

smoking was 87.3% in the case group with LRTI (n = 150) and 84.7% in the healthy children group (n = 150), with no significant difference (p = 0.618). However, a significant difference was found between passive smoking prevalence in groups at a urinary CCR of 60 ng/mg (76.7% and 50.7%, respectively) (p < 0.001). The children with LRTI had more dense ETS exposure compared to the healthy children (OR = 4.72; 95% CI = 2.62 to 8.51). When the cut-off level of urinary CCR was accepted as 60 ng/mg creatinine, it was found that passive smoking increased LRTI in children significantly (p = 0.000). This finding indicated that the causative effect on LRTI of passive smoking was dose dependent.

We believe that the evaluation of ETS exposure using a higher cut-off level of CCR than 30 ng/mg creatinine, such as 60 ng/mg and over, to investigate whether there is any association between ETS exposure and LRTI in an intensive exposure status and to assess the dose dependent relation will be more accurate.

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Perceptions of tobacco advertising and marketing that might lead to smoking initiation among Chinese high school girls

More than 320 million of China's 1.3 billion people are smokers (66.9% of all men and 4.2% of all women ≥15 years old).¹ Although Chinese men have been the subject of considerable research,²⁻⁴ little is known about smoking initiation among women. Our preliminary tobacco document research suggests significant female market segmentation and brand development by transnational tobacco companies (TTCs) in China. To understand the influence of these factors, we conducted a pilot study on susceptibility among young women in Beijing.

We assembled five focus groups of high school girls aged 16-19 years (n = 27) during summer 2006. After obtaining informed consent, a trained, female medical student conducted focus groups to ascertain knowledge, attitudes, behaviours, beliefs and intentions to smoke. Thirteen subjects reported smoking experience (smoked 100 lifetime cigarettes or smoked in past 30 days). In-depth questions identified themes such as knowledge of brand identities, influences and information about smoking among women (table 1).

Explicit cigarette advertisements are banned by law, but subjects noted the appearance of cigarette brand logos on television. Most subjects agreed that female cigarettes were long, slender, and pretty, with beautiful packaging. Subjects noted that female cigarettes were expensive and that people who bought them were usually white collar, successful and glamorous. They also were aware that TTCs manufacture most female brand cigarettes. Many subjects were aware that cigarettes were advertised at sporting events. "Baisha sponsors Liu Xiang" (the Chinese 110 metre hurdle Olympic gold medalist); "Marlboro tobacco advertisements are on F1 racing cars"; "555 sponsored a professional basketball game." Cigarette sports promotion has evaded restrictions imposed by the government on tobacco advertisements on television.

Many subjects' favourite actors and singers are smokers, and they reported that they believe these celebrities are more glamorous and elegant when they smoke. Smoking in movies contributes to images of increased female glamour and sophistication.

Most smokers agreed that smoking is a way to break with antiquated social restrictions. "Smoking is quite normal—if men can smoke, then why can't women?" Many subjects agreed

that smoking is used as a social tool. "When my classmates smoke, I do too."

Students reported smoking among teachers and students in schools, despite legal restrictions. "Once there was a teacher during class who wanted to take a 10 minute break in the middle of class, clearly because he wanted to go smoke. When I told him that break time had not arrived yet, he said well let's just take a five minute break then." Subjects stated that it was not uncommon to see high school teachers "smoking in their offices."

Although relatively knowledgeable about the health risks of smoking, many misconceptions of the health effects of smoking existed. None of the students were aware that smoking causes damage to the cardiovascular system. In addition, an 18 year old non-smoker stated that smoking can help smokers by "stimulating their spirits." "Smoking could inspire people and increase creativity when composing music."

This study suggests that concepts of femininity, independence, style and sophistication are recognised by young women in China as part of the already embedded smoking culture. These themes reflect the brand segmentation research conducted in the 1990s by TTCs.⁵ Our study is limited by a single small urban population sample. However, other research among adolescents in China^{6,7} confirms the vulnerability of young Chinese women. While smoking prevalence among women overall is still quite low, it appears to be increasing in urban areas, and there is a clear trend towards younger age of initiation. Our study and these reports suggest that additional, in-depth research⁸ is needed to understand changes in knowledge, attitudes, behaviours and beliefs of young Chinese women in order to develop appropriate prevention measures.

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Table 1 Thematic perceptions on smoking reported by focus group participants (n = 27), Beijing, 2006

Themes	Percentage agreement*
Television and advertising seen	85
Able to name female brands	74
Marketing and promotion observe	56
Approve smoking by celebrities	52
Smoking identifies women as independent	56
Friends who smoke	63
Seen teacher smoking on campus	78
Smoking is a risk for heart disease	0

*Percentages indicate percentage of group who agreed to questions presented in focus group thematic groups.

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The 1964 US Surgeon General's report is justifiably given a central role in convincing the medical community that cigarette smoking was a contributory cause of lung cancer, heart disease, and obstructive pulmonary disease. Brandt makes good use of industry documents in describing the industry's response to the report, reassuring anxious smokers by promoting cigarette filters and "low tar" cigarettes without explicitly acknowledging that smoking was harmful.

The most depressing aspect of the history is the success of the tobacco industry over 40 years in delaying and subverting attempts to regulate their product. In the 1960s they bought Congressional votes and used corporate lawyers to write legislation that allowed them to evade legal liability for the health consequences of smoking. They also appear to have survived the "killer blow" of suits for damages brought by US state attorneys general in the 1990s as well as a suit for racketeering brought by the US Department of Justice in the 1990s and 2000s.

Success for tobacco control efforts comes later in the story with the use of evidence on environmental tobacco smoke in the 1980s to justify restrictions on smoking that undermined the idea that it was permissible to smoke anywhere, anytime. The release of incriminating internal industry documents in the 1990s (a byproduct of tort suits and whistle-blowers) eliminated any residual credibility of the industry by exposing the amorality and duplicity of its executives.

This book should be read by anyone who is interested in understanding the extraordinary rise of the tobacco cigarette in the United States in the first half of the 20th century and the reasons for its more gradual cultural retreat since the early 1980s.

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BOOK REVIEWS

Cigarette Century: the Rise, Fall and Deadly Persistence of the Product that Defined America

By A M Brandt. Basic Books: New York, 2007, £16.99; pp 600. ISBN 13 978-0-465-07047-3

Allan Brandt, a leading US historian of medicine, provides a superb history of the century of the cigarette in the USA. He explains the technological and social reasons for the victory of the cigarette over all other methods of tobacco use; the key role played by the first world war in legitimating cigarette smoking; and the success of advertising and public relations in the 1920s and 1930s in making smoking such a pervasive habit that by 1950 over half of all men and a fifth of all women in the United States smoked cigarettes.

Brandt also provides a detailed excellent account of the discovery of the health harms of cigarette smoking. He describes the clinical observations in the 1920s, actuarial analyses of smokers' life expectancies in 1930s, and the epidemiological research of Doll and Hill in Britain, and Wynder and Graham in the United States in the early 1950s. The subsequent debate within the medical profession about the probative value of epidemiological evidence is well covered, as is the industry's PR strategy of maintaining a spurious controversy by amplifying the views of sceptics like Berkson and Fisher.

Globalizing Tobacco Control: Anti-Smoking Campaigns in California, France, and Japan

By Roddey Reid. Indiana: Bloomington and Indianapolis, 2005, \$24.95; pp 310. ISBN 0-253-21809-8.

What do California, France, and Japan have in common? Answer: tobacco control programmes. How do the programmes differ? Answer: while thinking globally, each acts locally. That seems to be the main message of this sprawling and sometimes informative work. The author is professor of literature at the University of San Diego, California, "an interdisciplinary scholar working at the intersection of French studies, science studies, communication, and cultural studies," as well as a former Japan Foundation Abe Fellow. The book mirrors the author's eclectic interests, and seems to originate from his opportunistic presence in the three locations described. The vagaries and politics in each area are described in such quotidian detail as to interest only those who took part. An activist just starting out on a tobacco control programme elsewhere is unlikely to learn what to do or how to begin, except to understand that it is a messy, highly political, locally idiosyncratic process; no mean lesson, however.

California has had the most intensive and successful tobacco control programme of the

three, 30 years along now (the author provides a useful chronology of events relating to both tobacco control and the industry). Indeed, the WHO Tobacco Free Initiative looked to California as the model for the Framework Convention on Tobacco Control, with good reason: California enjoys the lowest prevalence of adult smoking in the nation. Although taxation and local ordinances banning public smoking were essential components, the author's analysis of the California experience is mainly confined to the counter-marketing campaign conducted by the state's department of health. We learn that the media advertising regularly demonised smoking, smokers, and the tobacco industry, changing the image of smoking from being romantic and adventurous to a leprous habit. As one tagline had it, "Smokers are addicts, tobacco companies are pushers, and smoking stinks." The campaign's focus on second-hand smoke gave tobacco control the aura of a social welfare movement.

California's population is highly diverse, representing native and immigrant cultures from around the world, each with its own cultural attitudes and political interests. The counter-marketing had to be both sensitive to these singularities in local media and activities, as well as generic when addressing the whole state through mass media. According to the author, campaigns targeted at ethnic groups, however, were often insensitive, even racist: "She has her momma's eyes and her daddy's lungs," appeared to cast African-American men as selfish, abusing brutes, interested only in their own pleasures.

Politics intruded all the time, not only when a Republican governor tried to dismantle the programme, but also when different health groups competed for the same dollars. Nonetheless, something worked, but to this day no one can say what exactly happened, or whether California, with its culture of wellness, hygiene, and the good life, was in any case the most likely to succeed. (The author doesn't mention the backlash from the Hollywood movie industry that continues to glamorise smoking.)

Could any place be more different from California than France? With its iconic imagery of intellectual rebels, derring-do partisans, and smoky-voiced chanteuses, Gauloises dangling from their lips (although Marlboro is the most prevalent smoke) would seem to preclude any effective tobacco control programme. Indeed, the efforts have sputtered over the decades, not least because there has been no powerful public health movement, whether private, academic, or state run. Moreover, tobacco control is sometimes seen as a crazy American import threatening the liberal and freedom loving Frenchness of France. Nevertheless, within a few months France will follow other European nations in banning all public smoking, a measure supported by 70% of the populace. As the author says, "Something is afoot in France." Even Japan, a state having strong financial interests in its own industry, is beginning the first steps to managing the increasing epidemic of tobacco related diseases. Perhaps that is the reason why global concern about tobacco will eventually trump local smoking culture as more and more evidence is returned on the havoc of smoking, even while the implementation of tobacco control is necessarily local, a combination the author calls "global singularity."

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