United States Senator Robert F. Kennedy of New York was a vigorous advocate of governmental action to control cigarette advertising and other aspects of the problem. His address follows:

You represent some 34 nations, and it does honor to the conference that so many countries have sent such distinguished delegations of officials. And it is especially appropriate that your conference chairman is Dr. Luther L. Terry, who, as Surgeon General of the United States, was responsible for the historic report without which this conference would perhaps not have occurred.

Nor is it surprising that you attached enough significance to the problem to come here from so far away. All of you face mounting death rates from cigarette smoking, some more serious than in the United States. Great Britain, for example, has a higher death rate from lung cancer than we do. And all of you share with us a distressing lack of knowledge about how to convince people—particularly young people—not only that cigarettes may kill them, but that they should do something about it.

Most of my remarks today will be directed to the situation in the United States. But I believe they are relevant and applicable for all of you in greater or lesser degree depending on your population and the number of smokers in your country.

I need not rehearse the terrible facts about smoking in the United States for you in great detail:

Over a quarter of a million premature deaths each year from diseases associated with cigarette smoking. -Eleven million extra cases of chronic disease in the cigarette smoking population.

-The conclusion in the second Surgeon General's report that cigarette smoking is the "principal" cause of lung cancer and the most important of the causes of death and disability from chronic conditions.

Neither is there need for me to rehearse the urgency of action in any detail.

—Death from lung cancer increasing almost geometrically—from 2,500 in 1930, shortly after smoking started becoming a national habit, to 50,000 now.

—48 million Americans smoking 542 billion cigarettes last year, 2.5 percent more than they smoked the year before.

—Over 4,000 children starting to smoke every day, nearly a million and a half a year.

—A million children now in school dead before their time of lung cancer, if present rates continue.

Nor is there need for me to document these facts extensively. The original Surgeon General's report was based on over 3,000 studies, and the recent supplement to it was based on over 2,000 studies published since 1964. No responsible health organization which has examined the problem has disagreed with these essential facts.

And let me emphasize what I think is the most distressing projection of all. The quarter of a million early deaths are a little less than a seventh of all the deaths in America each year. At present rates, then, one seventh of all Americans now alive—about 28 million people—will die prematurely of diseases associated with cigarette smoking. These are round figures, but they are not far from the mark.

Having stated these facts, let me make my position about them clear:

Every year cigarettes kill more Americans than were killed in World War I, the Korean War, and

Vietnam combined; nearly as many as died in battle in World War II. Each year cigarettes kill five times more Americans than do traffic accidents. Lung cancer alone kills as many as die on the road. The cigarette industry is peddling a deadly weapon. It is dealing in people's lives for financial gain.

Cigarettes would have been banned years ago were it not for the tremendous economic power of their producers. If the cigarette industry's economic power were as minuscule as that of the marijuana industry, cigarettes would surely be illegal now and their sale subject to severe penalty as a health hazard.

The cigarette companies have demonstrated a total inattention to public responsibility. But it is also a reflection on our society—on all of us—that cigarette smoking has been permitted to continue in our various countries. There is no reason for another generation of mankind to end up disabled and the victim of premature death. We must act—and act now.

Given the tremendous economic power of those who oppose action, what can we realistically expect to do about this grave public health problem? That is where this conference plays—and must play—such an important role. For I believe you can—and must—use the opportunity to chart a course for the rest of us, in the United States and in your own countries. You can use these few days to say what must be done—by government at all levels, by voluntary agencies, and by the people themselves. Your recommendations for a specific set of actions will be of great value:

There are at least three fundamental questions before you:

- —What can be done to discourage young people from beginning to smoke?
- —What can be done to encourage those who are already smoking to end their habit?

-What can be done to make cigarettes relatively less harmful?

Bach of these questions raises others in turn.

First, what about cigarette advertising? Nearly \$300 million a year is spent in the United States alone on television, radio, and newspaper efforts to start young people smoking and continue others in their habit. We cannot seriously expect to make major inroads in people's smoking habits while \$300 million a year is being spent to increase the numbers of those addicted. Action is needed to limit and counteract this massive onslaught.

If we were starting fresh, I would say the first line of action would be industry self-regulation of advertising. But we have witnessed a charade of purported self-regulation for some years. The codes of self-regulation have been largely ineffective, and I see little hope for change.

Recently, for example, the Federal Trade Commission reported that the average youngster watches more hours of eigarette-sponsored television than the average adult.

I do not think anyone can be impressed with selfregulation up to now. Nevertheless, I did write recently to the major eigarette companies and the television networks to ask what further self-regulatory steps they plan to take. I am looking forward to discussing the matter with representatives of the two industries.

What might they do? There are at least three minimum steps that I think should be taken: no advertising of cigarettes before 9:00 p.m., a step the National Congress of PTAs called for at its recent convention; a more realistic definition of programs which young people are likely to watch; a limit on the overall amount of advertising. I emphasize the latter to the networks, because some 15 percent of their prime-time advertising is for cigarettes. If a ban on radio and television advertising of cigarettes is enacted at some point—and I favor such a ban—

they will be better prepared if they have voluntarily scaled down the volume of eigarette advertising and replaced it with other sponsors.

Short of enacting a ban on advertising, which does not seem likely at the moment, what might we in Congress do now? We can enact the tar-nicotine bill proposed by Senator Magnuson—who has led the fight on smoking and health in Congress and will address you later this week. This bill would require disclosure of tar and nicotine content on packages and in advertising. I believe the bill will encourage a constructive "reverse tar derby," and I think it should therefore be enacted—now.

In addition, I plan tomorrow to introduce two bills relating to advertising. The first is a strengthened version of Senator Neuberger's bill to require a warning in all advertising-"Warning: Cigarette Smoking Is Dangerous to Health and May Cause Death from Cancer and Other Diseases". While the 1965 labelling law was a small step forward, it has not reduced smoking appreciably. It is time the warning requirement was extended to advertising. The second bill would authorize the Federal Communications Commission to regulate the times and types of programs on which eigarette advertising may appear, and the over-all volume of cigarette advertising as well. These are the self-regulatory steps I have called for from the industry, but the Federal Communications Commission should have power to impose them if the industry does not act.

To anyone who opposes these proposals as unprecedented or extreme, I think I need quote only the observation of the Federal Communications Commission in reaffirming its "fairness" ruling just the other day. The Commission said it knew of no other "advertised product whose normal use has been found by the Congress and the Government to represent a serious potential hazard to public health."

There has been one important and encouraging

development in regard to cigarette advertising—the FCC's ruling on the "fairness" doctrine, to which I just referred. This decision has already had an impact. A Chicago television station in one recent month provided \$17,500 worth of prime time for educational messages on smoking. An Akron, Ohio television station now carrying 46 cigarette ads a day has agreed to carry an equal number of antismoking spots. And the American Cancer Society, which distributed 1,100 copies of TV spots over the three years before the FCC ruling, has sent out 2,000 in the three months since.

Like all laws, this wise and constructive ruling will be of less than full effect unless enforced. Compliance has already been good in some localities. But there are some 3,000 cigarette spots on television each week around the country. According to FCC guidelines, there should, therefore, be about 1,000 health warning spots in response. Some of these should be on the network shows where so many cigarette advertisements appear. To enforce compliance, I would urge the FCC to set up a unit to report on failure to comply. And I trust that radio and television stations will report the volume of health warning messages they carry to the American Cancer Society and other voluntary agencies.

I would also urge the American delegates, when they return home, to organize groups to monitor radio and television stations to check compliance and to demand it and complain to the FCC if it is found wanting. This has already been done in Denver, and perhaps elsewhere. It should be done everywhere, for I believe the FCC ruling is one of the most promising developments that has yet occurred in the effort to acquaint Americans with the dangers of cigarette smoking.

There has been some speculation that legislation requiring a warning in advertising would build compliance with the fairness doctrine into leach ad, and eliminate the need for free antismoking time. I do

not accept that interpretation, and will so state in introducing the warning legislation in the Senate. The warning, does not state the case against cigarette smoking. Rather, it contains only a conclusion that smoking is harmful. In my judgment, affirmative presentations of the underlying facts would still be very much in order.

Let me say one more word about cigarette advertising, or rather, let Emerson Foote say the last word, since he puts things so well. Here is what he wrote me, and this is the entire letter:

"To me, the situation of cigarette advertising on television is like this:

- 1. Television advertising encourages people to smoke cigarettes.
- 2. Cigarettes kill people—in large numbers.
- 3. It is not morally justifiable to encourage people to kill themselves.
- 4. Therefore, cigarette advertising on television should be banned."

And with this I agree.

Second, what is to be the content of educational efforts against smoking? We do not yet know enough about what techniques are most effective in convincing young people—and their parents—vot to smoke. You must, therefore, exchange views about the content of educational material, about how to conduct withdrawal clinics, about the kind of appeal and guidance that is effective. That exchange is especially important because of the opportunity presented by the FCC ruling. It will benefit us all.

I would only suggest that anti-smoking material should show the danger involved clearly and graphically, and with all the ingenuity that Madison Avenue uses to suggest that smoking is a desirable activity. One suggestion that I thought appropriate would place the tough, rangy man with the tattoo on his hand in front of a hospital ward and have him say, "Emphysema country."

Let me add that the matter of education of the

parents is important not just for their health, but is critical if we are to have any success with the children. For if the children see their parents and teachers smoking, efforts to convince them not to are unlikely to have much effect.

Third, what is the role of the various institutions in our society in discouraging smoking? We have discussed some things that government might do. Should the government also forbid smoking in facilities—or parts of facilities—that it runs? Should private employers take similar action? Should health agencies expand their activities? These are all questions for your consideration.

I recently urged those airlines in the United States which still distribute free cigarettes to their passengers to end that practice. Are there other ways in which business could indicate its view that smoking is hazardous?

Fourth, how can we encourage the development of less harmful cigarettes? We must above all be careful that this effort does not mislead the public. For it is all too likely that the ordinary smoker will just keep on smoking, content in the belief that the "safe" cigarette is just around the corner. There is no safe cigarette, and there is none foreseeable in the near future. The public must not be allowed to believe otherwise.

On the other hand, we do know that cigarettes with less tar and nicotine are less harmful. Dr. George Moore told the Senate Commerce Committee last week that cigarettes with less than 15 milligrams of tar are about half as dangerous as the average cigarette. That is why Senator Magnuson's tarnicotine disclosure bill is constructive. That is why most of the 100 millimeter cigarettes are so especially dangerous, and should be banned. That is why it would be a good idea to put a red circle on the cigarette to warn the smoker when the high tar portion of the cigarette has been reached; even more

effective would be an aluminum overwrap which would smiff out the cigarette at that point.

And that is why I will introduce a third bill tomorrow to establish a sliding scale tax on cigarettes.
The current rate—\$4 per 1,000 eigarettes—would
remain on cigarettes with less than 10 milligrams of
tar and .8 miligrams of nicotine. Others would be
taxed at higher rates, with a rate of \$15 per thousand imposed on cigarettes with more than 30 milligrams of tar or 1.6 milligrams of nicotine. The Roswell Park figures show that 18 brands would fall in
this category, as would most of the 100 millimeter
cigarettes—new since the Roswell Park study was
released. This legislation would speed the development of low tar, low nicotine cigarettes, and enable
the public to spot the more dangerous cigarettes by
their higher prices.

We must also encourage research in other ways to make smoking less harmful—and your discussion can guide such a program. The questions are complex. They range from the possibility of using different portions of the tobacco leaf in the cigarette, to developing different ways to deliver the smoke into the consumer's system. We need your guidance

on all of them.

Fifth, since this is an international conference, I urge the delegates from other nations to ask us whether we are right in what we do about cigarettes in your countries. For our Department of Agriculture still spends over \$200,000 a year to subsidize the overseas advertising of American cigarettes. And it still shows abroad a Hollywood produced promotional movie for U.S. tobacco, while other government agencies campaign against cigarette smoking here.

None of these are easy questions to answer; if they were, you would not be here today. Nor will the effort which you chart this week result in immediate success—this year or next. And the three bills which I shall introduce tomorrow may not be enacted right away. For the industry we seek to regulate is powerful and resourceful. Each new effort to regulate will bring new ways to evade, just as the television advertising ban in Britain brought forth an intensified coupon war to promote smoking.

Still, we must be equal to the task. For the stakes involved are nothing less than the lives and health of millions all over the world. But this is a battle which can be won—and with the commitment that is demonstrated by this conference; with the commitment that all of you show in being here and in your work at home—I know it is a battle which will be won.