The Birmingham News

COMMENTARY

America should put King's picture on \$20 bill / 6C

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Tom Scarritt

Government is servant of taxpayers

If there were any doubts about the depth of anti-tax sentiment in Alabama right now, the vote in Shelby County should have dispelled them. The most affluent county in the state had an easily explained need for more money to build schools for its fast-growing population. The voters said no.

There are a number of reasons why Alabamians are unwilling to invest in government. Many simply don't see the need. Most of us do not require Medicaid or mental health services or the intervention of the Department of Human Resources in our daily lives. And we are not fully aware of how much our less-fortunate neighbors depend on the state.

Many don't see the possibilities. We have lived with low expectations so long that we cannot conceive of Alabama as a leader in learning and a land of opportunity. We don't believe we can use government to transform our lives and enhance our future.

The main reason for the tax revolt, though, is the people who have to pay for government have lost faith in the managers they elect and the employees those managers hire. If government is not working for us, why should we pay the bills?

Too much of the news about government at all levels in this state has centered on secrecy, mismanagement and greed. Our public officials must change that pattern. As Gov. Bob Riley said, we have to restore trust.

Whenever a school board or city council meets in secret, it destroys trust. Whenever a sheriff or police chief resists telling people who is being held in jail or where crimes occur, he destroys trust. Whenever a city refuses to open its records to citizens, or makes them fill out a form explaining why they want to look at a document that the law says is public, it destroys trust. Whenever a lawyer hired with our money aids and abets the efforts of nublic officials to

Up in smoke

40 years after Alabamian's report, tobacco still ravaging lives

By ALAN BLUM, ERIC SOLBERG and HOWARD WOLINSKY

his month marks the 40th anniversary of the U.S. surgeon general's report on smoking and health. Its stark and unequivocal conclusion that cigarettes cause lung cancer

that cigarettes cause lung cancer and other devastating diseases was to have ended a debate that had raged for decades. Until Jan. 11, 1964, the tobacco industry had always managed to drown out the researchers who'd been raising alarms about smoking by flooding the mass media with glamorous ads showing youthful, athletic and sophisticated smokers.

In releasing the review of 7,000 research studies, Dr. Luther Terry, an Alabamian, somberly told a crowd of reporters that cigarettes represented "a health hazard of sufficient importance in the United States to warrant remedial action." Yet in the past four decades since the "War on Smoking" officially began, the tobacco control coalition of health departments, cancer, heart and lung associations and local advocacy groups has suffered far more setbacks than successes.

A full seven years elapsed before Congress would ban cigarette advertisements from TV in 1971, and then only at the request of the tobacco industry, which had seen cigarette sales flatten as the result of the first wave of antismoking commercials. The tobacco companies quickly figured out how to circumvent the ad ban by sponsoring NASCAR, women's tennis and other televised sporting events.

quickly figured out now to circumvent the ad ban by sponsoring NASCAR, women's tennis and other televised sporting events. For 33 years, until last month, R.J. Reynolds Tobacco Co.'s Winston Cup Racing saw its popular cigarette brand appear on TV more widely and more cheaply than ever before. As Talladega rolled out the red carpet year after year for its cigarette company benefactor and helped cultivate a generation of homegrown

See Cigarettes, Page 4C

Alan Blum, M.D., is director of the University of Alabama Center for the Study of Tobacco and Society. Eric Solberg is an administrator at the M.D. Anderson Cancer Center in Houston. Howard Wolinsky is a Chicago Sun-Times reporter. This article is based on a commentary in the Jan. 10 issue of The Lancet medical journal. You can email Blum at ablum@cchs.ua.edu. for the birth mother, repairs to her car, travel to California.

Mayor Williams was himself adopted, and at the time, his adoption did not look very promising. At an NCFA banquet at which Pierce was given an award, Williams' mother said that when the mayor was about 3, he was so traumatized he did not speak. His adoptive mother dismissed that with, "Oh, he just needs to be loved."

Adoptive parents had the same hope for Gerald R. Ford, later U.S. president; Dave Thomas, founder of Wendy's restaurants; Scott Hamilton, Olympic gold medalist; and Rosemary McDonough, an NCFA board member.

McDonough and a future brother were adopted — a family made by adoption. "I felt my parents loved me so specially that when I learned about being adopted, I felt sorry for my friends who were not adopted. I had a wonderful sense of being chosen and of being a wanted child."

Contrast that feeling with how a third of those born annually, 1.3 million out-ofwedlock children, must feel. Their parents did not care enough for them to even get married. Only 1 percent of those parents love their children enough to make an adoption plan for them to be raised by a married couple. In fact, 20,000 couples must go abroad to adopt.

When Rosemary married Walter McDonough, they were unable to have children. Though an in vitro fertilization clinic was across the street, "I knew I was supposed to adopt. It was a wonderful sense of coming full circle." They adopted two children, one from Catholic Social Services and another from Chile.

Vast unknown

Did Tony Blankley and his wife, Lynda Davis, adopt? Yes, although they had two boys of their own. As a volunteer, Lynda had seen orphanages in Bosnia and wanted to adopt a girl, but adoption was "a vast unknown."

Pierce said, "Let me talk you through the process." He educated them about the rules of different states, how to identify an agency, the consequences of adopting domestically vs. internationally, and the need to involve their children in the decision.

At first, the sons were surprised and dubious. They warmed to the idea but resisted adopting a child who looked different. Though not important to the parents, they chose a Russian child. The whole family had the adventure of going to St. Petersburg to bring their 9-month-old sister home.

"Bill was the facilitator, the godfather, the matchmaker and mentor to us as he was to numerous people throughout the country," Lynda said of Pierce. "He reached out discretely, anonymously. He helped put countries together in the Hague Agreement on International Adoption," which tripled international adoptions. Bill Pierce will be missed.

Write to Mike McManus at 9311 Harrington Drive, Petomac, MD 20854.

cardiovascular and respiratory disease, the tobacco industry launched a massive campaign to disparage these scientific studies and foment a "controversy" about the risks of smoking. In January 1954, the industry, already facing rising public concern about the dangers of smoking, issued a "Frank Statement to Cigarette Smokers," published in 448 newspapers across the country. In this full-page ad, the industry assured the American public:

"We accept an interest in people's health as a basic responsibility, paramount to every other consideration in our business. We believe the products we make are not injurious to health."

Although the industry promised to fund scientific research, in reality it created a sophisticated public relations operation to deny the harm of smoking. At the same time, as we now know from internal corporate documents uncovered in litigation, tobacco industry scientists consistently con-

CIGARETTES:

From Page 1C

Public complacent

about smoking toll

to one of the nation's highest.

Winston smokers by means of free

sample packs of cigarettes at every

race, Alabama's lung cancer rate grew

Cigarette ads remained on bill-

boards until 1998, with virtually no

paid counter-advertising messages

bought by health organizations during

all this time. Public complacency

about the devastating economic and

medical toll taken by cigarettes can

only be expected to go on, as long as

cultural organizations such as the Bir-

mingham Museum of Art and charit-

able organizations from food banks to

domestic violence shelters continue to

line up for handouts at cigarette company doorsteps.

Not until the 1980s were the first

laws passed restricting smoking in in-

door places. By then, several studies

had found that even nonsmoking

spouses and co-workers of persons

who smoked could also get lung can-

cer after years of exposure to such

"secondhand smoke." Airline flight at-

tendants, the personification of ca-

naries in the mine, struggled for

The inability to curb cigarette use

represents the worst public-health

failure in history: Today, the number

of U.S. consumers who smoke is

about the same as in 1964, and the co-

hort of Marlboro smokers is younger

nearly 25 years to end smoking aloft.

First laws passed

'Role model'

When Terry appointed his advisory committee, he offered the industry an opportunity to eliminate any of the 150 physicians and scientists under consideration. By so doing, he shrewdly ensured that the industry could not disparage the report as biased. And, tellingly, a number of the 10 committee members began their investigation in 1962 as committed smokers. Photos of the committee meeting at the National Library of Medicine show a smoke-filled room with a conference table littered with ashtrays. Terry himself gave up cigarettes in the weeks before the report was released, convinced that he should serve as a role model for the nation.

Confronted with the surgeon general's report, the tobacco industry decided to stay the course, insisting that the case against cigarettes had yet to Americans come to live in an increasingly smoke-free world. In the United States, some 400,000 people continue to die each year from tobacco-related diseases, and every day 3,000 children join the ranks of regular smokers. The industry continues to promote smoking to the tune of \$11 billion a year in marketing and advertisements.

The industry now claims to have turned over a new tobacco leaf, admitting the risks of its product and working to prevent youth smoking. But such pronouncements are only one more smoke screen, a thinly veiled attempt to reduce legal liabilities and relegitimize a stigmatized product and a rogue industry.

Global threat

In recent years, the multinational tobacco companies have turned their attention to new markets abroad. Taking advantage of the growing trends of trade liberalization and globalization, excluded from all multilateral trade agreements. Treating tobacco as a conventional product offers the industry the opportunity to use the liberalization of trade to secure new smokers.

Rarely in human history has a product turned out to be so popular, so profitable, so addictive and so deadly. The disease and death generated by tobacco force us to confront a wellknown but often-avoided reality: that public health must engage economy and politics at the same time it deploys science and medicine. May this be the legacy of Surgeon General Luther Terry's report.

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than ever. Even the recent four-year decline in smoking in teenagers hasn't offset the dramatic increase among adolescents in the past decade.

Progress has been thwarted because of a combination of political clout and lucrative payoffs to the very forces that should have been leading the fight against smoking. Federal and state elected officials (Democrat and Republican alike), the mass media, medical societies and academia have all been chronic recipients of tobacco industry cash and have not been willing to bite the hand that fed them. For decades, health insurers, pharmaceutical companies, hospital associations and other powerful health-care groups simply sat on the sidelines ignoring the tobacco pandemic.

Consider that as the result of large retail drugstore chains buying up local independent pharmacies, most of which had long ago stopped selling tobacco products as inimical to health, cigarettes are now sold in a higher percentage of pharmacies than a decade ago.

Government and private health agencies alike have put their faith in delusional projects such as the development of a "safe cigarette." Even today, the University of Alabama at Birmingham, a leading medical institution, has accepted more than \$1.2 million from one tobacco company for a program aimed at encouraging cigarette smokers not to stop but rather to switch to an allegedly safer form of tobacco addiction.

When one considers that more than 95 percent of today's cigarette smokers buy low-tar, filter brands in the mistaken belief that these are in some way safer, we would be far better off educating the public that filter brands cause even more lung and heart disease than the old ones, that low-tar doesn't contain fewer poisons, and that "lights and ultra-lights" just means more chemical sweeteners. By virtue of being able to allay consumers' anxiety with the illusion of safety, it's no exaggeration to say that the cigarette companies have been the most successful health educators of all.

Fooled by money

In 1998, the flow of big money from Big Tobacco — hundreds of millions of dollars handed over to the states by the tobacco industry under the Master Settlement Agreement negotiated by the states' attorneys general — fooled anti-smoking groups into thinking they would at long last compete headto-head with the Marlboro Man and Ms. Virginia Slims for the hearts, lungs and minds of the next generation. It didn't happen. Of the \$110 mil-

It didn't happen. Of the \$110 million Alabama receives in tobacco settlement money each year, \$360,000 (less than \$1,000 a day for the entire state) is dedicated to anti-smoking campaigns. That's to fight a killer that costs Alabamians \$3 billion a year, according to the American Lung Association.

But it gets even more absurd: As The News revealed two years ago, considerably more settlement funding is given to eight farmers in Alabama to grow tobacco than is spent to discourage smoking.

In other words, the Legislature has become hooked on the cash flow from the windfall tobacco settlement and is spending it on just about anything except hard-hitting tobacco prevention programs. Meanwhile, do-gooder organizations like the American Lung Association devote more time and energy to whining over their entitlement to settlement funding than to getting on with the work of exposing and undermining the alliances the tobacco industry has forged with a vast array of businesses, agricultural interests, elected officials, cultural organizations and even health-related institutions in Alabama. Apart from nicotine, the most addictive thing about tobacco is money.

In 2003, Alabama, which has the eighth highest death toll from smoking of all the states, became the very last legislature in the nation to pass even a weak clean indoor air act to reduce smoking in public places. Cigarette taxes, among the very lowest in the nation, haven't been increased in 20 years. Compared to our neighbor Mississippi, which has been recognized by the American Lung Association in its recent state-by-state report cards, as having among the six most energetic and comprehensive antismoking programs, Alabama (one of just six states to receive straight F's) has not even made it out of the gate.

There is hardly a family in this state that has not lost a loved one to the ravages of smoking. We challenge the leaders of Alabama who are in a position to curb the tobacco pandemic legislators, editors, businessmen and women, and every single health-care provider, administrator and student — to go from dead last to the head of the pack in confronting the tobacco industry at every level.

Forty years after the surgeon general's landmark report, we have failed abysmally to end the single most preventable cause of death and disease in Alabama. Will Dr. Luther Terry's legacy be abandoned even in his own home state?