

May '85

TGIC

Reginald L. Lester
Managing Director



TO: Committee Members

FROM: Reg Lester

SUBJECT: North Carolina Health Council Convocation

INTRODUCTION

The North Carolina Health Council, "an independent voluntary body made up of individuals and representatives from health organizations across the state," held a convocation on "Tobacco: A dilemma for North Carolina health workers," on May 7-8, 1985, in Raleigh, North Carolina. The brochure accompanying the registration form for the conference stated:

"There are few issues which have a greater impact on the health of the citizens of North Carolina than those surrounding tobacco. Our physical, economic, political and social health is closely tied to this agricultural product. North Carolina health professionals face a complex set of competing priorities when dealing with the health affects of tobacco. The objectives of this convocation will be to explore with speakers and participants various aspects of this dilemma and to plan an action plan for North Carolina health workers. Presenters have been chosen to represent a variety of perspectives, including that of the tobacco farmer, the media, the politician, and the health community." The principal organizer of the convocation was William Beery, president of the Council and associate director of the Health Services Research Center, University of North Carolina, in Chapel Hill.

This group asked me to give a presentation on the history of tobacco and as it turned out, I was the first speaker on the program. I will provide summaries of the individual presentations and discussion periods below.

PRESENTATIONS

History of tobacco (Reginald Lester)

I reviewed the history of tobacco with the group not only in North Carolina but also the United States, dating to the colonial period. I detailed the creation of the tobacco program in the days of the depression and the legacy of tobacco to North Carolina. I then described our view that tobacco was extremely important in the creation of a free and democratic society in the United States, pointing out that the U.S. capitol is adorned with tobacco leaves in tribute to the debt our nation has to tobacco. I reminded the

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group that the use of tobacco in our society is a matter of freedom of choice and pointed out to them that I did not see any dilemma for health workers in that most people perceive use of tobacco as a health hazard. I asked them if they wanted government "by nanny." I also told them that we in the tobacco economy do not feel that we have anything to be ashamed of and that tobacco would be important to North Carolina in the future as it was in the past.

HEALTH EFFECTS OF TOBACCO: THE EVIDENCE (Dr. Victor Schoenbach, Assistant Professor of Epidemiology, School of Public Health, University of North Carolina)

Dr. Schoenbach reviewed the early epidemiological studies on cigarette smoking and health, including Doll and Hill in 1956, the Framingham study and autopsy studies. In the context of freedom of expression and the Bill of Rights during my presentation, I had made note of the Coalition on Smoking or Health's opposition to the R. J. Reynolds' ad on the MR. FIT study. Naturally, Dr. Schoenbach felt he had to defend the MR. FIT study and to describe how the medical community was not really checking for smoking in relation to heart disease but a whole host of factors. I had not gotten into specifics. I was only speaking of the comments regarding freedom of expression, but this obviously shows that the mention of the MR. FIT study and its failure to provide a link with heart disease disturbs the medical community in light of Dr. Schoenbach's quick response to my statements.

PUBLIC HEALTH VS INDIVIDUAL LIBERTY: CONSTITUTIONAL AND PHILOSOPHICAL ISSUES (Dan E. Beauchamp, Professor, Department of Health Policy and Administration, School of Public Health, University of North Carolina)

This was one of three concurrent session for the afternoon of May 7. Participants were asked to choose two of the three sessions. I attended this one and the next item in this memo.

Dr. Beauchamp began his discussion with an antidote about the last smoker in America as performed by Garrison Keillor of National Public Radio's Prairie Home Companion. He then went on to say that for the purpose of his discussion, he would make two assumptions which he said he believed were vital to making his arguments. His two assumptions were: 1) That the health consequences of smoking are non-controversial; 2) That there were means at our disposal to restrict smoking through taxes or smoking restrictions or other measures.

He then said he felt that there were four choices in choosing to regulate or not regulate a product: 1) A totally free market without regulation; 2) The opposite; i.e. prohibition of a product; 3) Regulated maximum availability of a product; 4) Regulated minimum availability of a product.

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He said that he did not feel that a totally free market was available as an option. He also stated that he did not think that prohibition was a desirable option. Therefore, he said that we were in a situation with a choice between options three and four.

He described maximum availability of a product as a situation where a product was legal and could be sold but under certain restrictions. He suggested that this is approximately where we are today with the sale of cigarettes in the United States. There are certain restrictions such as advertising claims cannot be misleading and cigarettes cannot be sold to minors, but by and large sales were mostly unrestricted.

Minimum availability of a product would impose much tougher restrictions, including increasing taxes, restricted availability, further restriction on the ads and restrictions on the point of sale. He suggested that with the sale of cigarettes in the United States today we are perhaps somewhere in between maximum availability and minimum availability, having been in a period of maximum availability and perhaps moving to a period of minimum availability.

He said that in discussing this issue that one must come face to face with the issue of paternalism. He asked, in a democracy are we ever justified in protecting the public health even if we must interfere with individual freedom? The anti-paternalists has a problem, Beauchamp suggested, in that the anti-paternalist does not want products regulated but will accept some controls of certain groups, for example, such as restriction of sales to minors. He said that we are sorely tempted in this country to gang up on children and to use the process of educating people about the health hazards of a product to a large extent. He suggested a certain unfairness in this and thought that education alone will not get the job done to prevent people from smoking. He said he thought that this was an unbalanced policy.

He also said that he was sorry to see that individuals were trying to use the legal system in terms of damage cases against cigarette manufacturers to try to control smoking in this country, rather than the political process. He said that the use of the legal system burdens the court system, burdens the judges with decisions that they should not have to be making, and perverts the political process by virtue of using the legal system as opposed to doing something through the political process where it belongs.

Commenting on my remarks about individual freedom and the debt that this country has to tobacco, Dr. Beauchamp said that democracy was not just about liberty but about other things as well, including the health of a society. He cited seat belt laws, required vaccinations and the input of fluoride in the water systems as "interference" into personal matters in the interest of public health.

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He stated that being a member of this society is a trade-off between individual liberty and the common good. He suggested that when the tobacco lobby talks about freedom and is "intractable and militant" it is encouraging the opposition to move to a stance of prohibition. He said that the tobacco economy in North Carolina is sentimental about its past and unrealistic about its future. He felt it was desirable to see some sort of accommodation between health interests and the tobacco interests, particularly the agricultural groups.

This was a fascinating review of the legal aspects of the question and I think that the reader can see that this is a much more sophisticated argument than we usually encounter and one that I think demands that we study very carefully our response. To follow his argument to an action phase would indicate that these individuals might be talking about going to the North Carolina General Assembly and increasing our cigarette excise tax, creating new public smoking restrictions and other control measures.

He said that the opponents (i.e. cigarette manufacturers and other businesses who have products that have been alleged to be unhealthy) could use the ideas of John Stewart Mill in the future and that the health professionals would be hearing a lot about "commercial speech." He said that although legal products can be advertised without being deceptive, he thinks that it is inappropriate that a small warning label about the health consequences of smoking is the only mention of the health hazards.

THE TOBACCO FARMER'S PERSPECTIVE: SOCIAL AND CULTURAL ISSUES
(T. Carlton Blalock, Executive Vice President, Tobacco Growers Association of North Carolina, and John Vollmer, a Franklin County tobacco grower)

This was the other presentation on the program whereby the Council could say that they tried to achieve some balance by having this presentation and mine on the program. Dr. Blalock led off at this session and reviewed several items. 1) As I had stated earlier and he reminded them, tobacco is a legal crop. 2) Despite the Surgeon General's call for a smoke-free society, it's not likely to happen, and, therefore, people are going to smoke and since American tobacco farmers feel they are to most efficient and best tobacco producers in the world, they should have the right to grow and profit from this commodity. 3) Alternatives to tobacco growing are not very good for farmers in North Carolina. 4) We need to recognize the social contribution of agricultural programs. 5) He then reviewed some of the more significant numbers relating to tobacco's economic impact: a) farm income, b) two-thirds of the flue-cured production in North Carolina, c) fifty percent of the cigarette manufacturing occurs in our state, d) five of the six cigarette manufacturers

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have locations in North Carolina, e) tobacco's contribution to the balance of trade, f) the proceeds of excise taxes on tobacco generate four times more revenue from government than for growers, and g) 90 of the 100 counties in the state receive added value to the property tax of about \$300 million from the value of tobacco allotments, 6) Tobacco farmers need help to bail out the tobacco program: a) two crops due to heat and drought are particularly vulnerable and emergency help should be forthcoming like any other disaster, b) when comparing the cost of the tobacco program to other commodities, one can see that the program has cost less than \$250 million which is less than one percent of all agricultural program. 7) He talked about potential consequences of eliminating the tobacco program. a) A \$400 million a year loss of income to nonproducing allotment holders, some 65,000 to 70,000 people. He said these people share some characteristics. Most were not wealthy. They were elderly and had relatively low income. Over 50 percent of them had income of less than \$10,000 a year and that their tobacco allotment income was approximately 58 percent of that total. b) There would be a drop in farmland value due to the loss of the value of the allotments and approximately one-fourth of the counties in the state would have budget cuts, including county health departments. c) We would see the loss of the small family farmer and there would be contracts going to large producers, some of the more sophisticated ones and probably younger producers. d) There would be wild swings in the price with the loss of production control, and e) That the production would probably shift east and south so that it would be concentrated in many fewer counties.

At this point Dr. Blalock turned the program over to John Vollmer who showed a slide presentation of what the tobacco economy means to himself, his wife and four children. It was quite an emotional presentation as he described the personal involvement that he has with his family in the production of the crop and its economic importance to them and their community, including the new community health center.

I was unable to attend the Prevention and Cessation of Smoking clinic that occurred at the same time but I believe that the title speaks for itself.

WEDNESDAY, MAY 8

THE POLITICS AND ECONOMICS OF TOBACCO (Ferrel Guillory, Associate Editor, The News and Observer, and Dr. Dan Summer, Associate Professor, Department of Economics and Business, North Carolina State University)

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There was nothing new or surprising from these two speakers. Guillory provided an analysis of politics in North Carolina and its relation to tobacco, pointing out the obvious that the importance of tobacco economically to the state is what makes it important politically. This may be obvious to us but I think that some people, including health professionals, it is often misunderstood or overlooked. He predicted that if the tobacco economy in North Carolina remains strong and viable, then it will probably continue to be strong politically in the state.

Sumner did not go into detail of his report on the consequences of eliminating the tobacco program. Rather he focused on trends in production, costs for the growers and very detailed economic analysis which I think was above the heads of most of the participants. During the question and answer period, he responded to a question about the impact of the price support and production control system for tobacco. He pointed out that the program helps to control production and maintain prices at a high level, therefore, increasing the manufacturer's cost and the cost to consumers and could have a negative affect on consumption. He said that without the program the reverse could be true: i.e., great increases in production, much lower prices for leaf tobacco, manufacturer's prices being lower, and a potential for more stable prices at the consumer level which could lead to increased consumption.

MORAL AND ETHICAL CONSIDERATIONS: THE CHALLENGES TO CONSCIENCE
(The Reverend Collins Kilbourn, Executive Director, The North Carolina Council of Churches)

As most of you are aware, this group conducted its own review of the "moral dilemma" of tobacco last year, and Dr. Kilbourn was there to review their conclusions with the group. He reviewed the creation of various committees by the Council of Churches to study the issue and how the issue was bumped from one group to another until it ended up with a special task force on tobacco. He stated that this was an issue that he as the executive director really did not want to get into, did not want to study and thought that there were much more important issues for the group to be dealing with. But there was a majority on the Board of Directors who wanted to pursue this and, therefore, it finally ended up with a group to study it. He said that there was no clear-cut answer to their position, as perhaps there is some other issues the group takes up like civil rights or social justice; and, therefore, they decided to hold a hearing and gather information and come to some conclusions. Interestingly he said he was somewhat surprised at the amount of media attention and the volatility of the issue. I cannot believe that he did not realize that this would set off a hailstorm of protest, but he did make that comment.

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He said after holding the hearing and deliberating the Council of Churches came to four affirmations: 1) There are moral dimensions to the tobacco issue. a) Use of tobacco is counter to the Christian teaching of partaking of substances which are injurious to health. b) Economic hardship, produced by financial distress of a sudden change in the tobacco economy, is counter to the Christian belief of trying to prevent and alleviate suffering. 2) The group was persuaded that the evidence linking smoking to various diseases is overwhelming. 3) The economic dependence of the people of North Carolina on tobacco is self-evident and concern has to be extended to those who are economically vulnerable. Such persons cannot be criticized as immoral if there are no economic alternatives available. Society as a whole is at fault if it acquiesces and fails to try to find alternatives. 4) Regarding marketing of cigarettes in third world or developing nations, the group was concerned about advertising and promotion techniques used by cigarette manufacturers. "Cigarettes are advertised as symbols of vitality, verility, sophistication, sexuality, adulthood and modernity," Kilbourn said. He said the group found this issue to be less ambiguous than any of the other items.

During the question and answer session, I suggested to Dr. Kilbourn that the question of third world marketing was more ambiguous than he presented the situation. I told him that people across the world have been using tobacco products for many years, and the use of locally produced tobacco was the primary consumption until recently. I pointed out that as countries acquire more wealth, become more modern and more westernized, they look for and acquire a taste for American blended type cigarettes. I cited the case of Egypt where sales have increased and where no advertising is permitted, according to the president of the Egyptian tobacco monopoly.

THE FUTURE OF TOBACCO: AN AGRICULTURAL VIEW (D. G. Harwood, Assistant Director, Agriculture and Special Programs, North Carolina Cooperative Extension Service)

Dr. Harwood produced very solid evidence showing that tobacco is the most profitable commodity in North Carolina, "while others fall way short." He said evidence has shown that many types of farmers are profitable in relation to tobacco. He said that both small and large farmers who produce tobacco receive a good income. For example, the small farmer who has a great deal of labor available to him can make a profit on tobacco and a larger farmer who has more capital available to him can also receive a good return from tobacco. So they both are interested in growing tobacco. He showed production figures and the comparative profitability between tobacco and other commodities. He reviewed concerns about tobacco, including governmental intervention; price support level; imports, exports and stabilization stocks; non-

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grower quota holders; grower cost of operating the tobacco program; and storage cost.

During a question and answer session, Harwood pointed out that the farmers in North Carolina were undergoing financial distress as is the case in all of American agriculture, but he pointed out that it is not nearly so stressful in North Carolina as it is in the mid-West because of the profitability of tobacco which was due to the tobacco program.

THE ADVERTISING AND PROMOTION OF TOBACCO PRODUCTS (Alan Blum, Editor, New York State Journal of Medicine)

In a blistering attack on the cigarette manufacturers and their advertising and promotion techniques, Blum caught the imagination and great interest of the gathering. He began by commenting that The Tobacco Institute says that he is part of a group with a "rescue fantasy." He quipped, "Perhaps they are in a selling frenzy." He was critical as well of other business interests who have an "inter-connection" with the tobacco economy, including Ciba Geigy, for their agricultural products; Kimberly Clark, for paper products; and IBM and their computers. He was derisive of Merrill Dow, manufacturers of the Nicorette chewing gum, saying they were not interested in cessation of smoking but they were interested in selling chewing gum.

He claimed that cigarette companies were actively aiming at the eight to fifteen year old market group, saying that tobacco was being offered up as a forbidden fruit to entice the young people to use cigarettes. He was critical of the R.J. Reynolds' ads on youth smoking which repeat the industry's often stated belief that smoking is an adult custom and we do not want young people as customers. "What better way to encourage children to use cigarettes," Blum asked. He then showed slides of national magazines including Time, Newsweek, Sports Illustrated and The National Enquirer. He said the tobacco industry is talking an image vocabulary while health professionals are talking a health vocabulary and that is why cigarettes continue to be popular. He said the image vocabulary of the tobacco companies undermine the health vocabularies. In one of his most provocative statements he said that Goebbels, the Nazi propaganda minister, had nothing like The Tobacco Institute.

He showed an interview with Joseph Califano in 1978 on CBS News. Blum said that the news media was being manipulated by the industry and that the cigarette industry always got the last word. Part of the news clip showed Anne Browder responding to Califano and pointing out the industry's views. Blum said that by showing Califano and Browder, this put forth the notion of two legitimate points of

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view when in this case, there was only one. He also said that the use of a black woman to respond to the charges was not coincidental since this was "the heaviest target group" of the industry.

In one of the more unbelievable statements he made, Blum said that he would tell his patients to switch high tar, high nicotine, unfiltered straight tobacco cigarettes because "the body can't tolerate that much nicotine as opposed to the low tar, low nicotine brands, and because I believe it's the carbon monoxide and other components in cigarette smoke that is dangerous to people's health."

Blum said that the cigarette manufacturer's advertising campaigns shows that it "pays to advertise." But he said the major purpose of the advertising was not to sell products but to "buy off the mass media and buy our complacency" towards smoking through the saturation of advertising. He told the group that the cigarette manufacturers have not diversified into other business ventures to make a profit but to cover up the profits made from tobacco. He was critical of TIME magazine and other publications for not taking a harsher and in-depth look at smoking. He was critical of the vast amount of money spent by the cigarette manufacturers on advertising. And he said there was an incestuous relationship between the media and the cigarette companies.

"These people are no more truthful about not advertising to children as they are about the health affects of tobacco," Blum said. He spoke of the efforts of his group DOC (Doctors Ought to Care). He said DOC ridiculed the imagery of the cigarette manufacturers showing a satire of an ad where the cigarette was stuck in the model's nose instead of his mouth. He showed slides and spoke of the group's activities. Also during his presentation he said that the group needs to direct its anger and cynicism against an industry that is "actively going after your kids."

The organizers of the meeting did not allow any time for questions and answers or for any kind of rebuttal from me, because Blum ran over his allotted time and the meeting organizers wanted to move on into the lunch and hear from the next speaker. Therefore, I did not have a chance to rebut the many ridiculous and outlandish statements that Blum made. During part of his presentation, he had to eat a little crow by apologizing to me for interrupting me during an earlier question and answer session, showing his lack of courtesy and volatile ways.

KEYNOTE ADDRESS: TOBACCO: THE CHALLENGE TO HEALTH WORKERS
(William H. Foege, Assistant Surgeon General, and Special Assistant
for Policy Development for the Centers for Disease Control)

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This speaker tried to sum up the whole session and provide a rallying cry for the assembled gathering. He reviewed the strength of the evidence against cigarette smoking. He cited a cultural heritage that says cigarette smoking is neutral and showed early Kent ads that stated that smoking is a healthy custom. He too criticized the companies for trying to buy "our complacency" citing a Virginia Slims Tennis Tournament where the proceeds were donated to a children's hospital in San Francisco.

He too was critical of the R.J. Reynolds' advertising which state that the smoking and health controversy is still an open issue. He said, "This is simply false."

He too derided the belief that those who use cigarettes are demonstrating "free will." He said he felt "We are dealing with addiction." He told health workers "to resist the forces of politics, do our job and improve the quality of life."

He praised the religious community in North Carolina saying that they had shown the way to the religious interest across the nation on this issue. He urged the health professionals in North Carolina to do the same for health professionals across the nation. He also lauded some of the news media in North Carolina for their courageous acts in speaking up on this issue.

"Farmers should not be connected with the tobacco industry," Foege said. "For small farmers, there appears to be no alternatives to growing tobacco." At this point he made a pitch for health workers to form coalitions with agricultural interests to work for solutions for tobacco farmers. He suggested that as a matter of national policy tobacco growers be subsidized not to grow tobacco and that health workers would strive to make such funds available. He said tobacco farmers have not been well served by the politicians in this state who are interested in preserving the status quo. The tobacco industry and the politicians either don't understand the evidence or know it and are being dishonest," Foege said. "Smokers and tobacco farmers have been victimized by those two groups."

Foege summed up by saying health workers can do several things: 1) Help smokers through health education and other ways to quite or reduce smoking, 2) Help farmers find alternative crops by employing federal subsidies, 3) Work to see that measures are passed to help bring about truth in advertising of cigarettes, 4) Change the current system of nonsmokers having to pay for the medical costs of smokers and tobacco related illnesses, 5) Work for an end to cigarette advertising and promotion in third world countries.

He summed up by saying that "The tobacco promoters never stop promoting and to increase their profits, they are killing others."

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During a question and answer session after his talk I pointed out to Foege that there was little interest in America today to help agriculture, especially tobacco, and I was wondering how he could get such legislation through Congress. He replied that it could be a time limited program and he thought that certain anti-tobacco legislators such as Senator Mark Hatfield, would work to bring about the passage of such legislation.

BUILDING AN ACTION AGENDA

This was a wrap-up session to determine where the group was going to go here on this issue. The Health Council apparently has done little other than put on an annual convocation each year. The prime emphasis for this meeting and the action on this issue seemed to come from the employees of the Health Services Research Center and the Public Health School at the University of North Carolina. Gordon DeFriesse, Director of the Health Services Research Center, and boss of the president of the Health Council last year, put forth programs to build coalitions with agricultural interests, creating more smoking cessation programs and bringing about greater industry regulation and the running of counter advertising. The new president of the group who ran this session, Dr. Burns Jones, of the Vocational Rehabilitation Section of the State Department of Human Resources, did not seem to be as interested in pushing this issue as the former president. When asked about this by one of the participants, Jones said he was not downplaying the issue but "I don't want to whip you up in a frenzy and build false expectations" about what the Council can do in this issue. There was considerable discussion over the future of the Council, future steps to be taken as a result of this convocation on tobacco, and other alliances or vehicles for carrying out this attack on the tobacco industry. It is my conclusion that the Health Council is in disarray and mired in confusion, but I do not believe we can shrug off these people or this effort. They may not be able to bring about this campaign through the Health Council but I believe that they will endeavor to find some means to press forward, particularly the health professionals from UNC. Mr. DeFriesse did most of the talking during this session and sought to encourage the group to move forward with some sort of action.

I was asked if agricultural interests in tobacco would be interested in having discussions with the health interests to explore ways to find alternative crops and receive some federal funding for this type of effort. Not wanting to appear to be hostile and feeling that discretion was the better part of valor, I said that I did not think that such an offer would be rejected out of hand but I pointed out to them that tobacco growers have had a long standing basis of cooperation with the other sectors of the tobacco economy and that I thought this would remain strong in the future.

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SUMMARY

This conference received a small amount of media attention, primarily through the articles of Lawrence Spohn of the Greensboro News & Record, who in my opinion is very allied with the health interests and is very much a part of the anti-tobacco and anti-smoking crowd in this state. We distributed to you earlier three clippings. Enclosed with this report are three additional clips on the convocation and, a letter of appreciation for my participation in the convocation, and a pamphlet from Blum's group, DOC.

We will continue to monitor this situation and keep you informed as to the actions the group takes. Further participation by TGIC will be determined by the Executive Committee at a board meeting on May 30, 1985

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Enclosures

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