

Tobacco and the young

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This article provides an overview of a number of issues relating to tobacco and young people.*

More specifically, the article provides brief statistical information on the health impact and prevalence of tobacco use; it looks at a range of current youth/tobacco policy issues; and finally, the article describes the tobacco industry's interest in – despite their claims to the contrary – the youth market.

Smoking and health

With around 3 million Australian smokers, there are over 19,000 Australian deaths per year as a result of tobacco use. This exceeds the combined total deaths resulting from AIDS, breast cancer, illicit drug dependence, motor vehicle accidents, homicide, falls and numerous other causes of death. In 1997-98 tobacco accounted for 81% of all Australian deaths attributable to drug and alcohol use. World wide, tobacco use is responsible for approximately 4.9 million deaths per year. Approximately half of all long-term smokers will die as a result of their smoking. The burden

of ill-health is high too; in 1997/98 there were close to 142,500 Australian hospital episodes as a result of tobacco use. The financial burden on the community is substantial too. At last count this was costed at \$21.6 billion per annum.

Virtually every branch of medicine is represented among the illnesses that are either caused by or associated with the active smoking. Included among these illnesses are 15 cancers including those of the lung, mouth, throat, stomach, pancreas and cervix. During the last 25 years the health effects of passive smoking have been identified. For adults, these include lung cancer, cardio-vascular disease and a range of respiratory symptoms. Health effects for children include asthma, pneumonia, bronchiolitis, croup, glue ear and the sudden infant death syndrome.

The health effects of passive smoking have been confirmed by major reviews of the evidence conducted by peak international public health bodies including the US Surgeon General, the World Health Organisation and the US Environmental Protection Agency.

Australia's National Health & Medical Research Council has also reviewed the evidence and confirmed the abovementioned health effects. A recent Commonwealth Government commissioned study has quantified the number of annual Australian deaths resulting from passive smoking – 224 deaths including 103 children.

There is a growing body of case law involving passive smoking. At the time of writing The Cancer Council NSW had documented 50 cases worldwide in which people had been financially compensated for illness resulting from exposure to second hand smoke.

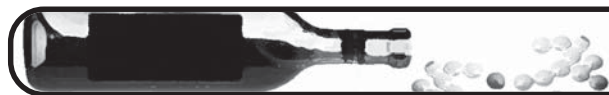
For the young, the health effects of active smoking are significant - addiction to nicotine can occur over days rather than months; and the earlier the uptake, the greater the risk of developing lung cancer. There are immediate toxic effects from smoking a cigarette; namely, carbon monoxide (CO) displaces oxygen from the body's red blood cells thereby denying the tissues their normal levels of oxygen. The most obvious manifestation of this for the

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“ 23% of the (Aust) population is 15 years of age and younger - 17% is 16-24 years of age ... this segment represents a significant market opportunity ... this segment of consumers appears to be at the forefront of a transition ... Belief that Marlboro's brand image/cowboy not aspirational to youth ”

From a 1990 Philip Morris document.





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young is intolerance sustained exercise and loss of fitness. Long-term exposure to CO from smoking can result in coronary heart disease and impaired lung function.

So, how can tobacco cause so much ill health? In 1987 the National Health and Medical Research Council described a lit cigarette as a “prolific chemical factory”. In fact, over 4,000 chemical compounds are contained in tobacco smoke. Many of these are toxic and carcinogenic (cancer causing) - there are 43 known human carcinogens in tobacco smoke. In 1996 it was discovered that one of these substances (benzo{a}pyrene) has a damaging effect on the tumour-suppressing P53 gene. This was considered by researchers to be the final piece of evidence confirming the link between smoking and cancer. Another reason why smoking can cause so much ill health is that nicotine is highly addictive – in the words of one US Surgeon General “as addictive as heroin”.

Smoking prevalence

In 2001, 19.5% of Australians aged 14 and over were daily smokers. The male/female breakdown of these figures was 21.1% and 18% respectively. These rates represent a substantial improvement over the situation in the late 1940s when over 70% of Australian men smoked. Despite this improvement, given the human and social costs of tobacco use, these rates remain unacceptably high.

Among 12 to 17 year old students in NSW, 18% of males and 19% of females were smokers in 1999^k. The figures peak at 28% among 16 year-old boys and at 30% among 16 year-old girls. While there was a dramatic fall in teenage smoking rates during the 1980s, rates returned to near pre-1980s levels during the 1990s. In the late 1990s they

began to fall again but not as dramatically as during the eighties. A number of factors may underlie these trends. The 1980s saw the advent of the Quit (public education) campaigns. By the end of the eighties every Australia State had implemented well-funded mass-media campaigns. However during the 1990s funding for these campaigns had begun to stall in real terms. Also during this period there was a dramatic increase in the depiction of smoking in youth-oriented popular media, notably in movies and popular music video clips^p. By the mid to late 1990s the Commonwealth Government’s National Tobacco Campaign “Every cigarette is doing you damage” had begun to impact on adult smoking attitudes. There is also evidence that the campaign also impacted upon youth smoking.

Current youth/tobacco policy issues

Tobacco control campaigns and youth smoking

There are two general schools of thought relating to this issue (Tobacco Control). One of these advocates the allocation of greater tobacco control resources to addressing adult smoking while the other school of thought advocates the implementation of strong youth-specific campaigns.

The “adults first” school argues that reduced parental smoking results in reduced risk of uptake by offspring and reduced risk of harm from second hand smoke. Secondly, authority messages are often rejected by the young and advertisements perceived as “try-hard”, will be dismissed. Furthermore, it is argued, teen-targeted campaigns are often favoured by the tobacco industry and tobacco control strategies favoured

by the industry tend to be the ones that don’t work. Lastly, there is evidence that adolescents respond as adults do to adult oriented campaigns. This was exemplified by the abovementioned adult-oriented National Tobacco Campaign (NTC) which, although targeted at adults, had the effect of encouraging teenagers to quit. In a NTC survey of 450 teenagers in Adelaide shopping centres 67% of smokers said they were more likely to quit as a result of seeing the ads; 68% of those who had quit said the ads would help them to stay quit; and 86% of non-smokers said that the ads would reinforce their decisions to be non-smokers.

On the other hand there are a number of compelling arguments for strong youth-targeted campaigns. Advocates of this approach argue that there is a role for both youth and adult-oriented campaigns and that the debate shouldn’t be framed as an “either/or” issue. Secondly, because 85-90% of smokers start as children, it would be socially irresponsible not to direct campaigns at this group. In addition, it is argued that strong youth campaigns in the US have proven to be effective. For example, in Florida, a youth-oriented campaign characterised by satire, humour and a hard-hitting focus on tobacco industry misbehaviour contributed to a dramatic decline in youth smoking rates. Furthermore, the teen campaigns favoured, and indeed implemented by the tobacco industry have a limited focus and are not typical of well-researched tobacco control community campaigns. In paraphrasing the typical message of the industry campaigns it could be said to be along the lines of:

Hey kids, don’t smoke. Smoking is an adult choice.”





And, as most parents and others who have regular dealings with children know, most young people are very eager to adopt a range of adult behaviours or perceived markers of maturity.

Smoking cessation and the young

Another policy issue is whether nicotine replacement therapy (NRT) use should be encouraged to promote smoking cessation among the young. Until recently there has been a traditional reluctance to recommend NRT for young people. However with the recognition that nicotine withdrawal symptoms can be as severe in the young as they are in adults this reluctance is no longer as prevalent as it once was. Given that NRT improves the odds of quitting by two to three times, there is an emerging view that for young people who are assessed as being more heavily nicotine dependent, NRT should be considered as a primary treatment option. In other words young smokers wanting to quit should be assessed and treated as adults (Bittoun).

Preventing access to tobacco

In tobacco control we often walk a fine line between discouraging youth smoking and creating the “forbidden fruit” effect. In preventing access, we walk the finest of lines. There are two legislative approaches to preventing access. These are sales-to-minors laws and youth possession, use and purchase laws (or PUP laws).

There is some evidence that enforcement of sales-to-minors laws, which exist throughout Australia, reduces access. On the NSW Central Coast a study found that youth smoking declined along with reduced sales to minors. Sales-to-minors laws place the onus of responsibility on the (usually) more mature party in any attempted youth purchase. However in recent years there have been a number of calls, notably from tobacco retailers and

manufacturers to penalise possession, use and purchase by minors thus shifting the onus of responsibility.

There is little evidence that PUP laws are effective, apart from among some low risk sub groups. A recently published review of PUP laws argues that such laws lack a number of important features required for punishment to be effective in changing behaviour. For example, the laws are characterised by a low likelihood of detection, therefore punishment is uncertain; secondly, the relationship between the punisher (the state) and the recipient (the youth) is impersonal rather than personal; and finally, there is likely to be a long time delay between the offence and the penalty. It is also argued that on a practical level, the laws are difficult to enforce; they require substantial allocation of resources; and importantly, tobacco is highly addictive. On a strategic level, these laws may divert resources from more effective tobacco control strategies. The Cancer Council NSW does not support PUP laws.

The tobacco industry and the young

Brown and Williamson Tobacco Corporation strongly believes that kids should not smoke cigarettes, under any circumstances

It is not possible to talk credibly about preventing youth smoking without talking about the tobacco industry. The above quote typifies the tobacco industry’s public position on youth smoking. Sadly, the sincerity of this statement is undermined by the industry’s real world behaviour. In recent years the Australian tobacco industry has funded, sponsored or otherwise been involved in rave parties, fashion shows, Internet marketing and popular music events. Two recent examples:

- The now infamous “Glisten” series of fashion parties that targeted young women and for which Philip Morris and an associated Internet company,

Wavesnet, were successfully prosecuted by the NSW Health Department.

- The 2002-2003 summer series of popular music festivals held throughout Australia at which tobacco products were sold and promoted using “buzz” or guerrilla marketing techniques. This promotional activity took place in breach of the spirit of tobacco advertising prohibition legislation. The vast majority of people who attend these festivals are young people, many under the age of 18. If the tobacco industry is sincere in its often repeated claim that it doesn’t want the young to smoke, it simply wouldn’t involve itself with these events.

Other tobacco industry activities over the last two decades that can only be interpreted as deliberate encouragement for young people to smoke have included:

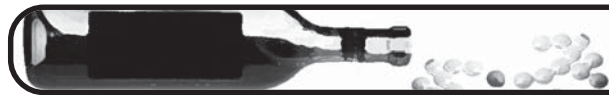
- Product placement in child and youth appealing movies (e.g. Grease, The Muppet Movie, Superman II, Who Framed Roger Rabbit, Crocodile Dundee)
- Provision of support to manufacturers of confectionary cigarettes
- Making cigarettes tasty through the use of flavoured additives such as chocolate, honey, maple syrup, vanilla, licorice, sugar, fruit extracts and oils such as dill, lemon, nutmeg and peppermint – Concern has been expressed by tobacco control advocates that the real purpose is to make cigarettes more palatable to first time users (i.e. mainly children)
- High levels of advertising in youth readership magazines.

What you can do

From the viewpoint of individuals and agencies interested in youth welfare, a

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number of things can be done to counter the predatory activity of the tobacco industry

1. Be aware of industry strategies. Good starting points are the web sites of Action on Smoking and Health (ASH) Australia (<http://www.ashaust.org.au/>) and The Cancer Council NSW (<http://www.cancerCouncil.com.au/>).
2. Join the Tobacco Action Group (TAG) newly established by The Cancer Council. TAG is an electronic mailing list through which those who sign up will receive a bi-monthly newsletter with up-to-date information and suggestions for community action on a range of tobacco control issues.
3. Where you suspect tobacco-related legislation is being breached, lodge a formal complaint with the NSW Health Department. It was such a complaint that led to the abovementioned prosecution of Philip Morris and Wavesnet.
4. Encourage politicians to act. Write to them and urge them to support stronger legislation to prohibit all tobacco promotion. The perfect opportunity to do that will arise with an upcoming review of the Commonwealth Tobacco Advertising Prohibition Act. It is expected that within the second half of 2003 the Government will ask for public submissions through mass-media outlets.

Youth advocacy campaigns in the United States

In the USA, an interesting approach to youth smoking prevention has involved the establishment of youth led anti-tobacco industry advocacy

campaigns sponsored by tobacco control organisations. The primary aim of these campaigns is to counter tobacco industry marketing to the young. The types of activities undertaken as part of the campaigns are media and publicity events, peer education, conferences and political lobbying. Some of these groups are as follows:

Reality Check funded by the New York State Health Department <http://www.rcsaratoga.com/index.html>

Revolution funded by the Minnesota State Government http://www.revolutionizenow.net/index.php?page=about_us

Target Market <http://www.tmvoice.com/index.asp>

Teens Kick ASH http://www.cancer.org/docroot/COM/content/div_CA/COM_4_2x_Teens_Kick_Ash.asp?sitearea=COM

The real attitude of the tobacco industry to youth

In concluding, it can be said that the tobacco industry is the vector of the tobacco epidemic – similar to the way in which the mosquito is the vector of malaria. However in this case, we have a corporate vector that preys on the young. Should this assertion be doubted, we need only refer to some of the quotes contained in the millions of pages of once-secret tobacco industry documents that have come into the public domain since the mid 1990s as a result of whistle blowing and litigation.

From a 1990 Philip Morris document: “23% of the (Aust) population is 15 years of age and younger - 17% is 16-24 years of age ... this segment **represents a significant market opportunity** ... this segment of

consumers appears to be at the forefront of a transition ... Belief that **Marlboro's brand image/cowboy not aspirational to youth**”

And from a Brown and Williamson Tobacco Company document entitled “How we can introduce starters and switchers to our brand” these revealing quotes:

“For the young smoker...the cigarette is the entrance ticket to the hall of the adult society...”

For them a cigarette, and the whole smoking process, is part of the illicit pleasure category...

Present the cigarette as one of a few initiations into the adult world...

Present the cigarette as a part of the illicit pleasure category of products and activities...

Consider a sampling technique to allow the young starters to actually try your brand. (They have very little ability to really compare, but they would like to see themselves as having this ability)...

To the best of your ability (considering some legal constraints), relate the cigarette to ‘pot’, wine, beer, sex, etc... **DON'T** communicate health or health-related points.”

* The complete article (ie with its endnote references) is available from YAPA.

¹ Figures for 2002 are to be jointly released within 3 months of the time of writing by The NSW Health Department and The Cancer Council NSW.

² During this period there were probably no bigger popular music acts than U2, Madonna and Guns and Roses, all of whom featured smoking in video clips. 