

LETTERS TO THE EDITOR

Reducing the risk to minors participating in an urban intervention program

To the Editor - A study conducted in the City of Chicago, by DePaul University in conjunction with the Chicago Department of Revenue's Compliance division, has addressed the enforcement of underage tobacco access laws. Compliance checks involved a minor who, working with a revenue official, entered businesses and attempted to buy cigarettes. When a sale occurred, the revenue official issued an on-the-spot ticket. The method chosen has become perhaps the most widely used for dealing with illegal sales of cigarettes to minors.^{1,2}

Working in Chicago allowed observation of the effects of an intervention on a large, ethnically diverse sample. The drawback of the study, however, has been problems encountered when issuing tickets in economically depressed areas of Chicago. Problems have included merchants refusing to accept the ticket, verbal abuse to the minor and revenue agent by the sales staff, verbal exchanges with gang members, and attempted bribery by merchants. These problems were almost non-existent in the economically advantaged areas of Chicago. When working in economically depressed areas with high crime rates, there is a necessity to have a plan, to be prepared for these types of dangerous interactions.

The following methods were developed to handle the possible reoccurrence of problems involving the minors. They have been instructed to respond to adverse situations in a non-confrontational manner. Should a situation persist, the minor is removed by the project director or revenue official.

One such instance involved a minor being confronted by two gang members. The gang members directed hand signals at the minor. When the minor did not respond, one of the gang verbally confronted the minor. The investigator then stepped between the minor and gang member and was able to diffuse the volatile situation. Another occurrence involved an irate merchant being verbally abusive towards the minor when the ticket was issued. The minor immediately left the establishment and the revenue official proceeded to deal with the merchant. Both instances show how risks to minors can be reduced by not allowing the minor to respond to a hazardous event and having an official handle any problems.

One could argue that mailing the ticket to the merchant would reduce the risk of confrontation involving the minor or revenue agent. The problem with this suggestion is that, in Chicago, a merchant can contest a ticket if the charge is not specific about who sold the cigarettes to the minor. Merchants in violation of the law are required to sign the ticket they are issued at the time of the illegal sale to verify receiving the ticket. If the ticket were mailed, the merchants could argue that no one at their store had sold cigarettes to a

minor, and merchants could avoid paying the fine because there would be no proof of sales (namely, a ticket signed by the merchant, acknowledging that a violation had been committed). A ticket issued through the mail, which could be contested because of a legal technicality, will not have the positive and long-term impact on reducing cigarette sales to minors as would immediate ticketing.

WILLIAM D BILLOWS
DANIEL SCHNOPP-WYATT
LEONARD A JASON
*Department of Psychology, DePaul University,
Chicago, Illinois, USA*

- 1 Jason LA, Ji PY, Anes MD, Birkhead SH. Active enforcement of cigarette control laws in the prevention of cigarette sales to minors. *JAMA* 1989; 266: 3159-61.
- 2 US Department of Health and Human Services. *Model sale of tobacco products to minors control act: a model law recommended for adoption to states and localities to prevent the sale of tobacco products to minors*. Washington, DC: US Department of Health and Human Services, 1990.

In reply - This letter raises important ethical issues about the safety of minors assisting in law enforcement aspects of tobacco control. In Australia, several research ethics committees have refused ethical clearance of similar projects in anticipation of possible harm caused to participating volunteer minors by irate retailers. This has led to the development of protocols whereby the monitoring phase of such projects has been strictly separated from the prosecutory phase. The protocols involve information obtained from minors engaged in the monitoring phase being passed to health officials. The officials then take a minor who is specially employed by the Health Department or local government authority to shops known to repeatedly sell. Part of the signed duty statement of these young employees is that they will attempt to buy cigarettes and that they will willingly appear as witnesses in any court proceedings. This protocol has proved acceptable to at least one ethics committee in Australia. We encourage others who have encountered and solved ethics committee objections to these interventions to share their experiences with the journal.

SIMON CHAPMAN
Deputy Editor

Women and tobacco

To the Editor - The International Network of Women Against Tobacco (INWAT), representing more than 400 members from nearly 60 countries, would like to voice its dissatisfaction with the final resolutions of the recent Ninth World Conference on Tobacco and Health.^{1,2} The resolution INWAT submitted, urging more equitable participation by women at world conferences did not become a final resolution. Moreover, issues of women and tobacco were entirely absent from the International Strategy for Tobacco Control, passed as the major resolution of the conference.

Why is INWAT so insistent that the tobacco control movement address women's tobacco use? Although Richard Peto and Alan Lopez reported at the conference that nearly half a million women die each year in developed countries from smoking-related causes,³ there has been little attention to tobacco control for women across the life cycle.⁴ Throughout the world, men generally have higher rates of smoking than women,

but the future of women's smoking is being shaped by the fact that, in many countries, teenage girls' smoking rates are skyrocketing, often surpassing their male peers' rates^{4,5}. The real challenge to all of us in tobacco control is in preventing a tobacco-related epidemic among women in developing countries, where rates of smoking cigarettes are generally low, but slick advertisements targeting women are widespread.

It is irresponsible for the International Strategy for Tobacco Control, passed at the Ninth World Conference, to omit totally issues of women's tobacco use. This inaction is a bit like the ostrich sticking its head in the sand to hide from an oncoming danger or something unpleasant. The International Strategy for Tobacco Control, as it currently exists, ignores the reality of women's smoking in the world as well as the potential for a much larger epidemic if women in developing countries are seduced into smoking by the tobacco industry.

DEBORAH L McLELLAN
*International Network of Women Against Tobacco,
c/o American Public Health Association,
Washington, DC, USA*

- 1 *Proceedings of the Ninth Conference on Tobacco and Health. Resolutions of the Ninth World Conference on Tobacco and Health 10-14 October 1994, Paris, France*. New York: Plenum Publishing Co., 1995 (in press).
- 2 Simpson D. Paris and beyond. *Tobacco Control* 1994; 3: 302-303.
- 3 Peto R, Lopez AD, Boreham J, Thun M, Heath C. *Mortality from smoking in developed countries 1950-2000*. New York: Oxford University Press, 1994.
- 4 Chollat-Traquet C. *Women and tobacco*. Geneva: World Health Organisation, 1992.
- 5 Pan American Health Organization. *Tobacco or health: status in the Americas*. Washington, DC: Pan American Health Organization, 1992. (PAHO Scientific Publication No 536.)

The Secretariat of the 9th World Conference on Tobacco and Health was invited to reply to this letter, but no response was received before this issue went to press. - ED

In the eyes of the beholder

To the Editor - In your issue of Autumn 1994, I am sure I and my colleagues and friends are not the only people, in Europe at least, who have noticed the message put out by the cartoon on the front cover.

As you can see, among the benefits of giving up smoking are that the black man on the far right in the top picture turns white.

A neat little racist message, isn't it - black = bad, white = good?

SP BAKLANOVA
Middlesex, UK

In reply - I was absolutely horrified to read that a reader has perceived the male stallholder on the right hand side of "Spot the difference" to be black in the top ("Before") image, and white in the bottom ("After") one.

Given the nature of our work at Comic Company, and of the body of resources we have built up over the years, we would never employ such a device. It is simply unimaginable that we would change a person's race/skin colour to make a point about how much better life would be if nobody smoked. Ironically, the stallholder in the "After" image is shown in the act of giving an apple to the young black girl - a gesture that was intended to signify racial harmony!

Looking at the front cover of *Tobacco Control*, I wonder whether the reproduction of the image from the larger/lighter original