

# United States Senate

WASHINGTON, DC 20510

June 22, 2007

Honorable Daniel Glickman  
President and CEO  
Motion Picture Association of America  
1600 Eye Street, NW  
Washington, DC 20006

Dear Mr. Glickman:

We are writing to express our disappointment with the new movie ratings policy announced by the Motion Picture Association of America (MPAA) in April to address the issue of smoking in motion pictures. Although we appreciate the MPAA's initiative and willingness to take the lead in this matter, we believe that the proposal falls short of the steps necessary to reduce the exposure of children and adolescents to smoking in movies.

Tobacco imagery, both branded and unbranded, continues to permeate the American movie industry, despite initiatives to reduce on-screen smoking. From 1999-2005, 41 percent of G- and PG-rated live action films, 75 percent of PG-13-rated live action films, and 88 percent of R-rated live action films produced in the United States delivered an estimated 44 billion tobacco impressions to American audiences.

Studies involving thousands of American adolescents have found that exposure to on-screen smoking is a major contributor to smoking initiation by youth. The Centers for Disease Control and Prevention (CDC) repeatedly cites tobacco imagery in motion pictures as one reason why teen smoking rates have stopped their historic decline.

Recently, smoking in the movies and its influence on children was highlighted in the May 24, 2007, release of the Institute of Medicine report: "Ending the Tobacco Problem: A Blueprint for the Nation" (National Academies Press). Five chapters of the report mention smoking in movies as a contributing factor to the tobacco problem and thus as a path towards intervention and prevention. Concerning youth exposure to smoking in movies, the report notes that messages in the media can induce and even glorify unhealthy and risky behaviors such as smoking.

We are concerned that the MPAA's adoption of a highly subjective policy is not enough to curb the influence of smoking in the movies on the health of children. The new policy merely calls for the Classification and Ratings Administration to "consider smoking as a factor" in the rating of films, but does not provide specifics as to the implementation of this proposal. We request that you provide us with more specifics as to how the MPAA will implement the new

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ratings rule, including information on what, if any, impact it would have had on the ratings of films from 2004-2006.

In particular, we request clarification of information used by the MPAA to indicate a recent decrease in on-screen smoking. A May 10, 2007, press release from the MPAA stated: "From July 2004 to July 2006, the percentage of films that included even a fleeting glimpse of smoking dropped from 60 percent to 52 percent. Of those films, 75 percent received an 'R' rating for other factors."

However, publicly available research studies have indicated the opposite of such a trend. Analyzed by calendar year, the percentage of films of all ratings with smoking went from 67 percent (2004) to 72 percent (2005) to 66 percent (2006) (Source: Polansky and Glantz, 2007). This evidence was also cited in a June 5, 2007, letter you received from Vermont Attorney General William H. Sorrell. As was also requested by the Attorneys General, please provide us with detailed information explaining the sampling method and criteria used by the MPAA to arrive at its conclusions so that this discrepancy can be resolved.

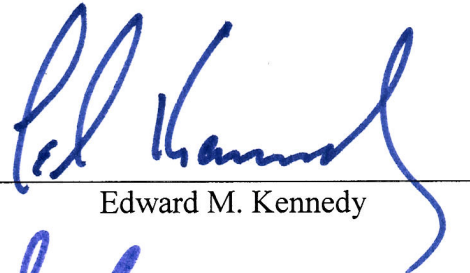
The decision to change your policy to more accurately address the influence of smoking in the movies on the health of children is encouraging. However, if the results show no change in the susceptibility of children to such images, we encourage the MPAA to establish meaningful, objective standards that will produce measurable reductions in smoking in the movies. In particular, we encourage the adoption of policy enhancements to the rating system, such as those endorsed by the American Medical Association, the American Academy of Pediatrics, the American Legacy Foundation, the Campaign for Tobacco-Free Kids, and the World Health Organization, among others.

We thank you for your prompt attention to this important matter. We look forward to working together to place the health of our nation's children and families first.

Sincerely,



Richard J. Durbin



Edward M. Kennedy



Frank R. Lautenberg