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## WOMEN'S HEALTH

### Cigarette advertising to women: Taking responsibility

Mary E. Guinan, MD, PhD

A variety of magazines are directed at American women. Some emphasize fashion, while others cover child rearing, homemaking, or gardening; still others stress career, coping with multiple women's roles, or feminism. Almost without exception, women's health concerns are periodically addressed by these magazines. Because women are the target audience, I have always assumed that these publications have women's best interests at heart. Is this a realistic assumption? I'm not sure. I also do not know what influence women's magazines have on women's health behavior, but I think it is substantial. If this is so, then shouldn't we hold these publications accountable not only for the accuracy of their health information, but also for the lack of information on serious women's health problems? I would like to hear the opinions of other women physicians on this subject. What should we be doing individually or collectively to ensure that women get responsible health information from these publications?

As an example, I believe that women's magazines that accept smoking advertising and do not provide regular information on the special dangers of smoking for women are irresponsible. I resisted coming to this conclusion for a long time but finally was convinced.

Approximately 10 years ago, I first became aware of the emerging epidemic of lung cancer in American women, which closely correlated with their smoking patterns. At the time, I subscribed to a women's magazine that often addressed women's health issues, pointing out that the male medical establishment did not have women's best interests at heart. One popular issue addressed was the number of unnecessary hysterectomies performed in the United States.

It was argued that one of the main reasons for this situation was the control of women's health by the male medical establishment, which:

1) didn't educate women to make appropriate choices, 2) wanted to make money at the expense of women's health, 3) had no concern for the psychological effects of this surgery, and 4) generally abused the trust that women had in them. I was convinced that this was a serious problem. I believed that women needed improved access to accurate health information and that this magazine was striving toward that end.

This magazine also had smoking advertisements in every issue. I wrote to the editor and asked about their smoking advertising policy, suggesting that they might be guilty of some of the charges they were making about the male medical establishment. I didn't receive an answer. As months went on, I became more disturbed because the number of advertisements for different brands of cigarettes kept increasing. I wrote an article on smoking and the related lung cancer epidemic in women and submitted it to the magazine for publication. I never received an answer.

In 1979, I was asked to attend a planning meeting for the 1980 Surgeon General's report on smoking, which would be devoted entirely to women. A number of experts from various disciplines discussed the serious increase in smoking related lung cancer in women and how cigarette manufacturers were targeting women for advertising. After the meeting, I reviewed back issues of my monthly magazine from 1972 to 1979 (I had saved them all). I found that the number of full-page cigarette ads increased from a high of three per issue in 1972 to a high of seven per issue in 1979, while the total number of magazine pages had

actually decreased, and, despite a large number of articles on women's health, not one appeared about the dangers of smoking.

Many of these ads had pictures of glamorous career women smoking. What positive images of smoking, with no hint of the dangers! I again wrote to the editors and gave them the results of my review and asked if they could print an article on the dangers of smoking without losing their cigarette advertising. Again, no answer. I wrote my last letter to these editors explaining that I was very reluctantly cancelling my subscription because of their glamorous cigarette ads and no counterbalancing articles on the rising incidence of smoking related illness in women. I'm sorry to say the letter went unanswered.

Many years later, I saw one of the editors interviewed by a woman reporter who asked about the magazine's smoking advertising and its effect on women. The editor replied that they always included the package warning in the ad, which they felt was sufficient to warn women of smoking's dangers. I have to conclude that they do not have the best interests of women at heart.

Now, almost 10 years later, the estimated number of women who will die of smoking related illnesses in 1988 exceeds 100,000. Hundreds of millions of dollars worth of tobacco advertising appears in women's magazines each year. Many that accept cigarette advertising will not accept advertisements for "stop smoking" clinics for fear of losing tobacco revenue.<sup>1</sup> Twenty-eight percent of American women smoke, compared to 33% of men. Cigarette advertising in women's magazines has increased to such an extraordinary degree that 8 of the 20 magazines receiving the most cigarette advertising revenue in 1985 were women's magazines.<sup>2</sup>

At least ten different brands of

cigarettes are being marketed especially for women. The packaging and paper are designed to appeal to women, and the names of these brands and the ads for them suggest thin or slim, capitalizing on the desire of many women to be thin. In the ads, smoking is identified with weight loss, feminism, and freedom of choice. That this targeted advertising is effective is evidenced by a much slower decline in smoking among women than men.<sup>3</sup> Even more worrisome is that among adolescents, a higher proportion of high school women than men are daily cigarette smokers.<sup>4</sup>

In a spirited article on cigarette advertising and media coverage of smoking and health, Warner<sup>1</sup> criticized physicians for not taking a leadership role in the antismoking movement. As women physicians, we should try especially to exercise leadership in women's health by strong, organized opposition to smoking. The American Medical Women's Association has done this. AMWA has made smoking and health its number one health policy priority.<sup>5</sup> At the 72nd Annual Meeting in Orlando, antismoking workshops were featured. A photo of AMWA members at the meeting in T-shirts declaring "Smoking is Dumb, Dirty, Deadly" should become a classic.

What more can we do? Ensure that your office has no magazines that advertise cigarettes, encourage all patients who smoke to quit, have negative advertising in your office. Be an antismoking activist. Speak out against free distribution of cigarettes in promotions, support strong measures to enforce laws prohibiting the sale of cigarettes to minors, and support no smoking ordinances. Write letters to restaurants that have no smoking policies congratulating them on their public health efforts. Support smoking bans in beauty parlors, health spas, or any businesses that cater to women. Take every opportunity to discuss the epidemic of lung cancer in women that is a result of cigarette smoking. Note that in at least two states, lung cancer has outstripped breast cancer as

the leading cause of cancer mortality in women.<sup>6,7</sup> Considering that one of every ten American women will develop breast cancer, isn't it sobering to think that this year lung cancer is expected to account for more deaths in American women than breast cancer? *These deaths are preventable.* Of all lung cancer deaths in women, 75% are attributable to smoking.<sup>8</sup>

We have to find new and effective methods to counteract both smoking advertising and the "conspiracy of silence"<sup>1</sup> on the epidemic of lung cancer in women. If you have ideas or have done some special antismoking campaign or action, write and share your ideas. Send them to: Anti-Smoking Task Force, c/o AMWA, 465 Grand St, New York, NY 10002.

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