BACKGROUND ON WOMEN & GIRLS AND TOBACCO

For decades, the tobacco industry has targeted women and girls with its marketing and advertising, with disastrous consequences for women's health. As a result, more than 180,000 women die of tobacco-caused diseases each year.[1] Since 1987, lung cancer has been the leading cancer killer among women. Heart disease is the overall leading cause of death among women, and smoking accounts for one of every three deaths from heart disease. [2] For many of the diseases caused by smoking, research has shown that women are at greater risk than men. Women also suffer gender-specific risks from tobacco, including harm to their reproductive health and complications during pregnancy.

Tobacco Industry Targeting of Women and Girls

The tobacco industry has a long history of targeting its advertising at women and girls dating back to the 1920s. This strategy intensified in 1968 when Philip Morris launched the first woman-specific brand, Virginia Slims, with its seductive "You've Come a Long Way Baby" advertising campaign. This and similar ad campaigns cynically equated smoking with independence, sophistication and beauty and preyed on the unique social pressures that women and girls face. These campaigns sought to take advantage of the impact that the women's liberation movement was having on the role and images of women in America. The marketing of cigarettes as "slims" or "thins" played into social pressures on young women to control their weight, manage stress, and appear grown up.

As women's concerns about the health risks of smoking grew, the tobacco companies in the 1970s began promoting "low tar" or "light" cigarettes to women as a "softer" or even "safer" option. 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.[3]

The tobacco industry continued to market these products despite being aware that the actual or implied health claims in their ads were either misleading or entirely false. In fact, studies have shown that the introduction of "lights" did not improve the public health and may have led to an increase in the incidence of disease caused by smoking. That is because the introduction of lights resulted in smokers switching to "light" cigarettes rather than quitting and compensated by smoking more, inhaling more deeply or blocking ventilation holes.[4] With the passage of the federal 2009 Family Smoking Prevention and Tobacco Control Act, tobacco companies today are prohibited from using the terms "light," "low" and "mild," to market their products.[5]

Additional examples of the tobacco industry's ongoing targeting of women and girls include a 1999–2000 Virginia Slims' ad campaign, which told women that smoking could help them "Find Your Voice," until Philip Morris' chief executive agreed to remove the slogan in June 2000 after being questioned during the landmark Florida smokers' trial about whether it might be offensive to smokers with throat cancer.[6] In 2008, Philip Morris launched a campaign to market Virginia Slims cigarettes in mauve and teal "purse packs" that are sleek, modern, compact and are sold in "Super Slim Lights" and "Super Slims Ultra Lights." Philip Morris' campaign targeting women and girls followed RJR's introduction of Camel No. 9 in 2007. Camel No. 9, a cigarette clearly aimed at girls and young women, has sleek packaging, flowery ads and the slogan "light and luscious." In more recent years, tobacco companies have continued to place their advertisements in popular women magazines, such as *Glamour, InStyle, Marie Claire and Vanity Fair*, often with the same themes of independence, social status and beauty that have been used by tobacco companies in the past.

The Consequences: An Epidemic of Addiction, Disease and Death

These tobacco industry marketing practices have had disastrous consequences for the health of women and girls. 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.[7]

Today, 7.5 percent of high school girls and 13.5 percent of American adult women are current smokers, putting their health at significant risk.[8]

Although death rates among female smokers were previously thought to be lower than among male smokers for lung cancer, chronic obstructive pulmonary disease and other tobacco-related diseases, the U.S. Surgeon General reported in 2014 that women's risks from smoking have risen sharply, and women who smoke are now as likely as men to die from many smoking-caused diseases. In fact, smokers' risk of death from all causes has more than tripled in women.[9] Researchers attribute this increase in large part to a convergence in smoking patterns among men and women since the 1960's, with women starting to smoke earlier in adolescence and smoking more heavily. Like men, women smokers have a death rate three times higher than people who never smoked. According to researchers, these findings confirm that "women who smoke like men die like men."[10]

Cardiovascular disease: Cardiovascular disease, including heart attacks and strokes, is the overall leading cause of death among women, and smoking accounts for one of every three deaths from cardiovascular disease. Altogether, cardiovascular disease kills roughly 290,000 women each year.[11] Women who smoke are twice as likely to suffer a heart attack as non-smoking women, and women smokers have a higher relative risk of developing cardiovascular disease than men do.[12]

Lung Cancer: Lung cancer is the leading cancer killer among women, and smoking causes 80 percent of all lung cancer deaths among women.[13] Because the risks of smoking for women have increased so much in the last few decades, women who smoke now have about the same high risk of death from lung cancer as men.[14] Lung cancer death rates among women increased by more than 600 percent between 1950 and 2005, but the most recent annual report to the nation on the status of cancer found a significant decrease in lung cancer incidence and death rates among women from 2004 to 2010.[15] Still, the risk of death from lung cancer is 25 times higher for women who smoke than for those who don't.[16]

Other Cancers: Smoking causes one-third of all cancer deaths. Smoking is a known cause of cancer of the lung, larynx, oral cavity, esophagus, bladder, kidney, pancreas, stomach, cervix, colon and rectum, and blood.[17]

Reproductive Health: The reproductive side effects of smoking include menstrual problems, reduced fertility and premature menopause. Smoking and exposure to secondhand smoke among pregnant women are a major cause of spontaneous abortions, stillbirths and sudden infant death syndrome; they also increase the risk of low-birth-weight babies and health and developmental problems of children born to these women. Smoking is also known to cause ectopic pregnancy—a very rarely survivable condition for the fetus and a potentially fatal condition for the mother. [18] Nevertheless, 7.2 percent of pregnant women smoke.[19]

Quitting Smoking

About 70 percent of women want to quit smoking; and in 2015, 55.6 percent of adult women smokers made a quit attempt.[20] Although it often takes individuals more than one try to successfully quit smoking, many do go on to quit, often with assistance from cessation medications and/or counseling. In 2016, there were more former women smokers than there were current women smokers.[21]

There are benefits to quitting smoking at any age. While smoking cuts at least 10 years on average from a person's life expectancy, individuals who quit before the age of 40 can regain almost all of those years. Those who quit between 35 to 44, 45 to 54 and 55 to 64 can regain 9, 6 and 4 years of life, respectively.[22]

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[5] See Food and Drug Administration, "Overview of the Family Smoking Prevention and Tobacco Control Act," http://www.fda.gov/downloads/TobaccoProducts/GuidanceComplianceRegulatoryInformation/UCM336940.pdf.

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[9] HHS, *The Health Consequences of Smoking—50 Years of Progress: A Report of the Surgeon General,* 2014, http://www.surgeongeneral.gov/library/reports/50-years-of-progress/.

[10] Thun, M, et al. "50-Year Trends in Smoking-Related Mortality in the United States," *New England Journal of Medicine,* 368:4, January 2013.

[11] HHS, *The Health Consequences of Smoking—50 Years of Progress: A Report of the Surgeon General,* 2014, http://www.surgeongeneral.gov/library/reports/50-years-of-progress/.

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