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RE: Opposition to taxpayer subsidies for films that include tobacco use

Dear Dr. Glantz:

American Heart Association has long supported the goals of the Smokefree Movies project. Numerous health authorities, having reviewed the evidence, concur that exposure to on-screen smoking is a substantial risk factor for initiation of smoking by adolescents. To lessen that risk, we continue to support your policy recommendations to reduce tobacco imagery on screen: producer certification of no pay-offs; strong anti-smoking ads before movies with smoking, in all media; no more identification of tobacco brands; and an R-rating for future movies with tobacco imagery, unless the presentation of tobacco clearly and unambiguously reflects the dangers and consequences of tobacco use or is necessary to represent the smoking of a real historical figure who actually used tobacco.

In recent years, in a bid for motion picture productions, as many as forty states have extended generous tax credits and spending rebates to film producers. Between 2008 and 2010, for example, states annually awarded an estimated average of \$436 million to top-grossing movie productions. In 2010, \$288 million in public subsidies — two-thirds of the US total — went to make films with smoking, including \$127 million to youth-rated movies.

The states that subsidized top-grossing film projects with smoking in 2010 spent more on these film production subsidies than they did on their 2011 tobacco control and prevention programs. In July 2011, this policy contradiction led the US Centers for Disease Control and Prevention to urge state and local health departments to “work with state policy makers to harmonize their state movie subsidy programs with their tobacco-control programs by limiting eligibility for subsidies to tobacco-free movies.”ⁱ In September 2011, the World Health Organization (WHO) similarly concluded that “Public subsidy of media productions known to promote youth smoking initiation is counter to WHO FCTC [Framework Convention on Tobacco Control] Article 13 and its guidelines.” WHO recommended that such media productions be made “ineligible for any form of public benefit.”ⁱⁱ

While American Heart Association takes no position in the controversy over the economic value of state motion picture production subsidies, it is clearly inappropriate

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free of cardiovascular
diseases and stroke.”*

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for taxpayers to subsidize media productions with tobacco in light of the strong scientific evidence that exposure to onscreen smoking causes youth smoking and of the states' compelling interest in reducing the lifetime harms and costs related to youth smoking.

Congruent with our mission of promoting the public interest in health and a tobacco-free future, and with our ongoing support for evidence-based policies to permanently and substantially reduce adolescent exposure to on-screen tobacco imagery, American Heart Association supports the swift revision of public film subsidy programs to limit eligibility for tax credit, spending rebate or any other favored policy treatment to media productions that do not depict or refer to any tobacco product or nonpharmaceutical nicotine delivery device or its use, associated paraphernalia or related trademarks or promotional material.



Nancy Brown
Chief Executive Officer

¹ Glantz S, Mitchell S, Titus K, Polansky JR, Kaufmann R, Bauer U (2011) Smoking in top-grossing movies — United States, 2010. *MMWR* 60:909-913. Accessible at www.cdc.gov/mmwr/preview/mmwrhtml/mm6027a1.htm?s_cid=mm6027a1_w

² World Health Organization (2011) *Smoke-free movies: from evidence to action* (2nd edition). Geneva, Switzerland: World Health Organization. Accessible at whqlibdoc.who.int/publications/2011/9789241502399_eng.pdf

ⁱ Glantz S, Mitchell S, Titus K, Polansky JR, Kaufmann R, Bauer U (2011) Smoking in top-grossing movies — United States, 2010. *MMWR* 60:909-913. Accessible at www.cdc.gov/mmwr/preview/mmwrhtml/mm6027a1.htm?s_cid=mm6027a1_w

ⁱⁱ World Health Organization (2011) *Smoke-free movies: from evidence to action* (2nd edition). Geneva, Switzerland: World Health Organization. Accessible at whqlibdoc.who.int/publications/2011/9789241502399_eng.pdf