

STATEMENT OF THE AMERICAN ADVERTISING FEDERATION  
ON THE ADVERTISING REQUIREMENTS OF H.R. 4957

The American Advertising Federation hereby submits its statement in opposition to H.R. 4957 and particularly to the requirement in Section 4(a)(2) that health warning disclosures must appear in all cigarette advertising.

The American Advertising Federation (AAF) is a national trade association which includes within its membership all of the various elements of the advertising industry. Its principal office is located at 1225 Connecticut Avenue, N.W., Washington, D.C. 20036. Its membership includes: newspaper publishers, magazine publishers, radio and television broadcasters and radio and television networks, advertising agencies and more than 400 companies which produce and/or advertise consumer products including cigarettes. Approximately 22 additional trade associations (including such diverse organizations as outdoor, transit, international, broadcasting, direct mail marketing, associations) with memberships comprised of companies engaged in various advertising pursuits, are also members of AAF. The Federation membership also includes 209 local advertising clubs and federations located throughout the United States. These local organizations have a combined membership of approximately 25,000 advertising practitioners.

The interest and hence, the comments of the American Advertising Federation in this proceeding are limited to the advertising proposals contained in the bill. In particular we are concerned with the proposal to replace the current advertising "warning" with a rotating series of more specific warnings as described in Section 4(a).

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In Section 2 the bill makes six "findings" as to the health consequences of smoking cigarettes and in Section 2(7) Congress "finds" that "present Federal, State, and private initiatives have been insufficient in conveying these health messages to the American public." According to Section 2(9), the bill constitutes "a new strategy . . . to educate and provide information to the American public to allow them to make informed decisions as to whether or not they should smoke."

Insofar as advertising is concerned the "new strategy" imposed by the bill is to require a rotating series of specific health warnings on labels and in advertising. Presumably the present warning on labels required by the Federal Cigarette Labeling and Advertising Act (15 U.S.C. 1333), the ban on broadcast advertising imposed by the same Act (15 U.S.C. 1335) and the FTC's orders mandating a warning in all print advertising are the "federal initiatives" which are now found to be "insufficient."

In introducing the bill Chairman Waxman referred to the conclusion of the FTC staff contained in its May 1981 Report on the Cigarette Advertising Investigation (File No. 792-3204) that "many consumers do not have enough information about the health risks of smoking . . ." But the same staff report acknowledges: "most people know that smoking is somewhat hazardous to health." Stf. Rept. 3-45. Apparently what the FTC staff and the bill's drafters feel is lacking is particular knowledge, in clinical detail, of the Surgeon General's findings as to the relationship between smoking and various diseases.

The essential fact is that people, probably all people, know, minimally, that "The Surgeon General has determined that cigarette smoking is dangerous to your health" and yet some of them continue to smoke. This bill is premised on the supposition that many smokers might quit if they possessed more precise information. But is that really true or only speculation? Moreover would a series of rotating advertising warnings implant that requisite knowledge?

Smoking and Health, The 1979 Report of the Surgeon General (hereinafter, the Report) sheds some light on these questions. In the first place advertising or the lack thereof appears to have little or no effect upon the incidence of cigarette smoking. In chapter 18 the Report cites studies which reveal that "bans on television advertising for cigarettes in several countries, including the United Kingdom, Denmark, Ireland, New Zealand, and Italy, seem to have had almost no effect on per capita cigarette consumption." p. 22. The Report points out that: "In communist countries, smoking is prevalent without advertising of any sort to support it." After citing statistics which show that per capita cigarette sales increased greatly during the period from 1922-1952 the report goes on to state:

More recently, however, the cigarette market has been in a relatively mature, stable state and has had a much lower rate of growth. As the cigarette industry has asserted, the major action of cigarette advertising now seems to be to shift brand preferences, to alter market shares for a particular brand. p. 23.

If advertising plays little or no role in the implementation and continuation of the smoking habit then advertising can hardly

be expected to be an effective medium for an attack on the habit. The Surgeon General's Report comes to the same conclusion. In chapter 17 the Report discusses a study, Television Advertising and the Adolescent, published by S. Ward in 1971. Ward concluded, according to the report, "The television medium appears to influence the formation of ideas and attitudes, yet does not 'trigger' adolescents to buy a product." According to the Ward study, teenagers listed cigarette advertisements as "least-liked." The Surgeon General's Report concludes:

It is possible that because of cognitive and social differences in various development stages of children and adolescents, mass communications may not be the most appropriate means to reach children and adolescents with smoking-deterrent messages. Chap. 17, pp. 15-16.

The Surgeon General's Report specifically disagrees with the speculation that increased knowledge with respect to health hazards will affect smoking habits. At page 8 of chapter 17 the Surgeon General finds:

As would be expected, beliefs of teenagers about smoking are related to whether or not they smoke. Of course, smokers generally hold more favorable attitudes toward smoking than do nonsmokers . . . Nevertheless, data . . . suggest that even teenage smokers seldom consider the decision to smoke a wise decision. For example, 77 percent of smokers believe that it is better not to start smoking than to have to quit. Over half of the teenage smokers believe that cigarette smoking becomes harmful after just one year of smoking. Eighty-four percent say it is habit-forming, while 68 percent agree that it is a bad habit. Of all teenagers, 78 percent believe that cigarette smoking can cause lung cancer and heart disease. Eighty-seven percent of all teenagers and 77 percent of the teenage smokers believe that smoking can harm their health.

Despite this knowledge, smoking among teenage boys remains constant and among teenage girls is actually increasing. Apparently the perceived social and psychological benefits of smoking outweigh the fear of adverse health consequences.

As the Surgeon General's Report points out, the reasons why people smoke are many and varied. Notably absent from the list is a lack of information as to health consequences. In the United States people smoke, obese people overeat, drivers refuse to fasten safety belts and motorcyclists refuse to wear helmets, not because of a lack of warning as to consequences, but simply because they refuse to heed such warnings. With this segment of the population additional warnings will serve no purpose and may indeed be counterproductive.

If this bill is enacted it will signal Congressional intention to transform the purpose and functioning of advertising in the United States for, in essence, it stands for the proposition that government can conscript private advertising to carry out national public education campaigns and force private advertisers to underwrite the costs of these campaigns. The bill leaps, from a finding that the public lacks precise information about the effects of cigarette smoking to a conclusion that cigarette advertising must be appropriated by government fiat to carry the government's message. This reasoning, if accepted, would create such a broad precedent as to sweep within its scope an innumerable array of advertised products. Moreover it ignores the Surgeon General's conclusions that advertising's major effect is merely to "shift brand preferences" and that "mass communications may

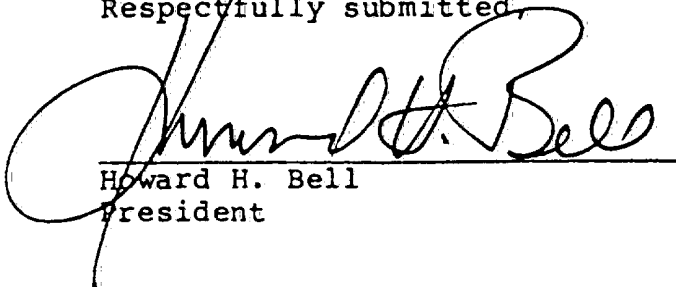
not be the most appropriate means to reach children and adolescents with smoking-deterrent messages."

AAF believes that there has been no showing that advertising plays a role in the public's decision as to whether to smoke or abstain and that further usurpation of advertising space is unwarranted. We also believe that the proposed system will be no more effective than the present warning for neither are relevant to the underlying causes of behavioral smoking.

For these reasons we urge that H.R. 4957 not be enacted into law.

Dated: March 3, 1982

Respectfully submitted,



Howard H. Bell  
President