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DOCTORS OUGHT TO CARE

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My name is Alan Blum. I am a family doctor in Houston,
Texas. In 1977 I founded DOC, the letters of which stand
for Doctors Ought to Care, with the aim of tapping the
highest level of commitment on the part of every member of
the health professions to educate children and teenagers in
refreshing ways about the major preventable causes of poor
health and high medical costs. The more than 5000 members
of DOC, representing every state in the country, attempt to
impart health information, convey positive health attitudes,
and change adverse health behaviors by means of a multilayerer, reinforcing program of office-based, school-based,
and community-wide activities.

Since DOC was founded, its principal focus has been on ending juvenile-onset tobacco and alcohol use, which we and the teenagers we work with believe are the neglected cornerstones of drug abuse. DOC's distinguishing feature among health promotion organizations is its purchase of advertising space in the mass media to expose, satirize, and otherwise undermine the specific brand-name imagery of the promoters of unhealthy products. I have been invited to provide testimony at this hearing in support of this bill doubtless because of our pioneering paid counteradvertisements that, in essence, fight smoke with fire. Our premise is simple and straightforward: the number one preventable cause of death in this country is not lung cancer, heart disease, or even smoking--it is Marlboro,

the most widely advertised product in the world, and in DOC's surveys, the kids' favorite brand. Generic lectures and warnings about the dangers of smoking cannot compete with the allure of imagery for Marlboro, Camel, and other popular adolescent brands that meet teenagers' needs for autonomy and social acceptance. Moreover, the belief that providing children with sufficient health information will enable them to make the right decisions fails to address the dynamic and insidious nature of tobacco advertising. the past 15 years DOC has studied and monitored tobacco advertising as if it were a cancer-causing virus, everchanging its identity to resist attempts to eradicate it. Seldom has a tobacco advertisement or company asked us to smoke (indeed, the models in the ads hardly ever do, and the smoke itself seems to have vanished). Instead, they invite us to join them at a party or sports event such as Philip Morris' Virginia Slims Cigarettes Tennis Tournament all this week in Washington, or the same company's Marlboro Cigarettes Soccer Cup tonight in Los Angeles, or an RJ Reynolds' Winston or Camel Cigarettes auto or motorcycle race every week-end across the country. Often such events benefit local hospitals. Truth may be good, but juxtaposition is better.

Traditional health advocates have long bemoaned their lack of financial resources to compete with the tobacco industry. But it is all the more imperative that we move beyond the

vocabulary of health behavior and begin to understand the way in which the industry reaches its consumers. The first step is to make use of the simplest of marketing tools, such as a map and a calendar in order to become familiar with popular events and places. The tobacco industry has been especially adept at exploiting racial identity in defining a profitable market among ethnic minorities. In addition to their constant presence on the news, sports, fashion, and lifestyle pages of newspapers directed to Black Americans, tobacco companies are their leading advertisers. As part of a salute to "Black History Month" in February, RJ Reynolds and Philip Morris are featuring discount coupons in Ebony and other Black magazines for various brands of cigarettes, complete with pictures of famous Black scientists such as George Washington Carver. These companies also sponsor numerous Hispanic street festivals in the US. Brown and Williamson presents annual "Kool Achiever" awards (named for Kool cigarettes) to individuals who want to improve the "quality of life in inner-city communities."

It is illusory to believe that there exists in this country a major mass media effort designed to engage the public in a true understanding of the devastating economic and physical toll taken by tobacco use. To any adolescent who reads Sports Illustrated, Rolling Stone, SPIN, Playboy, National Lampoon, or Mademoiselle, the presence of cigarette advertising clearly suggests that smoking is associated with

good looks, sexiness, success, and athletic ability. But bad health or even bad breath? Not on your life.

Although emphysema, coronary heart disease, and lung cancer caused by smoking now account for nearly 400,000 premature deaths each year and a vast amount of preventable disability in the workforce, the tobacco industry's ties to media corporations and other businesses remain healthy.

Back in the 1950s, when I would watch Brooklyn Dodgers baseball games on television with my late father, a general practitioner, he suggested that I tape record all the cigarette advertisements that appeared in association with sports events and entertainment. One day, he predicted, society would look back on our era of supposedly great scientific advances and laugh: Imagine, a nation that would condone the promotion of an irredeemably harmful, invariably debilitating, and frequently lethal product and that would offer financial incentives and tax deductions to devise propaganda that would undermine the efforts of the medical profession to improve health.

When the first major reports were published in the early 1950s linking cigarettes with lung cancer, the statistics scared many people--for one reason because cigarette companies had always used statistics to show how safe their brands were. But it didn't take long for cigarette makers

to figure out an answer to what they began calling "the smoking and health controversy": the filter. Today more than 97% of those who smoke buy filtered brands in the belief that they are somehow smoking safer. Safer than what? Fresh air? Indeed, smoking a filter cigarette carries all the safety of jumping from the 90th story of the World Trade Center instead of the roof.

When the first Surgeon General's report on smoking and health was published in 1964--by a committee of medical researchers selected by Surgeon General Luther Terry (and approved by the tobacco industry) in the administration of President John F. Kennedy, the verdict was unanimous: cigarette smoking was found to be the leading preventable cause of lung cancer and emphysema and was strongly implicated in heart disease. No minority report was written. Once again, the cigarette companies took the upper hand by increasing advertising expenditures and claiming to have made cigarettes with "low tar." That tar means poison was never mentioned in cigarette advertising, but tobacco advertisers by virtue of their unchecked advertising influence were able, in effect, to resume a health education role by promoting "lower poison" brands to meet consumer demand.

In 1967 a recent law school graduate named John Banzhaf became upset that cigarette advertising continued to appear

on television as if the findings of the Surgeon General's report was yesterday's news. He petitioned the Federal Communications Commission (FCC) for a fair opportunity for the other side of smoking to be told. The FCC agreed with Banzhaf, a decision that led the American Cancer Society, American Heart Association and other organizations to produce commercials to counteract smoking. counteradvertisements, such as one featuring actor William Talman (the district attorney on Perry Mason who was dying from lung cancer at the time he made the commercial) were so successful in decelerating the rise in cigarette sales among young people--even though they were shown a small fraction of the number of times cigarette advertisements were aired-proved so successful in holding down the rise in smoking among young people that the tobacco companies asked Congress--in exchange for an anti-trust exemption--to remove their own advertisements from television and radio.

But when Congress acceded to this request and approved the dropping of cigarette advertisements from the airwaves, counteradvertising also dropped out of sight because the fairness doctrine no longer applied. Thus the cigarette companies succeeded in halting the first successful mass media positive health strategy in this country. Today, advertisements that discourage smoking seldom appear on television because they are regarded as just another public service category.

Once off the air, cigarette companies became the top advertisers in most major magazines and stepped up their sponsorships of entertainment and sporting events. This method got cigarettes back on television with some decided advantages over conventional advertising. It was less expensive, for one thing, since the companies were able to attach a cigarette brand name onto a sports event, and it was more effective by virtue of the many mentions of the brand name and camera shots of advertising billboards in the background. Most important, with counter-advertisements effectively out of sight, the sales of cigarettes resumed an upward course. In 1977 DOC was founded with the idea to bring back and expand upon the very positive health values successfully promoted in the 1967-1969 counteradvertising campaign.

Unable to purchase billboard space in the city of Miami Florida because of the billboard companies' refusal to permit us to compete side-by-side with cigarette advertisers or to "interfere in people's personal lifestyles," DOC found a bus bench company that was delighted to sell us space for our messages. Opposite a huge downtown billboard that said, "Come to Marlboro Country," we put up a bench that said, "Country Fresh Arsenic." When one brand called Decade advertised itself as "the taste that took 10 years to make," DOC responded with "Emphysema--the disease that took a

decade to make." A billboard advertising the cigarette brand Arctic Lights contrasted with our nearby bus bench that read, "Arctic Lungs--quaranteed to make you cool as a corpse." DOC also began to create various counter-events to call attention to tobacco-sponsored promotions. The Benson and Heart Attack Film Festival, The Smoking is Un-Cool Jazz Festival, the Barfboro Country Music Show, and the Emphysema Slims Tennis Tournament are all actual events created by DOC chapters across the country. Most of these events have been created on a local level, but the first national Emphysema Slims Tennis Tournament and tennis clinic for kids attracted three Olympic gold medál winners, numerous entertainment figures, and tennis stars. All used the occasion to point to the absurdity of professional sports sponsorship by tobacco companies. The mayor of Santa Fe, New Mexico, proclaimed "Throw Tobacco Out of Sports Day" in his city in honor of the tournament.

DOC has also ventured into sports sponsorship on a larger scale. When DOC learned in 1988 that the United States Boomerang Team was about to depart for a major international competition and was sponsored by a cigarette company, DOC offered itself as a substitute sponsor. Wearing the prohealth international no-smoking logo on their uniforms, the DOC-sponsored team went to Australia, where they won the World Boomerang Championships. Other DOC sponsorships have included a pow wow in South Dakota, a racing sailboat in

Texas, a fencing competition in New York, and a monster truck in Washington. It is DOC's hope to inspire other health organizations to counteract the influence of tobacco promotions by sponsoring local and national sports teams with a "Just Say No to Marlboro and Camel" theme. (Camel and Marlboro are the top-selling brands among American teenagers.) For the past decade DOC has sponsored continuous counter-advertising contests for young people, aimed at undermining the brand name imagery that has been so successfully employed by tobacco companies. At countless school assemblies, classroom lectures, and SuperHealth conferences, DOC members have developed counter-advertising strategies to support DOC's motto of "laughing the pushers out of town." On numerous occasions, DOC has purchased advertising space in the mass media to display winning entries and to call attention to tobacco-sponsored sporting events or cultural activities. A DOC rap video rapping specific cigarette brands targeted to minority groups was recently produced by medical students in the New York City chapter for both classroom and television use. Along with California artist Doug Minkler, DOC has launched an effort of doctors and artists combining talents in schools and in the mass media.

Since most, if not all, new tobacco users come from the 8 to 18-year-old age group, who could doubt that the tobacco industry has not carefully researched this market? Peer

pressure can be bought, signed, sealed, and delivered on Madison Avenue, as any toy maker, candy company, or rock music star will corroborate. Of the ten most heavily promoted products in America, five are cigarette brands—the ones smoked most by teenagers.

Despite an advertising blitzkrieg second to none, the tobacco and advertising industries would have the public believe that adolescents have heard the facts about "both sides" and now have a "free choice" to decide whether or not to smoke "when they grow up." In claiming that it does not approve of young people smoking, the tobacco industry offers "peer pressure, parental smoking, and a climate of general rebelliousness among teenagers" as the reasons for adolescents taking up this neglected cornerstone of drug abuse. Meanwhile, the tobacco industry runs a year-round campaign with virtually no planned exposure for opposing messages (\$3 billion annually vs less than \$4 million in government public service announcements, pamphlets, and posters) in newspapers, magazines, supermarkets, and television. Every child grows up seeing thousands of larger-than-life billboards for cigarettes and countless sports-associated tobacco promotions. The formula for these promotions is both simple and insidious, invariably involving a community's newspaper and its top youth-oriented radio station as co-sponsors.

Support for visible counteradvertising of the kind pioneered by DOC is urgently needed to offset the long years of ubiquitous, unchallenged cigarette advertisements.

Classroom-based education with emphasis on the physical effects of smoking is only one, limited way to tackle the adolescent smoking pandemic. Cigarette advertising and promotion can keep up with the latest fads in its portrayal of smoking and so remain "in" far better than even the most talented and motivated teachers and parents.

Counteradvertising helps to educate young people not only about the preventable factors responsible for bad health and high medical costs but also about the insidiousness of the outright promotion of those factors.

The cost figures cited in this bill are much-needed if we are to immunize the next generation against the willful deceptiveness of cigarette advertising. In addition to the precedent for successful counter-advertising between 1967 and 1970, there are also precedents for government expenditures on public interest advertising, such as current military recruitment promotions during televised sporting events and various efforts a decade ago to conserve energy and to lessen dependence on foreign oil supplies. In the case of smoking, purchase of advertising space is especially essential. Unlike the heavily publicized Media-Advertising Partnership for a Drug-Free America, which has received hundreds of millions of dollars in donated space in the

printed media and free airtime on television and radio,
media corporations are too covetous of tobacco industry
advertising revenue to run free advertising to discourage
the sale of cigarettes and other tobacco products.

Perhaps it is time for a private Citizens Partnership for a Tobacco-Free Media. In the meantime, I hope the advertising and media industries will break ranks with the tobacco companies and support this bill. This would not only be to their best financial interests by virtue of the receipt of advertising revenues but also would be consistent with the position of leaders in the media who oppose banning tobacco advertising altogether.

The power of advertising to shape purchasing decisions, stimulate sales, and promote brand loyalty is well-documented. It has certainly created a huge following for cigarettes. It stands to reason that the same mix of marketing creative and strategic planning skills could generate persuasive and compelling anti-smoking advertising.

What is needed, then, is to counter the strong, engaging, omnipresent images of cigarette advertising—to laugh at the Marlboro man. We cannot do this with public service spots at 3 a.m. or earnest lectures in health ed class. Rather, we need to create an appeal for not buying cigarettes—and do it through sophisticated, ubiquitous, good—humored

imagery. What we need is, in brief, paid advertising space financed in part by existing tobacco excise taxes and in part from revenues that would be derived from ending tobacco promoters' deductability of cigarette advertising as a business expense.