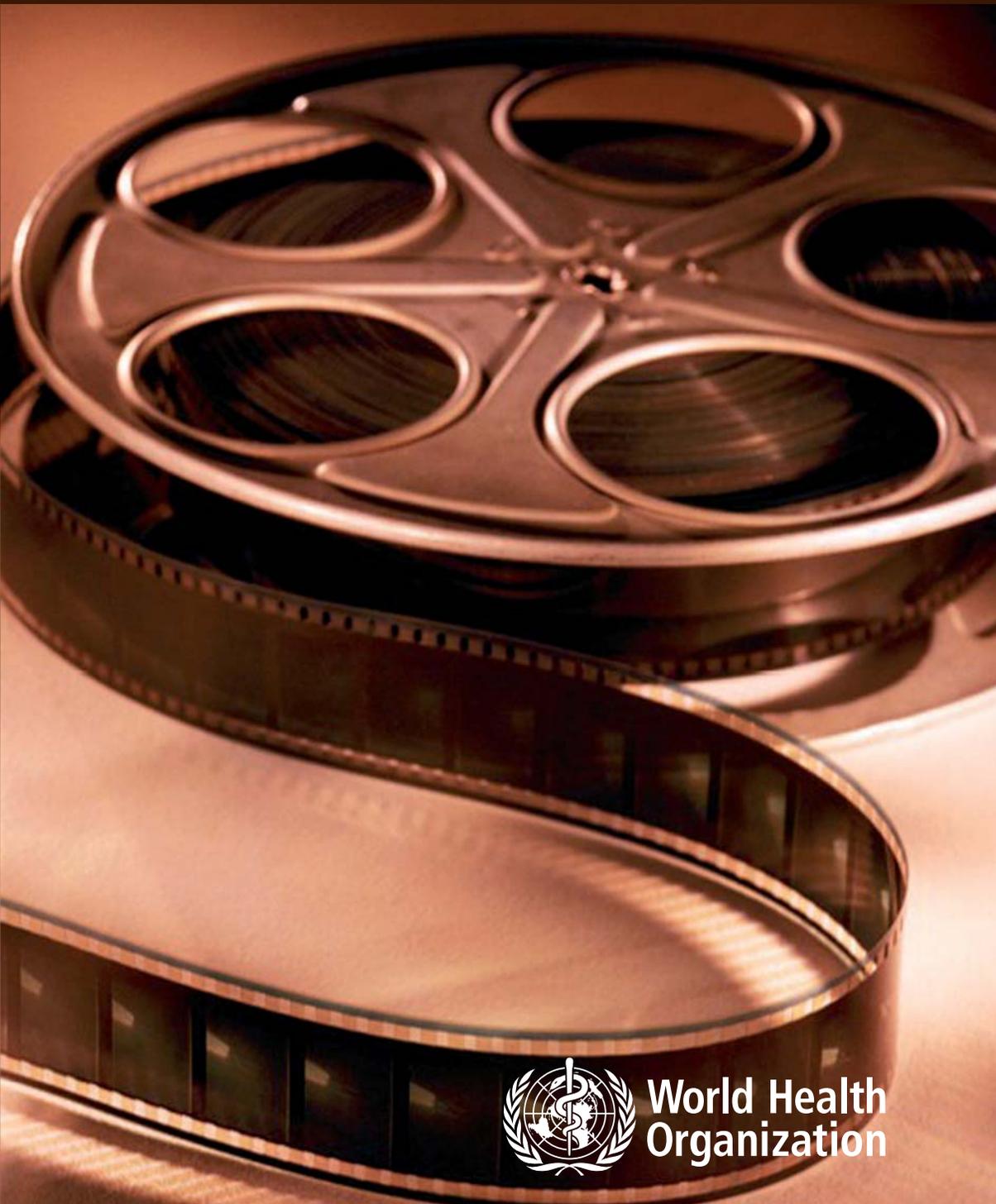


Smoke-free movies: **From evidence to action**



**World Health
Organization**

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Introduction

Imagery emanating from motion pictures continues to provide misleadingly positive impressions of tobacco use. These images have now been identified as a risk factor for smoking initiation among adolescents. In 2008, the National Cancer Institute of the United States of America concluded that:

“the total weight of evidence from cross-sectional, longitudinal, and experimental studies, combined with the high theoretical plausibility from the perspective of social influences, indicates a causal relationship between exposure to movie smoking depictions and youth smoking initiation”⁽¹⁾.

As the WHO Framework Convention on Tobacco Control (WHO FCTC) begins to be implemented, Parties must soon undertake a comprehensive ban on tobacco advertising, promotion and sponsorship according to Article 13 of the treaty (2). The guidelines for implementation of Article 13 recognize that the depiction of tobacco in films is a form of tobacco advertising that can strongly influence tobacco use, particularly among young people, and recommends a set of specific measures, which are addressed more fully within this report (68).

In the past, movies have been an important vehicle for product placement, indirect advertising of tobacco products and social learning (3)¹ about smoking. The marketing of tobacco in the movies, particularly movies originating from countries with the most active movie industries, remains an important vehicle for promoting smoking, including in films rated as suitable for children and adolescents.

Voluntary agreements with the tobacco industry to limit smoking in movies have not and cannot

work because the fiduciary interests of the tobacco industry are opposite those of the public health community. In the United States, the Master Settlement Agreement (MSA) between the states’ Attorneys General and the major domestic tobacco manufacturers included a provision in which the manufacturers agreed to a prohibition on paid tobacco product placement in movies (4). However, evidence has shown increased smoking exposure in movies made subsequent to the implementation date of the agreement (5).

Logic and science now support enforceable policies to severely restrict smoking imagery in all film media. Measures to substantially limit movie smoking, such as those outlined in the Article 13 guidelines, can ensure that motion pictures will not continue to serve as a source of tobacco promotion aimed at young people. In addition, strong and enforceable policy measures can be supported by programmes to educate the public and policy-makers, as well as the entertainment industry, on the value of reducing young people’s exposure to tobacco imagery.

This document summarizes current knowledge about smoking in movies, as well as current and proposed approaches to reduce the impact of this imagery. The report aims to help countries understand the basis for taking action to limit smoking depictions in movies. It is also intended that this report can help Parties to the WHO FCTC implement specific recommendations related to smoking in movies which are included in the Article 13 guidelines. In addition, it is expected that the report will also be useful to those countries which are not yet party to the treaty, in order to help them implement this important component of a comprehensive ban on tobacco advertising, promotion and sponsorship.

1 The social learning theory of Bandura emphasizes the importance of observing and modelling the behaviours, attitudes and emotional reactions of others.

1. Tobacco on screen: why this is a problem

The tobacco industry has in the past spent millions of dollars to maintain the portrayal of smoking in movies (7). The role of movies as vehicles for promoting smoking has become even more important as other forms of tobacco promotion are constrained (see Annex A). As shown in Figure 1, this investment² is part of a wider and more complex marketing strategy to support pro-tobacco social norms, including product placement in mass media, sponsorship and other modalities. In this figure, cinema is

also shown to be a core element in mass media approaches to normalizing smoking.

According to a recent publication of the British Medical Association (8) and other sources, there are several reasons why smoking in movies should be addressed as a public health problem, namely, that movies reach every corner of the globe, effectively promote smoking and have done so without much public health scrutiny until now.

Figure 1: The nested relationships among advertising, marketing communications, consumer marketing and stakeholder marketing in tobacco promotion



Source: National Cancer Institute (1).

² For the monetary value of tobacco companies' documented spending on Hollywood product placement agencies 1979-94, see <http://www.smokefreemovies.ucsf.edu/problem/bigtobacco.html>.

1.1. MOVIES REACH EVERY CORNER OF THE WORLD

At least 3400 feature-length movies were produced and released in 2005 (many directly to video) in 35 nations worldwide: 1041 (30%) in India, 798 (26%) in the European Union, 356 (10%) in Japan, 320 (9%) in the United States and 145 (4%) in China (9). Although a small proportion of all movies produced worldwide, movies produced in the United States have consistently owned 60 – 70% of the film market outside the United States as measured by theatre box office receipts – the major exception being the market share in India of films produced in the United States (10, 11).

The tobacco industry knows that motion pictures are one of humanity's most common entertainment experiences. In a world with two billion urban dwellers (12), cinemas sold eight billion movie tickets in 2006, an all-time high. Of these, 20% were sold in the United States and Canada; however, 80% of admissions and 63% of box office revenues were in other countries (13). Based on figures from exhibitors, distributors and market analysts, the world spends an estimated US\$ 100 billion a year on cinema tickets and on legitimate or pirated video copies of films. Roughly 30% is spent on single viewings in theatres, while 70% is spent on videos that can be viewed multiple times. Motion pictures are increasingly viewed outside movie theatres and distributed through other channels. The movie medium is extended by the Internet, television, DVDs and other video access, reaching widely

1999-2006, tobacco imagery permeated both youth-rated (G/PG/PG-13) and adult-rated (R) movies, with more than three quarters of movies made in the United States featuring tobacco imagery (14). More specifically, close to 90% of all R-rated movies included smoking, while smoking appeared in three quarters of movies rated PG-13 and was found in more than a third of movies rated G or PG. Altogether, live action movies of all ratings produced in the United States between 1999 and 2006 contained approximately 8400 tobacco incidents.³ Of these incidents, 68% were in movies rated R; 29% in movies rated PG-13; and 3% in movies rated G or PG. (See Box 1 for an explanation of the rating system.) There was no significant trend in tobacco incidents per film, either up or down, over the period 1999-2006.

Box 1: The film rating regime in the United States

Since 1968, film ratings in the United States have been assigned by the Motion Picture Association of America (MPAA), the trade group of major film studios, and by the National Association of Theatre Owners, which jointly operate the Classification and Rating Administration. Submitting a film for classification is voluntary, as is rating observance by theatres and video retailers, but is practically universal among commercial, non-pornographic film and video distributors.

MPAA rating categories

- G: General audiences – All ages admitted
- PG: Parental guidance suggested – Some material may not be suitable for children

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