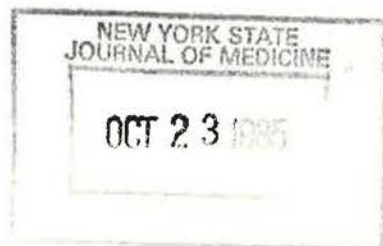
Please call me when you have a moment. I would enjoy having dinner with you in Washington. I don't know yet where I will be staying but perhaps we can arrange an evening together.

Thanks again for your thoughtfulness. See you in November.

With warm regards,



Dayle E. Powell, J.D.
Assistant to President Carter



THE WILLIAM AND FLORA HEWLETT FOUNDATION
525 MIDDLEFIELD ROAD • SUITE 200
MENLO PARK, CALIFORNIA 94025-3495
(415) 329-1070



September 13, 1985

Dr. Alan Blum
Editor
New York State Journal of Medicine
Medical Society State of New York
Post Office Box 5404
Lake Success, New York 11042

Dear Alan:

It was a great pleasure for me to be at the Carter Center this past week and to meet and work with you. I hope the understandings reached during our two days of discussions will lead to some tangible progress on two of the most complex problems our society faces: assuring fair treatment for family farmers and improving the health of our country's people. Your participation in the meeting and in our working group certainly helped me to have a better understanding of these issues and assisted my exploration of possible solutions very substantially. I think we all learned a lot in the process.

I thought you might want to see what the Hewlett Foundation has been doing in the areas of decisionmaking, public policy, and conflict resolution so I am enclosing a copy of our 1984 annual report.

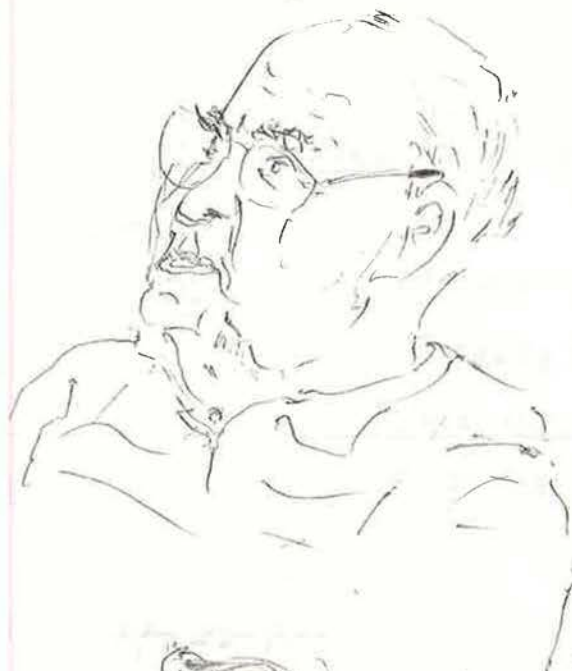
My best wishes for prosperity and good health in the future, and I hope we will run across each other again sometime,

Sincerely,

A handwritten signature in blue ink, appearing to read "R. Barrett".

Robert C. Barrett
Program Officer

RCB/ccg



- 1984
 - industry
 - never caught
 - kids
 - 2.76
 - maint.
 - famo
 - context
 - larvid



- across
 - control
 - conf.
 - broadest
 - probi
 - industry
 - research
 - community
 - world
 - probi
 - sak
 - c.g.

job
 doesn't
 depend
 on it.

Journal
 - robertos
 - 2003
 - 10/10/03
 - Sam Loun

- NY - leading tob. st.
 - Contradiction

- Journal
 - suppressed
 - 10/10/03
 - consumer
 - issue
 - children

- Profit
 Research

Control /
 The Issue

no limit -
 smoking

- smoking -



ACTIVIST

- industry
 - profit
 - filter

PRODUCT
 &
 MANUFAC.

- cancer
 - heart
 - lung

cig. adv.





bad news
graveyard dead

they've been hunting
for you for 48 hrs.

i sd. have told you
yesterday

your side
my side
right side - U Thant -

.545,000 families
growing tobacco
equity - farmers
youth
Family Life
"Molecular Cause"
"Relative Risk"

#1

1. Public awareness of the health hazards
2. Tobacco price support program
WHAT IS RESPONSIBILITY?
WHO'S RESPONSIBILITY IS IT TO?
& AT WHAT COST? & WHAT CONTROLS?
MARKET-ORIENTED
OR
POCKET MONEY AS PROFITS
3. Health effects of export/import
economic effects of imports
4. Rights of non-smokers/smokers
5. Feasibility of safe tobacco products
6. Economic and social costs/benefit
of tobacco

#2

1. Personal & Community economic impact of
loss of tobacco program
2. What are areas of health policy that
are not antithetical to ag policy,
& vice versa?
3. Are there viable alternatives to tobacco
production?
4. What is the proper role of gov't.,
a) promoting growth of tobacco
b) health effects of smoking

- #3 - Solve problems of economics of small family farm (tobacco farm, that is)
- Continuation of allotment system
 - Control program & price (\$-141's)
 - Reduction of tobacco surpluses
 - Eliminate advertising of smoking materials to get workers to quit smoking
 - Prevent young people from starting to smoke; help smokers quit

airing conflicts about me and me which we can't get home or you and I rather, excuse my English

#4 1. ECONOMIC BENEFITS & PUBLIC COST (HEALTH)

2. INDIVIDUAL CHOICE VS. GOV'T (eq access)
3. CORPORATE RESP. & CIG. ADV.
4. IMPORTS & THE TOBACCO PROBLEM

Courts have it said. Health people are not crazy.

#2

1ST PASS

RESEARCH

ECONOMIC

FREEDOM OF CHOICE

YOUTH

TRUTH

LEGISLATION

CHANGE EQUITY

American tobacco is finest in the world. more healthy tobacco.

I suspect I've got the least education, I brought a polaroid camera - not

If everybody's going to smoke why \$2.76 in adv?

ISSUE: IMPORTS

Neither health interests
nor the ^{interests} ~~members~~ of the
U.S. tobacco grower
are compromised in principle
by maintaining a viable
tobacco program and by
requiring imported tobacco
to meet US production standards.

Price
supports

YOUTH

We support.

- a) A program of
education for youngsters under 18
about the health consequences of the
use of tobacco products and
b) ^{if an existing tax sd. incl. funding for} action to enforce measures to limit or
^{for ex. dollar} access to tob. prod. for
youngsters under 18.
- A roughly equiv. ^{sol by ex. tobacco} \$400 million
amt. to support such
educ. prog.

youth wage
funded by
education

ADVERSE IMPACT

The tob. ind. sh. be req.
to abide by the code if
has ext. to reg. its own
advertising and promotional activities

pressure
support

NON-NEGOTIABLE
MOMENTS
NOW-N

SOME AGREEMENT

GIVEN A DOWN-TREND, WHAT CAN WE DO TO
LIMIT DAMAGE TO CITIZENS - FARMER

THRESHOLD AGREEMENTS ABOUT IMPORTS

- INSPECTION PROGRAM
- EXCISE TAX
- RATIONAL SUPPORT OF
FARM PROGRAMS IN TRANSITION
IS CONSISTENT WITH HEALTH INTERESTS
health/agriculture cooperation

YOUTH

- THOSE UNDER 18 SHOULD NOT USE TB. TRON.
- ^{more} ~~limit~~ - LIMITING ACCESS
- GO TO INDUSTRY TO ASK FOR HEALTH IN
LIMITING AGE ACCESS
- CREATE + ATTITUDES ABOUT YOUTH

~~DATA~~

INTRO

AGREE

10 ISSUE

LIST

CLARIFY

RANK

DECIDE

IMPORTED TOB.

SUBST. CROPS

FUND. ?'S

TRADE OFFS

How 2 manage

MANUFACT

RESP. FOR

DAMAGE

GOV'T REG.

ISSUE OF FREEDOM
OF CHOICE

HOW TO GET

SATISF PRODU

EXPLORE ALT

TRUTH IN PRG.

Growth & Prod

Health Risks

Corp Resp

(Prod. Liability)

Adv/Promote

Crop support

Import/Export

Global plan
- ec. - high - 3rd
- world
EC cost/yr

Res causes

of tob. ind. ds.

2. Tob. price support

3. Health effects
of exports

4. Rts. of sm.
& non-sm.

5. Feasibility

6. ec. cost/ben. of safe tob. prod

Health

Politics,
and opportunities
de-political.

Economics
- consy

Imports

Public Opinion

Economic
dep. → shared
burden
transfer

Advertising
morality of.

Selling

Indiv. Choice
vs. Gov't

Morality & health
risk of

Benefits of
tobacco.
& control
of tobacco.

Prize supports

Respect for
Professors/
Expert.

Elim. vs. encour

Jobs, loss of

Denial of
vested int

Corp. resp.
4
corp. adv

Politiciz

Trust mscr rep

LABELED

- ACCESS

- 3rd way

OPINIONS, ONLY BIASES / SUBURBAN
DOCTOR

SM vs. non-smoker

- POLITICS
- Respect

- NORMALITY

- PATRIOTISM

- JOBS - NYS

SUPPORTS

DENIAL

- 2 JAMES
- Bur. etures

- RESCUE FUND
- LOBBYING
BEGINS

coffee - parmesan cheese
biscuits - butter

- label us
label everything

30,000

← Cause cancer

apocalyptic
nature of
scrub for seas

MILLION DOLLARS
TO WINSTON
CUP WINNER

Why is ^a tobacco
co. giving a \$/M
to a race car driver
when farmers are
about to lose their
farms?



JIMMY CARTER

November 18, 1985

To Dr. Alan Blum

"Kids Just Wanna Have Fun", produced by the Georgia Public Television Network in cooperation with The Carter Center, is a creative follow-up to our national health policy consultation. I am especially pleased that this effort was devoted to young people.

Your contributions helped shape the concepts in the program and make them more effective. Thank you for sharing your talent with The Carter Center.

Sincerely,

A handwritten signature in cursive script, reading "Jimmy", with a horizontal line above it.

Alan Blum, M.D.
Editor
New York State Journal of Medicine
420 Lakeville Road
Lake Success, New York 11042