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A New Deviance: The Sociology of Smoking

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ABSTRACT

A New Deviance: The Sociology of Smoking

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The act of smoking has become a new deviance of the late twentieth century. Several factors have contributed to the redefinition of smoking from an accepted behaviour to deviant behaviour: an increasing perception of health risks that underline the dangers involved in smoking to the smoker, and the effects of second-hand smoke on non-smokers; the declining percentage of smokers in North America; restrictions that have been placed on smoking in public places, workplaces, and on public transportation; a ban on tobacco advertising in Canada effective January 1, 1989; and the anti-smoking movement's attack which has effectively stigmatized the smoker.

The theoretical framework for explaining the rise and fall of smoking is provided by functionalist, collective behaviour, conflict and labelling theories.

The redefinition of smoking as deviance has occurred very rapidly, especially since the 1964 U.S. Surgeon General's Report on Smoking and Health to Canada's Tobacco Products Control Act of 1989. This thesis will explain how smoking has come to be redefined as deviant, the stages and the areas of redefinition, the economic and political implications, and the conflicts within Canada and the United States over the definitional process.

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Chapter 1

Introduction

Smoking: the sign of masculinity during World War I; social sophistication through the '20s and '30s; sexiness, glamour, ruggedness and liberation in the 1940s and 1950s; a possible, then confirmed health hazard in the 1960s; and deviant behaviour in the 1970s and 1980s.

Smoking has experienced several swings in public perception throughout its storied history, but none more pronounced than in the twentieth century, as the behaviour has been the subject of constant redefinition.

The image of smoking in today's North American society is of a behaviour that is not glamourous, nor sexy, nor sophisticated. Smokers have become labelled as deviants, performing an act that is not only hazardous to themselves, but to those around them.

The stigmatization of the smoker comes from many sources: restrictions on smoking in public places, in the workplace, and on public transportation have contributed to the notion of smoking as an act of deviance; advertising restrictions that now prohibit tobacco advertising in Canada (Bill C-51) lend credence to the notion of deviance; health findings that show the dangers of smoking, and of exposure to second-hand smoke; and the escalating confrontations between pro-smoking and anti-smoking movements.

Proportionately fewer Canadians smoke now than ever before - they are a new minority that is seeking to find some form of acceptance in today's anti-smoking world.

The notion that smoking is a new deviance is the basis of this thesis. Smoking will be analyzed in the following categories: historical perspective; theoretical perspective; smoking and health; public smoking; advertising; the economics of tobacco; and smokers vs. non-smokers.

A variety of theoretical perspectives will be reviewed, namely functionalism, collective behaviour, conflict theory and labelling, in an attempt to understand why a behaviour that was once defined as normal and acceptable has been redefined as deviant.

The methods used to support this thesis include reference to: sociological texts to properly present the various deviance theories; medical documents to best review the health factors; and newspaper and magazine articles, for the following three reasons: (1) to effectively gauge public opinion; (2) they are excellent vehicles through which to monitor society's rapidly changing attitudes and policies: Maclean's and Report on Business each had cover stories on smoking in 1987, and Time in 1988; and (3) to provide an opportunity to cite statements made by prominent individuals and officials which would otherwise not be available.

Television is another medium that has proven to be an excellent resource: not only have newscasts devoted their attention to smoking, but "news magazine" programs have covered the smoking issue, and documentaries have been featured, for example, on public broadcasting stations.

All attempts have been made to provide Canadian data wherever possible. However, American data is also used in the

History chapter, partly because there is more available, but also because Canada and the United States are both part of a broader North American culture: Humphrey Bogart "lighting up" was an image which "crossed" national boundaries.

Public opinion surveys by the Gallup and Southam News - Angus Reid polling firms are referred to in context of public attitudes towards banning cigarette advertising, banning the sale of tobacco products and banning smoking in public buildings. It was decided that rather than conducting a survey for this thesis, a significant cost-savings would be obtained by presenting the results of nationwide polling companies, and energies could be better devoted instead to considering how smoking has been redefined from normal to deviant behaviour.

Chapter 2

History

Although most school children learn at any early age that Christopher Columbus discovered America in 1492, it is perhaps not as well documented that Columbus was involved with another discovery: for along with America came tobacco.

"At ten o'clock on the night of October 11th, 1492, Christopher Columbus from the deck of the Santa Maria saw a light ahead, the record of which in the log every smoker today should contemplate with reverence as that of an auspicious guiding star" (Mackenzie, 1957:63).

The New World would hold many surprises for Columbus, among them what must have been perceived as a rather bizarre ritual - smoking tobacco.

"...two Spaniards who were travelling with Christopher Columbus noticed that natives of Cuba were igniting dry tobacco leaves from glowing coals - and then, to the puzzled travellers' amazement, inhaling the smoke" (Gray, 1987:32).

This sense of bewilderment over the phenomenon of 'drinking smoke' drifted across the Atlantic. "During the next 60 years residents of Spanish and Portuguese seaports had the same reaction to returning sailors who brought tobacco plants, seeds and the smoking habit from the New World" (Ibid).

Concern over the health implications of smoking are not unique to the twentieth century and in fact can be traced back several centuries...as can the public's general unwillingness to heed those warnings.

The ruler of the Ottoman Empire during the seventeenth century, Murad IV, would occasionally enforce the death penalty in an attempt to eliminate smoking (Ibid).

In 1604, the English monarch King James I penned "A Counterblaste to tobacco," in which he described smoking as "a custom loathsome to the eye, hateful to the nose, harmful to the brain, dangerous to the lungs, and in the black, stinking fume thereof, resembling the horrible Stygian smoke of the pit that is bottomless" (Sobel, 1978:50-1).

Neither leader's warning generated the expected response, however: Murad IV's attempt was unsuccessful, and King James I's argument accomplished the complete opposite effect desired, as Gray says it "heightened interest in smoking throughout Britain" (Gray, 1987:32).

These anti-tobacco sentiments were responded to via poems and essays by tobacco lovers who defended pipes and cigars as "soothing, an aid to digestion, and the perfect companion to good talk and fine wines" (Sobel, 1978:51).

During this period, opposition to smoking and tobacco was based on health and moral objections. The health concerns associated smoking with sterility, birth defects, insanity and other illnesses. The moral concerns linked smoking to drunkenness, irresponsible and unruly behaviour, and being offensive to religion (Troyer and Markle, 1983:32).

However, by the start of the eighteenth century, it appeared as though most of the world had succumbed to tobacco, regardless of the opposition towards it. Most laws against smoking were repealed, primarily due to the

difficulty experienced in administering the laws, as well as the animosity that the enforcement produced (Ibid).

During the late 1700s and throughout most of the 1800s, the preferred forms of tobacco consumption were cigars, pipes and chewing tobacco. Cigars were the most popular, enjoyed by President Grant, Robert E. Lee, tycoons, actors, and the majority of American males. In 1870, the U.S. population stood at 40 million, and slightly less than half were male: that year, U.S. cigar factories produced, and importers brought into the country, over 1.2 billion cigars. Therefore, the average American male from youngsters on up smoked 60 cigars in 1870. In addition to this total was the more than 100 million pounds of smoking, snuffing and chewing tobacco - five pounds per male (Sobel, 1978:6).

By 1880, in just 10 years, Americans' annual consumption of cigars had doubled to 2.5 billion, and an additional 150 million pounds of pipe tobacco, snuff and plug were consumed. These figures are conservative; the inclusion of tobacco products manufactured by tax evaders and those not counted in official government statistics would increase the cigar total by an additional 250 million, and other smokes and chews would add another 50 million pounds (Ibid:7).

By the mid-nineteenth century, the cigarette was slowly becoming a fixture in society, and its popularity was accelerated by outbreaks of war.

The popularity of cigarettes in Britain can be traced back to 1856, when British soldiers returned from the Crimean War bringing with them tobacco rolled in paper tubes, a form

of smoking they had learned from French troops in the Crimean Peninsula (Gray, 1987:32).

The role that warfare played in spreading the smoking habit was also seen in the United States, where during the Civil War (1861-65), tobacco was perceived as necessary for the well-being of the soldiers, and because of their convenience, cigarettes became an established military ration (Nuehring and Markle, 1974:514).

In 1880, 500 million manufactured cigarettes were sold in the United States; roll-your-own cigarettes added approximately one billion to that total (Sobel, 1978:7).

And so began the saga of the cigarette. Interestingly enough, it only took the cigarette 20 years after its arrival in North America to find itself embroiled in controversy. "In the 1870s, competitive cigar manufacturers proclaimed that cigarettes were drugged with opium, their paper bleached with arsenic, their contents derived from garbage, and their makers, Chinese lepers" (Nuehring and Markle, 1974:514).

This lack of enthusiasm voiced by the cigar manufacturers did not stop the ever-increasing popularity of cigarettes. And to ensure that there would be enough cigarettes available to satisfy demand, Virginia inventor James Bonsack developed in 1884 a cigarette-rolling machine that could produce as many cigarettes in a day as 488 workers could manually - thereby making possible the mass production of the cigarette (Gray, 1987:32 and Stoffman, 1987:22). A safe, portable match was invented shortly afterwards (Stoffman, 1987:22).

By the beginning of the twentieth century, religious and moral opposition had begun to develop against cigarettes. Certain religions insisted that their ministers abstain from using tobacco. Cigarette smoking among boys was perceived to lead to delinquency and school failure. And, along with moral outrage towards cigarettes, there was a concern over health, as a list of physical ills such as increased blood pressure, nicotine poisoning, weakened nerve cells and bronchial tube irritation were linked with the "little white slavers" or "coffin nails." In fact, between 1895 and 1921, 14 American states completely banned cigarette smoking (Nuehring and Markle, 1974:514-5 and Troyer and Markle, 1983:38).

Although the Temperance Movement was devoting its energies to alcohol restrictions throughout this period, there was concern among the pro-tobacco forces that the Temperance Movement would switch its attention to tobacco. However, that fear never truly materialized. The Anti-Saloon League, a major temperance organization, refused to get involved in any anti-tobacco program. The Women's Christian Temperance Union (WCTU) only became active in a limited way in the 1920s, feeling that education and not prohibition would be how the organization should deal with tobacco (Troyer and Markle, 1983:43).

However, it would be incorrect to conclude that the Temperance Movement's general unwillingness to become involved with the cigarette issue meant that there was no organized opposition to cigarette smoking. Two major anti-cigarette organizations emerged prior to World War I.

Lucy Page Gaston was considered to be the leader of the anti-cigarette movement. In 1899, with the support of businessmen, she founded the Chicago Anti-Cigarette League. The organization changed its name in 1901 to the National Anti-Cigarette League, and then to accommodate Canadian branches it became known in 1911 as the Anti-Cigarette League of America. The goals of the organization were to discourage people from taking up smoking; to "save the nation from a great moral danger...(and) moral decay;" and rescue smokers from "the perils of the cigarette." The group's major goal was to have legislation enacted that would prohibit the sale and manufacture of cigarettes: in fact, the organization's lobbying efforts were instrumental in the passage of a number of anti-cigarette bills (Ibid:36,115-6).

During this same period, there was at least one other active anti-cigarette group: the Non-Smokers' Protective League of America (Ibid:36).

The anti-cigarette movement in this period was supported and led mainly by three groups: educators, reformers and businessmen. The educators were in the forefront of attempts to enact anti-cigarette legislation, with school teachers supporting pending bills and educators writing in periodicals about the dangers of youths' smoking; and business supported the anti-cigarette movement by refusing to hire cigarette smokers. Educators, reformers and businessmen made three general assertions about smoking: it was harmful to health; it led to moral degeneration; and they voiced their concern for the rights of the non-smoker (Ibid:35,37-9).

Religious organizations such as the Methodist, Baptist and Presbyterian denominations announced anti-cigarette policies in late 1919 and 1920. For example, the Methodist Episcopal Church Board of Temperance, Prohibition and Public Morals in 1920 proclaimed that women smokers were a "menace to the nation;" the Baptists pledged themselves to "wholly banish the use of cigarettes;" and the Presbyterian Church Board of Temperance and Moral Welfare declared a nationwide campaign against the cigarette (Ibid:43).

Throughout the early twentieth century, not unlike the mid-to-late nineteenth century, the cigarette's greatest ally was the proliferation of war. Between 1916 and 1918, United States General John Pershing insisted that cigarettes form a part of every soldier's daily ration (Stoffman, 1987:22). His enthusiasm for cigarettes is reflected in a New York Times article that appeared on July 18, 1918, where an army doctor was quoted as saying the cigarette is an "indispensable comfort to the men" (Troyer and Markle, 1983:40), and Pershing himself was quoted as saying "You ask me what we need to win this war. I answer tobacco, as much as bullets" (Sobel, 1978:84).

Warfare has played a major role in spreading the smoking habit. Soldiers who returned from the First World War helped to popularize cigarette smoking. In the U.S., production grew from 18 billion in 1914 to 47 billion in 1918 (Stoffman, 1987:22). By 1919, almost 54 billion cigarettes were manufactured, and per capita consumption increased from 134 in 1910-14 to 310 in 1915-19 (Starr, 1980:49).

Canadian tobacco manufacturers were enjoying economic prosperity during this period as well, albeit the major contributing factor was an abolition of a domestic tax. In 1922, the Canadian excise tax on domestic tobacco was eliminated whilst imported tobacco remained highly taxed, thereby encouraging local production (Mackenzie, 1957:292).

The cigarette's fortunes improved in the early 1920s, sparked by the increasing public perception, influenced by effective advertising campaigns, that "people who smoke are smarter, more liberated, have more grace and style, are creative, and have sex appeal" (Colby, 1977:20-1).

After World War I, the public's perception of cigarettes became more and more positive. New advertising strategies developed, with women, weight watchers and even health seekers ("cooling relief to irritated throats") all targeted by the tobacco industry. U.S. state governments also began to depend on the revenue generated by cigarette taxes (Nuehring and Markle, 1974:515).

By 1927, the laws in the 14 states which had banned cigarettes were repealed. And by the end of World War II, smoking was not only considered to be acceptable behaviour, it was also "socially desirable, even necessary, in some subcultures" (Ibid).

The correlation between increased cigarette consumption and warfare was again reinforced during the Second World War, as there was a huge boost in cigarette sales between 1940 - 1945 (Stoffman, 1987:22). As well, the influence of advertising became increasingly more effective during the

1920s to 1940s as cigarette companies and advertising agencies perfected the hard sell; in fact, during this time more money was spent on a Lucky Strike advertising campaign than for any other previous advertising (Ibid).

The enormous effect that popular culture had on cigarette smoking during this era is also extremely important. People started smoking in part to emulate the glamourous/handsome movie stars of the 1930s and 1940s (Gray, 1987:32).

A positive portrayal of cigarette smoking in a variety of forms of popular culture (movies, books, television) further enhanced the surging popularity of cigarettes. Then as now, our attitudes and beliefs are often shaped by popular entertainment.

Movie goers thought they would look as sophisticated as Lana Turner, Bette Davis, Marlene Dietrich or Humphrey Bogart if they too smoked. On television, Edward R. Murrow often interviewed guests enveloped in a smoky haze. It seemed as though without smoking, "great detectives could not detect, writers could not write, lovers could not languish, heroes were deflated and vamps declawed" (Gibbs, 1988:47).

This trend of a positive public attitude towards smoking continued throughout the 1940s and into the 1950s. However, it wasn't long into the 1950s when societal norms towards cigarettes began to shift again, influenced by many scientists who linked smoking with illnesses such as lung cancer and heart disease, and by U.S. Congressional hearings launched in 1957 regarding smoking and health.

A crushing blow to the tobacco industry came in 1964, with the publication of the U.S. Surgeon General's Smoking and Health: Report of the Advisory Committee to the Surgeon General of the Public Health Service. Released January 11, 1964, the 387-page report linked smoking with lung cancer, heart disease and chronic bronchitis (U.S. Department of Health, Education and Welfare, 1964:31-5).

The report had an immediate effect on sales, which declined almost 20 per cent within a few months after its release, but rebounded again primarily due to the passage of time and heavy advertising; and 1964's final months and 1965 again showed heavy demand (Sobel, 1978:190).

The Surgeon General's landmark report furthered the mounting attack on cigarette smoking. In the United States, the Public Health Service discontinued giving free cigarettes in its hospitals, and the Federal Trade Commission determined that by July 1, 1965, a warning label would have to be on all cigarette packages. As well, many states reflected the tougher federal position regarding cigarettes by passing forms of anti-cigarette legislation for the first time in more than 40 years (Nuehring and Markle, 1974:516).

Not unlike the Temperance Movement, some of these actions against smoking had moral overtones. For instance, the State of Florida enacted a law (code 233.09) in 1965 maintaining that public schools must instruct pupils of the negative health effects of cigarette smoking, along with "kindness to animals" and "proper flag salute" (Markle and Troyer, 1979:612).

Another serious blow was dealt to the tobacco industry in 1968; due to lobbying by John Banzhaf III (of the anti-smoking group Action on Smoking and Health), anti-smoking commercials appeared on television for the first time (Nuehring and Markle, 1974: 517 and Sobel, 1978: 211-3). And in 1970, the U.S. Congress banned cigarette advertising on radio and television effective January 1, 1971 (Stoffman, 1987:22).

The 1980s have seen the smoking controversy jump into an ever larger battleground. Whether or not to prohibit smoking in public places, the workplace or on public transportation have all become major topics (see Chapter 5).

Also, the extremely controversial issue of completely prohibiting cigarette advertising and sponsorship has been approved in Canada, and is being considered in the United States (see Chapter 6).

Without a doubt, the cigarette has had an enormous impact on popular culture - an impact that has consistently see-sawed back and forth between respectability and deviance.

The history of tobacco is therefore a classic example of the continuing redefining of reality. The "strange" custom of native Americans becomes accepted as a cultural norm for Europeans, then later still is defined as deviant. The personal habit is redefined as a public health issue. And what people may have once seen as glamourous, sexy and sophisticated is now seen by many people as not only not sexy, but even as silly, unhealthy, and on occasion illegal.

Chapter 3

Theoretical Perspectives

The theoretical framework for the rise and fall of smoking is provided by functionalist, collective behaviour, conflict and labelling theories.

Functionalism serves to clarify the functions of smoking as a norm (especially pre-1964), as well as the functions of smoking as deviance; collective behaviour explains the change in smoking from a norm to deviance; conflict theory clarifies the relationship between pro- and anti-smoking forces; and labelling theory helps us to better understand society's defining and re-defining processes at the micro-level.

Gusfield's study of the Temperance Movement can also be applied to the redefinition of smoking as a deviant behaviour.

This chapter will review these key theories of deviance, which, when applied to the current smoking controversy, provide the theoretical framework for the redefinition of smoking as deviant. However, before reviewing these theories, a few words need to be said on the definitions of deviance.

Durkheim pointed out the social nature of deviance when he wrote: "We must not say that an action shocks the common conscience because it is criminal, but rather that it is criminal because it shocks the common conscience. We do not reprove it because it is a crime, but it is a crime because we reprove it" (Durkheim, 1933:81).

Deviance is not a characteristic that can be found in behaviour itself. Rather, its basis rests in the interaction

between the person committing a particular act and those responding to the act - so, whether or not an act can be considered deviant depends upon others' reaction to it (Becker, 1963:13-4), hence, the development of Becker's theory of labelling.

Applying Durkheim's and Becker's definitions of deviance to smoking, it is not the act of smoking itself that is perceived as deviant or criminal - instead, it is the reaction that other people have towards a person who is smoking. As will be documented throughout the following chapters, that reaction, especially among non-smokers, has become increasingly militant.

Deviance also constitutes "anything that violates prevailing norms on what makes a person acceptable." The prevailing norms regarding smoking, as can be evidenced by societal and governmental reactions to the act, are clearly negative in terms of acceptability: "Deviance, to a sociologist, does not include acts or attributes that are merely unusual, eccentric, unhealthy or unwise, as long as they do not make a person objectionable in a given social setting" (Glaser, 1971:1).

One can also view deviance as a statistical phenomenon. By avoiding the area of normative sources of definitions, one can simply imply that any act that is performed by the majority is not deviant - therefore, "behaviour that digresses from what the majority do, or a variation of a 'normal average' of behaviour" is deviant (Clinard, 1974:27). However, Becker (1963a) maintains the statistical perspective

is "simple-minded, even trivial," and that it "simplifies the problem by doing away with many questions of value that ordinarily arise in discussions of the nature of deviance" (Becker, 1963a:4-5).

Keeping in mind these broad definitions of deviance, it is now possible to analyze specific deviance theories as they relate to the rise and fall of smoking. The first such theory to be reviewed is functionalist theory.

FUNCTIONALISM

Durkheim's interest in the functions of crime (deviance) produced the following theory: "...to explain a social fact it is not enough to show the cause on which it depends; we must also, at least in most cases, show its function in the establishment of social order" (Durkheim, 1938:97).

The functionalist approach to deviance is based on the following assumption: the rule (or, more accurately, the norm), comes first - its violation then follows. "The general theoretical stance of the functionalists requires that a norm be viewed as existing (in the institutional milieu and the orientation of the actor) prior to behaviour which can be said to deviate from it" (Wright and Randall, 1978:220).

In order to examine the functionalist theory of deviance in relation to smoking, it is necessary to first review the functions of smoking as a norm, and then to clarify the functions of smoking as deviance.

As reviewed in Chapter 2, smoking was considered a norm

up until approximately 1964. Before 1964, smoking was perceived as a glamourous, acceptable behaviour in society.

This perception of smoking as normative behaviour was promoted through a variety of functions that smoking performed: smoking was seen to be a sign of masculinity (especially for men attempting to emulate the machismo associated with the soldiers overseas), as well as femininity; friendships were strengthened by sharing cigarettes; a smoker personified the modern-day society; the economic functions of smoking, in terms of the profits made by tobacco growers, and the tax benefits reaped in by governments; and the popular notion that smoking served as a relaxing, pleasurable activity (after a hard day's work, when nerves were frayed, or after sex), all served to enforce the function of smoking as a normative behaviour.

This concept was reinforced by the popular culture of the day: advertising, magazines, films and books all contributed to the positive functions of smoking. A powerful, nicotine-induced addiction serves to further explain smoking s growth and popularity.

However, the functions of smoking as deviance, especially post-1964, are plentiful.

As will be reviewed in greater detail in Chapter 8, the values to which the anti-smoking lobbies appeal summarize the functions of smoking as deviance: health concerns, not only for the smoker but for those in the presence of second-hand smoke; the economics of smoking - at one time a profitable farming venture - has left many growers forced to sell out,

and governments are spending more on health care related to smoking than is generated through taxation; and there is the reinforcement of preventive medicine and self-care, as people are increasingly encouraged to give up smoking, or not even to begin.

In order to explain the change in smoking from a normative behaviour to deviance, it is appropriate to refer to Smelser's theory of collective behaviour.

COLLECTIVE BEHAVIOUR

The second theoretical perspective that can be applied to the change in the definition of smoking from a norm to deviance is Smelser's theory of collective behaviour.

Smelser defined collective behaviour as "mobilization on the basis of a belief which redefines social action" (Smelser, 1963:8).

Smelser details six determinants that are to take place in order for collective behaviour to occur. These six are: structural conduciveness; structural strain; growth and spread of a generalized belief; precipitating factors; mobilization; and social control.

Smelser's fourth, fifth and sixth determinants of collective behaviour (precipitating factors, mobilization and social control) help us to best understand smoking's change from a norm to deviance.

Precipitating factors provide generalized beliefs with concret , immediate substance (Ibid:17). In relation to

smoking, the precipitating factor was the U.S. Surgeon General's Report on Smoking and Health released in 1964. This report galvanized the anti-smoking community, and resulted in the next stage, mobilization.

The mobilization for action is illustrated by the formation of anti-smoking groups, wherein "the affected group (comes) into action" (Ibid). These anti-smoking organizations, formed mainly in the late 1960s and early-to-mid 1970s, include ASH (Action on Smoking and Health); GASP (Group Against Smokers Pollution); NIC (National Interagency Council on Smoking); and the Non-Smokers' Rights Association.

Smelser's final factor is the operation of social control, ultimately leading to legislation.

Various regulations have gone into effect against smoking: in 1971, cigarette commercials were banned from U.S. television and radio; strict rules prohibiting smoking on airline flights of certain durations were passed in both the United States and Canada in 1987; smoking in public places is greatly curtailed by laws such as Quebec's Bill 84, that came into effect January 1, 1987; and several workplaces have become smoke-free.

The failure of another social movement, the Temperance Movement, is directly attributable to the absence of a precipitating factor. The precipitating factor for the anti-smoking movement was the Surgeon General's 1964 Report; the Temperance Movement, however, had no such equivalent, and therefore, did not experience a similar, and permanent,

success.

However, the Temperance Movement did produce some parallels: Gusfield's (1963) analysis of the Temperance Movement provides an opportunity to make comparisons to the smoking controversy.

In his study, Gusfield identifies two major types of norms-violators. The "repentant deviant" is one who admits his action is "morally reprehensible, to himself as well as to those who dominate institutions...(and) may persist in his action without threatening the legitimacy or domination of the norms he violates;" the "dominated deviant" is a norms-violator who does not combat the norm-upholder's dominant position of more power and prestige (Gusfield, 1963:66).

Gusfield outlines two types of reform aimed at deviants. The first, assimilative reform, occurs when "a social group that perceives its culture as defining the ideal and publicly valid norms of the society will approach the deviant as someone to be helped in attaining the habits which can assure improvement in his social condition" (Ibid:68).

The second type of reform, coercive reform, takes place when "the object of reform is not someone to be helped but someone who is hostile and must be approached as an enemy; who must be forced to accept the dominance of the reformer" (Ibid:69).

In this framework, smokers can be defined (depending on the particular circumstance), as either repentant or dominated deviants. As well, the battles between pro- and

anti-smoking groups typify the conflict established in Gusfield's definition of enemies.

Assimilative reforms include stop-smoking clinics, increased public awareness of the dangers related to smoking, or any other such technique that attempts to convince the smoker to quit. Coercive reform (which assumes hostility), includes a variety of rules and regulations, such as prohibiting smoking in public places, the workplace, on public transportation, along with curtailing advertising, to ensure the smoker accepts the dominant position of the non-smoking majority.

CONFLICT

All societies are composed of a variety of general interests that are in altering degrees of conflict. A key component of conflict theory is resource mobilization theory, and it can be directly associated with defining smoking as deviant behaviour.

Resource mobilization theory examines "group conflict and social movements in terms of collectivities creating and mobilizing resources" (Troyer and Markle, 1983:15).

Resource mobilization theory is a valuable tool when examining rule creation and deviance designation. In the context of conflict in the smoking issue, it helps us to better understand why Gaston's anti-smoking movement of the early twentieth century failed, yet the present anti-smoking forces have been much more successful (Ibid:16-7).

Troyer and Markle (1983) maintain that the current definition of a behaviour as either acceptable or unacceptable can be traced back to the outcome of prior interest group conflict ie. "the balance of the resources the two sides were able to mobilize." Therefore, the theory in relation to cigarette smoking is that it was acceptable behaviour throughout the 1930s, 1940s and 1950s because pro-smoking groups had defeated anti-smoking organizers in the earlier battle (Ibid:128); however, anti-smoking groups have mobilized more resources since the 1964 Surgeon General's Report, and have continued to successfully mobilize their resources.

The role of the moral entrepreneur in deviance theory is also related to conflict theory. Becker (1963a) defined the moral entrepreneur as someone who advocates the idea that something is deviant in society: "Rules are the products of someone's initiative and we can think of the people who exhibit such enterprise as moral entrepreneurs" (Becker, 1963a:147).

It is Becker's contention that deviance (in the sense of publicly labelled wrongdoing) must be the result of enterprise: "Before any act can be viewed as deviant, and before any class of people can be labelled and treated as outsiders for committing the act, someone must have made the rule which defines the act as deviant" (Ibid:162).

The smoking issue's moral entrepreneurs are the anti-smoking groups. Their ability to act on the precipitating factor of the 1964 Surgeon General's Report by

informing the public of the health risks related to smoking, fulfills Becker's definition of the moral entrepreneur:

> Even though a practice may be harmful in an objective sense to the group in which it occurs, the harm needs to be discovered and pointed out. People must be made to feel that something ought to be done about it. Someone must call the public's attention to these matters, supply the push necessary to get things done, and direct such energies as are aroused in the proper direction to get a rule created (Ibid).

Further reinforcement that smoking is deviant behaviour comes with the knowledge that whenever public opinion is strongly divided on a given issue, with strong feelings expressed by both the dominant and deviant groups, the deviant group faces a good possibility of repressive action, either from police, government officials or groups that have opposing ideas (Glaser, 1971:61).

Rubington and Weinberg's (1973) all-encompassing definition of deviance can be applied to the non-smoking forces' method of attacking smokers:

> deviance is in the eyes of the beholder. For deviance to become a social fact, somebody must perceive an act, person, situation, or event as a departure from social norms, must categorize that perception, must report that perception to others, must get them to accept this definition of the situation, and must obtain a response that conforms to this definition (Rubington and Weinberg, 1973:vii).

LABELLING THEORY

According to Becker (1963a), "whether an act is deviant...depends on how other people react to it" (Becker, 1963a:11), and it is this reaction that forms the basis of Becker's theory of labelling.

In labelling theory, attention shifts from the functions of the perceived deviant behaviour to society's reaction to it. Therefore, what becomes important when labelling smoking as deviant behaviour is not to determine why one smokes, but rather to evaluate society's reaction to the smoking act.

Becker contends that "social groups create deviance by making the rules whose infraction constitutes deviance, and by applying those rules to particular people and labelling them as outsiders" (Ibid:9).

From this perspective, deviance is a consequence of the application of rules and sanctions by others to an "offender," and not a quality of the act that a person commits. "The deviant is one to whom that label has successfully been applied; deviant behaviour is behaviour that people so label" (Ibid).

The reaction to being labelled as deviant is also interesting to note in the context of smoking. As will be reviewed in subsequent chapters, smokers have attempted to counteract the stigmatization associated with smoking in various ways. Being labelled as deviant produces new allies in search of a common goal: "Many deviants never identified with each other or felt a sense of unity until opponents labelled them collectively, and thus gave them a sense of their numbers, their common features, and their need to organize and to coordinate for their common defense" (Glaser, 1971:45).

Smokers have attempted to combat their deviant label by forming pro-smoking groups such as the Smokers' Freedom

Society, a good example of a group coordinating for a common defense (for further elaborations on the Smokers' Freedom Society, please see Chapter 8).

This view is shared by Mausner and Platt (1971), who state that "a sense of affiliation towards other smokers is an important support for adult smoking in some people and that the degree of its importance could be assessed by various methods, including resistance to anti-smoking influence" (Mausner and Platt, 1971:14).

People may accept being labelled as deviant for one of two reasons: because of the consequences of suggestion or persuasion, or, because of the approval and backing of others who are similarly labelled (Glaser, 1971:42).

Glaser (1971) has identified seven broad categories into which deviance can be classified. Two of these categories, deviant consumption and deviant performance, are applicable to smoking.

Deviant consumption refers to the use of particular goods or services that have been judged to be objectionable by those who dominate a social system. Although these acts are perceived as having no clear victim, "the people who consider this consumption objectionable may regard the deviant himself as the victim and refer to the activity as a 'vice' or an abuse of oneself, but the deviant often - perhaps usually - does not share this view" (Ibid:10).

Deviant consumption can be applied to smoking. Smoking entails the use of a particular good (tobacco) that is seen to be objectionable, as discussed earlier. Non-smokers often

view smokers as harming themselves (ie. a self-destructive act), due to the increased knowledge of links between smoking and health; smoking is increasingly viewed as an anti-social activity - an activity which is in marked contrast to the earlier function of smoking; and, a habit that many perceive as both dirty and smelly is also a tremendous burden on our health care system; smoking is also considered to be a vice.

However, smoking does not fulfill all the requirements of the deviant consumption category as smoking is perceived to have victims - either the smoker or the non-smoker who is endangered by second-hand smoke; and although the smoker may not share the view of being a victim, most smokers will concede that smoking is a vice, due principally to the addictive qualities of nicotine.

Glaser's other category of deviance that can be associated with smoking is deviant performance. Deviant performance considers a wide array of behaviour that, although not intended to harm anyone, nonetheless does offend some people who in turn are able to complain effectively. Although this kind of behaviour is perceived as deviant in public places, it is usually not considered objectionable if it is performed in private (Ibid:14).

People do not smoke with the intention of harming those around them. However, second-hand smoke does offend many non-smokers, and non-smokers have manifested their displeasure by effectively organizing anti-smoking groups to voice their discontent. Also, government regulations that restrict smoking in public places contribute in large part to

labelling the smoking act as deviant, leaving smokers with fewer public areas in which to smoke - and ultimately, their private abode may become the only area where smoking is permissible.

The notion of deviant performance also touches upon an element of conflict, as people who are able to complain effectively will have an opposite view regarding the deviant act than will the person performing the act.

The labelling perspective focuses on the important role performed by social conflict and social power considerations when society determines what should be enforced as deviance, but also on the individual micro-processes of other-definition and self-definition (Clinard, 1974:22).

As we have seen throughout this chapter, it is society's reactions to a given behaviour and not the behaviour itself that form the nucleus of a sociological definition of deviance. Also, deviance is relative, dependent upon the make-up of society at any given time and who is perceived as being in the dominant position.

Several sociological theories relating to deviance are directly applicable to smoking. Functionalist, collective behaviour, conflict and labelling theories are all useful, and explain different aspects of the rise and fall of smoking as normative.

As previously reviewed in Chapter 2 dealing with history, the public's view of smoking has been constantly redefined throughout the twentieth century, ranging from glamour and sophistication to social stigmatization.

This chapter has attempted to place that historical background in a sociological context, as well as provide a theoretical foundation for the following chapters.

Chapter 4

Smoking and Health

Cigarette smoking is the major cause of preventable death in Canada and the United States. Approximately 35,000 Canadians a year between the ages of 35 - 84, about 100 a day, die from illnesses related to tobacco. In recent years, at least 25 per cent of all deaths among people between the ages of 35 - 84 in Canada were attributable to tobacco use (Collishaw, Tostowaryk and Wigle, 1988:166).

Cigarette smoking is also the major cause of preventable death in the United States, where in 1985, it was responsible for the deaths of about 390,000 Americans (U.S. Department of Health and Human Services, 1989:v). In 1979, the U.S. Surgeon General's Report claimed that 65 per cent of smoking related deaths were due to cardiovascular disease; 23 per cent due to lung cancer; 6 per cent from other forms of cancer; and 5 per cent due to chronic pulmonary disease (U.S. News & World Report, January 22, 1979:68). According to the American Lung Association, more Americans die annually from the effects of cigarette smoking than from alcohol, illegal drugs, traffic accidents, suicide and homicide - combined (Montreal Gazette, February 21,1987:B12).

Placing these totals in a somewhat more graphic description, the number of Canadian casualties is the equivalent of wiping out the entire population of a small city such as Sydney or Moose Jaw, and the U.S. total is comparable to two jumbo jets colliding every single day, with no survivors (Stoffman, 1987:20).

That's the bad news.

The good news (depending on one's point of view), is that smokers are an ever dwindling minority.

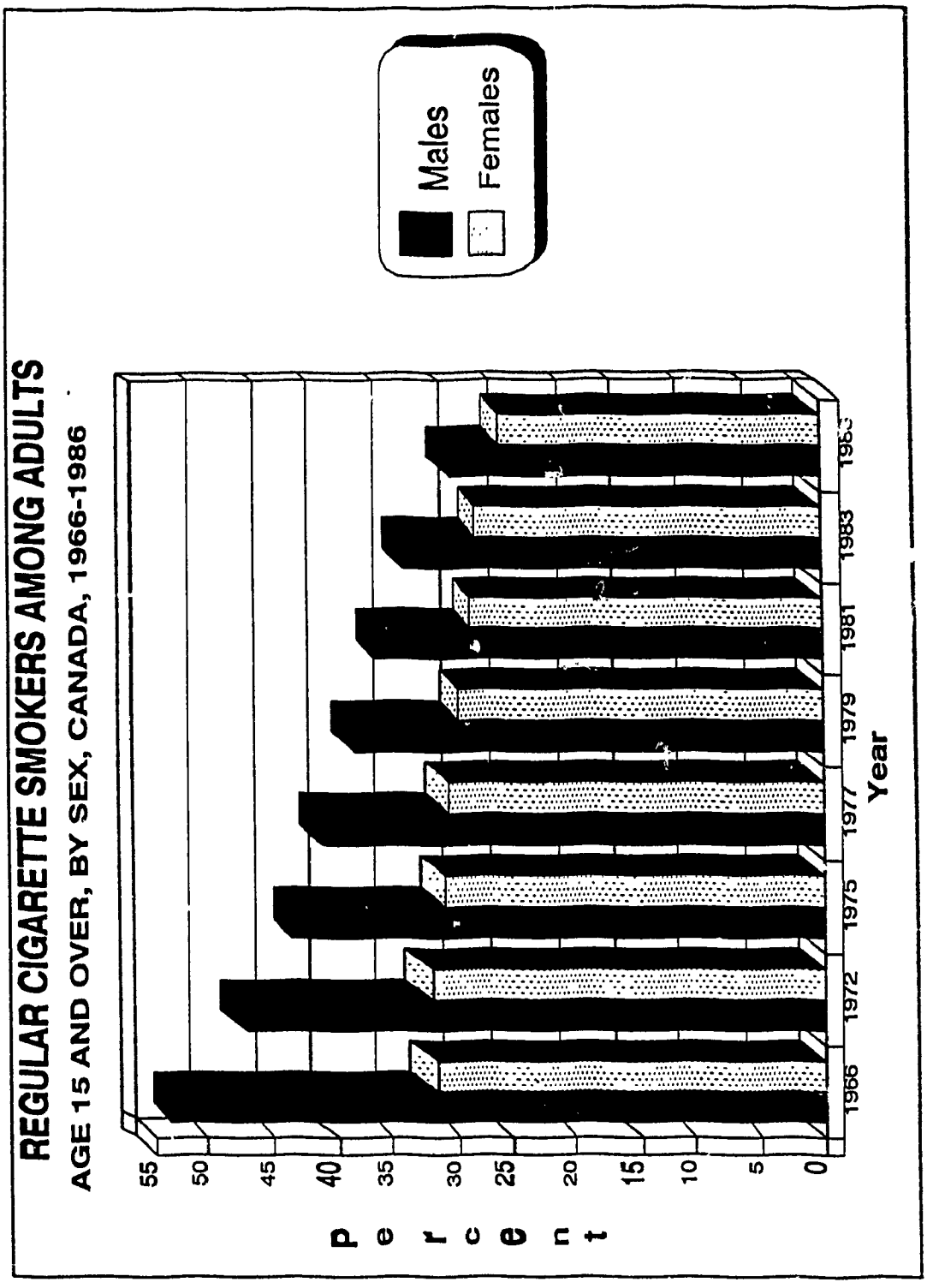
Recent figures suggest that smoking has reached an all-time low in Canada. In December, 1986, there were 5.5 million Canadians aged 15 years of age and older who were regular cigarette smokers. In percentage terms, this total accounts for an estimated 28 per cent of the Canadian population aged 15 and older (Millar, 1988:2).

These 5.5 million smokers are comprised of 3 million men and 2.5 million women. Approximately 31 per cent of Canadian males are regular cigarette smokers, and 26 per cent of Canadian females smoke cigarettes regularly (Ibid).

It is interesting to compare cigarette smoking statistics between 1966 and 1986: in 1966, 54 per cent of Canadian males smoked as compared to 31 per cent in 1986; 32 per cent of Canadian females smoked in 1966, and in 1986, 26 per cent smoked. Clearly, the decline has been much more dramatic among males (a drop of 23 per cent as compared to the six per cent decrease in female smokers), however, there are still more male smokers than female smokers (Ibid).

In 1987, 29 per cent of Americans smoked. This represents an 11 per cent decrease from 1965, when 40 per cent of Americans smoked (U.S. Department of Health and Human Services, 1989:i).

In 1986, 20 per cent of regular smokers in Canada smoked one to 10 cigarettes per day; 67 per cent smoked 11 to 25 cigarettes per day; and 12 per cent smoked more than 25



(Millar, 1988:20)

cigarettes per day (Millar, 1988:7). The annual per capita cigarette consumption of Canadians aged 15 years and over, according to National Health and Welfare Canada, was 3,348 in 1985. This is a marked decrease from the 1965 consumption of 4,076 annually, when the population was also much smaller (Corelli, 1987:26).

The U.S. pattern is very similar. According to the U.S. Department of Agriculture, the yearly per capita cigarette consumption among adults 18 years of age and over was 3,384 in 1985. In 1965, the figure stood at 4,259 (Ibid).

The segment of the population that is most susceptible to the lure of cigarettes are teenagers. Approximately 140,000 young Canadians begin smoking every year - 70 per cent are between eight and 14 years of age (Montreal Gazette, January 18, 1989:D13). In fact, according to Health and Welfare Canada in 1983, "all evidence indicates that most cigarette smoking starts during the teenage years" (Canadian Cancer Society, 1986:2).

From 1982 to 1986, the average age when people started smoking remained relatively stable at 12 to 14 for both boys and girls. However, girls between 12-14 were more likely to smoke daily than boys, and by 18-19 years of age, 37 per cent of all teenagers were daily smokers (National Program to Reduce Tobacco Use in Canada, 1987:6).

To prevent, or inhibit, teen smoking, Canada enacted the Tobacco Restraint Act in 1908 that prohibited shopkeepers from selling tobacco to anyone under 16. However, there has not been a single prosecution in the last 45 years (Montreal

Gazette, September 12, 1987:A11).

Many teenagers see smoking as emblematic of adulthood. In the United States, most smokers begin before age 19, 60 per cent by 14 years of age (Gibbs, 1988:46). The U.S. Office on Smoking and Health found that 80 per cent of smokers are addicted by 18 years of age, and 90 per cent are addicted by age 21. Studies have also determined that young females now have a higher percentage of smokers than young males (Stoffman, 1987:23-4).

In the 25 years since the 1964 Surgeon General's Report noted the relationship between smoking and lung cancer, chronic bronchitis, emphysema and coronary artery disease, further research has determined that smoking has several other negative side effects.

Cigarette smoking has also been associated with: blood vessel diseases; cancers of the larynx, pharynx, oral cavity, esophagus, pancreas and bladder; and stomach ulcers (U.S. Department of Health, Education and Welfare, 1979:121). More recently, cigarette smoking has also been determined as a major cause of strokes, as well as being associated with cancer of the uterine cervix (U.S. Department of Health and Human Services, 1989:12).

Cigarette smoking also has an extremely negative effect on pregnant women. As compared to non-smoking mothers, pregnant women who smoke have a higher rate of spontaneous abortion (miscarriage), stillbirth, premature birth and babies weighing below average at birth (with a resulting threat of disease and/or death). Also, more babies of smoking

mothers die soon after birth than do those of non-smoking mothers (Canadian Cancer Society, 1986:11), and smoking during pregnancy increases the risk of retardation of fetal growth (U.S. Department of Health, Education and Welfare, 1979:121).

Even women who are not pregnant are not immune to the risks involved with smoking. For instance, smoking is especially dangerous for women who take oral contraceptives (Montreal Gazette, November 12, 1987:B8); as well, bone loss, cancer of the cervix and a greater difficulty in conceiving all plague the female smoker (Solomon, 1987:E10).

Each year that passes brings more news of medical complications. What is also remarkable about this information, however, is that theoretically this damage is avoidable as smoking is presumed to be a voluntary act (U.S. Department of Health, Education and Welfare, 1979:122). Although that position is accurate, there is one quality that tobacco possesses that makes smoking cessation somewhat difficult.

On May 16, 1988, U.S. Surgeon General C. Everett Koop announced in the twentieth Surgeon General's Report on Smoking and Health that cigarettes are as addictive as drugs such as cocaine and heroin (Nesmith, 1988:D9).

The addictive nature of cigarettes is attributable to the nicotine that is contained in tobacco, the only plant that contains nicotine. When inhaling cigarette smoke, smokers get an instant concentrated dose of nicotine in their bloodstream (Canadian Cancer Society, 1986:17).

The presence of nicotine explains why so many people experience difficulties when trying to quit smoking. According to Surgeon General Koop, "it's hard for any smoker to quit smoking because smoke contains nicotine from tobacco, and nicotine is a very addictive drug" (Home Box Office, 1989).

People who have desperately tried to quit smoking and found they couldn't were doubtless not surprised by the Surgeon General's proclamation. As most heavy smokers already knew, nicotine's addictive qualities create a dependency - and once a tolerance level has been developed, higher doses are needed to obtain the same effect, and abstaining provokes withdrawal symptoms.

Medical researchers therefore verified what failed ex-smokers determined a long time ago - smoking is a powerful addiction. Smokers who found that they could not escape from the lure of nicotine instead sought to justify their addiction. That justification would likely take the form of "bombastic rationalizations that smoking is a matter of considered choice - and their constitutional rights" (White, 1988:47).

Unsuccessful ex-smokers are not the only ones who attempt to justify their involvement with tobacco in the face of such damning evidence. The tobacco industry also has to contend with the negative health effects related to smoking. Not surprisingly, the industry is not in accord with the notion that smoking is hazardous to one's health. Stoffman has noted that: "Refusing to accept the steadily growing

mountain of research connecting smoking to more than a dozen fatal diseases has been the industry's fundamental business strategy since 1964" (Stoffman, 1987:22).

The tobacco industry's stance of disavowing medical research pertaining to smoking and health has brought tremendous wrath from anti-smoking proponents. For example, Dr. Lloyd Bartlett of the Canadian Medical Association, in making comments to a Commons committee that was studying the (then) proposed legislation banning tobacco advertising, said tobacco industry executives must be either ignorant, stupid or dishonest (Montreal Gazette, January 22, 1988:B1).

The Non-Smokers' Rights Association also takes issue with the tobacco industry's position regarding smoking and health. In joining the criticism of the tobacco industry, it quotes a report by the U.S. Surgeon General: "In truth, the attack upon the scientific and medical evidence about smoking is little more than an attack upon science itself" (Ibid).

If the tobacco industry has been unable to formulate a connection between smoking and health, however, insurance companies have had much less difficulty in accepting the evidence that non-smokers are likely to live longer than smokers. Many life insurance companies therefore offer reduced life insurance policy premiums for non-smokers (Canadian Cancer Society, 1986:12). A pamphlet published by the Allstate insurance company states: "Years of medical research have made it common knowledge that non-smokers are a better life insurance risk than smokers. At Allstate we recognize this fact and therefore offer lower premiums to

non-smokers."

Ironically, even the Eagle Star insurance company, which is owned by the world's largest tobacco company, BAT Industries PLC, offers discounts to non-smokers based in no small part on evidence that the non-smoker's lifespan is about eight years longer than the lifespan of an average smoker (Stoffman, 1987:28).

However, it may take more than reduced life insurance premiums to keep the non-smoking community happy.

Research shows that second-hand smoke has harmful effects on non-smokers. And the non-smokers, no longer a silent majority, view tobacco smoke as a pollutant of their air (Canadian Lung Association, 1987).

Second-hand smoke, also referred to as passive smoking, involuntary smoking or sidestream smoke, refers to the act of inhaling smoke in smoke-filled atmospheres by people who don't smoke, as well as simply inhaling the smoke from someone else's cigarette or cigar. These people are inhaling smoke that has not been drawn through the cigarette. Undiluted sidestream smoke contains much higher percentages of tar, nicotine and noxious gases than the smoke exhaled by smokers that is filtered by their lungs (Canadian Cancer Society, 1986:21).

The effects of being exposed to second-hand smoke are dramatic. "Second-hand tobacco smoke is a dangerous substance...there is a significant correlation between exposure to passive smoke and an increased evidence of lung cancer" (Canadian Lung Association, 1986).

The eighteenth annual Surgeon General's Report was the first to address the harmful effects of "passive" smoke on non-smokers. Along with causing a variety of discomforts such as eye irritation, headaches, nasal difficulties, coughing and nausea, Surgeon General Koop concluded in 1986 that non-smokers could get lung cancer simply by living or working with cigarette smokers (Montreal Gazette, December 17, 1986:A1).

In summarizing the advances in knowledge of the health consequences of smoking, the 1989 Surgeon General's Report states that "research in the present decade has established that involuntary smoking is a cause of disease, including lung cancer, in healthy non-smokers" (U.S. Department of Health and Human Services, 1989:20).

Tobacco smoke has also been found to be dangerous to people with certain kinds of heart disease; some people experience breathing difficulties and for others allergic reactions; non-smoking wives of cigarette smokers have an increased risk of lung cancer; children living with either one or both parents who smoke have more adenoid and tonsil operations than do the children of non-smokers, as well as double the amount of bronchitis or pneumonia during the first year of their life than children in non-smoking households (Canadian Cancer Society, 1986:21-2).

Of course, these kinds of horror stories generate substantial worries for the health of non-smokers, who no longer view smoking simply as a nuisance, but rather as a major health concern both at home and in the workplace

(Canadian Lung Association, 1986; Canadian Cancer Society, 1986:21).

The fascinating irony of the entire second-hand smoke controversy must be that the smoke from the burning end of a cigarette "has higher concentrations of cancer-causing and other noxious compounds" than the mainstream smoke which is inhaled by the smoker. For instance, there is double the amount of tar and nicotine in sidestream smoke as compared to mainstream smoke (Canadian Lung Association, 1987).

The tobacco industry, perhaps recognizing that non-smokers shouldn't be subjected to the discomfort and/or pain as well as the harmful effects caused by second-hand smoke, but more likely in an attempt to "dampen non-smokers' vehemence over secondary smoke in the air from cigarettes," has now produced a "smokeless cigarette" (Montreal Gazette, July 30, 1988:D10).

Developed by the R.J. Reynolds Tobacco Company, the smokeless cigarette heats tobacco rather than burning it, therefore it produces no ash, no odour and practically no smoke from the lit end. Health experts, however, have dismissed it as "just another gimmick to throw a smokescreen over the tragic truth about smoking" as well as likely to cause drug dependence on nicotine (Montreal Gazette, September 15, 1987:A1).

Aside from developing smokeless cigarettes, the tobacco industry's position on second-hand smoke is similar to other smoking and health related matters: challenge the medical research, and attempt to avert the public's attention to

other matters.

For instance, in responding to the correlation made between cigarette smoke and people suffering from "sick building syndrome" (ie. sore eyes, nose and throat), Jacques LaRiviere of the Canadian Tobacco Manufacturers' Council said that inadequate ventilation, due to poor design or poorly maintained ventilation systems, is usually the culprit. He cites the example of a U.S. hospital where dead rodents were found in the ventilation system, which, he concluded, was "more of a health hazard than cigarette smoke" (Dunn, 1987:E3).

Dead rodents or not, the ever-increasing number of indictments made against cigarette smoking by medical researchers is proving to be a major problem for smokers and the smoking industry alike.

Smokers are now faced with the knowledge that their nicotine induced habit is not only killing them, but those around them. And the tobacco industry is faced with the unenviable challenge of promoting a product that is the leading cause of preventable death in North America.

The Surgeon General's assessment that nicotine is addictive verified what many health experts had previously determined. However, the attention and publicity that the Surgeon General's findings generate at a time when smoking is being restricted in the workplace, public places and on public transportation, intensifies the public scrutiny that today's smokers must endure (Brody, 1988:C6).

These growing restrictions, along with medical research

that produces more and more harrowing findings, further contribute to the labelling of the smoker as a social deviant.

Chapter 5

Public Smoking

There was a time, not so very long ago, when a smoker could savour a cigarette or a cigar after a particularly enjoyable meal at a fine restaurant; could smoke, if necessary, packs of cigarettes while nervously rooting for the home team at the stadium; or maybe enjoy a cigarette while reading a good book in the public library.

But that was then. Today, the act of smoking in public places in many cities, states and provinces has been outlawed. Smoking has been legally defined as deviant behaviour in public places, the workplace and on public transportation. This chapter will review the modern-day legal difficulties associated with smoking in public: the legal definition of the smoker as deviant.

PUBLIC PLACES

Governments have taken it upon themselves to enact legislation that effectively bans smoking in a variety of public places. Perhaps the city that has garnered the most attention over its no-smoking policies is New York City. As one of the world's largest cities, New York is constantly scrutinized for its high crime rate, economic problems and the like. The city's no-smoking legislation is no exception.

Signed into law in January, 1988, the Clean Indoor Air Act forbids smoking in large retail stores, schools, hospitals, banks and the assembly areas of sports arenas and

theatres. As well, smoking is restricted in bus and train terminals, convention halls and the lobbies of theatres, arenas and hotels. Also affected are larger restaurants that now must reserve at least half their seats for non-smokers (Montreal Gazette, January 8, 1988:D14).

Shortly after the law took effect on April 6, 1988, it appeared as though smokers in New York City were learning to live with the new restrictions placed on their lifestyle:

> Like a puff of smoke, a way of life in New York City has begun to disappear as smokers comply, sometimes grudgingly, with the city's new law that severely limits smoking in most public places. From hotel and bank lobbies to restaurants, offices and other places of business, lighting up now means looking for signs describing where smoking is legal and where it is not (Marriott, 1988:J11).

New York authorities are using monetary penalties to dissuade people from smoking in the aforementioned public places. People who smoke where forbidden can be fined $50, while businesses that fail to comply with the law's terms can be fined $100 for the first offence, and from $200 to $500 consequently (Montreal Gazette, January 8, 1988:D14 and Baker, 1988:25). However, enforcement in a city the size of New York may be tricky, since only five or six health officers will be assigned solely to smoking enforcement (Montreal Gazette, January 8, 1988:D14).

Although New York City's no-smoking regulations may generate the most publicity, New Yorkers can not boast that they are the first to legislate against smoking in public places.

In 1975, Minnesota became the first state to pass a statewide Clean Indoor Air Act, which limited smoking in

public to designated areas. By 1987, 40 additional states and at least 300 municipalities had enacted a variety of anti-smoking laws (Baker, 1988:25).

The toughest policy regarding no smoking in public places is not to be found in New York City, but in the small township of Waterford, Minnesota. The town, population 488, has become a battleground in the increasingly spirited fight over smoking. for in Waterford, smoking is banned outdoors: "No smoking on public property anywhere, from the six-stall parking lot next to town hall to the tiny, roadside park two blocks away...(however), with no township police force and no specific penalty attached to the smoking ban, enforcement is still up in the air" (Montreal Gazette, April 8, 1987:A16).

Across the Atlantic, similar tough sanctions on public smoking are found in Spain, a country that has one of Europe's heaviest concentration of smokers. Spain has banned smoking in most public places, including shops, schools, hospitals, theatres, elevators, food-processing areas, and places where pregnant women work and travel. Although restaurants and bars are not affected by the decree, they can set their own rules. And the penalties are stiff, with fines of up to $1 million U.S. for companies found in violation, and up to $40 for individual violators (Montreal Gazette, April 16, 1988:I5).

At home, the Province of Quebec has also adopted tough measures against smoking in public places. Quebec's anti-smoking law, Bill 84, came into effect on January 1, 1987, with the objective to "regulate the use of tobacco in

certain public places to ensure better protection for the health and well-being of non-smokers." The law bans smoking in all public buildings, as well as areas such as libraries, meeting halls, elevators, classrooms and conference rooms. The law also prohibits smoking in hospitals, schools, sports facilities, religious premises, courthouses, cultural or artistic areas, day-care centres, medical waiting rooms, nursery schools, ambulances, city buses and Metro cars. Fines for disobeying the law range from between $20 to $200 for violating certain sections of the law, and between $50 and $1,000 in other circumstances (Quebec, National Assembly, 1986: Chapter 13).

Quebec's Bill 84 was the first provincial legislation of its type passed in Canada, and it restricts smoking in some 30,000 public buildings across the province (Dunn, 1987:E3 and Montreal Gazette, January 6, 1987:A3).

However, Bill 84 allows municipalities to prohibit smoking in public places within their jurisdiction, and also, it does not apply to commercial establishments (Metcalfe, 1988:G3). These two features, consequently, have enabled several Quebec municipalities to construct their own no-smoking bylaws, many of which do take into account commercial establishments.

Many of Montreal's West Island suburban municipalities have taken the initiative to formulate their own no-smoking policies. Lachine and Pointe Claire are credited with being the trend setters in drafting legislation, and since March, 1988, Pierrefonds, Dollard-des-Ormeaux, Beaconsfield,

Kirkland, Dorval and Ste. Genevieve have also adopted no-smoking bylaws. Baie d'Urfe and Senneville have plans to enact bylaws shortly (Ibid). Other Montreal suburbs, namely Westmount, Cote St. Luc and the Town of Mount Royal also have no-smoking bylaws (Johnston, 1989:A1).

Pointe Claire's bylaw 2404, for instance, aims to respect "the protection of non-smokers in certain public places," deeming it "desirable for the health, safety and welfare of the residents of the City of Pointe Claire to regulate the use of tobacco." Bylaw 2404 restricts smoking in the service area of a commercial establishment; waiting lines in such public places as banks, post offices and restaurants; prohibits smoking in elevators and stairwells and on escalators in all buildings; and forces merchants to post signs that indicate a prohibition on smoking. Depending on the infraction, fines range between $20 to $1,000 (Pointe Claire, Bylaw 2404).

Pointe Claire's bylaw also imposes smoking restrictions in restaurants, an area not covered in Bill 84. Bylaw 2404 stipulates that a restaurant must reserve a minimum of 25 per cent of its seating capacity for non-smokers by March 7, 1988, and increase the size of the non-smoking area proportionately until July 1, 1993, when 50 per cent of the seats are reserved for non-smokers (Ibid).

Lachine's no-smoking regulations aim to protect the rights of non-smokers in private businesses that deal with the public, such as boutiques and grocery stores. However, the bylaw has been designed in such a manner that it allows

merchants themselves to decide whether they want the rules to apply in their establishments (Buchignani, 1987:I3).

Ironically, amidst the large number of its suburban municipalities enacting no-smoking legislation, the City of Montreal has procrastinated over the issue. However, executive committee chairman Michael Fainstat has said a draft bylaw regarding smoking in public places is being prepared for the fall of 1989 (Johnston, 1989:A4).

Other Canadian towns and cities have also taken measures to adopt no-smoking policies. For instance, in Etobicoke, Ontario (a Toronto suburb), it is illegal to light up in banks, financial institutions and municipal offices, unless a smoking area has been designated (Thompson, 1986:A6).

In Markham, Ontario (another Toronto suburb), smoking is banned in all retail shops, municipal offices, elevators and all public places via a bylaw similar to Toronto's. However, the Markham bylaw is considered to be more harsh than Toronto's in that it bans smoking in public areas of all malls. According to Markham town solicitor Robert Swayze, Markham's bylaws are the most restrictive in Canada, and he feels that "soon there will be no smoking anywhere here" (Godfrey, 1988:38).

One public place that has received a fair amount of publicity regarding smoking is the sports facility. Does a paying customer attending a sporting event have the right to light up? Although the smoker may have had that right at one time, the answer today is "no."

Toronto's SkyDome, which opened in June, 1989, does not

allow smoking in the seating areas. Smoking is only permitted in concourse sections of the stadium, as well as restaurants and bars (Toughill, 1987:A6 and Brehl, 1988:A17).

When Montreal's Olympic Stadium debuted for the 1976 Summer Olympic Games, smoking in the stands was permitted. However, a (sometimes) retractable roof, coupled with Quebec's Bill 84, changed that. Beginning with the 1987 baseball season, Olympic Stadium patrons who chose to smoke in the stands were doing so illegally.

Although smoking in Olympic Stadium is still permitted in the corridors under the stands, people who choose to smoke in the stands face fines ranging from $20 to $200 - however, enforcement appears to be a problem, as Stadium ushers will not be dispatched as "smoking police" (Montreal Gazette, April 24, 1987:A3).

Perhaps somewhat predictably, the Stadium's no-smoking policy produced an acrimonious debate on the subject, mainly concerning enforcement, as evidenced by the following series of letters to the editor that appeared in The Montreal Gazette:

> At the Expos game July 21, 1987, a cigar smoker was bothering people. An usherette said she couldn't do anything. A security person told me to change my seat. The head of security told me to call the police...a law unenforced is no law at all (Chandler, 1987:B2).

> The enforcement of the no-smoking policy inside the Olympic Stadium is somehow non-existant...the policy seems to work on the honour principle rather than by direct enforcement, with predictable results (Costantini, 1987:B2).

> If you can't stop for three hours, just don't go to the ball game. Smokers - and I am one - have no right to force this foul pollution on non-smokers and make them breathe it (Barnoff, 1987:B2).

> Those of us who don't smoke also pay as much for our baseball tickets as those who do. We are entitled to watch the game in comfort, not choke on the smoke of those around us...we should use common sense and enforce "no smoking" regulations in all public places (Finestone, 1987:B2).

Calgary's 1988 Winter Olympics carried the concept of smoking as deviant behaviour to its ultimate conclusion: for the Calgary Games could also be referred to as the "smoke-free" Olympics. A global viewing audience would have been hard-pressed to spot a smoker at any of the events, as officials were concerned both about the health factor as well as the negative public perception of smoking.

The Canadian Council on Smoking and Health suggested a "smoke-free" Winter Olympics, proposing smoke-free areas in the athletes' village, during transportation to events and during the running of events. The Council's intention was to provide "a healthful environment for athletes, officials and spectators" (Newbery, 1987:F2).

According to the health minister at the time, Jake Epp, the comprehensive Olympic smoking ban was implemented to shield athletes from second-hand smoke that could impair their performances. The no-smoking blanket covered athletes, coaches and officials who were not allowed to smoke in their residence rooms or cafeterias; smoking was not permitted in areas where athletes competed; as well as in Olympic cars and buses. The no-smoking rules were also extended to Olympic facilities for volunteers and the media, and medical centres (Hanna, 1988:D3).

Health factors were not the only considerations when formulating the Calgary Games' no-smoking policy. Also

playing a role was the ever-darkening public image of cigarette smoking.

Dr. John Read, a Calgary resident who is studying the effect of the ban, was concerned with society's perception: "If television cameras caught people smoking along a course or at the bottom, it would not project a healthful image, and the dignity of the Games certainly would be compromised" (Ibid).

As will be documented in the following sections dealing with smoking in the workplace and on public transportation, there are fewer and fewer sanctuaries where smokers can light up. Negative social perceptions coupled with strong government policies that severely restrict where smoking is permitted combine to make the act of smoking an act of deviance.

SMOKING IN THE WORKPLACE

The proliferation of no-smoking workplaces is apparently favourable to a large portion of Canadian society: a Southam News - Angus Reid poll conducted between November 26 and December 4, 1987, discovered seven out of 10 Canadians favour a ban on smoking in public buildings (Montreal Gazette, December 16, 1987:B1).

Examples of no-smoking workplaces throughout North America are numerous. No particular industry appears exempt from a no-smoking workplace policy, nor any particular region of the country, as illustrated by the following examples:

Manitoba Hydro's 300 offices became smoke-free in 1985; Boeing of Canada Ltd. has banned indoor smoking at its Winnipeg plant; Maritime Telephone and Telegraph's 4,000 employees in Halifax are not allowed to smoke in the office; and Nygard International, Canada's largest women's sportswear manufacturer, made its position on smoking very clear when guests at the opening of the firm's new corporate headquarters in Toronto were told that if they wanted to smoke, they would have to do so outdoors (Corelli, 1987:26).

Federal civil servants aren't immune to smoking restrictions either. Effective January 1, 1989, federal government employees, along with those who work in federally jurisdicted areas such as banks, may not smoke on the premises (Semenak, 1989:A?).

The workplace is probably the most explosive atmosphere in which to enforce no-smoking regulations, for it is where smokers and non-smokers have been on each other's nerves for years. Needless to say, new smoking restrictions are simply adding fuel to this on-going fire. Signs on office walls that may have once smiled THANK YOU FOR NOT SMOKING now snarl at the smoker with IF YOU SMOKE, DON'T EXHALE. With an ever-increasing number of firms asserting strict no-smoking rules, millions of smokers are suddenly finding themselves faced with the unenviable options of having to quit (either the job or the cigarettes), sneaking a puff in a secret corner, leaving the premises whenever necessary, or asking for a transfer to the washroom, assuming that smoking is permitted there (Gibbs, 1988:43).

One of the toughest anti-smoking legislations in North America concerning the workplace is in effect in Toronto. Under a new bylaw, all Toronto companies must devise a smoking policy with its employees. If smokers and non-smokers can't agree on a compromise solution - or if just one worker requests it - the entire workplace can be deemed a non-smoking area (Montreal Gazette, March 3, 1988:B1).

No-smoking policies in the workplace have also become commonplace in the United States. Seventeen states have banned smoking in offices and other workplaces, and regulations that limit smoking in federal government offices to specially designated areas took effect in 1987 (Corelli, 1987:26).

In fact, more than half of American companies have some form of restriction on smoking at work, and some ban it altogether. Then there are others such as Turner Broadcasting in Atlanta and Northern Life Insurance in Seattle that simply refuse to hire smokers. Most companies require that common areas like hallways, lounges, conference rooms, rest rooms and open office space be smoke-free (Gibbs, 1988:43).

Several questions immediately spring to mind regarding this relatively new social phenomenon of the smoke-free workplace. For instance, why has the workplace become off-limits to smokers? How are employers implementing this new policy? What sort of precautions are being taken to ensure that smokers are not tempted to light up at work ie. what's the penalty for smoking? And, how may this affect the social atmosphere in the workplace between employees and

management, as well as between employees?

There are a variety of explanations as to why employers now believe that a smoke-free workplace is necessary. According to Ron McClory, a spokesman for the Canadian Cancer Society:

> Employers are blowing an extra $1,500 to $3,000 a year for each worker they allow to smoke on the job...if for no other reason, it makes economic sense to ban smoking in the workplace...non-smokers tend to be sick half as often as smokers; air circulation equipment needed to clean smoky air is six times as expensive; offices where smoking is permitted tend to have lower morale and therefore produce less; and furniture and equipment replacement is more rapid in a smoking environment (Montreal Gazette, October 30, 1986:G13).

There is also damage to computer disc drives, which are highly sensitive to smoke, and to add insult to injury, McClory said that "smokers waste enough time each day in 'the smoking ritual' - searching for matches, lighting cigarettes - to account for 18.2 days a year" (Ibid). Another estimate is that smokers spend up to 35 minutes a day in the act of smoking (Bryan, 1986:C1), which would amount to 17.2-eight hour workdays a year (assuming an average employee has 25 vacation days/statutory holidays).

The concerns of, and for, non-smokers are also apparent in this area. As David Ellis wrote in a letter to the editor published in The Montreal Gazette:

> The argument that non-smokers should not have to breathe dangerous substances on the job is a valid, non-paternalistic reason for restricting smoking to separately ventilated areas. Telling employees that they may not smoke at their desks is not the same as telling them to go jogging or to eat more fibre; it is more like banning the playing of loud radios in offices where it would reduce the productivity and comfort of the majority (Ellis, 1988a:B2).

Of the assorted reasons cited for banning smoking in the workplace, health concerns, consideration for others and economic losses are the three reasons mentioned most often.

In Etobicoke, Ontario, where no-smoking in all city buildings is the city administration's eventual goal, the medical officer of health there said "it will certainly save the city a lot of money in absenteeism and ill health...studies show smokers are off work more than non-smokers" (Thompson, 1986:A6).

Health and Welfare Canada compared people who never smoke to those who smoke 23 or more cigarettes per day, and concluded that non-smokers were "significantly less likely to have had disability days in the last two weeks than the latter group" (Health and Welfare Canada, 1981:48).

The logic behind smoke-free areas at The Toronto Star, according to president David Jolley, is because he feels "non-smokers are becoming quite upset over being exposed to the discomfort of smokers, plus there's a fair concern about health" (Toronto Star, May 30, 1986:A20).

If certain public places should be deemed smoke-free, as noted in the previous section, then, some claim, the workplace should be smoke-free as well. "If it is important to protect non-smokers during the relatively brief periods they spend in restaurants and libraries, surely it is essential to protect them during the much longer intervals they must spend earning their living" (Ellis, 1988:B2).

Implementing a no-smoking policy in a workplace is much more complex than simply posting "no smoking" signs

throughout the building. Companies are reacting to the challenge in a number of ways, some perhaps more sympathetically than others.

For instance, 1,300 plant employees at the Chicago-based building products firm USG Acoustical Products Co. have been offered two alternatives: quit smoking, or be fired. Management plans pulmonary function tests to ensure there isn't any cheating. Workers there use minerals to manufacture insulation and acoustical tiles, and officials cite recent studies showing the potentially harmful effects of inhaling minute quantities, particularly for smokers (Corelli, 1987:27).

For the most part, however, companies do appear to attempt to aid the smoker in what can only be considered a difficult transition. In a situation such as this, tactfulness is paramount.

Most employers have found that there are many advantages in helping employees to stop smoking. Many companies absorb all or at least some of the costs involved with stop-smoking programs such as cessation programs, hypnosis therapy, special classes and self-help kits. Workers appear to welcome the assistance, feeling that employers are taking a sensible and understanding approach to their dilemma, and as well, appreciate the further motivation to quit (Gibbs, 1988:44).

Two Toronto newspapers utilized somewhat different strategies in an attempt to help employees stop smoking, perhaps indirectly reinforcing the notion of contrast in editorial style between the two dailies. The Toronto Star

planned to help employees quit smoking by sponsoring programs offered by the Ontario Heart and Lung Association (Toronto Star, May 30, 1986:A20), whereas The Toronto Sun offered $400 to any employee who declared they would quit smoking January 31, 1986, and continue to abstain throughout the rest of 1986. The Toronto Sun's assistant personnel director, Barb Owen, said the stop-smoking program had effectively been made into a contest, and not only were smokers participating, but that it had also become a morale booster in some departments (McLeod, 1986:49).

At The Montreal Gazette, what can be referred to as a "gradualist approach" was implemented. In August, 1986, smoking areas were made available to employees, and those who felt the urge to smoke were asked to use those areas. On January 1, 1987, The Gazette building became non-smoking for all employees, with the exception of designated smoking areas which were either vented directly to the outside or controlled with air-filtering systems. On January 1, 1988, smoking in the building was restricted solely to an area behind the cafeteria. Finally, on May 1, 1988, The Gazette was off-limits to smoking. Gazette publisher Clark Davey said that he doesn't consider a smoke-free building "to be draconian. I think we're doing it for their own good. I think everybody - including smokers - is entitled to a smoke-free workplace. Given the number of hours people work now, or are in the building - the two things might be different - I don't see it as an intolerable hardship" (Peritz, 1988:A4).

A recent development in The Gazette's no-smoking saga

indicates that somebody must have had a change of heart: the smoke-free building concept was discontinued in the spring of 1989, and smokers have been allowed to again smoke in a particular section of the cafeteria. A variety of possibilities have surfaced concerning this reversal in policy: successful lobbying by smokers; management dismayed by the amount of time employees spent outside the building performing the unproductive act of smoking; or perhaps a cafeteria staff that may have complained about a lack of business (and therefore revenue) due to Gazette employees spending their lunch hours in nearby restaurants where smoking is permitted.

A smoking committee was formed at The Gazette, and it "is working on a recommendation to management for company assistance to employees who enter and complete successfully formal stop-smoking programs" (Davey, 1988).

The aforementioned Etobicoke no-smoking endeavour employed a strategy similar to The Toronto Sun in that a certain financial inducement was made available.

In Etobicoke, city workers who signed up for the $75 stop-smoking program offered by the York-Toronto Lung Association were required to pay for the five-week program, but if they were successful in quitting smoking, then the city would repay them the $75 (Thompson, 1986:A6).

The old cliche of "where there's smoke, there's fire" could be modified somewhat to "where there's smoke, there are profits to be made," especially in the case of smoking in the workplace. Stop-smoking clinics and seminars have existed for

some time, most often aimed at helping individual smokers. However, the phenomenon of the smoke-free workplace has led the smart stop-smoking clinics to broaden their services. For instance, a Smokenders Canada Ltd. promotional flyer states: "If You're an Employer...Sponsor a Smokenders Seminar and watch your employees become healthier, happier and more productive. Hundreds of companies from every industry have discovered Smokenders' proven results." Also, a Smokenders ad that appeared in The Montreal Gazette, June 17, 1987, appealed to all companies' common characteristic - making a profit: "Smokenders' Corporate Services Can Help Clear The Air - We're the experts in smoking cessation. And that's worth a lot to your bottom line."

Some members of the private sector are concerned that policies restricting smoking in the workplace should be implemented before the government does it for them. According to Ghislain Dufour, president of the Conseil du patronat du Quebec (Quebec's largest employers' group), "it will only be a matter of time before the state intervenes by imposing more severe laws than we would like" (Dunn, 1987:E3).

In order to assist companies that are interested in restricting the use of tobacco products in the workplace, Edmund Tobin of the Montreal law firm Piche Emery suggests six considerations that if followed, should place companies on safe ground if challenged by smokers who felt their rights were being violated:

(1) there must be a valid reason in regards to the company's operations for introducing smoking

restrictions;

(2) where possible, areas where smoking is allowed should be permitted by companies;

(3) companies should discuss beforehand with employees plans to restrict smoking;

(4) sufficient advance notice of smoking restrictions should be provided to employees in order to best prepare themselves;

(5) the no-smoking policy must be enforced uniformly;

(6) constant reminders and notices should be made identifying no-smoking areas (Ibid).

However, whether companies choose to follow Tobin's more moderate approach towards a no-smoking workplace, or adopt the more dramatic policy of a "no-smoking anywhere" approach, the issue of enforcement is difficult.

The dramatic increases in no-smoking workplaces represent another crucial factor in the public definition of smoking as deviant behaviour.

SMOKING ON PUBLIC TRANSPORTATION

Sweeping reforms, mostly introduced in Canada since 1986, have effectively banned smoking on the most popular forms of public transportation: airplanes, buses, subways and commuter trains.

The focus of this section will be mainly centered on the legislation as it has affected smoking on aircraft, but also included will be the changing pattern of whether or not to

allow smoking on other forms of public transportation.

In Canada, regulations that were approved by the federal cabinet in 1987 banned smoking on airline flights that are two hours or shorter in duration. Also affected by the ban are longer flights that make stops every two hours or less (Montreal Gazette, September 16, 1987:B1 and Semenak, 1987:A3).

In the United States, the Senate approved a ban on smoking on domestic flights that have a duration of 90 minutes or less. The two-year restriction covers 72 per cent of all U.S. flights, and similar to the Canadian regulation, was passed in 1987 (Montreal Gazette, October 30, 1987:D16 and Adams and Mayfield, 1987:1). It is important to note, however, that when the law came into effect in April, 1988, the smoking restriction on flights of 90 minutes or less had been increased to two hours or less (Baker, 1988:25 and Gibbs, 1988:44).

The American and Canadian regulations may well have been influenced by a U.S. Natior l Academy of Sciences' study entitled "The Airliner Cabin Environment: Air Quality and Safety." Requested by the U.S. Congress and published in 1986, the study recommended the U.S. government ban smoking on all domestic airline flights, concluding that smoke in large jetliners is detrimental to health and safety. The Academy concluded after an 18-month examination of smoking in planes that ventilation systems are not capable of removing most exhaled smoke from cabin air, and even though smoking passengers are segregated, non-smokers are still exposed to

so much smoke that it may endanger their health (Montreal Gazette, August 13, 1986:H10 and Montreal Gazette, September 2, 1986:C16).

Even before the Canadian and U.S. regulations were passed in 1987, however, airlines were independently implementing their own measures that greatly restricted smoking on airplanes, over and above the smoking/non-smoking seating concept.

Air Canada was the first major North American airline to introduce non-smoking flights. In April, 1986, Air Canada inaugurated a no-smoking policy on flights in the busy commuter service linking Montreal - Ottawa - Toronto (although New York Air banned smoking on a limited number of short-haul flights several years ago, the project was abandoned after only a few months) (Ravensbergen, 1986:D7; Montreal Gazette, August 13, 1987:A16; Montreal Gazette, July 21, 1988:A1; and Marketing, September 5, 1988:8).

In 1987, Air Canada's no-smoking policy was extended to Montreal - New York and Toronto - New York flights and to one-half of its flights to Vancouver from Calgary and Edmonton. In October of 1987, Air Canada introduced one or two 15-minute no-smoking periods on flights longer than three hours (Montreal Gazette, July 21, 1988:A1).

Effective September 3, 1988, Air Canada expanded its smoke-free policy to all its North American scheduled and charter flights including those to Mexico and Hawaii. This policy meant that more than 80 per cent of Air Canada's 475 daily flights are non-smoking, leaving only flights to Europe

and the Caribbean with smoking permitted (Montreal Gazette, September 3, 1988:A9 and Marketing, September 5, 1988:8).

Canadian Airlines International has also taken an aggressive non-smoking stand. In April, 1988, it announced a smoking ban for all flights, regardless how long, in Canada or in the United States. Another Canadian airline, Wardair, bans smoking in all business-class cabins except on some flights to Europe (Montreal Gazette, July 21, 1988:A1 and Montreal Gazette, September 3, 1988:A9).

If Air Canada is the no-smoking trend setter among Canadian airlines, then Minneapolis-based Northwest Airlines is the American equivalent. It was the first U.S. airline to implement a smoking ban on all domestic flights, thereby going beyond the aforementioned U.S. governmental regulations (Montreal Gazette, July 21, 1988:A1). The Northwest ban applies to all flights within the United States, as well as flights to Canada and the Caribbean. Smoking will continue to be allowed, however, on overseas flights and flights to Hawaii (Montreal Gazette, March 24, 1988:A2).

Northwest's position is even more dramatic when one considers that the other major American airlines - Delta, United, American and Continental - agreed to obey the law banning smoking on flights under two hours, but said they had no plans to ban smoking on longer flights (Ibid).

A question that comes to mind is why would an airline take it upon itself to implement even greater measures than have been stipulated by the government - why take the no-smoking policies further than they have to? In a nutshell,

it boils down to customer preference.

For instance, Air Canada's decision to make more than 80 per cent of its 475 daily flights smoke-free was made after customer preference studies (Montreal Gazette, July 21, 1988:A1).

According to Air Canada spokesperson Esther Szynkarsky, Air Canada receives approximately 25 complaints per 100,000 passengers, which amounts to about 3,000 a year. The number one complaint concerns smoking, with delays and disappointments about meal service next. And contrary to popular belief, complaints do work, as Air Canada introduced no-smoking flights partly because of the volume of anti-smoking letters (Gersovitz, 1987:I11).

Air Canada receives many compliments for offering no-smoking flights, and airline official Don Roy said that customer reaction has been "overwhelmingly favourable to non-smoking flights" (Gersovitz, 1987:I11 and Montreal Gazette, March 28, 1987:A2).

As well, Air Canada's public-affairs manager for Quebec, Denis Couture, said that Air Canada's success with its smoke-free flights shows there is public support for the government imposed regulations: "Non-smokers are a majority now and we have to offer them the services they want" (Semenak, 1987:A3).

The fact that non-smokers form a majority is applicable to society as a whole, as well as to Air Canada's customers. According to Couture, smokers took up roughly half the seats on Air Canada flights a decade ago. Now, they occupy only

between 25 and 30 per cent (Ravensbergen, 1986:D7).

Canadian Airlines conducted a survey that showed 80 per cent of its passengers were in favour of its smoking ban (Montreal Gazette, July 21, 1988:A1).

And at Northwest, the smoking ban was instituted because it was what passengers wanted. "Northwest says a recent survey of its business travellers revealed that 85 per cent favour a smoking ban. Even 35 per cent of the smokers responding to the survey supported flights without cigarettes" (Montreal Gazette, March 24, 1988:A2).

Health considerations were also a factor at Northwest, coupled with customer preference. "A survey of hundreds of its frequent flyers showed that 90 per cent prefer a no-smoking seat. Passengers argue that after being aboard an airliner for a few hours everyone in effect is seated in the smoking section; even passengers seated far forward sometimes complain of headaches and watery eyes and blame the limited air circulation in airline cabins" (Gibbs, 1988:44).

The Canadian Cancer Society also affirms that smoking is a health hazard on airplanes. Society president Don Insley has said that smoking is a potential health hazard to crew members as well as frequent flyers because of the poor ventilation on aircrafts (Montreal Gazette, November 18, 1986: A2).

The tobacco industry has responded by citing studies that show the impact of smoke on non-smokers in airplanes is negligible (Montreal Gazette, September 2, 1986:C16), and in a show of protest, Canada's four major tobacco companies

launched a boycott in April, 1986, against Air Canada when that airline introduced its no-smoking policies. At least two of those companies have since ended their boycotts (Ravensbergen, 1986:D7).

However, three Dallas businessmen intend to see to it that smokers are afforded a viable alternative to a non-smoking airline, and hope to turn a profit on their scheme at the same time. "The Great American Smokers' Club" is a charter air service aimed specifically towards smokers. For a $25 annual membership fee ($40 for a family), smokers may join the club that has flights originating from Dallas' Love Field. As the service is for members only, a government ban would not apply, and in a total reversal from the trend being set by both airlines and government, smoking will be allowed at all times aboard the aircraft, except during take-offs and landings and in the washrooms. Although non-smokers will be allowed on-board, they must be tolerant. According to president Glenn Herndon, the Club acts as an alternative for smokers: "To fly on a plane nowadays, smokers are treated like second-class citizens and must sit in the back rows. When the smoking ban begins, we want to offer smokers an alternative - and, hopefully, make some money" (Kelly, 1988:I10).

Although the majority of this section has been devoted to smoking on airplanes, it is also important to review current regulations towards smoking on other forms of public transportation.

In Montreal, smoking is not permitted on commuter

trains, buses or subways. In 1987, fines for smoking ranged from $100 to $150, but despite that financial deterrence, smoking is still the number one offense related to passenger comfort on Montreal's public transportation system according to Abe Limonchik, a member of the Montreal Urban Community Transit Commission's (MUCTC) board of directors. The number of infractions of the MUCTC bylaw prohibiting activities that disturb passenger comfort rose by 46 per cent in the first four months of 1987 over the corresponding period in 1986. According to Limonchik, the vast majority of chose infractions involved smoking (Montreal Gazette, August 3, 1987:A3).

The Toronto Transit Commission (TTC) extended its prohibition on smoking to all passenger facilities within the rapid transit system on September 8, 1987. In a letter to the editor published in The Toronto Star, the chief general manager of the TTC, Al Leach, said he felt the methods used in enforcing the bylaw were effective:

> Since the smoking ban came into effect, TTC's security staff have been averaging about 1,000 cautions a month to riders found smoking...We have found that it is not necessary to lay charges. In all cases a caution to smokers has been sufficient, and once reminded of the bylaw, they have complied (Leach, 1987:A14).

On a national scale, Gray Coach Lines Ltd. banned smoking on all its buses, except privately chartered coaches, on June 1, 1986 (Montreal Gazette, May 8, 1986:B6).

There were 33 U.S. states that prohibited smoking in trains, buses, streetcars or subways in 1987 (Corelli, 1987:26). And in 1988, California became the first state to

outlaw smoking on all public transportation (Baker, 1988:25).

Smoking restrictions on virtually all forms of public transportation have come about due to growing health concerns and public pressure. The growing health concern is due primarily to the increased amount of research that has been conducted in regards to cigarette smoking. Of course, for as long as smoking has been allowed on public transportation there has been a threat to a person's health - it's not as though a person's health has only begun to be jeopardized in the past few years. Rather, it has only been during the past few years when concern over health, correlated with a greater awareness of the ramifications of cigarette smoking, has intensified to the point that the "no-smoking domestic flight" has replaced the no-smoking section.

Also, the increased social stigma attached to smoking has no doubt led many airlines to adopt no-smoking policies. As is apparent throughout this chapter, there is a "new non-smoking social order," an order that has made smoking a deviant behaviour, be it in public places, the workplace, or on public transportation.

Chapter 6

Advertising

Advertising's role in selling cigarettes, as well as shaping society's perceptions towards smoking, has taken as many twists and turns as the cigarette itself - a roller coaster ride of public acceptance and subsequent fall from grace.

This chapter will examine cigarette advertising in the following areas: its colourful and often turbulent history; current forms in which cigarettes, as well as cigarette smokers, are presented in advertisements; an analysis of the on-going debate concerning the effectiveness of cigarette advertising along with opposing points of view regarding the banning of cigarette advertising; and also a review of the Canadian government's controversial Bill C-51 (1988) which prohibits the advertising of tobacco products.

HISTORY

Shortly before World War I, the hard sell of cigarettes took shape. A mass market was created when smoother tobacco brands were introduced, enabling smokers to inhale without coughing. However, the brands all tasted virtually the same - therefore, in order to sell cigarettes, manufacturers had to establish identities as well as markets for their brands (Rothenberg, 1988:4-6). As early as pre-World War I, the concept of brand loyalty was taking shape, and would continue to be a primary area of cigarette advertising for several

decades.

Cigarette promoters attempting to make cigarettes a masculine product discovered a godsend with the outbreak of World War I. Advertising campaigns during this period equated cigarette smoking with patriotism and masculinity, featuring soldiers in trenches with cigarettes between their lips (Starr, 1980:49).

This notion of equating cigarettes with particular identities is apparent with the Lucky Strike campaign during the 1920s. Lucky Strike, considered to be the most aggressively marketed brand during the '20s, was associated with high society, Hollywood and heroism. Testimonials were offered by everyone from actress Constance Talmadge to a freighter's crew that had saved a troubled ship at sea (Rothenberg, 1988:4-6).

Throughout the 1920s and 1930s, cigarettes were endorsed by famous athletes as well as movie stars, who would credit part of their success to smoking a particular brand of cigarette (Henningfield, 1985:59).

America's newest mass medium - national magazines - was providing cigarette manufacturers with tremendous advertising exposure throughout this period. A flood of advertising appeared in magazines depicting smoking as attractive. This was especially pertinent for men, who began to take up smoking in increasing numbers partly due to the images and symbolic values regarding cigarettes that these ads invoked: sexual appeal, sophistication and pleasure (Varied Directions Inc., 1987).


Life
Capt. George Fried,
"Reach for a Lucky
instead of a sweet"
"REACH FOR A LUCKY INSTEAD OF A SWEET."
"It's toasted"
No Throat Irritation-No Cough
Life
heroic rescuer says:
LUCKY
STRIKE
CIGARETTES

However, romance and excitement were not the only themes in cigarette advertising that appeared during the 1920s and 1930s. Another goal of cigarette manufacturers was to assuage worries that cigarettes were unhealthful. In a 1927 advertisement, opera diva Ernestine Schumann-Heink asserted that Lucky Strikes soothed the throat. A Lucky Strike ad appearing in 1932 was even more to the point, claiming: "More than 200,000 physicians...stated that Luckies are less irritating to the throat than other cigarettes" (Rothenberg, 1988:4-6).

Cigarette advertising during World War II again linked men with masculinity. Camel and Chesterfield ads featured both soldiers and sailors: a Chesterfield ad proclaimed "Keep 'em Smoking. Our Fighting Men Rate the Best!", and a Camel ad boasted "Camels are the Favorite! In the Army...In the Navy...In the Marine Corps...In the Coast Guard!" (Starr, 1980:51).

Just as national magazines were the new sensation of the 1920s and 1930s, by the time the 1950s rolled around there was a new form of mass communication that was generating tremendous excitement: television.

By the early 1950s, television had entered millions of North American homes. Among the many messages being conveyed on television commercials was that cigarettes were as much a part of American life as apple pie.

Although prominent entertainers such as Marlene Dietrich, Lucille Ball and Ronald Reagan were once featured in magazine ads, celebrities were now promoting cigarettes on

The Dramatic Actress, Nazimova

says, "I have found my favorite cigarette, the Lucky Strike"

Lucky Strikes are mild and mellow—the finest cigarettes you ever smoked. They are made of the finest Turkish and domestic tobaccos, properly aged and blended with great skill, *and* there is an extra process in treating the tobacco. "It's toasted"—no harshness, not a bit of bite.

"It's toasted"

Your Throat Protection

the television screen. For instance, Charlton Heston promoted Camel. And another Hollywood star, Steve McQueen, endorsed Viceroy, calling it "the thinking man's filter and the smoking man's taste" (Home Box Office, 1989).

Famous TV couples also got into the act. Lucille Ball and Desi Arnaz, in their television roles as Lucy and Ricky Ricardo, encouraged female viewers to give their husbands a carton of Philip Morris cigarettes. Even the stone-age couple from Bedrock, Fred and Wilma Flintstone, could be seen promoting Winston.

Smoking was even advertised as <u>good</u> for the health: "you'll feel better." Consider the following voice-over for a Philip Morris ad:

> When you change to Philip Morris, you'll feel better...coughs due to smoking disappear; parched throat clears up; that stale, smoked-out feeling vanishes...recommended by eminent nose and throat specialists to patients who smoke...whether you've been smoking for 10 months or 10 years, something wonderful happens - you'll feel better when you change to Philip Morris (Ibid).

There is no question that TV commercials and magazine advertising helped shape North Americans' attitudes towards smoking. In fact, by the late 1950s, there were more people smoking than ever before, and the preferred choice of the smoking population was the Marlboro brand. The Marlboro appeal was not directly attributable to a better taste over other brands: rather, Marlboro advertising had made the inspired connection between cigarettes and a very powerful and dynamic image - the quintessential American symbol of freedom and self-sufficiency as personified by the "Marlboro Man." (Varied Directions Inc., 1987).

Although the cigarette manufacturers played a key role in having their products gain tremendous popularity during this time, the advertising industry's involvement was even more important. The Madison Avenue advertising machine could be considered as the real stimulus for the cigarette's fashionableness throughout this period.

For the most part, tobacco manufacturers, and by extension the advertising industry, had free reign through the decades when it came to advertising cigarettes. That free reign came to an abrupt halt, however, with the release of the Surgeon General's Report on Smoking and Health in 1964. It didn't take long afterwards for various restrictions to set in.

The tobacco industry was quick to develop a self-enforced advertising code, prohibiting appeals to youth, unsubstantiated health claims and smoking's depiction as necessary in order to have "social prominence, distinction, success, or sexual attraction." The industry maintained that this code kept "literally hundreds of advertisements and commercials from public exposure" (Nuehring and Markle, 1974:523).

However, that's not to say that this self-enforced advertising code was depriving media outlets such as television and magazines of millions of dollars in advertising revenue. On the contrary, during this same period, the tobacco industry increased advertising expenditures by 18 per cent. This increase was primarily to offset the impact of the warning labels that cigarette

packages were required to carry as of July 1, 1965 (Ibid).

Due to the increasing publicity concerning the health hazards associated with smoking, a series of advertising bans took place in Canada beginning in the early 1960s. In 1960, cigarettes could only be advertised on radio and television after 9:00 p.m., when it was assumed that most children would not be exposed to such advertising; in 1963, a British Columbia broadcaster became the first in Canada to ban all tobacco advertising; in 1969, the Canadian Broadcasting Corporation (CBC), prohibited all cigarette advertising on television; and in 1972, Canada's major cigarette producers voluntarily renounced all broadcast advertising (Singer, 1986:163).

In 1968, anti-smoking commercials appeared on television for the first time. As of January 1, 1971, cigarette commercials appeared on U.S. television and radio for the last time.

The removal of cigarette commercials from U.S. radio and television involved many different groups. In fact, the National Association of Broadcasters had agreed to eliminate cigarette commercials altogether by 1973 and not 1971. However, an astounded tobacco industry counteracted by requesting anti-trust immunity, as well as suggesting to remove all network advertising by September, 1970 - a plan that would deprive broadcasters of over $200 million. The plan backfired, however, when the U.S. Senate Commerce Committee, in order to avoid giving anti-trust immunity to the tobacco industry, voted to ban all cigarette commercials

on radio and television as of January 1, 1971 (Nuehring and Markle, 1974:516-7).

In Britain, the ban on cigarette advertising on television preceded the U.S. decision by six years. The tobacco industry has been forbidden by law to advertise on television in Britain since 1965, "following the failure of the tobacco companies to honour a voluntary agreement aimed at protecting children by not advertising before 9:00 p.m." (Ledworth, 1984:173).

The victims of the 1971 U.S. legislation may not have been the tobacco industry itself, however, but rather the advertising industry and the television and radio broadcasting companies. In dollar values, prior to 1971 cigarettes were the most advertised product on television, outdistancing the second most advertised product (automobiles) by $65.3 million, per year. Broadcasters saw a potential $194 million per year go up in smoke, so to speak, and the Madison Avenue advertising industry suffered even more, possibly losing up to 25 per cent of their pre-1971 business (Nuehring and Markle, 1974:523).

With television and radio now out of bounds, tobacco companies intensified their focus on the print media. So much so that newspaper, magazine and outdoor advertising expenditures in the U.S. had tripled from $67.3 million in 1970 to $200.2 million in 1971. However, 1971's $200.2 million advertising outlay was 28 per cent below the total advertising expenses in 1970 (Morris, 1972:43).

THE PRESENT

The nature, or "look," of cigarette advertising throughout the 1970s and 1980s has to a certain degree remained static. Confined to advertising in magazines, newspapers and on billboards, the tobacco industry has flirted with both "high-involvement" ads as well as "low-involvement" advertising, however, it has rarely strayed too far from the objective of enticing people to take up smoking, or at least to switch to their brand.

Confrontational advertisements appeared in the late 1970s. These ads would dispute medical research on tobacco and health, or would promote a peaceful co-existence between smokers and non-smokers. According to John F. Banzhaf III, the executive director of the anti-smoking lobby group Action on Smoking and Health (ASH), these ads were a result of a public opinion survey by the Roper Organization that indicated that the greatest threat facing the tobacco industry was the anti-smoking movement (Rothenberg, 1988:4-6).

However, according to David G. Altman, a researcher at Stanford University who has studied the history of American cigarette advertising, "high-involvement" ads such as confrontational ads that dispute medical evidence on tobacco and health, or ads that promote a co-existence between smokers and non-smokers, for the most part have been replaced by "low-involvement" ads that attempt to deal with ambiguous images that relate to health and vitality while staying clear

of tobacco and health issues per se (Ibid).

There are exceptions to this theory, however. In 1988, the Philip Morris magazine ran an ad in the October edition of "Atlantic Monthly," reminding people that smokers are an economic force in the travel industry, with over 24 million American smokers travelling throughout the summer months and keeping the travel industry of America occupied. As well, the huge R.J. Reynolds Tobacco Company ran a full-page text-only ad in the October 18, 1985 edition of "USA Weekend" magazine appealing for a truce between pro- and anti-smoking forces.

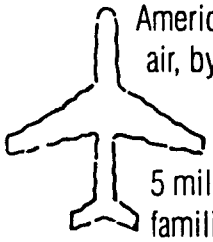
The Altman study concluded that overt health claims peaked in 1979, when low tar and nicotine was emphasized in 82 per cent of the magazine ads. By 1985, this theme was featured in only a quarter of the ads and at the same time, images of smoke virtually disappeared from cigarette advertising (Ibid).

Regardless what kind of techniques cigarette advertising employs, the bottom line is that American tobacco companies spend about $2.5 billion annually on marketing (Ibid). In Canada, pre-Bill C-51 amounts spent on advertising and promotion were approximately $80 million (Sutter, 1988c:3).

This money is being directed towards the following pursuit: "(the tobacco industry) ... to recruit new smokers to replace those who've kicked the habit or died. Because few adults take up smoking, that means recruiting children and adolescents" (Stoffman, 1987:23).

In no uncertain terms, cigarette advertising has two goals: to allay smokers' fears with messages of health and

More than 24 million of this country's smokers will travel this summer. Make room, America!



America's smokers travel by land, by air, by sea. They travel far and wide. During the summer, resort hotels alone will welcome 5 million smokers and their families. More than 7.5 million will travel the U.S.A. More than 2 million will head overseas. And 5 million will take to the air. Spring, summer, winter and fall, smokers keep the travel industry of America occupied.

The American Smoker- an economic force.

PHILIP MORRIS
MAGAZINE

Presented by Philip Morris Magazine in the interest of America's 55.8 million smokers.

Source The Roper Organization

vitality, and to attract and entice "what it considers vulnerable segments of the market" (Rothenberg, 1988:4-6).

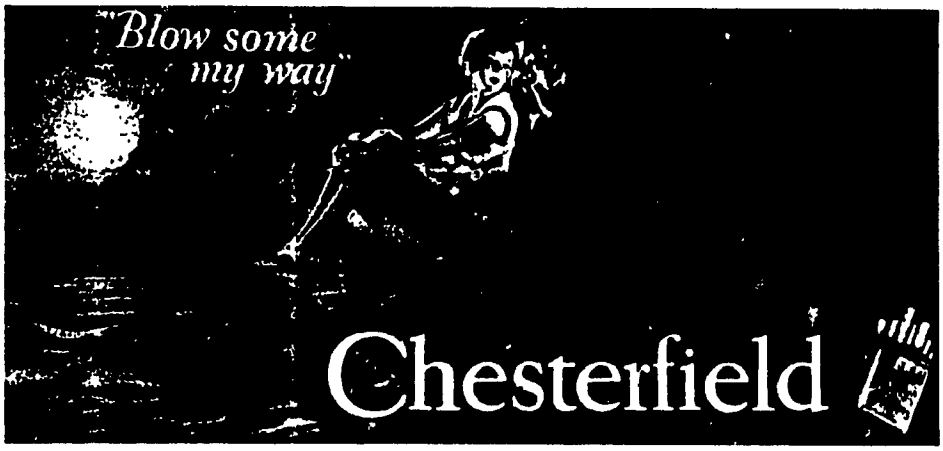
Supporting the "vulnerable segments of the market" theory is the fact that most of today's cigarette advertising is directed at young people and women (Ibid).

Cigarette companies have tended to re-use a handful of tried and true themes since consumers first began walking miles for Camels seven decades ago. In 1926, for instance, Chesterfield cigarette advertisements featured a woman telling her male companion to "Blow some my way" (Ibid).

Cigarette advertising has skillfully created images that a mass population has been able to either identify with or aspire to. Recent successful examples include the rugged Marlboro man and the liberated Virginia Slims woman who has come a long way, baby. Both characters can be perceived as role models for men or women.

What is remarkable, though, is the complete about-face that today's popular personalities have taken regarding cigarette smoking in comparison to popular figures of an earlier day. Today's personalities are much more likely to support the anti-smoking lobby, whereas many celebrities in the 1930s and 1940s would appear in advertisements stating that smoking had contributed to their success (Henningfield, 1985:107). A good example of this is actress and model Brooke Shields, who appeared in one anti-smoking ad with a cigarette sticking out of each ear.

By extension, it is virtually impossible to fathom any popular entertainer endorsing a particular brand of


"Blow some
my way"
Chesterfield

cigarettes in 1989. The thought of Clint Eastwood promoting Winston, Tom Cruise hyping Vantage or Luciano Pavarotti endorsing Salem is simply inconceivable. And the thought of cartoon characters (ie. the Flintstones with Winston) promoting cigarettes, with the obvious impact these characters have on youngsters, is frightening.

THE QUESTION OF ADVERTISING EFFECTIVENESS

The tobacco industry vehemently denies that cigarette advertising is aimed at recruiting new, young smokers. Rather, it claims that the purpose of cigarette advertising is to maintain and increase market share among existing smokers. This claim is viewed with great skepticism outside the tobacco industry, and is a major reason for the introduction of Bill C-51 in Canada: legislation that bans all tobacco advertising (Stoffman, 1987:23).

Advertising effectiveness and the merits of banning cigarette advertising represent the next focus of attention in this chapter, followed by an analysis of the controversial Bill C-51.

Similar to the smoking/anti-smoking debate, the issue of cigarette advertising effectiveness has produced two divided camps.

On the one side is the group that adamantly believes that cigarette advertising is essential in order to increase market share by appealing to smokers to switch brands. On the other side is the group that maintains cigarette advertising

serves no other purpose than to create new markets, especially among young people.

The Canadian Tobacco Manufacturers' Council, along with a group of allies ranging from the Smokers' Freedom Society to the New Brunswick Flue-Cured Tobacco Growers' Association, purchased a series of full-page ads that appeared in newspapers across Canada. These ads denounced (the then impending) Bill C-51, as well as addressed various issues, among them the purpose of cigarette advertising:

> Today's tobacco advertising is designed to encourage current smokers to try one brand over another. That's all advertising does. It doesn't get people to start smoking and it doesn't get them to smoke more...advertising also doesn't encourage young people to start smoking.

A similar message was conveyed in a pamphlet published by the Tobacco Council entitled "And now, a few words about cigarette advertising," that echoed the previously stated philosophy and added that cigarette advertising is intended to assist the consumer in selecting a particular brand or service, however, only once the purchasing decision has already been made (Dunn, 1986:A8).

The view that tobacco companies advertise in order to best compete for market share is a view held by some, but not many. It can be argued that especially in a stagnant market, the tobacco industry's goal is to at least protect, and hopefully increase, their share of the market (Drouin, 1987:C3).

Groups that are opposed to cigarette advertising will concede that one function of advertising is to attempt to maximize sales by maintaining and improving the market share.

However, another purpose is to expand the market. In the case of the tobacco industry, expanding the market means appealing to the many people, especially children, that do not presently smoke and might be persuaded to start (Chapman, 1985:84).

For tobacco advertising to be effective, logic dictates that it might do four things: "(1) influence smokers to change brands; (2) influence smokers to smoke more; (3) influence non-smokers to start smoking; (4) discourage or delay smokers from giving it up" (Ibid).

It is probably the third aspect, "influence non-smokers to start smoking," that is most problematic, especially when those non-smokers may be children or teenagers.

In order to appeal to this segment of the population, tobacco advertising tends to cultivate the notion of smoking as being acceptable, desirable and glamourous, as well as perpetuating the idea that smoking is in fact "'grown-up,' 'relaxing,' 'sociable,' or 'attractive'" (Ibid:79-81).

Anti-smoking groups maintain that in recent years, cigarette advertising has increasingly been aimed at minors. In fact, there are those who claim that tobacco companies place profits ahead of public interest, employing flashy campaigns that make youngsters equate smoking with a glamourous lifestyle (Dunn, 1986:A1).

This view is supported by Stanford University research that found that approximately 30 per cent of cigarette advertising in magazines, and 40 per cent of advertising in youth-oriented publications, feature themes related to risk

and adventure (Rothenberg, 1988:4-6).

The theory that cigarette advertising attempts to switch smokers from one brand to another, in other words to redistribute the market share of different brands, is essentially a non-issue as all sides are in agreement on this point.

The contentious issue is whether cigarette advertising influences non-smokers, thereby increasing demand. "One can not promote cigarettes without implicitly promoting smoking, so the industry's argument that its advertising is only solely concerned with brand promotion is specious" (Chapman, 1985:89).

However, tobacco companies are unflinching in their position that cigarette advertising is designed principally to sway existing smokers away from competing brands. And to support this notion, the tobacco industry often refers to the effects of advertising bans on cigarettes in other countries, bans they claim have not been successful in curtailing smoking (Dunn, 1986:A1). In other words, it is not the advertising, they claim, that encourages people to begin smoking.

By 1982, there were 47 countries that had laws or voluntary agreements that restricted certain kinds of advertising. Of these 47 countries, 21 had banned tobacco advertising altogether, including Finland, Iceland, Italy, Norway, Singapore and Yugoslavia (Chapman, 1985:80).

Again referring to the series of ads sponsored by the Canadian Tobacco Manufacturers' Council, among others, the

tobacco industry states that in countries where either a total or partial ban on cigarette advertising has been instituted, consumption did not decline and in some instances it actually increased.

Dr. Neville Lefcoe, a medicine professor at the University of Western Ontario as well as a long-time anti-smoking advocate, maintains that cigarette advertising has virtually no effect in encouraging people to begin smoking, citing smoking rates in communist countries, despite a lack of advertising, as among the world's highest (Montreal Gazette, October 30, 1986:G13).

Supporting this theory are the results of a survey conducted by the New York-based International Advertising Association (IAA). Published in 1986, the survey found that there was no relationship between advertising bans and smoking levels. In eight eastern European countries where tobacco advertising has been prohibited for at least 14 years, cigarette consumption has risen by 20 per cent in Hungary, and 66 per cent in Yugoslavia. Also noted in the survey was that in Italy, where tobacco advertising has been forbidden since 1962, cigarette consumption has doubled in the past 20 years (Corelli, 1987:25).

The IAA disputes claims that cigarette advertising increases consumption as well as encourages young people to smoke. Citing a United Kingdom study that maintains the effect of media advertising for cigarettes is "statistically insignificant, regardless of the definition of the advertising variable and of the time period chosen," the IAA

concludes that a total cigarette advertising ban would result in "economic and social hardships and nothing else" (Dunn, 1986:A8).

Canadian public opinion seems to agree with the IAA findings. A Southam News - Angus Reid poll conducted between November 26 and December 4, 1987, found that 51 per cent of Canadians polled thought tobacco ads should be banned, but only 40 per cent felt that such action would in fact reduce smoking (Montreal Gazette, December 16, 1987:B1).

Although the IAA's research provides pro-cigarette advertising forces with plenty of ammunition, there are still those who vigourously maintain that restricting cigarette advertising equals a decline in cigarette smoking.

Jake Epp, for instance, the author of Bill C-51, maintains that restricting advertising would reduce smoking as well as discourage people from starting to smoke. And Neil Wickham, a consumer products analyst with the Toronto stockbroking firm of Walwyn Stodgell Cochran and Murray, feels that cigarette advertising works, and due to its absence a decline in sales would accelerate (Corelli, 1987:25).

The tobacco industry has a third perspective regarding cigarette advertising. Along with denying claims that cigarette advertising is aimed at youngsters, and dismissing the contention that a ban on cigarette advertising results in a decrease in smoking, the tobacco industry also maintains the right to freedom of speech. The argument is that if a ban is instituted on advertising cigarettes, a product that can

be legally bought and sold, then it will be only a matter of time before other products that have been judged as detrimental to one's health, such as coffee, sugar and fats, will also be prohibited from being advertised (Drouin, 1987:C3).

Further to that point, they contend that restricting cigarette advertising is a denial of free speech, and in consequence, denies people the opportunity to make up their own minds.

John C. Luik, a teacher of medical and advertising ethics at the University of Manitoba, is very much opposed to restrictions on cigarette advertising. What he finds extremely offensive about such limitations is that by restricting free speech, "it inevitably demeans us all by proclaiming that we are insufficiently rational to understand the consequences of our actions, to weigh certain benefits against certain harms" (Auf der Maur, 1987a:A2).

Those who favour cigarette advertising restrictions denounce the freedom to advertise position by citing the health hazards involved with smoking, stating advertising promotes the use of nicotine, an addictive drug that induces a strong dependency and that will prematurely kill one user in four (Chapman, 1985:83).

There are those who contend that if cigarette advertising is disallowed, then so too should advertising for other articles that are detrimental to one's health such as sugar and coffee. However, those in favour of restrictions make the claim that "these products can endanger health, but

they are dangerous only when abused. Tobacco is the only advertised product which is hazardous when used as intended" (Ibid).

The argument that cigarettes are a legal product to sell and therefore should be legal to advertise is also met with wrath. Opponents to cigarette advertising label this as "a convenient ruse to justify the perpetuation of tobacco advertising," claiming that this approach ignores tobacco's unenviable position as "the leading cause of death in the developed world" (Ibid:82-3).

The anti-cigarette advertising forces adamantly insist that "if tobacco was invented in a laboratory tomorrow, with all the information known about it available, no government would permit it to be sold" (Ibid:82). If cigarettes did not exist, although we would surely invent them, they would never become available, at least not in a legal marketplace (Goodman, 1987:10A).

Ultimately, it is the health issue that appears to be the rallying cry of those opposed to cigarette advertising. "The bottom line in all argument about alleged freedoms, the role of the state, and tobacco advertising is the appalling, unnecessary and totally avoidable health consequences of smoking" (Chapman, 1985:94).

In an editorial, The Montreal Gazette used similar logic in defending its decision to cease publishing cigarette advertising. The newspaper maintained that free speech is not absolute, citing libel, hate propaganda, and false news or false advertising as forms of speech that are forbidden. The

editorial then goes on to point out that a ban on the advertising of a product that is dangerous, addictive and causes fatal illness is "clearly justifiable, in the name of the public interest" (Montreal Gazette, April 27, 1987:B2).

The International Advertising Association, obviously taking a somewhat different stand, insists that an advertising ban would not deter people who choose to smoke from smoking, and manufacturers would continue churning out cigarettes. The IAA feels that the only things an advertising ban accomplishes is to deny media potential advertising revenue, "smoke out" smaller companies, stabilize the market and thwart competition (Dunn, 1986:A8).

However, even in the United States, a country renowned as a symbolic cornerstone for the right to free speech, a bill is pending before Congress that proposes to ban all print advertising for tobacco products. This is perceived to be an especially ambitious proposal, for even though cigarette commercials have been banned from radio and television since 1971, cigarettes remain as one of the most heavily marketed consumer products in the United States (Gibbs, 1988:48).

Banning cigarette advertising in the U.S. means that the free speech rights in the First Amendment are invoked. The Supreme Court has deemed advertising to be a form of commercial speech, which has some protection under the First Amendment. The U.S. government has substantial authority over radio and television airwaves, however, as they are considered to be a limited public resource, the elimination

of cigarette commercials was far less problematic. Much less control is exercised over newspapers and magazines, meaning any attempt by Congress to restrict cigarette advertising in this form of media would imply a tougher constitutional question. Nonetheless, the court suggested in 1986 that advertising of harmful activities could be banned (Lacayo, 1988:50).

Advocates of the proposed U.S. ban on all forms of cigarette advertising and promotion perceive it as a more effective method than warning labels in order to stop companies from appealing to new and young smokers to replace those who have either died or quit. "A ban on advertising is an imperfect and unstable compromise. But the alternative is grim in its consistency: the seduction of yet another generation into disease" (Goodman, 1987:10A).

BILL C-51

Having presented the various issues involved with cigarette advertising, it is now important to take a look at Bill C-51, as well as its implications.

Bill C-51 is the federal government's decision to ban the advertising and promotion of tobacco products, as well as set specific guidelines for labelling and monitoring of tobacco products (Statutes of Canada, Ch. 20, 1988:393).

Also known as the Tobacco Products Control Act, it became law in June, 1988, and took effect January 1, 1989. The Act's purpose is "to provide a legislative response to a

national public health problem of substantial and pressing concern" (Ibid:394).

The Act sets forth to achieve three major goals:

> (a) to protect the health of Canadians in the light of conclusive evidence implicating tobacco use in the incidence of numerous debilitating and fatal diseases; (b) to protect young persons and others, to the extent that is reasonable in a free and democratic society, from inducements to use tobacco products and consequent dependence on them; and (c) to enhance public awareness of the hazards of tobacco use by ensuring the effective communication of pertinent information to consumers of tobacco products (Ibid).

In order to achieve these goals, the Tobacco Products Control Act stipulates the following: all tobacco advertising in magazines and newspapers must have stopped as of January 1, 1989; outdoor advertising should be phased out in stages by 1991; point-of-purchase material ie. displays, is permissible only until 1993; and tobacco companies will be allowed to continue brand sponsorships, however spending is to be frozen at 1987 levels. New sponsorships using a company's full corporate name are permissible (Ibid:394-7).

Also included in Bill C-51's legislation is the requirement that new, mandatory health warnings be placed on all cigarette packages and packages of cigarette tobacco as of October 31, 1989, with one of four rotating messages that caution: that smoking is the major cause of lung cancer; smoking is a major cause of heart disease; it may create complications during pregnancies; and smoking reduces life expectancy (Canada Gazette, 1989:60).

This is a far stronger warning than the present one that reads: "Health and Welfare Canada advises that danger to

health increases with amount smoked - avoid inhaling." This was drawn up by the tobacco industry, and has been in effect since 1972 (Montreal Gazette, October 26, 1988:B1).

Cigar and pipe tobacco packages must warn that these products can cause cancer, and that neither cigars nor pipe tobacco are safe alternatives to cigarettes. Smokeless tobacco packages must state that this product can cause mouth cancer (Canada Gazette, 1989:61-2).

According to Rob Cunningham, a spokesperson for the National Campaign to Pass Bill C-51, Canada's Bill C-51 also carries with it a few "firsts." For instance, Bill C-51 represents the first complete tobacco advertising ban in North America. Canada is also the first non-Scandinavian western nation to implement such a policy (Sutter, 1988a:2).

Bill C-51 also brings with it massive monetary repercussions for a variety of organizations. Tobacco advertising is estimated to have generated $13 million annually for Canadian newspapers and magazines; sports and cultural organizers of such events as horse racing, tennis, golf, theatre and opera stand to lose an estimated $10 million of tobacco industry support annually (Corelli, 1987:26-7).

For instance, one magazine that has been hit hard by Bill C-51 is Maclean's - it stands to lose about $1 million in advertising revenue (Doyle, 1987:2). The Montreal Gazette, which beat the gun and decided not to accept tobacco advertising as of January 1, 1988, lost about $300,000 a year (Montreal Gazette, October 31, 1987:A1).

According to Jacques LaRiviere, a spokesperson for the Canadian Tobacco Manufacturers' Council, the three major tobacco companies, between them, will be forced to spend at least $12 million redesigning cigarette packaging due to the new health warnings (Sutter, 1988c:3).

However, according to Neil Collishaw, the head of Health and Welfare's Tobacco Products Unit, the tobacco industry will still be ahead of the game financially, as its $80 million advertising expense will no longer be a concern (Ibid).

Reaction to Bill C-51 has been predictably mixed, with two sides being drawn in similar fashion to other areas of the smoking debate.

Employing several of the points raised in the previous section pertaining to cigarette advertising effectiveness, opponents of Bill C-51 maintain the law violates freedom of speech guarantees, especially in terms of offering information about a legal product; that it promotes censorship; and that it will restrict attempts to maintain a share of the market (Corelli, 1987:24 and Wallace, 1987:28).

The aforementioned series of full-page newspaper ads purchased by the Canadian Tobacco Manufacturers' Council in collaboration with a variety of groups, at a cost of $800,000, protested Bill C-51's ban on tobacco advertising and promotion as well as sponsorship restrictions. Of the three ads, one concentrated on the benefits of tobacco brand sponsorship, while the other two dealt with freedom of expression as well as the right to advertise (Gibbon,

1987:D5).

These ads urged readers to write in to obtain further information. In return, people received a seven-page document detailing the "Implications of Bill C-51" and "Statements critical of Bill C-51."

The "Implications of Bill C-51" section deals with the concept of tobacco being a legal product; the spectre of censorship; freedom of speech; the economic impact of less advertising for media outlets, advertising agencies, etc.; the deprivation of sponsorship towards sporting and cultural groups; stifling product development; and advertising not increasing the size of the market nor influencing children or adults to take up smoking, rather, only serving to switch smokers from one brand to another.

The "Statements critical of Bill C-51" come from a wide variety of individuals, primarily media representatives denouncing the restriction placed upon them in terms of advertising a legal product, restricting freedom of speech, denying people the right to make their own decision and questioning what product may be restricted next.

At the same time, the Non-Smokers' Rights Association as well as the National Campaign to Pass Bill C-51 also published full-page ads in Canadian newspapers, giving their side of the story along with urging the government to be strong and not be swayed by tobacco companies' interests.

The tobacco companies are complaining the loudest over Bill C-51. Rothmans Inc. announced July 20, 1988, that it would challenge the law in the Federal Court of Canada, and

Imperial Tobacco Ltd. and RJR - Macdonald Inc. filed separate lawsuits in Quebec Superior Court on September 1, 1988, in an effort to overturn Bill C-51 (Bryan, 1988:D5).

The companies are basing their arguments on the following points: (1) regulation of commerce, including advertising, is primarily a provincial responsibility; (2) an advertising ban violates the constitutionally guaranteed right to freedom of speech; and (3) whether or not tobacco advertising affects consumption. Industry spokesmen maintain that cigarette advertising only serves to switch smokers from one brand to another, with no impact on overall consumption. Therefore, their contention is that an advertising ban represents an infringement of freedom of commercial speech and an unjustified and unheard of trespass into the marketplace (Bryan, 1988:D5 and Sutter, 1988b:10).

These legal steps, however, have not prevented the passage of Bill C-51. Former health minister Jake Epp has referred to the Act as "progressive legislation...very much in the mood of the Canadian public" (Montreal Gazette, April 30, 1988:B9), and it has been heralded as a significant breakthrough by health groups around the world (Sutter, 1988a:2).

CONCLUSION

Although it has been only 18 years since North Americans last saw a cigarette commercial on television cr heard one on the radio, those 18 years have seen a tremendous evolution in

the perceptions of smoking.

Whereas Steve McQueen and Charlton Heston once encouraged TV viewers to patronize Viceroy and Camel, today's TV viewer is now audience to ads such as one for Northwest Airlines. Announcing that all its domestic flights would soon be smoke-free, Northwest's TV commercial showed an aircraft cabin, with a camera panning across the passengers until it stops to focus on a lonely smoker. When an announcer's voice declares the smoking ban, the passengers altogether erupt into applause, save for the smoker (Gibbs, 1988:46).

These restrictions on the advertising of tobacco products implicitly define smoking as deviant behaviour. Although highly proficient machines will continue to churn out cigarettes and people will no doubt continue to smoke them, in the absence of advertising, smoking will lose its publicly validated attraction, and it will no longer be characterized as a "normal" activity in everyday life.

Chapter 7

Economics of Tobacco

North Americans spent $49.1 billion on cigarettes in 1986 (Stoffman, 1987:25), and in Canada alone, there are roughly 60,000 people employed in the $6.4 billion a year tobacco industry: growing, selling and manufacturing its products (Wallace, 1987:28).

However, as smoking has continued to fall from grace, the economic ramifications have been quite dramatic: although tobacco corporations continue to make a "healthy" profit, they have been forced to greatly adjust to a much more different smoking climate than, say, 20 years ago; and the tobacco farmer has had to learn how to deal with the growing threat of foreclosure.

The dawning of each new day brings with it for the tobacco industry one form of bad news or another. If it's not a community introducing a no-smoking policy for public places, or one more company declaring itself "smoke-free," then it might be new medical findings implicating cigarette smoking with a serious illness. Or worse yet, the release of a new survey further reinforcing the fact that fewer cigarettes are being consumed and proportionately fewer people are smoking (Stoffman, 1987:22).

In Canada, cigarette consumption has indeed been declining. Cigarette sales peaked in 1982 at 68.1 billion and by 1986, the number had dropped to only 55.4 billion sold. According to Christopher Seymour of the Canadian Tobacco Manufacturers' Council, the 1986 total is the lowest since

1973 (Underwood, 1987:30).

Annual per capita consumption of cigarettes in Canada is also declining. In 1965, the total stood at 4,076. In 1985, the total had dropped to 3,348 (Corelli, 1987:25).

Ultimately, these statistics add up to the inescapable fact that proportionately fewer people are smoking today than during the past twenty-odd years. As detailed in Chapter 4, smoking has reached an all-time low in Canada, with an estimated 28 per cent of the 15 years of age and older population smoking cigarettes regularly (Millar, 1988:2).

The tobacco industry has been facing an uphill battle ever since the U.S. Surgeon General's 1964 Report on Smoking and Health linked smoking with lung cancer and heart disease.

However, amidst all this doom and gloom about the declining percentage of smokers, decreasing consumption and more health warnings, the tobacco industry has, perhaps contradictorily, been able to remain remarkably profitable. The six multinational corporations that control the world's tobacco trade acknowledge that the cigarette was, and remains, "the most profitable consumer product ever sold legally" (Stoffman, 1987:20).

The U.S. Department of Agriculture reported that tobacco went from being an $18 billion industry in 1978 to a $35.5 billion industry in 1987: "Some of that can be attributed to inflation, but not all, not by any means" (Montreal Gazette, June 27, 1988:D15).

Consider, for example, Tobaccoville, North Carolina. Home to a $1 billion (U.S.) RJR Nabisco Inc. plant, it along

with two other RJR plants in nearby Winston-Salem manufacture enough RJR brand cigarettes like Winston and Camel daily to encircle the globe...twice (Stoffman, 1987:20).

The tobacco industry appears to be remarkably resilient in the face of what can ultimately be considered as a no-win situation. Bombarded with strict governmental legislation, numerous health claims, militant anti-smoking factions and a declining percentage of smokers, the industry could resign itself to the prospect of a smoke-free society. However, the industry has instead aggressively surged forward: "Through imaginative economic retrenchment, particularly automation, aggressive pricing and a strong push for exports, the industry is hanging on, still pulling in good money. The pace of the retrenchment, it appears, has exceeded the slow but steady decline in tobacco consumption" (Montreal Gazette, June 27, 1988:D15).

Cigarettes have also proven to be price resistant: a 10 per cent increase in price will only cause a four per cent decrease in sales (Stoffman, 1987:22).

In 1986, Canada's four tobacco companies - Montreal-based Imperial Tobacco Ltd.; Toronto-based Rothmans Inc.; Benson & Hedges (Canada) Inc. of Montreal; and RJR - Macdonald Inc. of Toronto - recorded combined after-tax profits in excess of $150 million (Wallace, 1987:28).

However, by 1988 that group of four had whittled down to three. Imperial Tobacco Ltd. remained the industry leader with more than 50 per cent of the market; Rothmans Inc. and Benson & Hedges merged to form Rothmans Benson & Hedges,

thereby becoming Canada's second-largest cigarette manufacturer; and RJR - Macdonald is third-ranked in Canada (Bryan, 1988:D5 and Sutter, 1988:10).

Of course, there is another beneficiary of the tobacco industry's profits: the government. Caught in a rather strange tug of war, on one side the government advocates bills restricting cigarette advertising, yet also enjoys the tax money it receives through the sale of cigarettes.

In Canada, governments collect $4.1 billion annually in federal and provincial taxes. In the United States, governments collect $13 billion in taxes. Tobacco is the sixth-largest cash-crop in the U.S., and not only does it play a major role in the financial well-being of assorted southern states, but it also accounts for $60 billion of the U.S. gross national product and 710,000 jobs (Stoffman, 1987:25,28).

Indeed, one could almost assume that with all this money to be made in the tobacco industry, that a tobacco grower would also stand to benefit. However, such is not the case. Consider the following:

Federal cigarette taxes in Canada increased 179 per cent between January 1, 1980, and April 15, 1987. As well, there have been some hefty provincial increases: for instance, Ontario's cigarette taxes went up 200 per cent in the same period. From a $3 package of 25 king-size cigarettes, the federal government received 92 cents from its tax in 1987 - the farmers, on the other hand, got 6 1/2 cents (Underwood, 1987:30).

To assume that tobacco growers are content with their share of the pie would be inaccurate. In 1986, Canadian tobacco growers tried to persuade the government that a national board was necessary to represent their interests, and that receiving an additional 2 1/2 cents per pack of cigarettes would greatly assist in stabilizing the industry. The request failed (Ibid).

The future of tobacco farming is, at best, uncertain. Stated bluntly, growing tobacco has become less and less profitable, and although at one time considered to be the most prosperous of all farmers, many tobacco growers are now faced with the grim fact that the future will be a struggle, and a family tradition which once carried great pride, will be hard to continue (Ibid:31).

The decrease in the percentage of smokers coupled with an increase in government taxation has prompted many Canadian tobacco producers to consider other avenues. The number of tobacco growers in the southern Ontario region alone is now below 2,000, representing an approximate 20 per cent decrease from the 1982 figure of more than 2,500 tobacco growers. Even though a three-year, $30 million federal-provincial program has been introduced to entice farmers to switch out of tobacco and into other crops, many farmers believe that the market for other crops is saturated (Ibid:30).

The Quebec tobacco farmer has also been hard hit. In 1984-1985, 20 Quebec tobacco farmers left the business, representing 15 per cent of the total number of growers in the province (Bryan, 1986a:C1).

The tobacco growers' plight is equally apparent in the United States, where tobacco is perhaps no longer considered as a powerful industry, as it was at one time: "Over the past decade, tobacco acreage has almost been cut in half nationally, with North Carolina, the major tobacco-growing state, planting only 225,000 acres (in 1987), compared with 399,000 acres planted in 1978" (Montreal Gazette, June 27, 1988:D15).

Tobacco growers must feel the effects of a society that is increasingly butting-out, simply in terms of supply and demand. For instance, only 110 million pounds of tobacco were grown in Canada in 1987, an amount that is projected to stay constant until 1990, and is about half of the peak 230 million pounds grown in 1980 (Underwood, 1987:30).

But it is not only decreased production and government taxes that are undermining the tobacco farmer. According to one farmer in Simcoe, Ontario, what has hurt the tobacco growers most is the price they currently receive for their quota: in 1983, one pound of quota sold for $2.60; in 1987 it sold for 65 cents (Ibid).

Whereas a forced farm sale was a rare occurrence in more prosperous times, in the spring of 1987 there were as many as two a week in the southern Ontario tobacco belt, which is the largest tobacco-producing area in the country. As well, Ontario tobacco farms were worth approximately $2,500 per acre in 1984; in 1987, one real estate lawyer/tobacco grower said it was hard to find a market at $900. Coupled with the tobacco farmer's loss of revenue is a loss of pride. Once

viewed with great respect, tobacco farmers have been sucked into the cigarette controversy as the enemy, the producer of what many perceive as a cancer of society. As one farmer said, "when I got into this business 20 years ago, tobacco farmers were well-respected community leaders. Now we are just depicted as villains" (Ibid:30-1).

The tobacco industry has devised a four-part strategy that is aimed at forestalling a smoke-free society for as long as possible:

(1) deny that cigarettes are a health hazard; this tactic may deter smokers from quitting;

(2) advertise cigarettes as a glamourous product, thereby hopefully attracting new customers (this may be difficult in Canada with Bill C-51, but it is still possible in the United States);

(3) lobby governments and form political alliances; this may be the only way to avert legal restrictions on the industry;

(4) aggressively seek new Third World markets; these countries provide a wide scope for expansion due to rapid population growth and compliant governments (Stoffman, 1987:20).

However, several hurdles remain for the tobacco industry to clear if it hopes to remain at best profitable, and at worst, operative.

Although the tobacco industry is for the most part effectively counteracting the North American decline in smoking by downsizing, the fact remains that employment among

cigarette makers has dropped from approximately 7,900 in 1981 to 6,400 in 1985, a decrease of 23 per cent. And even though automation is a factor, as it has been since the 1960s, it is also important to note that cigarette production is down 12 per cent in the first half of the 1980s (Bryan, 1986a:C1).

Some forecasters have also predicted that there is a possibility of only two tobacco companies remaining in Canada in 10 years time (Ibid).

Bill C-51, according to tobacco industry leaders, will also play havoc with any effort to remain functional. The federal legislation that bans the promotion of tobacco products has the industry worried that it "will cripple their attempts to retain their share of a shrinking market - and result in staff layoffs" and according to Jean-Louis Mercier, the chairman of Imperial Tobacco and head of the Canadian Tobacco Manufacturers' Council, "if we are not allowed to advertise, factories will close and jobs will be lost" (Wallace, 1987:28).

Also disturbing for the tobacco industry must be the results of a Gallup nationwide poll conducted in early May, 1987, that found 34 per cent of Canadians support a ban on the sale of tobacco products (Montreal Gazette, May 25, 1987:A1).

The tax bonanza that cigarettes reputedly are to governments has also come under scrutiny of late. Two studies that were, ironically, commissioned by the tobacco industry in an attempt to prove that tobacco is necessary to the economy, "conceded that if all smokers were to quit, their

money would be spent on other products and would generate comparable amounts of income and employment" (Stotfman, 1987:25).

Consider as well the other governmental costs that can be attributed to smoking. For instance, in 1982, the cost to society in terms of premature death, disability, hospitalization, physician services and fires due to tobacco use was estimated to be $7.1 billion - that represents $2.7 billion more than 1982's annual consumer expenditures for tobacco products (National Program to Reduce Tobacco Use in Canada, 1987:9).

And finally, the beleaguered tobacco farmer, who has met with opposition and/or a lack of support from the public, the tobacco companies and the government. As one tobacco farmer said of his all-too-gloomy future, "we're virtually dead now...even those growers who are left will be gone when we hit smoke-free Canada" (Underwood, 1987:31).

Despite the high profits currently being made in the tobacco industry, the long-term future appears bleak, at least in North America. The ultimate threat to the tobacco industry's future is the aging of today's society, as well as the increased public awareness of the health dangers, government legislations and the increasing stigmatization of the smoker.

Although the tobacco industry is a profit-making machine today, its economic prospects look glum for the future (Hadekel, 1988:F1).

Chapter 8

Smokers vs. Non-Smokers

The battle between smokers and non-smokers can be reviewed in the sociological context. To do so, it is important to analyze this relationship in three areas: firstly, the issues, namely health (ie. second-hand smoke, air pollution), and rights; secondly, the modes of conflict, primarily law, media, medical and violence; and finally, the multiple dimensions of the conflict such as class, race and gender.

THE ISSUES

There are two major issues involved in the controversy between smokers and non-smokers: the first is the health danger associated with second-hand smoke (as detailed in Chapter 4); the conflict of rights between the non-smokers' perceived right to enjoy a smoke-free environment and the smokers' right to smoke a legal product is the second.

More and more evidence is accumulating that the smoke generated by a cigarette can be harmful to the health of a non-smoker.

For instance, non-smokers who have been exposed to tobacco smoke have been found to have measurable levels of nicotine in their blood and urine. People with particular diseases may be especially affected by second-hand smoke. As well, breathing in second-hand smoke can induce allergic reactions; aggravate asthma and bronchitis conditions; and

lead to dangerous carbon monoxide levels. Infants exposed to parental smoking risk increased respiratory infections (U.S. Department of Health, Education and Welfare, 1979:124).

Bleda and Sandman (1977) examined the immediate consequences of exposure to second-hand cigarette smoke on a number of different people in various situations and circumstances:

> According to the 'discomfort' notion, tobacco smoking may be considered a pollutant that contaminates ambient air and is an irritant to non-smokers and smokers alike...second-hand cigarette smoke could be viewed as a negative reinforcer that elicits an unpleasant feeling state, which, in turn, mediates a variety of approach-avoidance responses to others present in the situation (Bleda and Sandman, 1977:452-3).

It is precisely with this sort of ammunition that the anti-smoking forces do battle. The entire concept of the danger of second-hand smoke appears to galvanize the non-smoking community.

New York City mayor Ed Koch, a strong proponent of non-smokers' rights and a key figure in New York's Clean Indoor Air Act, feels "there is no one more enraged than a non-smoker forced to take in second-hand smoke" (Gibbs, 1988:43).

It may be premature to conclude that the evidence against second-hand smoke is definitive. However, regardless how conclusive the research is, there is a further perspective to be considered:

Boston University sociologist Peter L. Berger hesitates to judge the evidence on passive smoking, as he feels that it appears to be "much, much weaker" than the research on active

smoking. However, he maintains the reason why second-hand smoke has become such an important factor "is not because of the weight of the evidence but because of the ideological usefulness of the idea" (Mansnerus, 1988:4-6).

If this is indeed the case, that anti-smokers have grabbed on to the "ideological usefulness" of second-hand smoke, then they are doing so with unmitigated vigour, as the following passages attest.

One author of a letter to the editor in The Montreal Gazette stressed greater importance on the health and survival debate between smokers and non-smokers than on the question of rights, "in the same way that drinking and driving become everyone's business" (Small, 1988:B2).

According to Robert A. Rosner, executive director of the Smoking Policy Institute in Seattle, Washington, the main issue with second-hand smoke is that "the average person can justify harming themselves, but can't justify harming somebody else" (Mansnerus, 1988:4-1).

Thus, although the issue of "rights" is an important one (an issue that will be reviewed shortly), it is the "smoking and health" concept that dominates the anti-smoking rhetoric.

Anti-smoking groups whose aim is to ban all smoking in public places derive this position from the knowledge that unwilling exposure to second-hand smoke is both an irritant to, as well as inconsiderate towards, non-smokers (Bleda and Sandman, 1977:453).

In fact, there are "millions of newly militant non-smokers who have joined in a campaign to clear the air"

(Gibbs, 1988:43), and they preach a philosophy that goes along the lines of "if they want to kill themselves, they should do it in private and not pull down someone else with them" (Ibid:48).

Armed with such damning evidence, the anti-smoking movement has been able to mobilize, and over the years groups such as ASH (Action on Smoking and Health), GASP (Group Against Smokers Pollution), NIC (National Interagency Council on Smoking) and the Non-Smokers' Rights Association have been a consistent thorn in the smokers' side.

Anti-smoking organizations such as ASH maintain that "not only does cigarette smoke pose a potential health hazard to those exposed to it, but its smell may cause discomfort as well" (Bleda and Sandman, 1977:452).

The anti-smoking movement has not only become more active in recent years, but also more politically effective as can be evidenced through increasing governmental legislation. Smokers are being labelled as drug addicts, neurotics, air polluters and fire hazards, and those who dare not to accept these labels can look forward to the wrath of the militant non-smoker in increasing confrontations (Markle and Troyer, 1979:622).

The notion of the "right to smoke" inter-related with the dangers of second-hand smoke is also an explosive battleground. Smokers tend to adamantly maintain that it is their right to smoke if they choose to do so. Needless to say, this is not a view that is shared with the non-smoking community.

Some smokers may feel that behaving politely in public, rather than abstaining from smoking altogether, would satisfy the non-smoking community. However, "polite" or "discourteous" smoke is still smoke and remains a cause of discomfort to non-smokers, whose attitude may be best summarized with: "Your right to smoke ends where my nose begins" (Bleda and Sandman, 1977:457).

THE MODES OF CONFLICT

There are four modes of conflict in the battle between smokers and non-smokers: law; media; medical; and violence.

As documented in previous chapters, several legal actions (ie. Quebec's Bill 84, Canada's Bill C-51, and Pointe Claire's bylaw 2404) have contributed to the stigmatization of the smoker - laws that are now in effect that restrict smoking in certain public places and workplaces, and ban tobacco advertising.

For those wanting to test the new laws on public transportation, for instance, the penalties are severe. Smokers who can not resist the temptation on Canadian flights could face stiff fines as well as criminal charges, and be removed from the aircraft at its next stop and handed over to peace officers at the local airport (Semenak, 1987:A3).

In one case, a 31-year-old Ontario man named Lawrence Brian Fantin was jailed for one day and fined $1,500 for disconnecting a smoke detector in an airplane washroom so he could smoke on a flight from Toronto to Calgary. Fantin

pleaded guilty to the seldom used charge of endangering the safety of an aircraft or rendering it incapable of flight (Montreal Gazette, May 11, 1988:B1).

And, in another incident related to the new smoking laws, Jean-Guy LeBlanc, a 30-year-old Guelph, Ontario man, pleaded guilty to smoking in the washroom of a domestic Air Canada non-smoking flight and was fined $700 in provincial court (Montreal Gazette, July 16, 1988:A6).

In the United States, people caught smoking on flights where it is banned are subject to fines of up to $1,000, and people found tampering with smoke detectors in airplane restrooms are subject to $2,000 fines (Montreal Gazette, October 30, 1987:D16).

Of course, fines, health concerns and public pressure have not deterred some rather vitriolic opposition to the smoking bans on planes.

The most obvious opponents are probably smokers themselves. Although they have long been segregated on scheduled flights, some smokers are indignant about the outright ban. One of those smokers is John Collins, a Los Angeles telecommunications contractor and frequent flyer:

> I think it's discriminatory. First they put all us smokers way in the back of the plane. We took that O.K. But now they tell us that we can't smoke at all. The whole thing has been aggravating as hell, especially when I can remember when you used to get on a plane and the stewardesses were handing out five-packs of cigarettes (Gibbs, 1988:44).

The same can be said for the workplace. It appears as though smokers are unwilling to flaunt their workplaces' no-smoking policy by sneaking a quick puff in the washroom,

most probably because the risk is simply too great. At The Gazette, for instance, publisher Clark Davey circulated a memo detailing an "escalating series of disciplinary actions" for those unlucky enough to be caught smoking within the confines of The Gazette. The final disciplinary action? Said Davey: "Ultimately, dismissal" (Peritz, 1988:A4).

Whereas being an elementary school monitor garnered peers' respect, being a smoking warden offers no such luxury. According to John Bowyer, a personnel director in Charleston, West Virginia, "nobody thanks you for putting in a smoking ban," and when he found out that smokers at his company were sneaking off into nearby offices for a quick puff, "I went over with a fire extinguisher and dropped a rather strong hint" (Gibbs, 1988:44).

The media has also played a major role in the conflict between smokers and non-smokers.

The pro-smoking factions have been characterized in the media as the more passive of the two sides in "The Great Smoking Confrontation." And to a certain degree, this stereotyping does appear justified, as the following sentiments voiced by smokers confirm an acquiescence of the situation:

"I've realized that as a smoker, I'm low on the totem pole right now. So I'm the one doing the accommodating" (Ibid:45).

"It's hell to be a smoker these days, because we all have to be so sensitive to non-smokers" (Ibid).

"People make you feel like you've got some filthy habit"

(Ibid).

Coupled with this notion of acquiescence is the theory that smokers are overwhelmed by the restrictions being placed on their habit, and this leads smokers to a sense of bewilderment and stress.

The University of Alberta's co-ordinator of clinical services, Dr. John Patterson, feels that actions such as banning smoking in the workplace places smokers under greater stress, and the smoker is becoming increasingly confused by an ever-militant world. According to Patterson, "looking back 20 years from now, this will probably be one of the biggest revolutions that we have ever seen" (Corelli, 1987:27).

Even advice columnist Ann Landers shows no sympathy towards the smokers' plight. When a smoker wrote in to complain that she was "sick and tired of being insulted and treated as if I have some loathsome disease...I still choose to smoke. Isn't that my right?", Landers curtly replied "I agree that you have a perfect right to smoke, but you do not have the right to foul the air that non-smokers must inhale. Second-hand smoke is a proven health hazard" (Landers, 1988:D4).

Disputing the medical evidence associated with smoking is another important mode of conflict between smokers and non-smokers. As detailed earlier, the tobacco industry contests much of the evidence that places smoking in a negative light. Pro-smoking groups also attempt to dispute medical evidence - however, taking that stand has become increasingly difficult.

Unlike the anti-smoking supporters who have a variety of groups they can join, the pro-smoking population is proportionately not as well represented.

A group that looks out for the smokers' best interests is the Smokers' Freedom Society, launched September 3, 1986 by Michel Bedard. It is a Canada-wide organization that supports smokers who want to fight restrictions on their habit.

The Smokers' Freedom Society's major ally is the tobacco industry, and those who are employed either directly or indirectly with the production of cigarettes. The Society began with a $100,000 grant from cigarette manufacturers, and had signed up 6,362 people as of March, 1987, although it was estimated that at least two-thirds of its supporters were tobacco workers (Bryan, 1987:D1).

Being a member of the Smokers' Freedom Society is also a grim reminder of what it is like to be a smoker in today's society, especially in terms of attempting to defend one's right to smoke. For instance, evidence against second-hand smoke is increasingly damning, and attempting to defend against this becomes progressively more difficult (Ibid).

Another organization that has set out to defend smokers' rights is called FOREST (Freedom Organization for the Right to Enjoy Smoking Tobacco). Based in England, the organization's original name was a fine example of British humour: SBUA (Stop Buggering Us About).

Stephen Eyres, a representative of FOREST, maintains that smokers should not let themselves be stampeded, and he

clings to the notion of freedom of choice. According to Eyres, "people should be free to make up their own minds. Smoke may be unpleasant for some people, but so is bad breath, coughing and sneezing, and we don't regulate those" (Auf der Maur, 1985:A2).

Although the pro-smoking forces are perhaps not as large in number or loud in voice as they may have been during the 1950s and 1960s, they can nevertheless be quite eloquent when expressing their position, linking their current plight to that of sheep being herded by zealous prohibitionists (Ibid).

Perhaps one factor that may inadvertantly serve as a source of strength for the pro-smoking groups is a perceived over-aggressiveness on the part of the anti-smoking factions. It is apparent that smokers do not enjoy their new-found role as social outcasts, and that they take extreme displeasure over what may be viewed as incessant badgering from anti-smoking forces.

As more and more governments enact various no-smoking policies, militant anti-smoking warriors appear to feel justified in taking the law into their own hands, not satisfied until at best there are no longer any smokers, and at least, that they have been properly humiliated.

Examples of anti-smoking vigilantes displaying overt aggression are plentiful. In Toronto, a man grappled with a woman smoker in a shopping mall, grabbing the woman who was smoking in a line-up for an automatic teller, wrenching her arm behind her and yanking the cigarette out of her hand. Also in Toronto, a man "publicly humiliated" a table of

smokers in a restaurant's designated smoking area, telling them they "should be shot" (Montreal Gazette, March 9, 1988:B1).

And what began as an otherwise innocent TWA flight from Boston to Los Angeles on December 30, 1987, degenerated into a free-for-all that served to exemplify some smokers' reaction to the "new non-smoking social order," as well as provide a classic example of conflict theory. By the time the flight touched down in Los Angeles, a temporary smoking ban had produced 11 passengers who lit cigarettes and booed loudly; a flight attendant who filed assault charges; the captain radioing ahead to have police meet the plane upon landing; and four protesters were sent for questioning (Montreal Gazette, January 4, 1988:D16).

Needless to say, the smoking community does not take too kindly to such stories. And although smokers may grudgingly accept their low status on the totem pole, they do not appear willing to accept the status of whipping boys.

The battle lines have been drawn: the smokers on one side - the anti-smoking groups on the other.

Smokers have become the new minority. Most have apparently learned to accept the constraints on their habit instituted by both public and private authorities. However, there remains some animosity towards the more militant in the non-smoking community: "More and more...some non-smokers give the impression they regard persuasion as inadequate. They behave as if they'd like to take matters into their own hands" (Bantey, 1988:A2).

DIMENSIONS

There are certain dimensions of the smokers vs. non-smokers conflict that have yet to be addressed in this thesis. Namely, it is necessary to identify the race, gender and class of the smoking society, and determine what role, if any, these groups play in the debate.

Race is a much more important variable in the United States than in Canada. For instance, according to the Centers for Disease Control, 28.4 per cent of blacks smoke, and 26.4 per cent of whites smoke. Among American male smokers there are proportionately more blacks that smoke than whites (in 1986, 32.5 per cent of black males smoked, as compared to 29.3 per cent of white males) (Mansnerus, 1988:4-6).

This same trend is apparent among female smokers: in 1986, 25.1 per cent of black females smoked, as compared to 23.7 per cent of white females (Ibid).

As detailed in Chapter 4, the percentage of Canadian male smokers has been steadily declining over the past two decades, whereas the percentage of female smokers has declined, but not as dramatically.

In 1986, 31 per cent of Canadian males smoked, as compared to the 26 per cent of Canada's female population that smoked (Millar, 1988:2).

The percentages are very similar in the United States. According to the Centers for Disease Control, 29.5 per cent of American males smoked in 1986, and 23.8 per cent of American females smoked (Mansnerus, 1988:4-6).

It is particularly interesting to note the relationship between smoking and various levels of education and occupation.

In Canada, smoking is closely associated with education. For instance, those with a secondary level education or less are twice as likely to be smokers than those with a university degree (31 per cent compared to 15 per cent) (Millar, 1988:5).

According to a Louis Harris survey, the same relationship applies in the United States. In 1987, 32 per cent of the people who did not graduate from high school smoked; 33 per cent of high school graduates smoked; 29 per cent with some college education smoked; and 18 per cent of four-year college graduates smoked (Mansnerus, 1988:4-6).

This same trend can be evidenced in the income and occupation categories. In the U.S., 23 per cent of those with household incomes of $50,001+ smoked in 1987; however, 38 per cent of those living in households where the total income was between $7,501 - $15,000 smoked (Ibid).

Examining occupations in Canada, the highest percentage of smokers can be found in the following occupation categories: transportation (42 per cent); mining (40 per cent); and construction (38 per cent). The lowest percentages of smokers are in professional occupations (18 per cent); managerial (25 per cent); outdoors and sales (both 27 per cent) (Millar, 1988:28).

Consequently, one aftermath of the new no-smoking workplace regulations is the degeneration of the relationship

between smoking employees and non-smoking employees, and between smoking employees and management:

> While we are allowed to smoke here, we have to go into a little smoking room. The room, sometimes referred to as Hackers' Haven, is fast developing an aura along the lines of a prohibition-era speakeasy or an opium den...this new no-smoking policy has changed the social dynamics of the office. All the really creative and witty elements in the newsroom congregate in the smoking room. And boy do we have a good time, while all the dour ones sit at their desks working...already there is grumbling in the composing room and demands that non-smokers get some sort of equivalent goof-off time in a non-smoking room (Auf der Maur, 1987:A2).

The no-smoking workplace has produced two historically familiar opponents: the labourers and the owners, with battle lines drawn between the dank factory floor and the plush executive offices. Workers in open areas have nowhere to hide, and therefore must comply with smoking restrictions. However, management's office door can always be closed in order to smoke in solitude, although somewhat ironically, there aren't many smokers among upper executives. Proportionately fewer white-collar workers smoke than do blue-collar workers. Donald Garner, an expert in liability law at Southern Illinois University, said only 25 per cent of white-collar workers smoke, compared to 50 per cent of blue-collar workers (Gibbs, 1988:44).

And if smokers aren't busy trying to escape the wrath of a perceived anti-smoking management, they are trying to shake off an image that one smoker at least feels is akin to being branded a leper: an Ontario Hydro employee said he feels like he's in high school and has to sneak around back for a smoke, while another said "we're a bunch of lepers gathering

together" (Montreal Gazette, March 3, 1988:B1).

And Toronto Sun columnist John McLeod wrote: "Sometimes we have trouble deciding whether it's more difficult being a small-c conservative in a left-lib society or a confirmed smoker in an increasingly anti-smoking working world" (McLeod, 1986:49).

As the debate continues, two characteristics develop - tempers begin to flare, and a growing awareness unfolds. Relations between smokers and non-smokers can develop friction as more rules, restrictions and labels are applied to the smoker, and non-smokers become increasingly militant. Non-smokers can be found to rate people more negatively when they smoke, and smokers may find that they underestimate the degree to which their smoking is perceived as impolite (Markle and Troyer, 1979:621).

It has been hypothesized that the entire notion of smoking as deviant behaviour revolves around the battle between pro- and anti-smoking forces. In other words, the outcome of this confrontation could determine the future of the act of smoking: "Smoking, like many other emerging social problems, is characterized by a conflict of vested interests over the collective definition of individual behaviour" (Ibid:623).

Collective behaviour is a major component in the confrontation between pro- and anti-smoking groups. In fact, although smoking is an act performed by an individual, it is how the group has responded to that act which is important to observe.

Collective action can be interpreted as people acting together. According to Becker (1973), "they do what they do with an eye on what others have done, are doing now, and may do in the future" (Becker, 1973:44).

Furthermore, collective activity consists of more than just the acts of alleged wrongdoing. "It is an involved drama in which making allegations of wrongdoing is a central feature" (Ibid:45).

Clearly, the anti-smoking groups are making the allegation that smoking is a negative act. The act of smoking alone does not constitute collective behaviour.

There are two distinct, though overlapping, systems of collective action, and both can be applied to the smoking controversy: on the one side are the people who co-operate to produce the act in question (smokers smoking); and on the other side are the "people who co-operate in the drama of morality by which 'wrongdoing' is discovered and dealt with, whether that procedure is formal and legal or quite informal" (anti-smokers dealing with smokers either through legal restrictions or through "moral persuasion") (Ibid:46).

CONCLUSION

It would be premature to conclude that the pro-smoking forces are ready to lie down and play dead. In the face of an ever-worsening public perception towards smoking, smokers have been able to maintain some powerful friends. The tobacco industry, for obvious reasons, counters the anti-smoking

movement with promotional campaigns (ie. the advertising campaign denouncing Bill C-51), lobbying and court appeals (ie. the cas against Bill C-51); and there are civil libertarians who are always eager to take on any infringements on personal freedoms, and anti-smoking laws are no exception (Gibbs, 1988:46).

The social climate towards smokers has, however, changed dramatically over the past three decades. Smokers have been forced to learn to adapt to these changes, as have non-smokers.

Smoking etiquette has noticeably evolved through the past few decades. It wasn't so long ago when asking "would you like a cigarette?" was a friendly, polite question. Today, the question is the defensive "do you mind if I smoke?", to which non-smokers are increasingly answering "yes" (Markle and Troyer, 1979:622).

The strength of the anti-smoking movement is based in no small part on the familiar adage, "strength in numbers." An individual's displeasure over someone else's smoking is best directed in the collective context.

The non-smokers' defensive behaviour is a prime reason for the smoking controversy, as non-smokers assert their desire for a healthy, long life. However, it is the collective context that has escalated the smoking controversy, even more so than the health factors. Two groups in conflict have emerged, with "collective conferral of legitimacy and consequent prestige" at stake. "If the norms of the non-smoker are officially endorsed, the smoker clearly

will drop in status ranking" (Ibid).

The smoker has a tremendous amount at stake in this battle. A drop in status ranking, as well as being labelled a "social deviant," necessitates that the smoker must fight for what is perceived as a right to smoke, for the consequences of losing this fight are dramatic.

The battle between pro- and anti-smoking movements has plenty at stake, and will most likely be the reason for continued confrontations: "the symbolic definition of a behaviour as socially approved or illegitimate and the consequent denigration of the losers" (Ibid:611).

The possibility of a solution to this conflict in the foreseeable future appears remote. The anti-smoking forces, amidst increased governmental legislations aimed at restricting smoking, coupled with a growing public acceptance of smoke-free workplaces and the like, must be able to sense that their goal is within reach. The pro-smoking side realizes how important it is to keep fighting.

Regardless of the final outcome, however, the pro-smoking forces may soon have to face the reality of the situation - that their pastime is increasingly viewed as a new deviance. And time is not on the smokers' side, for the longer the debate drags on, especially when one considers the effectiveness of the anti-smoking attack, the more hostile society will likely become towards smokers.

Chapter 9

Conclusion

The preceding pages have detailed the evolution of smoking from a glamourous, socially accepted behaviour as recently as 30 to 40 years ago, to the redefinition of the act as socially unacceptable today.

The stigmatization of smoking can be assessed by referring to both official and public definitions (Troyer and Markle, 1983:25).

Official definitions can be interpreted as actions by government and/or officials that label or restrict smoking. As previously documented, smoking has become greatly restricted in public places, workplaces, and on public transportation. There is also Bill C-51, the federal government's Tobacco Products Control Act that prohibits the advertising and promotion of tobacco products.

Public definitions relate to the general population's attitude that smoking is a deviant behaviour. This position is supported not only by an ever-decreasing percentage of smokers, but also public opinion surveys regarding, for instance, being annoyed by second-hand smoke: "Though not capturing the full sociological notion of stigma, the item has the advantage of not having any reference to the health issue, and the concept of 'annoying' is clearly a dimension of sociological deviance" (Ibid:26).

A variety of pre-disposing factors have contributed to the redefinition of smoking as deviance. For instance, the 1989 Surgeon General's Report established that in the United

States, "the prevalence of smoking remains higher among blacks, blue-collar workers, and less-educated persons than in the overall population. The decline in smoking has been substantially slower among women than among men" (U.S. Department of Health and Human Services, 1989:11).

A similar trend is found in Canada, where people with a secondary level education or less are twice as likely to be smokers than people with a university degree (Millar, 1988:5).

Canadian smokers tend to follow the same occupational characteristics as their American counterparts, with the highest percentage of smokers in the transportation, mining and construction (ie. blue-collar) categories (Ibid:28).

Also, although more Canadian males than females smoke, the decline in smoking, as in the United States, is much more pronounced among the male population (Ibid:2).

World War II brought respectability to smoking, with cigarettes even included with K-rations. It really wasn't until the mid-1960s that the decline in the public's perception of smoking began to noticeably develop (Mansnerus, 1988:4-6).

A brief chronology on the following page highlights the major events associated with smoking over the past 25 years and succinctly illustrates the factors involved with smoking's downfall.

Combatting this downfall is the formation of pro-smoking groups such as FOREST, and the Smokers' Freedom Society launched in 1986.

Chronology

1964 U.S. Surgeon General's Report on Smoking and Health links cigarette smoking with lung cancer and heart disease.

1965 U.S. Federal Trade Commission decides that a warning label must be on all cigarette packages.

1965 U.K. prohibition of cigarette advertising on television.

1967 ASH (Action on Smoking and Health) founded by John Banzhaf III.

1968 Anti-smoking commercials first appear on television.

1969 Canadian Broadcasting Corporation prohibits all cigarette advertising on television.

1971 Removal of cigarette advertising on U.S. radio and television.

1971 Air Canada introduces non-smoking/smoking seating arrangements.

1972 Canada's major cigarette producers voluntarily renounce all broadcast advertising.

1972 Canadian cigarette packages begin carrying health warning.

1974 Non-Smokers' Rights Association founded.

1975 Minnesota passes first statewide "Clean Indoor Air Act."

1979 U.S. Surgeon General's Report concludes cigarette smoking is "far more dangerous" to health than originally supposed in 1964, and details number of deaths attributable to smoking.

1986 Quebec's Bill 84 introduced, restricting smoking in certain public places.

1988 Air Canada's North American flights become smoke-free.

1988 New York City's "Clean Indoor Air Act" is signed into law.

1989 Bill C-51 goes into effect, prohibiting tobacco advertising in Canada.

1990 City of Montreal expected to implement a no-smoking policy in public places.

When one considers that both official and public definitions have contributed to make smoking a new deviance, the question that remains is: what is the future of smoking?

Proportionately fewer people are now smoking. It seems unlikely that this pattern will reverse and the percentage of smokers would actually begin to increase, especially considering the aforementioned sanctions and public displeasure associated with smoking.

However, there is some debate as to whether smoking will ever be completely obsolete (a goal of the National Program to Reduce Tobacco Use in Canada, whose aim is to produce "a generation of non-smokers by the year 2000") (National Program to Reduce Tobacco Use in Canada, 1987:4), or if it will continue to be a behaviour performed by a small percentage of society.

According to Adele Paroni of the American Cancer Society, there are two schools of thought: one believes that only hard-core smokers remain, with mild smokers having quit; and the other maintains that the percentage of smokers will continue to decline to almost zero (Gibbs, 1988:48).

The complete eradication of smoking will be virtually impossible in our lifetime. As documented in Chapter 7, the government, the tobacco industry, tobacco growers, and all involved indirectly with the sale of tobacco products contribute to a multi-billion dollar industry that refuses to be easily extinguished.

Although it may seem premature to predict the total disappearance of smoking in the near future, the act of

smoking has continued to be less and less acceptable.

As smokers are faced with mounting legislation, and increased attacks from anti-smoking groups, it is evident that smoking has become a behaviour that is frowned upon in public, leaving the private domain as perhaps the last enclave where smokers can enjoy their pastime.

A variety of sociological deviance theories serve to reinforce this notion: functionalism clarifies the functions of smoking as a norm (pre-1964), along with the functions of smoking as deviance; the change in smoking from a norm to deviance is explained by collective behaviour; the relationship between pro- and anti-smoking groups is clarified by conflict theory; and labelling theory provides an opportunity to better understand society's defining and re-defining processes at the micro-level.

Smokers have become social outcasts, and must face on a daily basis restrictions that not so many years ago didn't exist. These restrictions, combined with a proportionate decline in number and an ever-worsening public image, have contributed to the redefinition of smoking as a new deviance.

This new deviance may attract its own new clientele among the young in the future, however, precisely because smoking is now clearly defined as deviant.

Chapter 10

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