

Deadly in Pink

*Big Tobacco
Steps Up
Its Targeting of
Women and Girls*

February 18, 2009



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Deadly in Pink: Big Tobacco Steps Up Its Targeting of Women and Girls

Summary

The tobacco industry has a long history of developing cigarette brands and marketing campaigns that target women and girls, with devastating consequences for women's health. In the last two years, the industry has significantly stepped up these efforts, threatening to lure a new generation of girls into a lifetime of smoking. The nation's two largest tobacco companies – Philip Morris USA and R.J. Reynolds – have launched new marketing campaigns that depict cigarette smoking as feminine and fashionable to counter the growing public consensus that smoking is socially unacceptable and unhealthy.

These new marketing campaigns represent the most aggressive efforts by the tobacco industry to target women and girls in at least a decade. These campaigns are jeopardizing the progress the United States has made in reducing smoking and once again putting the health of women and girls at risk.

A December 2008 report by the nation's leading cancer organizations underscores the threat to women's health from this new wave of cigarette marketing to women and girls. The "Annual Report to the Nation on the Status of Cancer" found that while lung cancer death rates are decreasing for men – and overall cancer death rates are decreasing for both men and women – lung cancer death rates have yet to decline among all women. A key reason cited was the sharp increase in smoking initiation among young women and girls during the late 1960s and 1970s, when cigarette brands such as Philip Morris' Virginia Slims were created for and aggressively marketed to women.¹

The latest cigarette marketing to women and girls threatens a repeat of this harmful history, but it is preventable.

The Congress has a significant role to play by passing legislation granting the U.S. Food and Drug Administration (FDA) the authority to regulate the manufacturing, marketing and sale of tobacco products. This legislation would curtail many of the industry's most harmful practices that have been used to target women and girls. Among other things, it would:

- Crack down on marketing that makes tobacco products appealing to children;
- Ban misleading health claims such as "light" and "low tar" that often have been targeted to women;
- Stop tobacco companies from manipulating their products in ways that increase addiction and harm; and
- Require large health warnings that, in addition to better informing consumers, would reduce the effectiveness of the cigarette pack itself as a marketing tool.

This report describes the tobacco industry's new marketing campaigns, the industry's history of targeting women and girls, the devastating consequences for women's health and the benefits of the pending legislation to grant the FDA authority over tobacco products.

¹ Jemal, A, et al., "Annual Report to the Nation on the Status of Cancer, 1975 – 2005, Featuring Trends in Lung Cancer, Tobacco Use, and Tobacco Control," *Journal of the National Cancer Institute* 100(23):1672-1694, December 3, 2008, <http://jnci.oxfordjournals.org/cgi/reprint/100/23/1672>.

Deadly in Pink: Big Tobacco Steps Up Its Targeting of Women and Girls

New Wave of Cigarette Marketing Targeting Women and Girls

As smoking rates decline in the United States and efforts to further reduce tobacco use increase, the tobacco industry is once again stepping up its marketing of tobacco products specifically to women and girls. In the last two years, Philip Morris USA and R.J. Reynolds have launched the latest wave of cigarette marketing that appeals to this target market.

In October 2008, Philip Morris USA announced a makeover of its iconic Virginia Slims brand into “purse packs” – small, rectangular cigarette packs that contain “superslim” cigarettes. Available in shades of mauve and teal and half the size of regular cigarette packs, the sleek “purse packs” bear a striking resemblance to packages of cosmetics and come in a size and shape that fit easily in small purses. They are available in “Superslims Lights” and “Superslims Ultra Lights” versions, continuing the tobacco industry’s history of associating smoking with slimness and weight control and of appealing to women’s health concerns with misleading terms such as “light” and “low tar.” Direct mail marketing for the new Virginia Slims arrived in the shape of a clutch-style purse filled with colorful coupons for dollars-off packs of cigarettes.

In January 2007, R.J. Reynolds launched a new version of its Camel cigarette, called Camel No. 9, packaged in shiny black boxes with hot pink and teal borders. The name evoked famous Chanel perfumes, and the marketing campaign associated the brand with romance and glamour through magazine ads that featured flowery imagery and vintage fashion. “Light and luscious” promised the first ads in the campaign. “Now available in stiletto” and “dressed to the 9s,” read a later magazine ad that pitched a thin version of the cigarette to “the most fashion forward woman.”

Ads for Camel No. 9 ran in magazines popular with both women and girls, including *Vogue*, *Glamour*, *Cosmopolitan*, *Marie Claire* and *InStyle*. Promotional giveaways have included flavored lip balm, cell phone jewelry, tiny purses and wristbands, all in hot pink. The marketing campaign prompted the Oregonian newspaper to editorialize that R.J. Reynolds, which once marketed to kids with the now-banned Joe Camel cartoon character, was doing it again with “Barbie Camel.”¹

A Long History of Targeting Women and Girls

These new marketing campaigns reprise and update themes common in the tobacco industry’s long history of targeting women and girls. Cigarette smoking was rare among women in the early 20th century, but started climbing after cigarette advertising geared toward women began in the 1920s. Setting a pattern that continues today, cigarette marketing has sought to exploit the aspirations and social concerns of women and girls to sell them a deadly and addictive product.

From its earliest days, tobacco advertising geared toward women and girls sought to link smoking to slimness and weight control. A 1920s ad for Lucky Strike cigarettes urged women to “Reach for a Lucky instead of a sweet.” This marketing of Lucky Strike as an aid to weight

control led to a greater than 300 percent increase in the brand's sales in the first year of the advertising campaign.²

During the World War II period, cigarette companies began to target women even more aggressively, using the fashion, beauty and sophistication themes that still continue today. Advertisements for Chesterfield cigarettes featured glamorous photographs of a Chesterfield girl of the month, usually a fashion model or a Hollywood star such as Rita Hayworth, Rosalind Russell, or Betty Grable.³

The targeting of the female market reached new levels in 1968 when Philip Morris introduced Virginia Slims, the first cigarette brand created specifically for women. With the slogan, "You've come a long way, baby," this marketing campaign cynically appropriated the themes and goals of the women's liberation movement – independence and empowerment – to sell a product that, through addiction, disease, and death, would have the opposite effect. Subsequent Virginia Slims campaigns would continue the theme with slogans such as "It's a Woman Thing" and "Find Your Voice," the latter featuring women of diverse racial and ethnic backgrounds.

Six years after the introduction of Virginia Slims and other brands aimed at the female market, the rate of smoking initiation of 12-year-old girls had increased by 110 percent. Increases among teenage girls of other ages were also substantial.⁴

As women's concerns about the health risk of smoking grew, the tobacco companies in the 1970s began marketing "low tar" and "light" cigarettes to women as a "softer" or "safer" option. Tobacco companies continued to market these products despite being aware that the actual or implied health claims in their ads were either misleading or false. Women smokers are more likely than their male counterparts to smoke "light" and "ultra-light" cigarettes (63 percent vs. 46 percent), and women are more likely than men to switch to these cigarettes.⁵

The Devastating Impact on Women's Health

These marketing campaigns have had a devastating impact on the health of women and girls, which the latest marketing campaigns threaten to perpetuate. In the United States, 18.7 percent of high school girls and 17.4 percent of women are current smokers.⁶ Altogether, more than 20 million women and more than 1.5 million girls currently smoke, putting them at risk of lung cancer, heart attacks, strokes, emphysema and other deadly diseases caused by smoking. The toll in health and lives is tremendous:

- Just as it is for the population as a whole, tobacco use is the leading cause of preventable death among women. Cigarette smoking kills more than 170,000 women in the U.S. each year, amounting to nearly 2.1 million years of potential life lost prematurely because of smoking-attributable diseases.⁷
- In 1987, lung cancer surpassed breast cancer to become the leading cause of cancer death among women. Lung cancer death rates among women increased by more than 600 percent between 1950 and 2005, and lung cancer now kills more than 66,000 women each year.⁸ Smoking causes about 90 percent of all lung cancer deaths among women.⁹

- As noted already, while lung cancer death rates are decreasing for men – and the overall cancer death rate is decreasing for both men and women – lung cancer death rates have yet to decline among all women.¹⁰
- Coronary heart disease (CHD), including heart attacks and strokes, is the overall leading cause of death among women, killing more than 450,000 women each year.¹¹ Smoking is a major cause of CHD among women; in fact, smoking doubles the risk for CHD.¹²
- Cigarette smoking is the primary cause of chronic obstructive pulmonary disease (COPD), which includes bronchitis and emphysema, in women, and the risk increases with the amount and duration of cigarette use. COPD has become the fourth leading cause of death in the U.S. and now kills more women than men.¹³
- Smoking causes *at least* 30 percent of *all* cancer deaths.¹⁴ In addition to causing lung cancer, smoking is a known cause of cancer of the larynx, oral cavity and esophagus, stomach, bladder, cervix, kidney and pancreas. Women smokers also have an increased risk of cervical and vulvar cancer.¹⁵
- Smoking before and during pregnancy is the single most preventable cause of illness and death among mothers and infants. Smoking and exposure to secondhand smoke during pregnancy directly increases the risk of miscarriage and ectopic pregnancy as well as sudden infant death syndrome, mental retardation and low birthweight babies. Smoking also causes menstrual problems, reduced fertility and premature menopause.¹⁶

How FDA Regulation of Tobacco Would Protect Women and Girls

The legislation before Congress would grant the FDA broad authority to regulate the manufacturing, marketing and sale of tobacco products. While protecting all Americans from the harmful practices of the tobacco industry, it includes provisions that would curtail many of the specific practices the industry has used to target women and girls. The legislation would:

- **Crack down on tobacco marketing and sales to kids.** Magazine and store advertising and event sponsorships have been key elements of cigarette marketing campaigns aimed at women and girls. The bill would limit tobacco advertising in publications with significant teen readership and outdoor and point of sale advertising to black-and-white text only. It would also ban all remaining tobacco industry sponsorships of sports and entertainment events. The bill would also provide for enforcement and penalties against the sale of tobacco products to minors.
- **Require larger, more effective health warnings on tobacco products and advertising.** The new warnings would at a minimum cover the top 30 percent of the front and rear panels of the pack. The FDA would gain authority to require graphic warnings that cover 50 percent of the front and rear panels. It could also revise warnings to keep them fresh and effective and respond to new science or industry practices. In addition to better informing consumers about health risks and motivating smokers to quit, these larger warnings would limit the ability of tobacco companies to use the cigarette pack itself as a marketing tool, as R.J. Reynolds and Philip Morris have done with Camel No. 9 and the Virginia Slims “purse packs.”

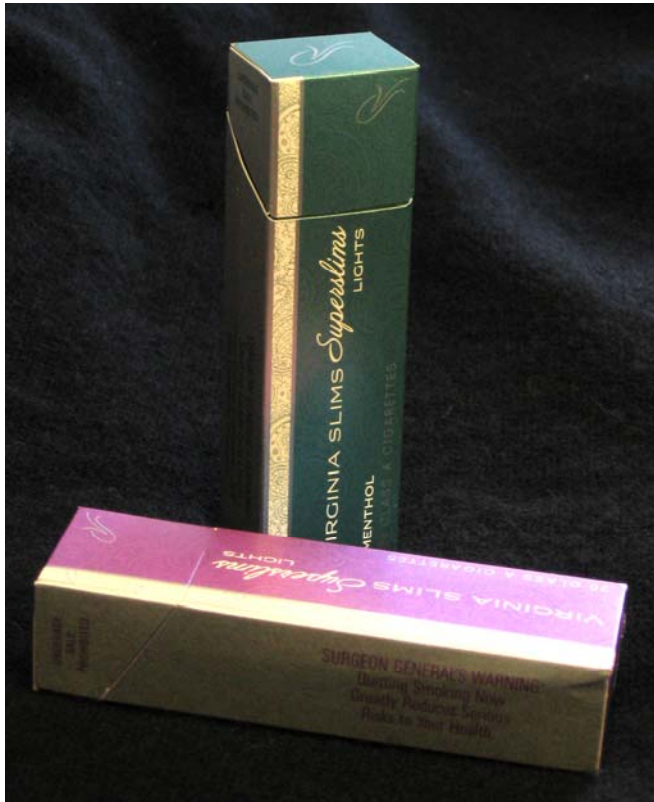
- **Prohibit misleading cigarette descriptions such as “light,” “low tar,” and “mild.”** As described in this report, tobacco companies have often targeted the marketing of these cigarettes to women, deceptively implying that these brands offered a healthier option despite knowing that they produced no real health benefits.
- **Strictly regulate all health claims about tobacco products.** To prevent deceptive and misleading marketing in the future, the bill would prohibit any health claims about tobacco products that are not scientifically proven or that would discourage current tobacco users from quitting or encourage new users to start.
- **Require tobacco companies to disclose previously secret information about their products,** including the contents of products, changes to products and research about health effects. Tobacco companies would no longer be able to secretly manipulate their products in ways that make them more harmful or more addictive.
- **Require FDA review of product changes and new products.** The FDA would gain authority to review all new products and evaluate modifications to existing products to determine the impact on public health. Tobacco manufacturers would be required to disclose any new additives or increase in existing additives before making product changes and to demonstrate that the changes would protect the public health. In order to introduce a new product that is not similar to products currently on the market, a manufacturer would have to demonstrate to the FDA that introduction of the new product would protect the public health. In reviewing the product, the FDA would consider the risks and benefits to the population as a whole. This would include examining whether the product as marketed would discourage current tobacco users from quitting or cause non-users to start.
- **Grant the FDA authority to require changes in tobacco products,** such as the reduction or removal of harmful ingredients and the reduction of nicotine to non-addictive levels. This authority will help ensure that changes in tobacco products are made to protect public health, not to advance tobacco industry strategies to addict new customers and maintain current ones.

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- ¹ "From Joe Camel to Barbie Camel," *The Oregonian*, May 13, 2007.
- ² U.S. Department of Health and Human Services (HHS), *Women and Smoking: A Report of the Surgeon General*, Washington, DC: HHS, Public Health Service, Office of the Surgeon General, 2001, http://www.cdc.gov/tobacco/data_statistics/sgr/index.htm.
- ³ HHS, *Women and Smoking: A Report of the Surgeon General*, Washington, DC: HHS, Public Health Service, Office of the Surgeon General, 2001, http://www.cdc.gov/tobacco/data_statistics/sgr/index.htm.
- ⁴ Pierce, JP, Lee, L, & Gilpin EA, "Smoking initiation by adolescent girls, 1944 through 1988: An association with targeted advertising," *Journal of the American Medical Association* 271:8, 1994.
- ⁵ Pillitteri, JL, et al., "Smokers beliefs about light and ultralight cigarettes," *Tobacco Control* 10(Suppl):i17-i23, 2001. Giovino, G. et al., "Attitudes, Knowledge, and Beliefs About Low-yield Cigarettes Among Adolescents and Adults," in National Institutes of Health, National Cancer Institute, *The FTC Cigarette Test Method for Determining Tar, Nicotine, and Carbon Monoxide Yields of U.S. Cigarettes; Report of the NCI Expert Committee, Smoking and Tobacco Control Monograph 7*.
- ⁶ U.S. Centers for Disease Control and Prevention (CDC), "Youth Risk Behavior Surveillance, United States, 2007," *Morbidity and Mortality Weekly Report (MMWR)*, June 6, 2008 57 SS-4 <http://www.cdc.gov/mmwr/pdf/ss/ss5704.pdf>. CDC, "Cigarette Smoking Among Adults – United States, 2007," *MMWR* 57(45), November 14, 2008, <http://www.cdc.gov/mmwr/preview/mmwrhtml/mm5745a2.htm>.
- ⁷ CDC, "Annual Smoking-Attributable Mortality, Years of Potential Life Lost, and Productivity Losses – United States, 2000-2004," *MMWR* 57(45), November 14, 2008. <http://www.cdc.gov/mmwr/PDF/wk/mm5745.pdf>.
- ⁸ CDC, "Annual Smoking-Attributable Mortality, Years of Potential Life Lost, and Productivity Losses – United States, 2000-2004," *MMWR* 57(45), November 14, 2008. <http://www.cdc.gov/mmwr/PDF/wk/mm5745.pdf>. See also, US Mortality Public Use Data Tapes 1960-2003, US Mortality Volumes 1930-1959, National Center for Health Statistics, CDC, 2006. See also, American Cancer Society (ACS), *Cancer Facts and Figures*, 2008, <http://www.cancer.org/downloads/STT/2008CAFFfinalsecured.pdf>.
- ⁹ HHS, *Women and Smoking: A Report of the Surgeon General*, Washington, DC: HHS, Public Health Service, Office of the Surgeon General, 2001, http://www.cdc.gov/tobacco/data_statistics/sgr/index.htm.
- ¹⁰ Jemal, A, et al., "Annual Report to the Nation on the Status of Cancer, 1975 – 2005, Featuring Trends in Lung Cancer, Tobacco Use, and Tobacco Control," *Journal of the National Cancer Institute* 100(23):1672-1694, December 3, 2008, <http://jnci.oxfordjournals.org/cgi/reprint/100/23/1672>.
- ¹¹ CDC, "Annual Smoking-Attributable Mortality, Years of Potential Life Lost, and Productivity Losses – United States, 2000-2004," *MMWR* 57(45), November 14, 2008. <http://www.cdc.gov/mmwr/PDF/wk/mm5745.pdf>.
- ¹² HHS, *Women and Smoking: A Report of the Surgeon General*, Washington, DC: HHS, Public Health Service, Office of the Surgeon General, 2001, http://www.cdc.gov/tobacco/data_statistics/sgr/index.htm.
- ¹³ HHS, *The Health Consequences of Smoking. A Report of the Surgeon General*, 2004, <http://www.surgeongeneral.gov/library/smokingconsequences/>.
- ¹⁴ ACS, *Cancer Facts and Figures*, 2008. <http://www.cancer.org/downloads/STT/2008CAFFfinalsecured.pdf>
- ¹⁵ HHS, *The Health Consequences of Smoking. A Report of the Surgeon General*, 2004, <http://www.surgeongeneral.gov/library/smokingconsequences/>; HHS, *Women and Smoking: A Report of the Surgeon General*, Washington, DC: HHS, Public Health Service, Office of the Surgeon General, 2001, http://www.cdc.gov/tobacco/data_statistics/sgr/sgr_2001/index.htm.
- ¹⁶ HHS, *Women and Smoking: A Report of the Surgeon General*, Washington, DC: HHS, Public Health Service, Office of the Surgeon General, 2001, http://www.cdc.gov/tobacco/data_statistics/sgr/sgr_2001/index.htm. CDC, *Preventing Smoking and Exposure to Secondhand Smoke Before, During, and After Pregnancy*, July 2007, <http://www.cdc.gov/NCCdphp/publications/factsheets/Prevention/smoking.htm>.

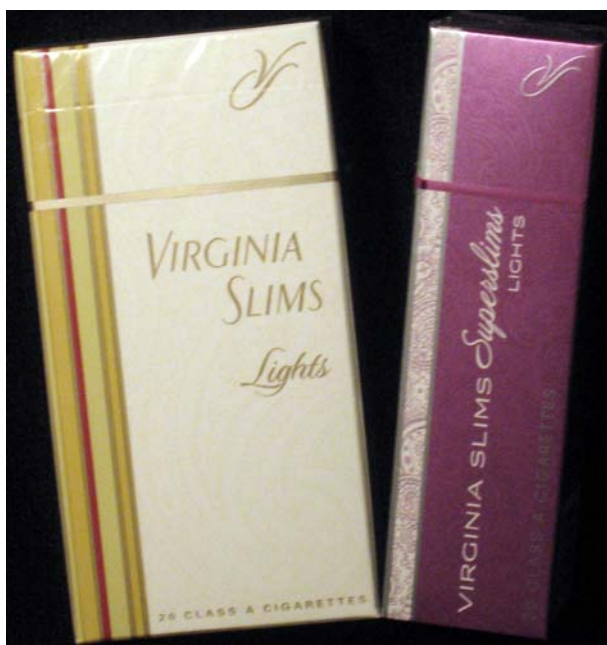
The Story in Pictures:

Big Tobacco's Current and Past Marketing to Women and Girls

New Wave of Cigarette Marketing Targeting Women and Girls



In October 2008, Philip Morris USA announced a makeover of its Virginia Slims brand as “purse packs” – small, rectangular cigarette packs that come in mauve or teal and contain “superslim” cigarettes. These sleek “purse packs” resemble packages of cosmetics, are half the size of regular cigarette packs and are sold in “Superslims Lights” and “Superslims Ultra Lights.” These new packs have been on the market since October 2008. Philip Morris announced that it would launch a marketing campaign by the first quarter of 2009, focusing on direct, event and point of purchase marketing. The direct mail marketing has begun and features elaborate mailers designed to look like popular clutch-style purses with pop-up “purse packs” inside and coupons for over \$5 off.



Superslims
in Virginia
Slims
purse
packs

Virginia
Slims
Lights

Camel No. 9



Virginia Slims
Superslims Purse
Packs compared to
drug store cosmetics.



Virginia Slims Superslims
Purse Pack direct mail piece.



To launch Camel No. 9, RJR placed slick ads in magazines popular with women and girls, including *Vogue*, *Glamour*, *Cosmopolitan*, *Marie Claire* and *InStyle*. Camel No. 9 “ladies nights” were held in bars across the country, offering women facials, manicures, makeup, and hair styling. Promotional giveaways at these events included flavored lip balm, cell phone jewelry, tiny purses, and wristbands, all in hot pink, and free cigarettes.

Subsequent advertising linked a thin version of the Camel No. 9 cigarette with vintage fashion. “Now available in Stiletto” and “dressed to the 9s,” read the ads, which pitch the cigarette to “the most fashion forward woman.” RJR continues to link the Camel No. 9 brand with fashion, soliciting up-and-coming fashion designers to design limited edition cigarette packs and accessories.

NOW AVAILABLE IN STILETTO

CAMEL
No. 9
100's

No. 9 100's

CAMEL NO. 9 100'S MENTHOL: 10 mg. "tar," 0.9 mg. nicotine av. per cigarette by FTC method. Actual amounts may vary depending on how you smoke. For "SAFs" info, visit www.rjrtobacco.com.

SURGEON GENERAL'S WARNING: Quitting Smoking Now Greatly Reduces Serious Risks to Your Health.

ADVERTISING

DRESSED to the 9s

The most fashion forward woman takes her cue from timeless vintage looks. Inspire your inner style maven with a visit to a vintage hotspot in your city.

MAKE IT YOURS

Style your vintage look with your own personal touch. **HERE'S HOW:**

- Start with a little black dress from your favorite era.
- Mix in sophisticated accent pieces, like an antique necklace or bold bangles.
- Wear sleek, stylish stilettos to complete the look.

JOIN THE VINTAGE VANGUARD

Update your closet at top vintage shops across the U.S. Find out where at camel9smokes.com.

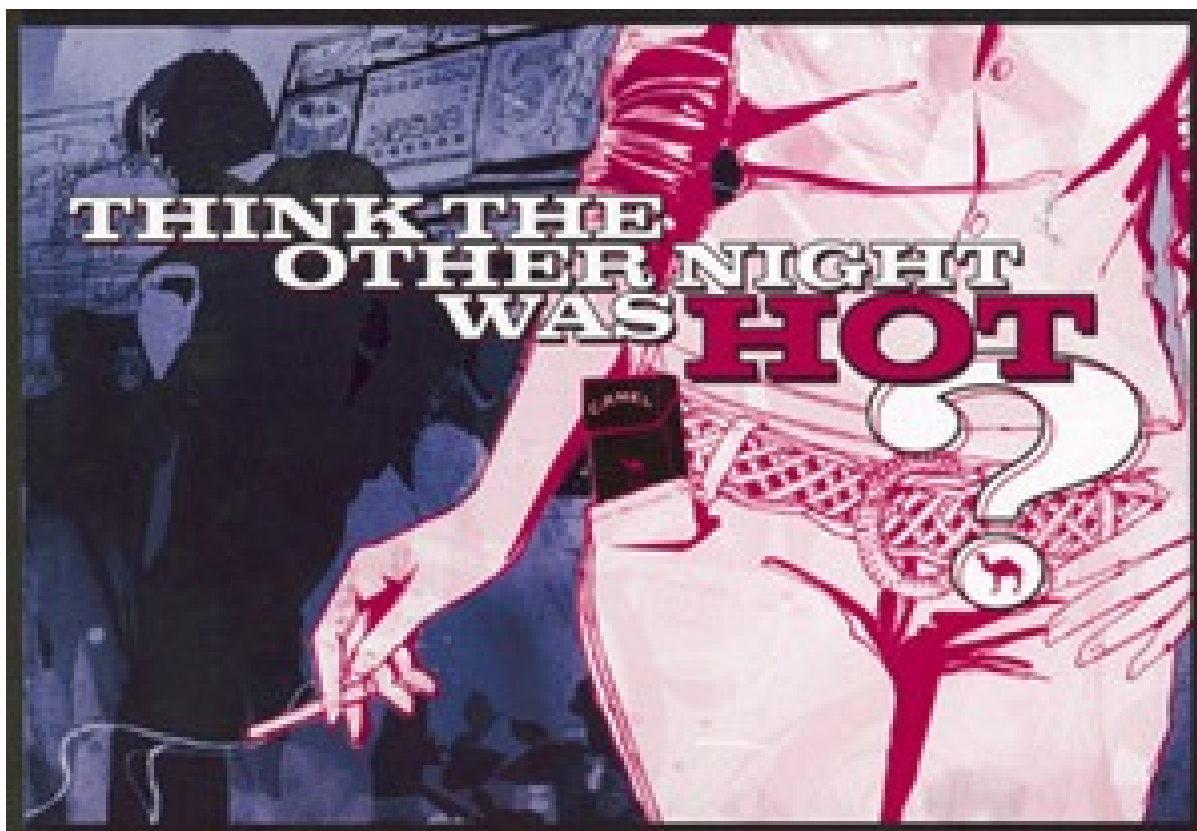
*HEAVES RESTRICTED TO LEGAL AGE TOBACCO CONSUMERS

TIGGY PARSON
Visit the store for more unique finds.
133 COLUMBIA ST.
NEW YORK, NY



Free giveaways from a Camel No. 9 Ladies' Night event.





Camel No. 9 Direct Mail piece received by a woman who attended a Camel No. 9 Ladies' Night.



JUST WAIT UNTIL WE GET WARMED UP

Camel events are always smokin', but meeting you was music to our ears. So until we see each other again, keep an eye on your mailbox. We're sending something special your way—you know, to welcome you to the neighborhood and show you what to expect from the Camel community. Meanwhile, feel free to check out our website, www.camelsmokes.com for info on us and our products, or to find out more about Camel's upcoming events.

Use this PDM:

TO CHECK OUT THE SCENE AT
CAMELSMOKES.COM

*EVENTS, OFFERS AND WEBSITE RESTRICTED TO
LEGAL AGE TOBACCO CONSUMERS

**SURGEON GENERAL'S WARNING: Smoking
By Pregnant Women May Result in Fetal
Injury, Premature Birth, And Low Birth Weight.**

Big Tobacco's Long History of Marketing Cigarettes to Women and Girls

Virginia Slims Purse Packs and Camel No. 9 continue a long history of tobacco industry marketing to women and girls that dates back to the 1920s. These ads have sought to exploit the aspirations and social concerns of women and girls to sell them a deadly and addictive product. From its earliest days, tobacco advertising geared toward women and girls sought to link smoking to slimness and weight control. A 1920s ad for Lucky Strike cigarettes urged women to "Reach for a Lucky instead of a sweet."



In the 1960s, Philip Morris introduced the first brand specifically created for women, Virginia Slims, with the marketing slogan, "You've come a long way, baby." Later ad campaigns for the brand included, "It's a Woman Thing," and "Find Your Voice," aimed to strike a chord with young women seeking to assert their independence and uniqueness.

We make Virginia Slims especially for women because they are biologically superior to men.

That's right, *superior*. Women are more resistant to starvation, fatigue, exposure, shock, and illness than men are. Women have two "X" chromosomes in their sex cells, while men have only one "X" chromosome and a "Y" chromosome... which some experts consider to be the inferior chromosome. They are also less inclined than men to congenital baldness, Albinism of the eyes, improperly developed sweat glands, color blindness of the red-green type, day blindness, defective hair follicles, defective iris, defective tooth enamel, double eyelashes, skin cysts, shortsightedness, night-blindness, nomadism, retinal detachment, and white occipital locks of hair. In view of these and other facts, the makers of Virginia Slims feel it highly inappropriate that women continue to use the fat, stubby cigarettes designed for mere men.



Virginia Slims.
Slimmer than the fat cigarettes men smoke.
With rich Virginia flavor women like.

You've come a long way, baby.

1971 Magazine Ad

1976 Magazine Ad

CAN YOU FIND THE 8 SMOKING WOMEN?

When women had no right to smoke, a woman had to hide out in the forest if she wanted to sneak a cigarette. In this picture, can you find the eight ladies who have no rights?

You've come a long way, baby.

VIRGINIA SLIMS
Slimmer than the fat cigarettes men smoke.



Fashions: Christian Dior

Warning: The Surgeon General Has Determined That Cigarette Smoking Is Dangerous to Your Health.

17 mg "tar," 1.0 mg nicotine av. per cigarette, FTC Report Nov. '75

It's not just a bath,

It's our aromatherapy-meditation-

don't-bother-me-now-or-you'll-regret-it-later zone.

© Philip Morris Inc. 1999
8 mg "tar," 0.7 mg nicotine av. per cigarette by FTC method.

**SURGEON GENERAL'S WARNING: Cigarette
Smoke Contains Carbon Monoxide.**

**VIRGINIA
SLIMS**
It's a woman thing.



Magazine ad for the "It's a Woman Thing" campaign.



Magazine Ad from the "Find Your Voice" campaign.

Starting in the 1970s and continuing today, to alleviate concerns about the health risks of smoking, the tobacco industry has targeted women with advertising for so-called “light” and “low tar” cigarettes. In 2001, a National Cancer Institute Monograph confirmed that while changes in cigarette design have reduced the amount of tar and nicotine measured by smoking machines, these machine measurements do not accurately show how much tar and nicotine is actually received by the smoker. Despite knowing this, the cigarette companies marketed these cigarettes as safer products.* This public health fraud has affected women disproportionately. Today, women smokers are more likely than their male counterparts to smoke light and ultra-light cigarettes (63 percent vs. 46 percent), and women are more likely than men to switch to these cigarettes.**



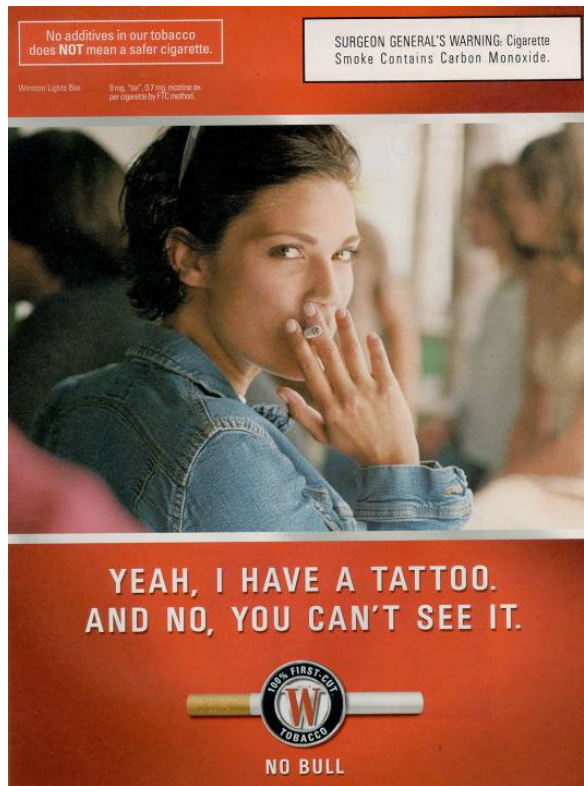
1969 Magazine Ad for Pall Mall cigarettes.

1976 Magazine Ad for True cigarettes.

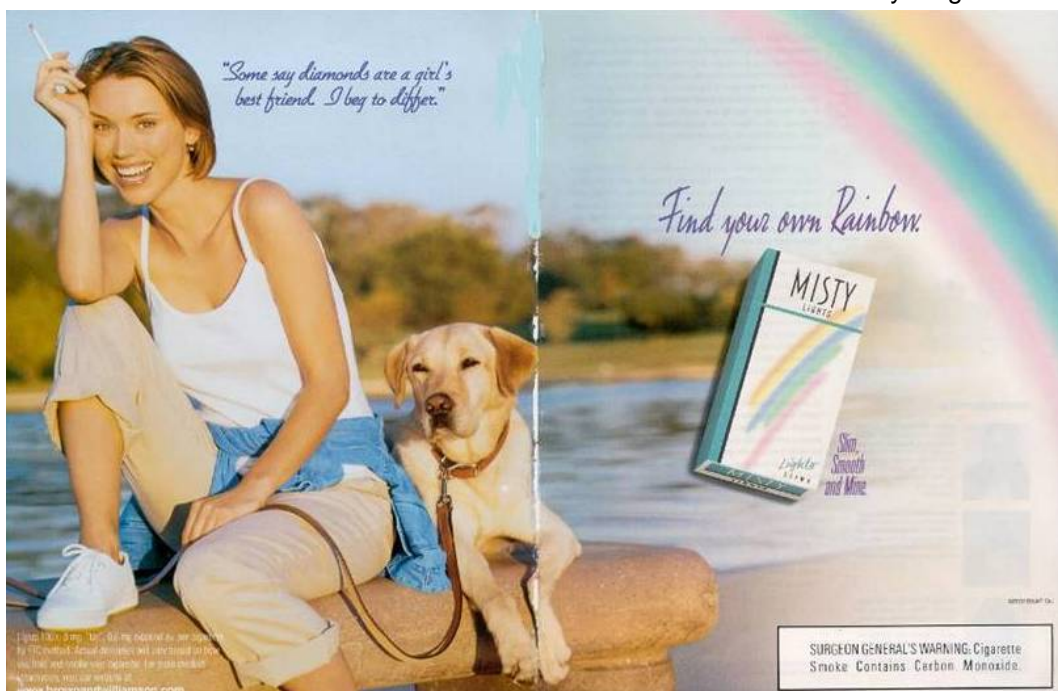
* National Institutes of Health, *Risks Associated with Smoking Cigarettes with Low Machine-Yields of Tar and Nicotine*; Report of the NCI Expert Committee, National Cancer Institute, Smoking and Tobacco Control Monograph 13, October 2001.

** Pillitteri, J.L., et al., Smokers beliefs about light and ultralight cigarettes," 2001; *Tobacco Control* 10(Suppl1):i17-i23 (and underlying data supplied by the authors).

Other companies also take aim at the female market, with both women-specific brands and marketing for existing brands targeted to this market. These marketing campaigns equate smoking with independence, sophistication, and beauty, and prey on the social pressures that women and girls face.



Winston Magazine Ad



Misty Magazine Ad

APPENDIX 1: Tobacco Industry's History of Targeting Women and Girls

The tobacco companies have long understood the importance of women and girls in the overall market for cigarettes and as a source of new customers. They have conducted extensive market research on the attitudes of women and girls to better understand how to target their products and their advertising. By focusing their research on how females view themselves, their aspirations and the social pressures they face, the cigarette companies have developed some of the most aggressive and sophisticated marketing campaigns in history for reaching and influencing women and girls. The consequences of these campaigns are staggering. Smoking among girls and young women increased dramatically in the 1990s, although rates have declined recently. Today, almost one out of every five high school girls is a current smoker (18.7 percent)¹ and 17.4 percent of women still smoke.²

The Early Years

Though the slogans have changed over time, the tobacco industry's targeted marketing of women can be traced back to the 1920s. While women were depicted in cigarette ads as non-smoking admirers of smoking men at first, by 1927 advertisements with women smoking began to appear in women's magazines.³ One of the most famous early cigarette advertising campaigns directed at women was Lucky Strike's "Reach for A Lucky Instead of A Sweet."

Despite the advent of targeted advertising, smoking among women did not really gain social acceptability until World War II. During that era, cigarette companies began to target women more directly, using the fashion, beauty, and sophistication themes that still continue today. The companies also used images of women in the military and the work place. For example, Camel's ad slogan during World War II was "First in the Service" and highlighted successful women in the military. While these new advertising campaigns focused on women's growing role in the American workplace, they still portrayed smoking as a stylish and feminine act. This theme of smoking as a way of achieving independence, while at the same time remaining stylish and attractive (especially to men), became less popular after the war ended, but would later reappear.

The Advent of Women-Specific Brands in the 1960s

Cigarette advertising continued to target women throughout the 1950s and 1960s, but the companies did not make a full-scale effort to expand the number of their female customers until the late 1960s. Realizing the impact that the women's liberation movement was having on the role of women in America, the tobacco companies began to create specific brands of cigarettes for women.

In 1968, Philip Morris introduced Virginia Slims, the first women-specific brand ever to hit the market. Cigarette ads for this brand depicted women as independent and successful with catchy tag lines such as the infamous "You've Come A Long Way Baby." Like early ads targeted at women, these marketing efforts continued to portray female smoking as a way to express one's independence, as well as a way to be particularly stylish and sexy. Six years after the introduction of Virginia Slims and other brands aimed at the female market, the smoking initiation rate of 12-year-old girls had increased by 110 percent. Increases among teenage girls of other ages were also substantial.⁴

Philip Morris continued to market Virginia Slims using images of empowered women paired with "You've Come A Long Way Baby" throughout the 1970s and 1980s. The copy on these ads

usually focused on how women's lives had changed since the 1920s and 1930s, focusing on the new freedoms allowed to women. In the early 1990s, Philip Morris revamped the image of Virginia Slims with the "It's a Woman Thing" campaign. While these ad campaigns continued to suggest empowerment and attractiveness from smoking, the ad copy focused on how women are different than men. From 1999 to 2000, Virginia Slims launched the lavish "Find Your Voice" ad campaign, which featured strikingly beautiful women from around the world and suggested that independence and allure could be found by smoking. Philip Morris' chief executive in June 2000 agreed to remove the "Find Your Voice" slogan after being questioned in the landmark Florida smokers trial about whether it might be offensive to smokers with throat cancer.⁵

With the success of these marketing campaigns, the tobacco companies fully recognized the importance of women and girls as a key to their future success. For example, an internal RJ Reynolds document stated that "Younger adult female smokers will continue to gain importance among [young adult] smokers due to their stronger incidence trend versus [young adult] male smokers."⁶

In the 1990s, the tobacco industry started tying their print advertising campaigns to a variety of promotional campaigns. These campaigns reinforced the image of smoking as stylish and sexy by offering free merchandise like clothing and CDs. Studies have shown that there is a direct relationship between the awareness of and involvement with promotional items and smoking initiation by youth.⁷

Targeting Women with "Low Tar" and "Light" Cigarettes

Realizing that many women were concerned about the long-term health risks of smoking, in the 1970s the tobacco companies began promoting "low tar" or "light" cigarettes to women as a "softer" or even "safer" option. As a 1978 Philip Morris document stated, "Today women make up the majority of low tar smokers. Almost half of all women have switched to low tar."⁸ An example of this marketing strategy can be seen in Lorillard's True ad campaign from the 1970s. This campaign, which showed golfers and tennis players as well as young women, read, "All the fuss about smoking got me thinking I'd either quit or smoke True. I smoke True. The low tar low nicotine cigarette. Think about it."

Almost a decade later, another Philip Morris document offered a more detailed analysis, stating that "because of women's nurturing role in society, they are naturally more involved with low tar cigarettes than men (70% of low tar smokers are female). They do not want to stop smoking, yet they are guilt-ridden with concerns for their families if smoking should badly damage their own health. Thus they compromise by smoking low tar cigarettes....This new product can fit this positioning exactly."⁹

This public health fraud that tobacco companies have perpetrated on American smokers through the marketing of "light" and "low tar" cigarettes has affected women disproportionately. Rather than reducing harm to women, these products have discouraged quitting, with a negative impact on women's health. Women (63 percent) are much more likely than men (46 percent) to report smoking light and ultra-light cigarettes.¹⁰ Women smokers of light and ultralight cigarettes are also more likely (48 percent vs. 39 percent) than men who smoke those brands to say they switched to a low tar brand "just to reduce your health risk." Smokers who switch brands are twice as likely as non-switchers to believe their brand is less hazardous than others. This may explain why some studies have shown that respondents who switched to low tar cigarettes are less likely to have quit than those who have never switched.¹¹ A 2006 study published by the *American Journal of Public Health* found that smokers who switched to light

cigarettes to reduce health risks were about 50 percent less likely to quit smoking than those who smoked non-light cigarettes.¹²

In August 2006, U.S. District Court Judge Gladys Kessler declared that tobacco companies could no longer use descriptive labels such as “low tar” or “light” on their products or marketing materials because they are false and misleading, by implying a more healthful tobacco product.¹³ While the ruling is on appeal, cigarette companies continue to use these marketing practices despite the court’s finding that the health claims in cigarette ads are misleading and entirely false.

Cigarette Company Targeting of Women and Girls Today

The cigarette companies continue to target women using the same themes in their advertising. The image of smoking being tied to independence, stylishness, weight control, sophistication and power continues today in the advertisements running in many popular women’s magazines. There are now two main types of cigarettes marketed to women, female brands and dual sex brands. Female brands, like Virginia Slims, Capri, Misty, and the new Camel No. 9 brand by RJ Reynolds, are marketed directly to women using feminine images. Dual sex brands, like Marlboro, are marketed to women with independent and fun-loving imagery.

Philip Morris has been especially successful in its efforts to attract women to its “dual sex” brands. For years now, more women, of all age groups, have smoked Marlboro than any other brand.¹⁴ As an RJ Reynolds document recognized, “It is clear that the primary competitor for a new [young adult] female smoker is Marlboro.”¹⁵ An undated RJ Reynolds analysis of younger adult female smokers recognized the importance of this group to industry growth and also the potential in ‘dual sex’ brands like Marlboro and Camel: “Most younger adult females smoke a dual sex brand – not too masculine (e.g. Camel), but not strictly female (Virginia Slims). While specially targeted female brands will undoubtedly play a role in the future market, lifestyle trends suggest that commonalities between younger adult males/females are increasing over time, so that dual sex wants are likely to remain prevalent.”¹⁶

In January 2007, RJ Reynolds introduced Camel No. 9 cigarettes, aimed directly at women because women smokers “didn’t feel that Camel had a brand for them.” Spending between \$25 to \$50 million on the marketing and launch of this new brand, RJ Reynolds is pulling out all the stops, with “ladies’ nights” and other bar events that create excitement and buzz around the sleek new product. Despite Judge Kessler’s ruling banning use of the term “light,” full-page advertisements running in women’s magazines such as *Glamour*, *Cosmopolitan*, and *Vogue* contain the statement, “light and luscious.”

Female-specific brands continue to play an important role in the cigarette companies’ marketing strategies. Recent female-brand marketing campaigns continue to portray the image that women are empowered by smoking and Virginia Slims continues to be the most popular female-specific brand among women.¹⁷

From the Camel ads of the forties, with images of female pilots and copy lines like “They’ve Got What it Takes!,” to the Virginia Slims campaign telling women to “Find Your Voice,” and now the Camel No. 9 “light and luscious” campaign to “wow” women, the tobacco companies have continued to target women and girls with their deadly and addictive product.

Additional Tobacco Industry Quotes About Targeting Women and Girls

RJ Reynolds, 2007. "Camel has traditionally been looked at as a male brand. So we saw a great business opportunity there to be able to communicate with adult, female smokers of competitive brands that this is a product they might enjoy."¹⁸

RJ Reynolds, 2007. "If a Camel light smoker sees No. 9 and she thinks it is even better for her than what's she smoking, that's a good thing for us because it's making a current franchise smoker feel even better about the brand."¹⁹

Brown and Williamson, 1995. "Role of Print: Reach - Misty target is a heavy magazine reader ... Image - Vast array of editorial formats (i.e.: service, beauty, fashion, entertainment) provide Misty advertising with numerous 'personalities' increasing relevancy and interest to broad scope of Misty target ... Beauty / Fashion: Allure, Bazaar, Elle, Glamour, Mademoiselle, Mirabella, Vogue. Strong composition of younger portion of Misty target, editorial focus appeals to the sociability of the Misty smoker, ideal format to showcase creative."²⁰

Brown and Williamson, 1995. "The recent BrandScape research identified key characteristics of Misty smokers. Summed up into two words, the Misty smoker is both "Savvy" and "Sassy"; Savvy - rational, practical, feminine, price conscious. Sassy - active, youthful attitude, confident. This type of information has allowed us to fine-tune Misty's magazine selection, going beyond traditional quantitative data, age, income to include more qualitative insight into who the Misty focus audience is."²¹

Philip Morris, 1993. "As it is often the case, being stylish implies to hold the weight down and to remain physically fit. Not surprisingly, the people to look up to as models are sexy and self assure people and consists at least of socializing with sophisticated friends."²²

Philip Morris, 1993. "As a matter of fact, advertisements in magazines is the most efficient way to talk to these female smokers. We also know what values to outline based on what we just saw ... Actually, one of their main terminal values is to look attractive. In other words, a woman cannot be attractive if she is fat. Aerobics (gym) is therefore one of their major activities, when they do not try to meet the opposite sex in parties, bars or discotheques. This is their conception of having an exciting life for the time being. The feed back effect of such an exciting life and such as independence is that they claim it would be a long time before they settle down with someone. This boiling mixture of dreams, immediate experience of independence and intensive sexual encounters is satisfied in some ways by the brands they smoke."²³

American Tobacco Company (later purchased by Brown and Williamson) 1993. "There is significant opportunity to segment the female market on the basis of current values, age, lifestyles and preferred length and circumference of products. This assignment should consider a more contemporary and relevant lifestyle approach targeted toward young adult female smokers."²⁴

Philip Morris, 1992. "In an effort to gain relevancy among young adult female smokers, Virginia Slims is exploring a new advertising direction. While this new direction has not been specifically defined as of yet, its objective is to make Virginia Slims relevant to young adult female smokers through a proprietary attitude, in the context of female style ... To women smokers, Virginia Slims is the brand that best expresses their style and attitude about being a women today. The Virginia Slims Fashion program should dimensionalize the style and attitude of today's young women smoker ... Event Objectives: generate trial and retrial among target ... provide YAFS with an opportunity to support a popular, relevant charitable cause."²⁵

Philip Morris, 1991. "VSLM Creative Strategy: To convince fashionable, modern, independent and self-confident women aged 20-34 that by smoking VSLM, they are making better/more complete expression of their independence."²⁶

Philip Morris, 1985. "However, this report does provide us with some useful information for Virginia Slims in a sense that a slim image cigarette has to be more of an appeal for the female smokers who are concerned about their weight. Although the survey indicated that only 52% of all female smokers 18-20 years old are concerned about their weight, I believe that this concern will be much higher amongst the over 20 year old female smokers, which is presumably the correct target for Virginia Slims."²⁷

R.J. Reynolds, 1984. "Designed to reinforce its appeal to fashion conscious, younger adult women ... These product and packaging modifications will allow the consumer to make a bolder statement about her lifestyle and still enjoy the low tar benefits of MORE lights 100's."²⁸

R.J. Reynolds, 1983. "The 'premise' is described as: "A brand that enhances/complements the young adult female smoker's image by standing for contemporary femininity."²⁹

R.J. Reynolds, 1983. "There is greater agreement as to how and why women began smoking in the first place. Beyond the easily recognized pressure of peers, women come to indicate passage into adulthood and as part of this transitional period, to exhibit anti-authoritarian behavior."³⁰

American Tobacco Company (later purchased by Brown and Williamson) 1983. "Only recently has Virginia Slims attempted to update their approach reflecting fun and lifestyle. Given the increasing number of women in the work force, their demanding life-styles and changing values, an opportunity exists to position a female brand in step with today's successful women's lifestyle and values."³¹

R.J. Reynolds, 1982. "RJR has a corporate gap in the younger adult female smoker market. While this in itself does not represent a market opportunity, penetration of this smoker group does pose a strategic corporate opportunity ... younger adult smokers are strategically important to RJR's long-term growth ... Specifically, these young adult females agree that smoking is: attractive to the opposite sex, sophisticated/stylish, less intelligent, more aggressive, more mature, less feminine, smoke because friends do, feel more comfortable around others, feel that I'm rebelling."³²

¹ U.S. Centers for Disease Control and Prevention (CDC), "Youth Risk Behavior Surveillance, United States, 2007," *Morbidity and Mortality Weekly Report (MMWR)*, June 6, 2008 57 SS-4 <http://www.cdc.gov/mmwr/pdf/ss/ss5704.pdf>.

² CDC, "Cigarette Smoking Among Adults - United States, 2007," *MMWR* 57(45), November 14, 2008. <http://www.cdc.gov/mmwr/PDF/wk/mm5745.pdf>

³ Ernster, V, "Mixed Messages for Women," *New York State Journal of Medicine*, July 1985.

⁴ Pierce, JP, Lee, L, & Gilpin EA, "Smoking initiation by adolescent girls, 1944 through 1988: An association with targeted advertising," *Journal of the American Medical Association (JAMA)* 271:8, 1994.

⁵ Fairclough, G, "Philip Morris Removes Slogan From Ads In Second Attempt Responding To Critics," *Wall Street Journal*, June 12, 2000.

⁶ RJ Reynolds, Younger Adult Female Smokers - New Brand Opportunity, July 23, 1985, RJR 504103122 -3124.

⁷ Pierce, J, et al., "Tobacco Industry Promotion of Cigarettes and Adolescent Smoking," *JAMA* 279(7): 511-505, February 1998. [with erratum in *JAMA* 280(5):422, August 1998]; Altman, DG, et al., "Tobacco Promotion and Susceptibility to Tobacco Use Among Adolescents aged 12 through 17," *American Journal of Public Health* 86(11):1590-1593, November 1996.

⁸ Philip Morris, Virginia Slims introduces the low tar cigarette made just for women, 1978 (PM 1005064182).

⁹ Philip Morris, Project Magic, June 1985. (PM 2501008130).

¹⁰ Pillitteri, JL, et al., "Smokers beliefs about light and ultralight cigarettes," *Tobacco Control* 10(Suppl):i17-i23, 2001.

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- ¹¹ Giovino, G, et al., "Attitudes, Knowledge, and Beliefs About Low-yield Cigarettes Among Adolescents and Adults," in *The FTC Cigarette Test Method for Determining Tar, Nicotine, and Carbon Monoxide Yields of U.S. Cigarettes; Report of the NCI Expert Committee*. National Institutes of Health. National Cancer Institute. Smoking and Tobacco Control Monograph 7.
- ¹² Tindle, HA, et al., "Cessation Among Smokers of "Light Cigarettes": Results from the 2000 National Health Interview Survey," *American Journal of Public Health*, August 2006 Vol. 96 No 8.
- ¹³ *U.S. V. Philip Morris USA, Inc., et al.*, No. 99-CV-02496GK (U.S. Dist. Ct., D.C.), Final Opinion, August 17, 2006, <http://www.tobaccofreekids.org/reports/doj/FinalOpinion.pdf>.
- ¹⁴ Substance Abuse and Mental Health Services Administration (SAMHSA), Office of Applied Studies, *National Survey on Drug Use and Health*, 2005.
- ¹⁵ RJ Reynolds, Younger Adult Female Smokers - New Brand Opportunity, July, 23 1985 (RJR 504103122 -3124).
- ¹⁶ RJ Reynolds, Younger Adult Female Smokers, undated (RJR 503049112 -9115).
- ¹⁷ SAMHSA, Office of Applied Studies, *National Survey on Drug Use and Health*, 2005.
- ¹⁸ Hochberg, A, "Critics fume over marketing of 'Camel No. 9,'" *NPR*, March 16, 2007, <http://www.npr.org/templates/story/story.php?storyId=8909745>.
- ¹⁹ Craver, R, "New Camel is aimed at women smokers," *Winston-Salem Journal*, February 1, 2007.
- ²⁰ Brown and Williamson, B&W Misty Media Plan Recommendation, March 3, 1995 (B&W 432010732).
- ²¹ Brown and Williamson, B&W Misty Media Plan Recommendation, March 3, 1995 (B&W 432010732).
- ²² Philip Morris, Research Report YAMS/YAFS, 1993 (PM 2040885023)
- ²³ Philip Morris, Research Report on YAMS/YAFS, 1993 (PM 2040885023)
- ²⁴ American Tobacco Company, November 17, 1993 (B&W/ATC ATX040017950-ATX040017951).
- ²⁵ Philip Morris, Request for Promotional Services, March 31, 1992 (PM 2043524894)
- ²⁶ Philip Morris, VSLM Print Advertising Test, April 5, 1991 (PM 2504059015/9081).
- ²⁷ Philip Morris, Virginia Slims Memo, August 8, 1985 (PM 2026305099).
- ²⁸ RJ Reynolds, June 14, 1984 (RJR 500627236-7337).
- ²⁹ RJ Reynolds, Project AA Analysis of Female Smokers, July 19, 1983 (RJR 501759283-9314).
- ³⁰ RJ Reynolds, McCann-Erickson market research dept, Two Focussed Group Sessions to Explore Attitudes Toward Smoking and Cigarette Brands/Advertising, November 1983 (RJR 501759283-9314).
- ³¹ American Tobacco Company, November 17, 1983 (B&W/ATC ATX040017950-ATX040017951).
- ³² RJ Reynolds, Analysis of 18-24 year old female market, May 7, 1982 (RJR 502765848).

APPENDIX 2: Women's Health and Smoking

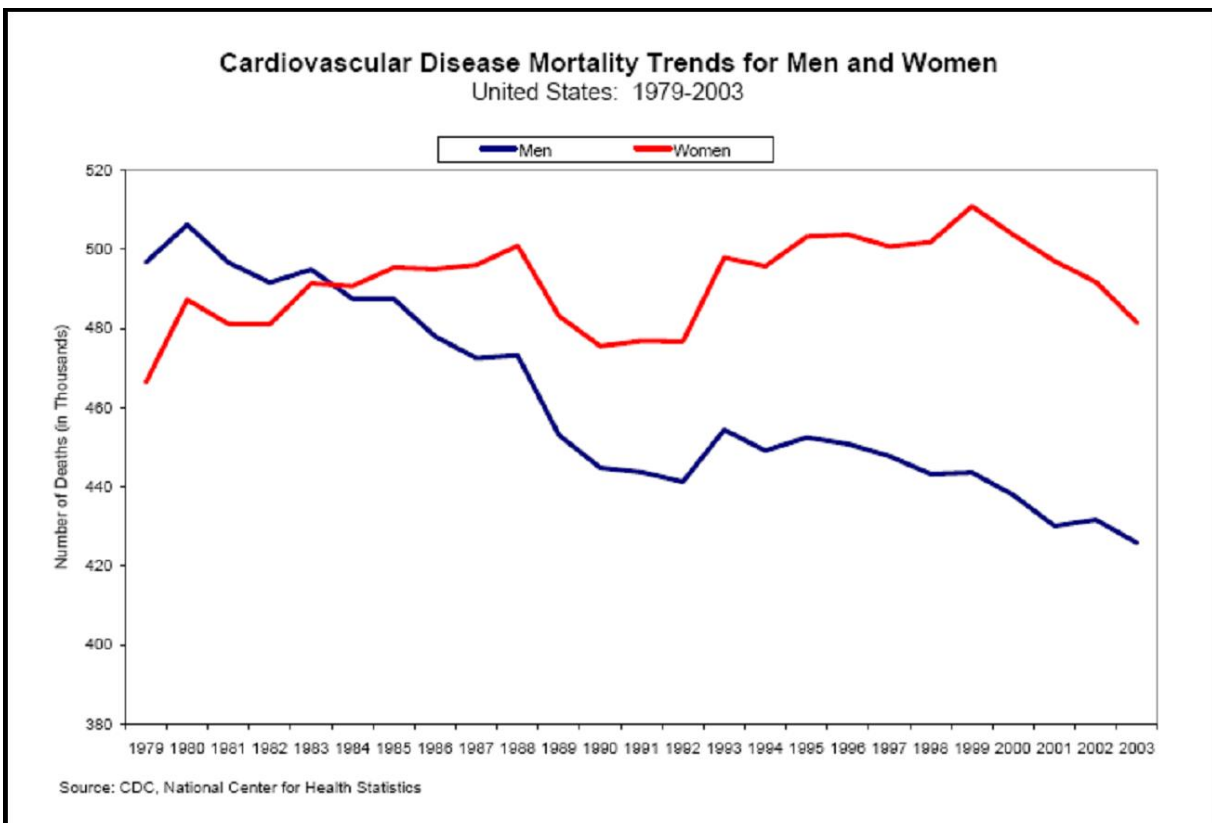
In the United States, more than 20 million adult women and more than 1.5 million girls currently smoke cigarettes, putting them at risk for heart attacks, strokes, lung cancer, emphysema and other life-threatening illnesses.¹ As a result, more than 170,000 women die of smoking-caused disease each year, with additional deaths caused by the use of other tobacco products such as smokeless tobacco. While smoking harms and kills both males and females, women smokers face even greater health risks from smoking than men. Today, almost one out of every five high school girls currently smoke (18.7 percent)² and 17.4 percent of women still smoke.³

Mortality:

- Each year more than 170,000 U.S. women die from smoking-caused diseases.⁴
- Approximately four million women in the United States have died prematurely from smoking related diseases since the release of the Surgeon General's initial report on women and tobacco in 1980.⁵
- About 2.1 million years of potential life of U.S women are lost prematurely each year due to smoking related diseases.⁶

Cardiovascular Disease:

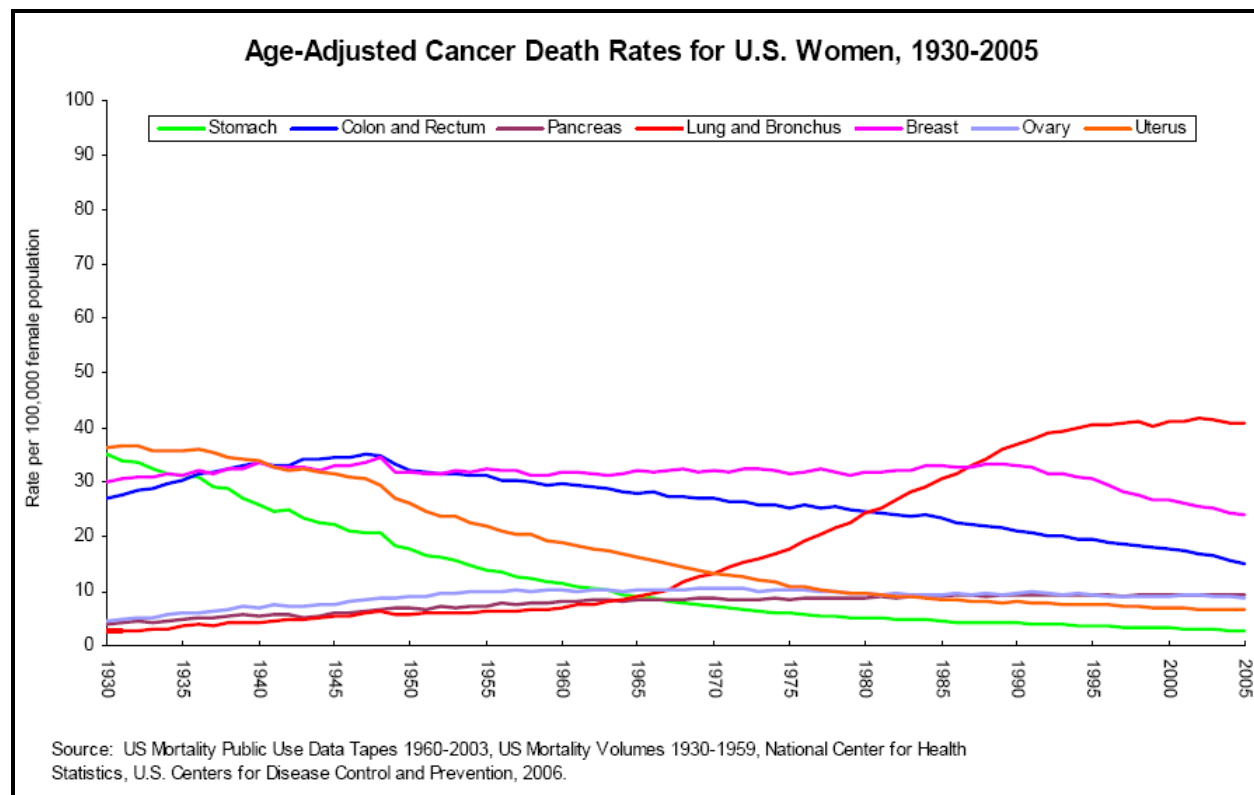
- Cardiovascular diseases are the number one killers of both men and women. Each year more than 450,000 women die of these diseases.⁷ Cardiovascular diseases caused by smoking include coronary heart disease, atherosclerosis and stroke, among others.⁸



- Women who smoke are twice as likely to suffer a heart attack as non-smoking women. The risk of developing coronary heart disease increases with the number of cigarettes smoked per day, the total number of smoking years, and earlier age of initiation.⁹
- Women smokers have a higher relative risk of developing cardiovascular disease than men. The reasons for the difference are not yet known, but could be due to tobacco smoke having an adverse effect on estrogen.¹⁰
- Women who smoke and use oral contraceptives are up to 40 times more likely to have a heart attack than women who neither smoke nor use birth control.¹¹
- While women smoke less than men, many nonsmoking women still suffer increased risk of heart disease from exposure to secondhand smoke because their husbands or partners smoke.¹²

Lung Cancer:

- Lung cancer death rates among women increased by more than 600 percent between 1950 and 2005. In 1987, lung cancer surpassed breast cancer to become the leading cause of cancer death among women.¹³
- More than 66,000 U.S. women die of lung cancer each year.¹⁴
- While lung cancer death rates are decreasing for men – and the overall cancer death rate is decreasing for both men and women – lung cancer death rates have yet to decline among all women, according to a December 2008 report by the nation's leading cancer organizations.¹⁵
- Smoking causes about 90 percent of all lung cancer deaths among women.¹⁶



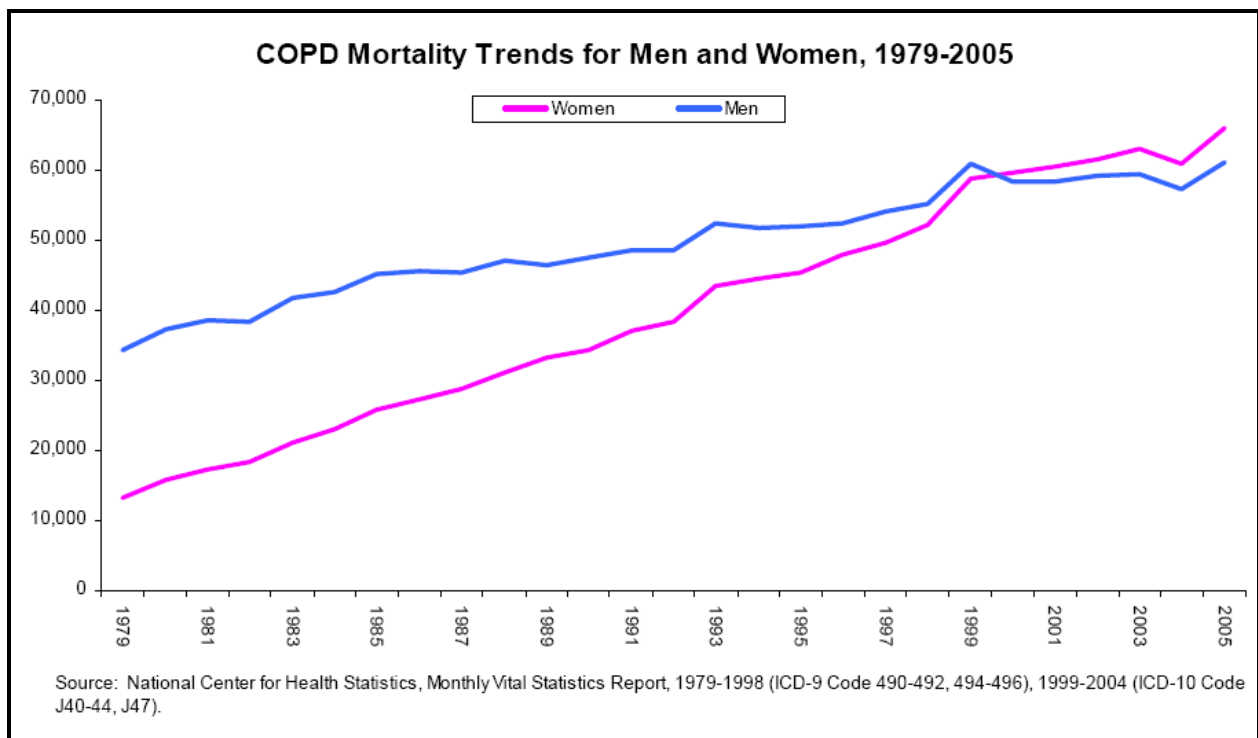
- The risk of developing lung cancer is 13 times higher for current women smokers compared to lifelong non-smokers.¹⁷
- A survey from the American Legacy Foundation found that 80 percent of American women mistakenly believe that breast cancer is the primary cause of cancer death among women.¹⁸
- While women smoke less than men, many nonsmoking women still suffer increased risk of lung cancer because their husbands or partners smoke.¹⁹

Other Cancers:

- Smoking accounts for at least 30 percent of all cancer deaths.²⁰
- Smoking is a known cause of cancer of the lung, larynx, oral cavity, bladder, pancreas, uterus, cervix, kidney, stomach and esophagus.²¹
- Women smokers have an increased risk of cervical cancer.²²
- Women smokers may have increased risks for liver and colorectal cancer.²³

Chronic Obstructive Pulmonary Disease (COPD)

- COPD is the fourth leading cause of death in America, claiming the lives of 127,049 Americans in 2005, and the number of women who have died from COPD has exceeded men for five consecutive years. In 2005, almost 66,000 females died compared to 61,000 males.²⁴
- Smoking is the primary risk factor for COPD. The risk of COPD is directly related to the amount and duration of cigarette use.²⁵



- Approximately 80 to 90 percent of COPD deaths are caused by smoking. Female smokers are nearly 13 times as likely to die from COPD as women who have never smoked.²⁶
- In 2007, 10.2 million U.S. adults (aged 18 and over) were estimated to have COPD. However, close to 24 million U.S. adults have evidence of impaired lung function, indicating an under diagnosis of COPD.²⁷
- Females are over twice as likely to be diagnosed with chronic bronchitis as males. In 2007, 2.6 million males had a diagnosis of chronic bronchitis compared to 5.0 million females.²⁸
- Female smokers increase their risk of death from chronic bronchitis and emphysema by 13 times.²⁹

Smoking and Pregnancy:

- Smoking reduces a woman's fertility. Women smokers tend to take longer to conceive than women nonsmokers, and women smokers are at a higher risk of not being able to get pregnant at all. Furthermore, more cigarettes women smoked per day are associated with decreased fertility rates.³⁰
- Research studies have found that smoking and exposure to secondhand smoke among pregnant women is a major cause of spontaneous abortions, stillbirths, and sudden infant death syndrome (SIDS) after birth.³¹ Nevertheless, 10.7 percent of pregnant women smoke.³²
- Mothers who smoke have double the rate of premature delivery compared to nonsmoking mothers.³³
- There is a clear relationship between the number of cigarettes smoked during pregnancy and low birthweight babies.³⁴
- Smoking and exposure to secondhand smoke during pregnancy directly increase the risk of health and behavioral problems including: abnormal blood pressure in infants and children, cleft palates and lips, childhood leukemia, infantile colic, childhood wheezing, respiratory disorders in childhood, eye problems during childhood, mental retardation, attention deficit disorder, behavioral problems and other learning and developmental problems.³⁵

Other Health Risks for Women who Smoke:

- Many women who smoke choose brands which are 'low tar' or lower nicotine brands. There is no evidence that a smoker who chooses low tar and nicotine brands reduces the risk of myocardial infarction, chronic obstructive pulmonary disease or lung cancer.^{36 37} In fact, a number of studies have linked low tar cigarettes and smokers' compensation (especially their drawing smoke from low tar cigarettes more deeply into lungs) to increases among smokers of adenocarcinoma, a previously rare type of lung cancer that afflicts the tiniest airways of the lung.³⁸
- Women who smoke are more likely to have menstrual problems including painful periods, irregular bleeding, missed periods, and early onset of menopause.³⁹
- Cigarette smoking is a risk factor for osteoporosis, and could become a more powerful factor among today's youth who have begun smoking at earlier ages. Postmenopausal women who are current smokers have lower bone density versus women who never smoked.⁴⁰
- Women smokers have a greater risk for hip fracture than their non-smoking counterparts.⁴¹

The Benefits of Quitting:

- Women who stop smoking reduce their risk of dying prematurely. While the benefits of quitting are greater at a younger age, quitting smoking has health benefits at any age.⁴²
- 10 to 15 years after quitting, a female ex-smoker's risk of stroke is almost equal to that of a woman who never smoked.⁴³

¹ U.S. Centers for Disease Control and Prevention (CDC), "Cigarette Smoking Among Adults – United States, 2007," *Morbidity and Mortality Weekly Report (MMWR)* 57(45), November 14, 2008, <http://www.cdc.gov/mmwr/PDF/wk/mm5745.pdf>; CDC, "Youth Risk Behavior Surveillance, United States, 2007," *MMWR* 57(SS-4), June 6, 2008, <http://www.cdc.gov/mmwr/pdf/ss/ss5704.pdf>.

² CDC, "Youth Risk Behavior Surveillance, United States, 2007," *MMWR* 57(SS-4), June 6, 2008, <http://www.cdc.gov/mmwr/pdf/ss/ss5704.pdf>.

³ CDC, "Cigarette Smoking Among Adults – United States, 2007," *MMWR* 57(45), November 14, 2008, <http://www.cdc.gov/mmwr/PDF/wk/mm5745.pdf>.

⁴ CDC, "Annual Smoking-Attributable Mortality, Years of Potential Life Lost, and Productivity Losses – United States, 2000-2004," *MMWR* 57(45), November 14, 2008, <http://www.cdc.gov/mmwr/PDF/wk/mm5745.pdf>.

⁵ U.S. Department of Health and Human Services (HHS), *Women and Smoking: A Report of the Surgeon General*, Washington, DC: HHS, Public Health Service, Office of the Surgeon General, 2001; CDC, "Annual Smoking-Attributable Mortality, Years of Potential Life Lost, and Economic Costs—United States 1995-2001," *MMWR* 54(25):625-628, July 1, 2005, <http://www.cdc.gov/mmwr/preview/mmwrhtml/mm5425a1.htm>.

⁶ CDC, "Annual Smoking-Attributable Mortality, Years of Potential Life Lost, and Productivity Losses – United States, 2000-2004," *MMWR* 57(45), November 14, 2008, <http://www.cdc.gov/mmwr/PDF/wk/mm5745.pdf>.

⁷ CDC, "Annual Smoking-Attributable Mortality, Years of Potential Life Lost, and Productivity Losses – United States, 2000-2004," *MMWR* 57(45), November 14, 2008, <http://www.cdc.gov/mmwr/PDF/wk/mm5745.pdf>. See also, American Heart Association. Heart Disease and Stroke Statistics- 2007 Update, http://www.heart.org/downloadable/heart/1166712318459HS_StatsInsideText.pdf.

⁸ HHS, *The health consequences of smoking: A report of the Surgeon General*, Atlanta, GA: HHS, CDC, National Center for Chronic Disease Prevention and Health Promotion, Office on Smoking and Health, 2004, http://www.cdc.gov/tobacco/data_statistics/sgr/sgr_2004/index.htm.

⁹ HHS, *The health consequences of smoking: A report of the Surgeon General*, Atlanta, GA: HHS, CDC, National Center for Chronic Disease Prevention and Health Promotion, Office on Smoking and Health, 2004; See also, HHS, *Women and Smoking: A Report of the Surgeon General*, Washington, DC: HHS, Public Health Service, Office of the Surgeon General, 2001, http://www.cdc.gov/tobacco/data_statistics/sgr/sgr_2001/index.htm.

¹⁰ Prescott, E, et al., "Smoking and risk of myocardial infarction in women and men: Longitudinal population study," *British Medical Journal (BMJ)* 316:1043-7, 1998.

¹¹ HHS, *Women and Smoking: A Report of the Surgeon General*, Washington, DC: HHS, Public Health Service, Office of the Surgeon General, 2001, http://www.cdc.gov/tobacco/data_statistics/sgr/sgr_2001/index.htm.

¹² HHS, *The health consequences of involuntary exposure to tobacco smoke: A report of the Surgeon General*, Atlanta, GA: HHS, CDC, Coordinating Center for Health Promotion, National Center for Chronic Disease Prevention and Health Promotion, Office on Smoking and Health, 2006, <http://www.surgeongeneral.gov/library/secondhandsmoke/report/>.

¹³ US Mortality Public Use Data Tapes 1960-2003, US Mortality Volumes 1930-1959, National Center for Health Statistics, CDC, 2006. See also, American Cancer Society, Cancer Facts and Figures, 2008, <http://www.cancer.org/downloads/STT/2008CAFFfinalsecured.pdf>.

¹⁴ CDC, "Annual Smoking-Attributable Mortality, Years of Potential Life Lost, and Productivity Losses – United States, 2000-2004," *MMWR* 57(45), November 14, 2008, <http://www.cdc.gov/mmwr/PDF/wk/mm5745.pdf>.

¹⁵ Jemal, A, et al., "Annual Report to the Nation on the Status of Cancer, 1975 – 2005, Featuring Trends in Lung Cancer, Tobacco Use, and Tobacco Control," *Journal of the National Cancer Institute* 100(23):1672-1694, December 3, 2008, <http://jnci.oxfordjournals.org/cgi/reprint/100/23/1672>.

¹⁶ HHS, *Women and Smoking: A Report of the Surgeon General*, Washington, DC: HHS, Public Health Service, Office of the Surgeon General, 2001, http://www.cdc.gov/tobacco/data_statistics/sgr/sgr_2001/index.htm.

¹⁷ HHS, *The health consequences of smoking: A report of the Surgeon General*, Atlanta, GA: HHS, CDC, National Center for Chronic Disease Prevention and Health Promotion, Office on Smoking and Health, 2004, http://www.cdc.gov/tobacco/data_statistics/sgr/sgr_2004/index.htm.

¹⁸ American Legacy Foundation, "Women and Lung Cancer Survey," January 2001.

¹⁹ HHS, *The health consequences of involuntary exposure to tobacco smoke: A report of the Surgeon General*, Atlanta, GA: HHS, CDC, Coordinating Center for Health Promotion, National Center for Chronic Disease Prevention and Health Promotion, Office on Smoking and Health, 2006, <http://www.surgeongeneral.gov/library/secondhandsmoke/report/>.

²⁰ Doll, R & Peto, R, *The Causes of Cancer*, New York, NY: Oxford Press, 1981. See also, ACS, Cancer Facts and Figures 2008; HHS, *Reducing the Health Consequences of Smoking: 25 Years of Progress. A Report of the Surgeon General*, Atlanta: US Department of Health and Human Services, Public Health Service, Centers for Disease Control, Office on Smoking and Health DHHS Publication No 89-8911, 1989.

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- ²² HHS, *Women and Smoking: A Report of the Surgeon General*, Washington, DC: HHS, Public Health Service, Office of the Surgeon General, 2001, http://www.cdc.gov/tobacco/data_statistics/sgr/sgr_2001/index.htm.
- ²³ HHS, *Women and Smoking: A Report of the Surgeon General*, Washington, DC: HHS, Public Health Service, Office of the Surgeon General, 2001, http://www.cdc.gov/tobacco/data_statistics/sgr/sgr_2001/index.htm.
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