Marketing to the marginalized: Tobacco industry targeting of the homeless, mentally ill and injection drug users

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Learning from the tobacco industry

- More than 7 million internal industry documents released under the 1998 Master Settlement Agreement
- Include memos, budgets, business and marketing plans, diaries
- Allow researchers to learn about industry behavior
- Allow advocates to counter industry PR strategies

Selling cigarettes to marginalized populations

- Past research reveals industry marketing to marginalized groups
 - African Americans, Asian Americans, Latinos
 - Women, gays and lesbians
- Our study: industry efforts to target the homeless, mentally ill and injection drug users
- Project grew out of interest in drug treatment programs, which do not typically address smoking

The role tobacco plays in disadvantaged populations

- Tobacco is a "cheap treat" for people who cannot afford middle-class luxuries
- Populations may believe they are selfmedicating
- Resolving tobacco addiction by smoking is a way to relieve stress in the short term
- Providing cigarettes for clients may be a way to establish rapport

Why the industry was interested

- Homeless, mentally ill, and injection drug users have high smoking rates (70-99%)
 - Mentally ill estimated to buy nearly half of cigarettes sold in the US
- Smoking rates in these populations are not declining, unlike in the general population
- Populations overlap substantially

Marketing to the homeless

- By the 1990s, homeless were specifically targeted by tobacco companies
- Companies sponsored product placement: Homeless activists shown smoking value brands in at least one movie
- Donation of logo merchandise (distribution of 7,000 "Merit" label blankets)
- Certain brands recognized as "homeless" products by marketers (e.g. GPC)

Project SCUM



Bates: 518021121 (1995)

Distribution of sample cigarettes

SAMPLE Date	Date Er	LOG 1990-1991 mployee Name/Dept. Fun G 1990-1991 yee Name/Dept.	Function c	Owantito	Quantity in Packs
11/29/90		Vanstory r. Spears	Mental Health	AssocGso.	100
12/14/90	J.C. 7	Futtle - Making	Gso. Urban Mi Soup Kitchen	nistry	140
12/18/90	Bobby McHone - Maintenance Homeless Shelter-Gso.			ter-Gso.	100
		Ron Smith	for Christnas to employees	0-10's	
	11/19/90	Dorothenia Carter per Ron Smith	James B. Dudley High School Class Reunion	100	
	11/29/90	Peter Vanstory per Dr. Spears	Mental Bealth AssocGso.	100	
	12/14/90	J.C. Tuttle - Making	Gso. Urban Ministry	140	
	12/18/90	Bobby McHone - Maintenance	Soup Kitchen Bomeless Shelter-Gso.	100	
	12/6/90	James M. Dixon - Maintenar	nce Gso. Elks Lodge Pall Charity	300	
	12/11/90	Ron Price	Burlington/Alamance Jaycees	150	
	12/14/90	Ron Price	Wesley Hall of Alamance	400	

Bates: 87810958 (1991)

Cultivating service organizations

- Industry also sought relationships with service providers for PR purposes
- Charitable contributions to homeless shelters (often as part of brand promotion)
- Cigarette donations at Christmas to shelters
- Sales promotions at psychiatric hospitals

Smoking is viewed as a resource

telling a homeless person to quit smoking may not be as effective an intervention as providing a way to more easily obtain fresh, unadulterated, "clean" cigarettes while simultaneously offering smoking cessa-

one must consider that smoking is a major coping mechanism used by the homeless to deal with the, and stress of their day-to-day existence. Telling the home-

Cancer Nursing 1993; 16:123-30

Providers solicit cigarettes for clients

RJ Reynolds Tobacco Cu Winster-Sclen, N.C. 27102 "...I am specifically asking if you might consider giving us cigarettes, factory rejects or irregulars would be fine for our clients. When clients come to our door they are usually depleted of all funds and resources. We do not believe this is necessarily the most appropriate time to give up smoking, it simply add [sic] to their stress." our work, and we would more than gladly accept a maniforg contribution I am "A cigarette on the day of arrival for a homeless person who has been without for a while can be a great comfort." are usually depleted of all fonds and resources. We do not believe this is necessarily the most appropriate time to give up socking it simply add to their stress.

Bates: 5008460550 (1992)

Providing cigarettes is "caring"

TO WHOM IT MAY CONCERN:

We are in urgent need for assistance. As you know, the State of New York has made several cuts and one of those were to cut off funding for purchasing cigarettes for the patients in the Mental Health System.

to stop smoking and for some here that is all they have.

A majority of the patients here do not have family who are involved or care

If you could, by some miracle, donate cigarettes or tobacco to the hospital to the patients it would be very much appreciated. As you know, it is very hard to stop smoking and for some here that is all they have.

appreciated and I am sure you would be able to put down any donation on your taxes.

Thank you.

A majority of the patients here do not have family who are involved or care enough about them to bring cigarettes to them.

You can contact me at:

Ann Santiago c/o Capital District Psychiatric Center 75 New Scotland Avenue Albany, New York 12208

Phone (518) 447-9611 EXT. 6745

JUL 1 7 1995

Lates: 517224635 (1995)

The tobacco industry and veterans: a case study

- Industry has long-term relationships with veterans groups
- Makes financial contributions to organizations that advocate for the population
- National Coalition for Homeless Veterans (NCHV) appeared repeatedly on industry behalf
- Other organizations (AMVETS, American Legion, VFW) advocated against clean indoor air laws

Homeless veterans groups

- Relationship built on marketing campaign to military (cigarettes were part of military rations until 1972)
- Veterans in the US constitute a substantial market
- Veterans have high rates of homelessness, substance abuse, and mental illness

Veterans groups advocated against clean indoor air laws

Exhibit 95

Testimony by

Richard Fitzpatrick, Executive Director National Coalition for Homeless Veterans

Thus we urge OSHA to rescind the onerous requirements that would prohibit on-the-job smoking and which would force homeless veterans--and others like them--back on the streets. We simply cannot place a recovering unemployed veteran in such a restrictive environment and expect success. It has long been recognized by the federal government

There is no national funding for homeless veterans programs. Many of our programs are dependent on the private sector, mainly on the

numerous ways which may not be readily apparent to OSHA officials. Many of the implications of this proposed rule are subtle but can dramatically affect homeless and unemployed veterans, both directly and indirectly.

The most important element of our programs is not just to give homeless veterans a place to live, but to help them get a job they can stay with end grow, thus breaking their cycle of dependency. In most instances, this requires helping them recover from substance abuse, whether it be alcohol or other drugs. The Department of Veterana Affeirs

Bates: 512682289 (1994)

Small contributions, big impacts

- Extensive media coverage solicited for contributions
- Contributions often depended on prior sales, e.g. \$1000 in exchange for Doral cigarette pack seals
- In several cases, RJR press release quoted verbatim in media reports
- Events specifically arranged to target veterans, who constitute 42% of Doral smokers

Effects of industry targeting

- Industry successfully marketed to disadvantaged populations to increase sales
- Used charitable contributions (money and product) to recruit service providers into providing political support
- Little studied populations were vulnerable
- Activities probably contribute to high smoking rates

Ethical implications

- Tobacco is an addictive and deadly product
- Targeted populations may suffer from impaired judgment
- Individuals will purchase cigarettes in lieu of food and shelter
- Population is disorganized and has no cultural identity
- Unlike other marginalized groups, groups may not be able to advocate for their own interests

Implications for public health

- Tobacco control advocates need to challenge assumption that tobacco is a resource for marginalized clients
- Should also consider ways to educate service providers, who may also smoke
- Funding organizations should devote resources toward these groups to reduce the importance of tobacco industry funding