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Authors

Hammond, Ross
White, Celia, MLS

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Voices of Truth, vol. 2: Multinational Tobacco Industry Activity in the Middle East: A review of Internal Industry Documents

Ross Hammond *

Celia M. White †

*World Health Organization

†University of California, San Francisco

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Voices of Truth, vol. 2: Multinational Tobacco Industry Activity in the Middle East: A review of Internal Industry Documents

Abstract

The WHO Regional Office for the Eastern Mediterranean has been working for years with national, regional and international partners to address tobacco health hazards and to support all national tobacco control measures. Yet, success in reducing the rates of morbidity and mortality attributed to tobacco use has remained elusive. This delay is the result of many factors, the most important of which include the activities of the tobacco industry, activities which have long been denied by the industry itself. Recently, however, the unethical behaviour of the tobacco industry in undermining efforts by the World Health Organization to control tobacco use has been brought to light by the WHO Report of the Committee of Experts on Tobacco Industry Documents, published in July 2000.

The following regional report, "Voice of Truth", presents for the first time compelling evidence that the unethical behaviour of the tobacco industry was extended to all levels: international, regional and national. Through their regional offices, the tobacco companies used all possible routes to stop governments from adopting tobacco control policies. In addition, they monitored closely all activities undertaken by the WHO Regional Office, and tried to oppose any consensus-building agreements regarding tobacco control at the regional level.

The first volume of "Voice of Truth" reveals some of the tactics and strategies used by the tobacco industry in the Eastern Mediterranean Region generally, and in the countries of the Gulf Cooperation Council (GCC) specifically, to promote a product which kills more than 4 million people annually. Direct targeting of this region is clearly evident throughout the report, which contains

startling facts about how the tobacco industry has operated in the area since 1970.

This report provides a strong argument for combining efforts as the only way to tackle the tobacco problem. It calls for all decision-makers and tobacco control advocates to review and redirect their tobacco control policies in light of the nature of tobacco industry activities.

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EXECUTIVE SUMMARY

- The tobacco industry was particularly concerned about Islamic teachings which discouraged tobacco use. They sought to “identify Islamic religious leaders who oppose interpretations of the Quran which would ban the use of tobacco and encourage support for these leaders.” Despite these concerns, they insisted on continuing to advertise during Ramadan and even devised a marketing scheme to promote “light” brands during Ramadan in order to appeal to Muslims who wanted to quit during this Holy period.
- Throughout the Middle East, the tobacco industry fought government attempts to restrict smoking in public places through covert lobbying, public relations campaigns, issuing “pseudo-scientific” studies on the topic, planting stories in the media, organizing briefings for journalists, infiltrating scientific meetings and other measures to ensure the continued “social acceptability” of smoking.
- The tobacco industry also vigorously fought Gulf Cooperation Council (GCC) efforts to regulate the manufacture of tobacco products, including attempts to mandate lower tar and nicotine levels, controls and restrictions on certain cigarette additives, and stronger health warning labels. At every step, the industry fought proposed government regulations and sought to replace local testing methods with their own by overtly and covertly lobbying officials in both government and national and regional standards organizations.
- Finally, the tobacco industry worked tirelessly to defeat proposals to increase tobacco taxes. Through the covert lobbying of policy-makers and the manipulation of the media, the tobacco industry was able to delay these tax increases. When it looked they would no longer be able to stave off action, they cleverly exploited differences between GCC countries to ensure that the proposals that did pass benefited them to the maximum extent possible.

1. THE TOBACCO INDUSTRY AND ISLAM

Work to develop a system by which Philip Morris can measure trends on the issue of Smoking and Islam. Identify Islamic religious leader who oppose interpretations of the Quran which would ban the use of tobacco and encourage support for these leaders.

-- Philip Morris, 1987

The tobacco industry has always been worried by the influence of Islam in the Middle East, which they fear will be used by health authorities and religious activists to discourage smoking in the region and encourage strict government regulation of industry activities. A 1984 Brown & Williamson trip report from Saudi Arabia, for example, states that “The pressure upon smoking is continuous, with Friday sermons being delivered in the mosques stating that smoking is *haram* (outlawed by Islam).” The author was confident however that “this is only rhetoric and no action will be taken. The rationale for this is that smoking is not as clearly *haram* as alcohol, pork, etc. and will not therefore be banned.”¹ Nevertheless, the industry continued to monitor publications and speeches to ensure that a stricter interpretation of what constituted *haram* did not start to gain currency.²

A draft 1987 Philip Morris Corporate Affairs Plan meanwhile called for “better argumentation” on the “major issue” of smoking and Islam. One of the company’s strategies was to “Work to develop a system by which Philip Morris can measure trends on the issue of Smoking and Islam. Identify Islamic religious leaders who oppose interpretations of the Quran which would ban the use of tobacco and encourage support for these leaders³. Keen to burnish its image with religious leaders, the company publicized its charitable donations to Islamic institutions, as in 1989 when it obtained “extensive coverage in GCC media for Philip Morris’ corporate contribution to the House of Quran, an Islamic cultural institution in Bahrain.”⁴ The company’s religious sensitivities only went so far, however. A 1991 memo from Baroudi to META Secretary Robin Allen regarding the draft voluntary code for the UAE stated that “Philip Morris would prefer to maintain the right to hold special promotions during Ramadan” and proposed instead that companies “give up cinema advertising during the Holy month”.⁵

Brown & Williamson took this a step further, when, in 1995, they prepared a “creative brief” for an advertising campaign during Ramadan to promote their light brands. They hoped that, instead of quitting during Ramadan, smokers in the Middle East would instead switch to light cigarettes. Having abstained from smoking during daylight hours, the company reasoned, would make the lower dose of nicotine in a light

¹ Under “Support Requirements” in a 1988 Philip Morris Corporate Affairs memo is the following: “Islam – support JLB/BGB in project to counter haram charges.” (Corporate Affairs Support Requirements Needed from S&T and R&D in 880000; PM 2501152305-2308; <http://www.pmdocs.com/getallimg.asp?DOCID=2501152305/2308>)

cigarette more palatable. The ad campaign would focus on smokers' desire during Ramadan to "cleanse the body" and would take advantage of the fact that other companies reduced their tobacco advertising during this period:

Lights Ramadan creative brief

The Holy Month of Ramadan is a time of fasting, in order to practice self restraint and cleanse the body. It is therefore a time when Muslims try to live a healthier life and it is believed that many people may try to give up smoking.

Smoking during daylight hours is banned until the Iftaar canon goes off around 6:30pm. Therefore smokers will not have had a cigarette for around 14 hours.

This being the case it is reasonable to assume that after such a period of abstinence the tar/nicotine levels of a Lights/U.L.T. brand may be more acceptable to consumers than at normal times. This coupled with a desire to lead a healthier life may provide an opportunity to get smokers to switch.

In addition, during Ramadan the level of support/activity for competitive brands are significantly reduced (both in advertising and at point of sale) allowing us to be more prominent with lesser funds. N.B. As Ramadan is the *Holy Month* it is very important that we are careful not to offend prospective consumers, the trade and importantly the religious authorities.

Finally, when looking at options, we must consider how this can be linked to the light shadow concept. Indeed one option might be to simply tweak the existing creative to allude to Ramadan as being the ideal time to switch to a Lights/U.L.T. brand.

Communication objectives (ATL/BTL):

To build awareness of the Lights category.

To build brand varieties of the Lights category as being the logical and sensible choice.

Role for communications:

Convince full flavour smokers that now (Ramadan) is the ideal time to switch to a U.L.T. brand.

Target audience:

All full flavour cigarette smokers (Arab).

Proposition:

Now (during Ramadan) is the time to switch to Lights.

Support:

Full range of U.K./U.S. Lights brands, i.e. tastes, flavours, price and image.

Creative considerations:

Must enhance existing 'Light Shadow' creative concept.

Proposition:

Now (during Ramadan) is the time to switch to Lights.

Support:

Full range of U.K./U.S. Lights brands, i.e. tastes, flavours, price and image.

Creative considerations:

Must enhance existing 'Light Shadow' creative concept.

Timing:

Immediate

Geography:

All GCC. Therefore must be able to run unbranded in Saudi, i.e. no brand names, nor mention of tar, nicotine, cigarettes etc

2. THE THREAT OF PUBLIC SMOKING RESTRICTIONS AND THE ETS ISSUE: INDUSTRY BATTLE PLANS

In 1978, a confidential study for the Tobacco Institute noted that second hand smoke, also called “passive smoking”, “involuntary smoking” and “environmental tobacco smoke” (ETS), was an issue of rising concern to the public and constituted “the most dangerous threat to the viability of the tobacco industry that has yet occurred.”⁶ Throughout the Middle East, the tobacco industry fought government attempts to restrict smoking in public places through covert lobbying, public relations campaigns, issuing “scientific” studies on the topic to create propaganda for their side, and taking any and all steps to “restore smoker confidence”.

A March 1987 ETS Plan for the Philip Morris EEMA Region succinctly summarizes the tobacco industry’s thinking on the ETS issue and the strategy they would employ to defeat restrictions on public smoking:

OVERVIEW AND OBJECTIVES

The primary threat of the ETS issue is its potential for converting non-smokers into anti-smokers and further undermining the social acceptability of smoking.

Objectives

- resist smoking restrictions;
- restore smoker confidence; and
- preserve product liability defence.

Two sub-objectives considered as prerequisites are:

- the reversal of scientific and popular opinion that ETS is harmful to health; and
- the restoration of the social acceptability of smoking.

Strategy

Develop expert opinion in order to influence and direct:

- popular attitudes;
- political attitudes;
- professional institutions; and
- interested parties (e.g. airlines, labour unions, hotel and restaurant associations).

It is critical to cultivate and exploit targeted sections of the media (e.g. scientific journals, labour newsletters) and selected communication channels (e.g. IATA, ILO) to achieve this influence.

Expert opinions will be solicited in two ways:

- identification of, education and support of indigenous, credible third-party spokesman in the whole area of environmental toxicology, and

- sponsor domestic research into air pollution, including indoor air quality (IAQ) and in-flight air-quality (IFAQ).

Resources needed

- recruit and direct ETS “white coats” (e.g. scientists);
- develop working relationship with “ETS experts” who are not associated with PM/industry
- strengthen available ETS argumentation;
- participate in PM/industry ETS briefings for Government leaders; and
- supply PM’s scientific input for NMA ETS efforts.

Assistance is needed from PMI N.Y./US Tobacco Industry in order to:

- ensure that ETS experts are available to submit papers and speak at ETS seminars which are not organised by the industry;
- provide early warning of WHO ETS strategies/plans (particularly as they impact on national health plans); develop advocacy advertising materials and media events (e.g. Great American Smoker’s Kits) to counter the antis; and stimulate US Government Delegates to more carefully scrutinize WHO activities and finances (in EEMA, concentrate on WHO Regional Offices in Alexandria, Brazzaville and Copenhagen);
- obtain industry agreement to expand Infotab’s charter and resources so that Infotab can lobby international organizations(e.g. ILO) and speak out publicly on the ETS issue...⁷

In the Middle East, the tobacco industry identified public health authorities and the media as the two main sources of “imported” material on ETS. They believed that the authorities were obtaining scientific studies on ETS carried out in developed countries “via WHO Geneva or WHO-EMRO,” studies they complained were “usually never disputed or criticized by the local health/scientific establishment neither officially nor privately.” At the same time, the industry was upset at the local and regional media for creating a “sensational effect by plagiarizing ETS related articles from Western media” covering the U.S. Surgeon General’s report and other scientific studies. Although smoking bans in governmental offices, hospitals and private companies had already been passed, they were not being strictly enforced. Even more encouraging for the tobacco industry was their belief that “fundamental differences exist between the Western and the GCC’s approach to individual rights and liberties. Non-Smokers in the GCC are more tolerant or less likely to fight for their ‘individual rights as non-smokers’, than their counterparts in the US or Europe.” Taking these factors into account, Philip Morris’s “1987 ETS Plan” for the GCC had two main objectives:

- a) Resist the adoption of smoking restrictions in public and [the] work place.*
- b) Minimise the impact of media reports on smokers’ confidence (In the GCC, smoker’s confidence is undermined by more than health concerns; government mandated restrictions already in force and peer pressure, on religious grounds, play an important role).*

In order to carry out these objectives, the company planned to organize an “ETS media briefing” for the Pan-Arab and Pan-Gulf media and “encourage print media in certain GCC countries to publish “rebuttals” on specific articles dealing with Smoking and Health.” Articles questioning the science behind ETS restrictions would be planted in local media by Radius/Leo Burnett and Tihama in Saudi Arabia using the “International Tobacco Science Information Service” (ITI). To carry out this plan, the company planned to utilize a “Philip Morris ‘ETS issue scientist’ in presentations tailored to Arab health officials/markets (argumentation, language, degree of sophistication). The same scientist should be prepared to address the primary Smoking and Health issues.” The company’s media operation in the Middle East would also need to be strengthened and a Corporate Affairs executive “identified, hired and relocated to Bahrain to assist in the coordination of smoking and health ETS related activities.” Finally, to be on the safe side, the company would “Obtain EEMA’s legal opinion on the feasibility of conducting ETS briefings for Government officials in foreign locations should in-country briefings become impractical or undesirable.”⁸

The tobacco industry constantly attempted to get its message on ETS into the media. One of its more successful tactics in the GCC region was to frame the threat of public smoking restrictions as one of “smokers’ rights”, as noted in this Philip Morris telex from George L. Nassif to Keith Ware:

Since the media has reacted promptly in favour of the smoker’s rights, Dr. Al Awadhi will definitely use ETS as part of his arsenal against our lobbying. The media has been very helpful and I have requested meetings with Kuwaiti editors. Depending on the outcome of our conversations, we hope to set up follow-up meetings and we can set up an ETS briefing for the Kuwaiti media to start with. Our point of view on ETS will definitely be carried by the Kuwaiti media if packaged properly.

Philip Morris also worked through Intermarkets, one of its media and corporate affairs firms, to “publicize in the GCC and Pan Arab media the IFAQ expert presentations and documents utilized on Oct. 25 during the IFAA Congress in Brussels. During this summer, Middle East Corporate Affairs successfully stimulated the GCC media to publicize Swissair’s policy of continuing to provide seats for smokers.”⁹ The tobacco industry closely watched the activities of WHO on the ETS issue. Jeffery Philips, the Cairo-based consultant hired by Philip Morris to monitor WHO-EMRO, tracked the work of Dr Mojtabai, the Head of the EMRO Disease Prevention and Control Department (and former Inspector General of Health for the late Shah of Iran) who was “responsible for anti-smoking programs – the principal emphasis of which is ETS”.¹⁰ Philip Morris continued to supply ETS and IFAQ issue papers supplied by the U.S. law firm of Covington & Burling to “key GCC health officials. As part of the effort, Middle East Corporate Affairs is working with Steve Parrishⁱⁱ to finalize by mid-1989 a tobacco issues Question and Answer booklet which will be printed in Arabic.”¹¹

ⁱⁱ Now Senior Vice President of Philip Morris.

One of the “key issues/threats” identified by META in its 1992–1993 workplan was the “threat of restrictions/bans on workplace smoking, public smoking, airline smoking and similar restrictions or bans in the hospitality sector.” In order to deal with this “threat” META members set out to:

Maintain and step up MEMAC’s ETS communications effort with a view to promote balanced coverage of the public smoking debate. Concentrate this effort on management, travel and leisure and business publications.

Consider, and if feasible, undertake a direct mailing campaign to leading GCC private employers, communicating the Industry’s arguments against workplace and public smoking restrictions/bans.

Establish contact with the Amman-based Arab Air Carriers Organisation (AACO) and develop this relationship to serve as a conduit through which technical/scientific arguments/solutions to cabin air quality problems can be communicated to GCC and Arab airlines.¹²

This strategy was refined and elaborated in an October 1992 “Analysis and Action Plan” prepared by Robin Allen for a meeting of META companies and their distributors in Dubai. This document has been reproduced in Annex 1 because of the sophistication of the plan and the fact that this meeting brought all of the principals together in the same place. It is also remarkable in its honesty (e.g. its advocacy of advancing “pseudo-scientific arguments” and “damage limitation”) as well as its specific targeting of Middle Eastern health officials.¹³

Cairo Conference on Indoor Air Quality (November 1993)

As in many other parts of the world, the tobacco industry sought to insert itself into independent scientific gatherings. A series of memos concerning a November 1993 conference in Cairo on Indoor Air Quality (IAQ) shows the extent to which they saw such conferences as public relations platforms (the conference was co-sponsored by Indoor Air International, which has been linked to the tobacco industry). The theme of the conference was “Occupational Hazards from Air Pollution”, and, it was noted with some relief, secondhand smoke was likely to be only one topic among many on the agenda. The industry planned to have three or four consultants attend. While the benefits of participating in somewhat open conferences had clear benefits, it also entailed some risks. As Charles Lister explained to Philip Morris colleague Mark Mansour:

Let me emphasize that this is not our conference to control. It was organized by the Ain Shams faculty. We have friendly relations with some of them, and can exercise a modest degree of influence, but we cannot (for example) cancel the meeting. Nor can we prevent unhelpful speakers. They will in essence allow anyone with a paper to give it. Again based upon past experience, I would expect an anti paper or two, but I would also expect them to be poorly done. A few pointed questions usually deflates them. All that being said, it still offers an opportunity. We will have some

friendly speakers there, and they could give interviews, meet regulators, etc. We could, in other words, market their visit. I could therefore be grateful for advice as to whether (1) you would like such efforts and (2) how you think they might best be conducted. This has to be done at arm's length, but we have in the past hired local PR people for other such events. Depending on the quality of the person, it has sometimes worked well.¹⁴

Another memo four days later from Lister to Mansour (also marked “privileged and confidential”) provided more details on the conference and a list of tasks to be done:

We want simple PR help, done carefully at arm's length, and of the kind that plausibly could be sought by a scientific society. We do not want to publicize the conference itself, or Ain Shams, or the Medical Faculty, except incidentally and as necessary to publicize some of speakers. There may be things at the conference we will want ignored...We will have several speakers, but there are two to concentrate on, and two others who might be fallbacks. The two choices are George Leslie and Roger Perry. Leslie is a toxicologist, formerly head or research for a large pharmaceutical firm, a lecturer at Imperial College, London, and president of Indoor Air International (IAI)ⁱⁱⁱ. Perry is the professor of engineering and environmental sciences at Imperial College, London, formerly chief advisor to the House of Commons Environment Committee, head of an environmental centre, a major figure in EC advisory committees, etc. Perry is the biggest name in environmental matters in the U.K.... I will be there to keep things going, oversee everything, etc., so I can also coordinate with the PR person. The chief contact, however should formally be listed as Leslie. Indeed I will give a paper on LED legislation, so as not to look like an odd outsider....

I suggest interviews, joint or separate, with Leslie and Perry. They play off each other well, and between them cover both health and IAQ questions. I can imagine stories to the effect that two eminent British scientists are in Cairo to attend an international conference regarding air pollution, and kindly expressed their views regarding those issues. A press conference would be fine, but I would hold it at a hotel or other place away from the Conference centre itself. Otherwise, others at the conference will be aware of it, and may want to become involved....

If it were possible to line up courtesy visits (in other words, informal lobbying) to government people, so much the better. Leslie could do them on the 16th or 17th, or they could both do them on the 14th. They could if necessary bring the Egyptian chairman of the organizing committee, who is a professor at Ain Shams. His name is Aly Massoud. I would not have Massoud go on such visits unless it were really necessary. I would not--not--have the PR person in direct contact with Massoud.¹⁵

ⁱⁱⁱ For more information on Perry, Leslie and IAI see David Concar and Michael Day, “Undercover Operation,” *New Scientist*, 16 May 1998; <http://www.newscientist.com/ns/980516/nsmoking.html>

One month later, and with the Conference fast approaching, Lister wrote to George Pantos emphasizing the need to keep the planned infiltration of the Conference at arm's length:

I have now had discussions with Intermarkets and they seem quite professional and good....I hope that they will be able to arrange visits by some of our speakers to relevant government people. I have also arranged that Intermarkets will coordinate with our contacts at Ain Shams. That coordination process should already have begun. In other words, the PR effort seems to be going well. I do want to emphasize that Intermarkets has been told that their client is the scientific society. The bill will come to the society, and all of the instructions will come from them. I believe that it is most important to keep this completely at arm's length, lest we disturb our local contacts and taint our visiting people. Please therefore remember the need for confidentiality....I gather that you have recently had a ban on smoking in hospitals, and I take it that this may be only the beginning. I hope we can help.¹⁶

During the 1980s, the tobacco industry also worked hard to prevent airlines in the region from going smoke-free. George Nassif of Philip Morris met with Saudia Airline officials to show them “sources that prove the lack of evidence” that passive smoking is harmful, avoiding the term “cigarette smoke” for the more reassuring sounding “ETS.” Part of his argument was that “smoking offers comfort and calming of the nerves for smoking passengers irrespective of the time-duration of the flights”.¹⁷ Although the industry succeeded in preventing many airlines in the region from going smoke free, pressure began to mount in the 1990s as a 1996 memo from Philip Morris points out. “A more pressing issue in the GCC is the threat of a possible smoking ban on domestic and intra-GCC flights inspired by the recent extension of the airline smoking ban in the U.S. to cover all flights of less than six hours.”¹⁸

International Agency for Research on Cancer

In 1988, a research branch of the World Health Organization, IARC (the International Agency for Research on Cancer), undertook the largest European epidemiological study on lung cancer and secondhand smoke. Philip Morris feared that the study, which they monitored closely through the use of undercover consultants as well as through direct contact with IARC investigators (under the guise of providing comments on the study's “inadequacies”), would lead to increased public smoking restrictions in Europe, which at that time had few.

Although the study itself demonstrated a 16% increase in the point estimate of risk in lung cancer for nonsmokers, it was described in newspapers as demonstrating no increase in risk. The industry was able to achieve this “balancing of perspective” through an inter-industry, multi-level strategy which included scientific, communications and government components. While the IARC study cost US\$ 2 million over the course of a ten-year period, Philip Morris planned to spend US\$ 2 million in one year and up to US\$ 4 million on research to counter the study's

anticipated findings. The industry also worked to prevent a monograph of the study from being published. Indeed, no such publication has yet been produced.^{iv}

In 1995, META companies began to prepare for the fallout in the region from the release of the IARC study, including inevitable calls for public smoking restrictions. It was noted that “IARC can be expected to provide support for this position, and health officials will exploit it to the greatest extent possible...[creating] tension between smokers and non-smokers, with the intention of eroding the tolerance that characterizes the popular response to smoking in public....Any effort to counter the IARC conclusions should focus on the preservation of social acceptability.” The industry planned to emphasize its support of accommodation and courtesy programmes in hotels and workplaces, particularly the International Hospitality Association’s “Courtesy of Choice” programme which had already been implemented in the United Arab Emirates and Kuwait (it was hoped this could be expanded to Oman and Bahrain). Regarding workplaces, the goal was to forestall smoking bans by developing a package to be distributed to key private sector and state-owned company employers, that this might be considered as an alternative to government-sponsored legislation. A complete copy of the 1995 IARC memo is provided in Annex 2.

The problem of countering the IARC study’s impact in the media was more challenging. The placement of advertisements promoting “courtesy” and successful workplace smoking programmes were suggested, as was an extremely aggressive media campaign which would rebut the IARC conclusions.¹⁹ As part of this effort, the industry employed the public relations firm of Burston-Marsteller to run a “news-bureau” which was to plant articles critical of the IARC and other scientific studies on passive smoking in order to supplement and reinforce other industry activities on the issue. The goals of this operation were laid out in a 1989 Philip Morris document entitled the “The E.T.S. Battle”:

The overriding strategy of the Philip Morris news bureau operation, then, is to fill the gap; to take the raw material of scientific fact, opinion and commentary from across Europe and repackage it into a range of targeted communications products that articulate the “other side” of the debate....Credibility for this core message is wholly dependent on source, and in addition to creating communications channels such as media events, seminars and conferences, we will need to talk in a variety of voices if what we want to say is to be heard, understood and acted upon. At times, we will speak as Philip Morris; sometimes we will need to speak as independent scientists, scientific groups and businessmen; and, finally, we will need to speak as the smoker.²⁰

^{iv} See Ong, Elisa K., Glantz, Stanton A., “Tobacco industry efforts subverting International Agency for Research on Cancer’s second-hand smoke study”, *The Lancet*, Volume 355, April 8, 2000, p. 1253–1259.

3. TOBACCO INDUSTRY INFLUENCE ON MIDDLE EAST CIGARETTE TESTING STANDARDS AND SPECIFICATIONS

*In these six markets our strategy to implement targeted government relations programs as well as extensive technical assistance and training programs has achieved remarkable results. Our Corporate Affairs, Science and Technology and Research and Development personnel have established a close and collaborative relationship with health officials, standards setting regulators and consumer testing laboratory directors.*²¹

-- Philip Morris, 1989

Throughout the 1980s and into the 1990s, the tobacco industry vigorously fought GCC government efforts to regulate the manufacture of tobacco products, including attempts to mandate:

- lower tar and nicotine levels;
- the printing of those levels on cigarette packs;
- controls and restrictions on certain cigarette additives;
- the placing of date of manufacture stamps on cigarette packets; and
- stronger health warning labels.

As none of the major companies manufactured cigarettes in the Middle East, the standards and specifications by which imported cigarettes were tested and allowed to enter the region were a major, ongoing concern to META companies. At every step, the industry fought proposed government regulations and sought to replace local testing methods with their own by overtly and covertly lobbying officials in both government and national and regional standards organizations.

Many of these regulations were embodied in a draft “GCC Standard for Cigarettes”, which governments had been discussing since 1988. These draft standards served as a rallying point for the tobacco industry, which saw them as a serious threat to their ability to do business in the Gulf and as potentially setting dangerous precedents for their operations in the rest of the world. A 1989 Philip Morris report stated that “[t]he most significant current lobbying effort” concerns the Draft Standards being coordinated by the Saudi Arabian Standards Organization (SASO). These standards had “already been amended in line with industry comments. Middle East Corporate Affairs is guiding the industry scientific lobbying effort on this Standard.”²²

In 1991, Philip Morris obtained a draft copy of the standard, putting META members in an awkward situation. Although they had developed detailed views on every aspect of the Standard, they had to be careful not to refer it directly. This raised the issue of “whether the industry should respond to a draft law of whose existence it should not have been aware. [PM had obtained a copy of the draft law from the Secretariat of the Council of Ministers but did not inform META members of its exact source].”²³


GCC - RESTRICTIVE PRODUCT REGULATIONS

Issue	The threat of the possible adoption of a Gulf Standard for Cigarettes which contains maximum limits for lead and cadmium, CO and Hydrogen Cyanide, a 15% ceiling on ingredients and a labelling section which would supersede all concessions obtained in the various GCC countries on the front of the pack HWL and the date of production requirement.
Strategy	<ol style="list-style-type: none"> 1. Continue to improve and develop PM's relations and scientific/professional dialogue with SASO/GSMO. With KGFI, maintain regular assistance to SASO/GSMO on food specifications and capitalize on the goodwill generated to reinforce PM's position on tobacco issues. 2. Work directly and with the Industry (META) to provide comments on the latest draft of the Gulf Standard and resolve remaining contentious issues in a manner favorable to PM. 3. Work closely with standards and specifications officials in individual GCC countries to secure their support of PM's and the Industry's position on remaining points of contention in the Gulf Standard. 4. Maintain a working relationship with the US resident Standards expert seconded to SASO and organize tobacco science/technology briefing trips in the US for SASO and other GCC standards officials. 5. Consider Involving the US Agricultural Trade Office and the USTR to ensure that SASO/GSMO standards do not present manufacturers with non-tariff trade barriers.

PHILIP MORRIS

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Tar and nicotine levels

In the early 1980s, limits on tar and nicotine in the GCC for imported cigarettes varied by country, ranging from 15–20 mg of tar and 1 mg of nicotine.^v At the time, few countries in the world even had limits, making the GCC's the lowest in the world. Even so, there was pressure for even further reductions in these levels, driven by published scientific reports as well as consumers, who believed that cigarettes with lower tar and nicotine levels were "safer".^{vi} In 1982, the Saudi Arabian Standards Organization (SASO) established the following maximum levels for imported cigarettes: "Nicotine content in cigarettes shall not be more than 0.8 mg per cigarette. Tar content in cigarettes shall not be more than 12 mg per cigarette.....".²⁴ Soon, the Arab Gulf Health

^v This was not necessarily the case for local and other tobacco products, as noted in an October 2, 1980 note from T.A. MacLeod of Philip Morris to colleague T.L. Wells. MacLeod points out that a local company cigarette company, Alnaar, was advertising Nefertiti cigarettes with claims that these were low in tar and nicotine (despite a declared tar content of more than 24 mgs per cig), meaning "pleasure, mildness, safety." At this time, no health warnings were required to appear in cigarette advertisements, but this ad carried a warning in Arabic, stating "Smoking damages health." PM's MacLeod, clearly annoyed, speculates that the manager of Alnaar "wants to curry favor from somebody either at the Ministry of Industry or from some other influential sector." "Egypt - Smoking and Health", PM 2024949003. October 2, 1980. <http://www.pmdocs.com/getallimg.asp?DOCID=2024949003>

^{vi} This was apparently not the case. For a full discussion, See Clive Bates & Martin Jarvis, "Why Low Tar Cigarettes Don't Work and How the Tobacco Industry Has Fooled the Smoking Public," ASH-UK and the Imperial Cancer Research Fund; <http://www.ash.org.uk/html/regulation/html/big-one.html>

Ministers Conference began discussing the possibility of adopting these maximum levels for the entire region.

In what would have been an astonishing admission at the time had it been made public, notes from a 1982 meeting of the MEWG pointed out that “nicotine limitations are of little use, as smokers will obtain their nicotine requirements from lower limit cigarettes by smoking more of them, and, in any case, nicotine may have little relevance to the smoking and health controversy.” The companies planned to advise health officials of this fact, hoping to dissuade them from adopting these standards—an interesting reversal of the position taken by the industry in other areas of the world, including the United States, where such information was kept as quiet as possible.²⁵

In August 1986, the MEWG Scientists met to discuss a proposed GCC Health Ministers’ Council Resolution requiring maximum constituent levels (MCLs) of 12 mg tar and 0.8 mg nicotine. Minutes of the meeting note that “lobbying activities had already taken place in Saudi and Bahrain and were underway in the other States.” Other countries at the time allowed limits of 13–15mg tar. It was decided that a BAT paper on the MCL topic could be adapted for use as a “hymn sheet” which all MEWG members could draw from to ensure all were “driving in the same direction in their own individual efforts.”²⁶ A position statement was also drafted which read, in part:

*The tobacco companies engage in a constructive dialogue with authorities wherever possible in their endeavor to provide the best possible products for their customers...it is in this spirit that a constructive dialogue is sought with the authorities of the GCC member countries....The authorities can expect from the tobacco companies an attitude of responsibility, particularly where scientific issues concerning public health are concerned...The tobacco companies cannot, however, be party to prohibitionist measures nor to efforts aimed at influencing the public.*²⁷

The Group goes on to suggest a scientific liaison committee be created to conjoin tobacco companies and authorities to channel scientific information from the industry to government on issues such as the role of nicotine in product acceptability, in order “to raise the level of understanding of complex issues rather than to give advice.”²⁸ While the companies had several times considered producing a scientific paper on MCLs, this idea was consistently passed over because “the legal implications were considerable.”²⁹ Generally, the industry relied on quoting the directives of other, more liberal regions such as Europe, and repeatedly pointing out that the countries of the GCC already had the lowest limits in the world.

Although they knew privately at the time that lowering tar and nicotine levels would not bring any health benefits to smokers nor would it lead to reductions in consumption, their inability to divulge these facts left the companies in a bind: “With regard to MCL’s there was the general opinion that authorities in the Gulf region are in the belief that reducing MCL’s brings people to the point that they stop smoking. It may be that WHO influences the Health Minister.”³⁰ The companies stressed however that “tar and nicotine should be treated separately. We should try to persuade the GCC states

that Nicotine limits should not be altered. All agreed that a reduction in the limits for Tar, although undesirable, would not be too serious for the Companies.”³¹

Cigarette testing specifications

In addition to the levels of the tar and nicotine, the tobacco industry also wanted to make sure that it controlled how the tests were carried out, who carried them out and what equipment they used. Only a few of the countries in the GCC actually owned and utilized smoking machines to test incoming cigarette shipments — Kuwait had one, Oman had ordered one.^{vii} META members agreed to provide, at their own expense, the SASO laboratory with cigarette testing equipment so that SASO could comply with ISO standards. META member companies well understood that “the industry would have the necessary protection as and when SASO adopted ISO standards.”³²

An issue arose in 1985 in Qatar when a shipment of Philip Morris cigarettes which the company claimed delivered .84 mg nicotine were tested and found to deliver 1.1 and 1.2 mgs per cigarette, exceeding Qatar’s regulated limits. The Qatari authorities immediately impounded the shipment and barred all subsequent shipments until the matter could be investigated. In response, Philip Morris sent a laboratory technician from Switzerland to meet with Qatari laboratory technicians.³³

By the end of 1989, Philip Morris was able to state that “Pursuant to the multi-year effort between Philip Morris scientists and Middle East Corporate Affairs professionals, Standards and Testing Officials in Bahrain, Kuwait, and Saudi Arabia now regularly consult with PM in advance of their decisions.”³⁴ This advice was not always dispensed, especially when it was in the tobacco industry’s interests. A 1993 visit to laboratories in Kuwait and Saudi Arabia revealed that not all were correctly applying ISO standards, but concluding, “why not leave it in this state, since their analytical results have not harmed our products for the past years.”³⁵

Printing of tar and nicotine levels on cigarette packs

Also of concern to the industry were moves by GCC governments to require that tar and nicotine levels be printed on packs exported to the region. In 1982, Bahrain and Saudi Arabia officially required that companies print tar and nicotine readings on packs. Oman also indicated that it would require tar and nicotine readings by the first day of 1983. The companies agreed that any manufacturer would be permitted to put tar and nicotine readings on packs whether the national government required this or not, although Philip Morris stated “that company policy would not allow them to introduce T/N readings unless formally requested by governments.”³⁶

^{vii} A detailed explanation of the cigarette testing protocol is described in the following document: Anonymous, April 16, 1984 “Protocol: The Sampling and testing of cigarettes for the determination of tar and nicotine in cigarette smoke”, B&W 655005510-655005551.

While the industry continually resisted revealing information on its products, the tar and nicotine issue was particularly charged, as the previous decade had seen fierce debate and competition on the topic in both the United States and the United Kingdom. The “tar derby”, launched by the requirement that tar and nicotine deliveries be reported on packages and in advertisements, led consumers to make brand choices based on these numbers, mistakenly assuming that “light” cigarettes were safer. The companies chose not to dispel this assumption, because to do so would have required them to reveal the extent of their knowledge regarding how unsafe all cigarettes are. For some companies, the “tar derby” allowed them to claim new market share through the marketing of cigarettes with lower and lower deliveries. As the image of Philip Morris’ flagship, Marlboro, was based on its “full flavor” characteristics, it was particularly threatened by this issue.

In the mid-1980’s, The British-American Tobacco Company began marketing a new cigarette, Barclay, with a channel-ventilated filter which allowed the cigarette to “cheat” traditional tar and nicotine testing methods—and causing smokers to receive much higher tar and nicotine deliveries than the package stated. The other companies saw this as threatening to the ISO standards they were working so hard to influence. Philip Morris conducted extensive testing, as well as lobbying of Middle East specifications officials, reporting that samples of Barclay cigarettes had been found to deliver tar content exceeding that named on the pack by at least 320%, even 600% on one sample.^{viii}

Additives

The tobacco industry viewed with great suspicion government attempts to regulate ingredients in cigarettes, particularly additives and heavy metals such as lead, cadmium, and hydrogen cyanide (HCN). An analysis of the cadmium^{ix} issue indicates the level, and the tone, of attention given to the problem. For example, the draft Gulf SASO standard on cigarettes required that cadmium content in cigarette tobacco not exceed 0.8 mg per cigarette, while testing had already shown that the average cadmium content of a cigarette was 1 mg per cigarette.³⁷ In 1986, the AGHMC had also stated its intention to issue an exhaustive cigarette product specification and undertake studies to determine “maximum permissible levels of CO [carbon monoxide] in cigarette smoke, in view of its hazardous effects in public health.”³⁸

In June of 1988, Philip Morris representatives met with SASO officials and others to discuss the draft standards. The company noted that Gulf Ministerial decrees drove these standards, so that even if a given testing tolerance were accepted by many other

^{viii} “Underreporting of Tar on Barclay Cigarettes,” April 1987, PM 2028457938-7939 PM; <http://www.pmdocs.com/getallimg.asp?DOCID=2028457938/7939>

^{ix} Cadmium is a trace heavy metal found in many foods (fish, grains, vegetables, water). It has no biological function, but cadmium poisoning is linked to cancers of the liver, bladder, prostate and lung, and to emphysema. Smokers have a daily cadmium exposure approximately twice that of non-smokers, and it has been found that cadmium accumulation is related to the number of pack-years smoked; only in smokers is cadmium found in the lung.

standards organizations around the world, governments in the GCC still might insist on something stricter. The company continued to dispute regulations concerning allowable levels of cadmium in tobacco (leaf, rather than the smoke measurement), and the company planned to push for a level of 5 ug for cadmium and 20 ug for lead.³⁹ Philip Morris continued to visit officials in the Middle East officials, lobbying for the removal of HCN in the Gulf Standards.

Throughout 1990, the SASO specifications continued to be a major area of concern to the tobacco industry. META officials continued to lobby to have the testing protocol defined to the companies' advantage, such as having lead and cadmium be measured in smoke only, rather than in tobacco blend, or having have HCN completely removed from the specification. Obviously there was concern that if such measures were applied in the GCC region, this would effectively set a precedent for the industry worldwide — something no company wanted, although META admitted that “additives was an issue that could not be ducked.”⁴⁰ META reopened contact with SASO again in 1992 over the Gulf Standard. The main issue of contention remained additives, particularly lead and cadmium, with META scientists admitting that “arguments against a limit are tenuous.”⁴¹ Their central concern remained that inclusion of these in the Standards could easily lead to a requirement that such measurements be printed on the package in addition to the tar and nicotine numbers.

Date of manufacture

Tobacco companies continued to fight regulations requiring them to print the date of manufacture on cigarette packs. Ostensibly, the industry objected to any further regulation, to the extra expense of having dates imprinted, but most of all, to the possibility that yet another regulation might cause shipments of their product to be denied entrance to the Middle East market.

In 1992 the industry began sending letters to various ministers in Qatar and the United Arab Emirates arguing that the date coding requirement should be dropped because “tobacco is not like perishable foodstuffs” and that a cigarette blend might be comprised of leaf from more than one source rendering it impossible to state how old the product was. In any case, they argued “Its fitness does not depend on age.” The industry emphasized that date coding might even be misleading to consumers, causing them to assume a difference in product quality due to date.⁴² Internally, however, META conceded that while arguments against date coding could be backed up with scientific evidence, the major arguments against date coding were “PR-based”, calling the concern “mainly emotive” and noting that “logic was not likely to succeed.”⁴³ META's agenda was challenged from within though when R. J. Reynolds began to advertise the use of its ‘Flavor Seal foil wrap’ in Saudi Arabia. Baroudi commented that RJR's emphasis of product freshness contradicted the META's call for the deletion of the date of production requirement. He called this marketing ploy “an open invitation to specifications authorities to ensure that freshness is maintained in all cigarettes, not by ‘Flavor Seal’...but through the introduction of a shelf-life requirement.”⁴⁴

Health warning labels

...prevent the spread of unacceptable health warning labeling, ensure appropriate attribution and where justified, invoke legal action.

-- Philip Morris, 1989

The tobacco industry also actively opposed requirements to place health warning labels on cigarette packs. In 1980 the Minister of Public Health of Lebanon decreed that tobacco products carry a warning in Arabic stating: "The Minister of Public Health warns you of the harmful effects of smoking". Describing some of the argumentation that Philip Morris would make against the warning labels, T. A. Macleod writes that since over 50% of cigarettes sold in Lebanon are smuggled, "no warning label would, of course, be applied and consumers may prefer to buy packs without warning labels." Since Lebanon is an important source of Arab press coverage, "Unreasonable warnings on advertisements might encourage advertisers to reduce their advertising in Lebanese publications, in favour of sources where less obnoxious warnings apply." And then of course the most practical argument against health warning the labels: "the absence of proof that smoking causes cancer."⁴⁵ The same year in Kuwait, the industry met with the Ministry of Public Health in order to get a stay of implementation in the hope that the wording of the health warning label could be "watered down".⁴⁶ In the Republic of Yemen, meanwhile, the MEWG reported that "the delay in the implementation of the health warning is being pursued."⁴⁷

In Bahrain, the industry took a harder line. Faced with a proposed health warning that the industry found "non-factual and unacceptable" the industry threatened to withhold advertising revenue from the media. "Hopefully," Borek wrote, "when the press will feel the sting of lost revenue, they will become active with the authorities to have the wording modified. Assuming that no change of mind can be assumed, how should the health warning be preceded (official warning, the ministry of health or the government of Bahrain has determined...) so that we can live with it?"⁴⁸ Fearful of legal liability, the industry in case after case lobbied to have government attribution on the warning labels. In the United Arab Emirates, the industry succeeded in convincing the Ministry of Information to authorize the use of the phrase "government warning" to precede any health warnings.⁴⁹

Unlike their later efforts to adopt voluntary codes in order to curry favor with health authorities, the tobacco industry opposed voluntarily placing health warnings on their products unless forced to do so. At meetings of the MEWG in 1982 and 1983, the companies agreed not to place health warnings on cigarette packs and tobacco advertising unless specifically required to by law.⁵⁰ The industry also sought to circumvent labelling requirements in Lebanon by persuading the Pan Arab press based in Lebanon to omit the health warnings,⁵¹ while in Saudi Arabia Brown & Williamson decided to remove health warnings from its advertisements for Kent cigarettes upon discovering that other manufacturers were not displaying them.⁵²

In Saudi Arabia, the tobacco companies used their contacts with the Saudi Health Minister to persuade him that the Arab Gulf Health Ministers' proposals for visible health warning labels in English and Arabic were "not in Saudi Arabia's interests", while in Iraq the industry believed that the state monopoly had a "vested interest in delaying or defeating proposals which adversely impact on their trading relationship with GCC member states. The related costs for them of a rotational warning label system should also move the monopoly to seek the assistance of the Iraqi Health Minister."⁵³

META members had agreed that the industry would only change the wording on health warning labels if forced to by new laws or regulations. Thus there was consternation in 1988 when Gallaher, without consulting other companies, changed the words on its warning labels from "a major cause" to "a main cause" and "cancer" to "lung cancer". Writing to META members, Abdullah Borek opined that "A statement linking smoking to LUNG CANCER looks right to the uninitiated public. By improving the 'accuracy' of the warning without apparent need, its credibility is enhanced and I wonder whether this is really in the best interest of the industry."⁵⁴ In 1988, META members finally agreed on a common position on health warning labels, that "no legislation should be pre-empted by 'over-compliance'."⁵⁵ The overall strategy of the industry, as described by Philip Morris, was to "prevent the spread of unacceptable health warning labeling, ensure appropriate attribution and where justified, invoke legal action."⁵⁶

Tobacco industry influence on specifications standards

By late 1992, SASO had, at least in principle, adopted 1990 ISO standards for sampling, and had taken over the testing of all cigarette imports for tar and nicotine. While the draft Gulf Standard for cigarettes (4 years in the making) had been successfully amended through industry influence with GCC and SASO specifications officials, the 1992 draft still contained the restrictive additives sections (regarding HCN, lead, cadmium and the 15% ceiling on additives) the industry so feared. The labelling section was even more frustrating, reviving several requirements on which the industry had already gained concessions in more than one GCC country. These included date coding and the front of the pack health warning label. Overall, the companies feared the draft law would "Expose the Industry...to penalties, confiscation, and stock destruction...due to improper sampling."⁵⁷

GCC PRODUCT SPECIFICATIONS AND LABELLING REQUIREMENTS

COUNTRY	MCL'S		FRONT OF THE PACK	HEALTH WARNING LABEL (Arabic and English)*		PRODUCTION DATE		DATE IMPLEMENTED
	Tar	Nic.		Attribution	Warning	Year	Month	
Saudi Arabia	12	0.8	Yes	No - Health Warning	Smoking is a main cause of lung cancer, lung diseases and of heart and arteries diseases	Yes	Yes	1.07.1987
Kuwait	12	0.8	No	(*)	(*)	Yes	No	1.01.1988
U.A.E.	12	0.8	No	(*)	(*)	Yes	Yes (1)	1.10.1989
Bahrain	12	0.8	No	(*)	(*)	No	No	1.07.1987
Oman	12	0.8	No	(*)	(*)	No	No	1.10.1987
Qatar	12	0.8	No	(*)	(*)	Yes	Yes	1.09.1992

* Even where language is not officially specified, practice is to use both Arabic and English.

(1) Officially required, not strictly enforced (with the agreement of the MOH). Requirement recently revised. Industry asking its deletion officially.

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The lessons from the GCC reveal that the tobacco industry will do whatever it takes to avoid being regulated. If politically they feel that they can no longer resist regulations on the manufacture of tobacco products, then they will do everything in their power to ensure that they set the agenda for what is to be tested, how it is to be tested and by whom.

4. TOBACCO INDUSTRY EFFORTS TO DEFEAT AND AMEND TAX INCREASE PROPOSALS

Throughout the 1980s and into the 1990s, the tobacco industry worked tirelessly to defeat proposals to increase tobacco taxes. Through the covert lobbying of policy-makers and the manipulation of the media, the tobacco industry was able to delay these increases. When it looked they would no longer be able to stave off action, they cleverly exploited differences between GCC countries to ensure that the proposals that did pass benefited them to the maximum extent possible.

A key issue for the industry was that, short of defeating tax increases, they at least wanted to ensure that specific rather than ad valorem taxes were approved. The reason was that since most of the multinationals sold premium (i.e. higher priced brands), a specific tax would tend to lower the percentage differential between premium and low-price brands, while an ad valorem tax would maintain it.^x A 1992 Philip Morris

^x A simple example shows why. Assume that premium cigarettes sell for US\$1 and low-price brands \$0.50. A specific tax of say \$0.50 would raise the price of the premium brand to \$1.50 and the low price brand to \$1.00. On the other hand an ad valorem tax of say 50%, would raise the price of the premium brand to \$1.50 while only increasing the low price brand to \$0.75.

document states that “proposals for higher customs duty on cigarettes constitute a threat to PM’s aim of increased sales in the GCC [and that] the ad valorem structure of GCC customs duty on cigarettes undermines PM’s efforts to achieve increased market share and higher profitability.”⁵⁹

Beware the “Arab psyche”

As the region stood on the brink of war, Robin Allen assured META that “in this climate of uncertainty and apprehension, the tobacco industry is safe from any *unified* GCC legislation concerning tax, bans on promotions, etc.; but middle-level bureaucrats in those GCC countries further from the war zone, i.e. Oman and the UAE, could still initiate moves harmful to the industry – especially on health grounds.” He did caution them however that “Stocks and distribution centers should be kept as far as possible from the *likely* war zone – and identifiable only by the names of the national/regional/local distributors. US and British names (i.e. places of business) would be all the more vulnerable to civil disturbance if Israel was involved in the conflict, in which case the Arab psyche could erupt – in different degrees in different places – against any conspicuous Western presence, including Western brand names.”⁶⁰

Battling tax increases

The primary goal of the tobacco companies was to delay and defeat GCC proposals for a unified approach to raising tax increases across the region. A draft Corporate Affairs Plan for Philip Morris laid out the strategy:

- *Pursue the strategy to moderate and postpone the customs duty increase to 50% and ensure that all GCC member states adopt a high minimum specific duty.*
- *Guide and support Dr. Abdullah Alomran in his dialogue with the GCC Secretariat, the Ministers of Finance and the Customs Directors. Identify additional nationals of other member states who will act as consultants on tax and other tobacco issues.*
- *Cooperate with Rothmans and Gallaher in an effort to strengthen the forces in the UAE who are resisting GCC tax increases and thereby preventing a GCC consensus agreement to harmonize tobacco taxes. Continue to support our UAE Distributor and his business partner, the Foreign Minister, with argument and studies.*
- *Use this period when GCC Finance Ministers cannot agree on increased tobacco taxes as an opportunity to lobby in Saudi Arabia to increase the minimum specific tax....Support our Distributors in a renewed drive to persuade the other GCC countries to adopt a high minimum specific tax within the existing tax incidence.*
- *Lobby the GCC Customs Directors to permit duty drawback on goods which are destroyed.*⁶¹

Internally, Philip Morris acknowledged that it could adapt to increased taxes if it had to through the use of “flexible pricing to retain the affordability and competitiveness of our products, as in the GCC...or to establish a presence in growth markets, for example in Iraq and UAE exports.” Nevertheless, their long range plan called for Corporate Affairs to “Continue to foster the delay in the duty hike in the GCC” and advocate the adoption of a “Saudi-type high minimum specific duty, the conversion to a fully specific structure, and the defeat of any future initiatives to increase the tax incidence.” The company noted that:

The lack of agreement within the Council of Rulers of the United Arab Emirates precludes the consensus sought by the GCC as a prerequisite for implementing the duty rate increase. In addition to creating delays in the duty rate increase, this situation has provided us with greater opportunity to pursue our auxiliary objective of generating wider acceptance of the principle of a high minimum specific duty.....Our ultimate objective is to work towards the adoption of a fully specific duty for cigarettes, and to avert any further increase in tax incidence.

Philip Morris also made sure to exploit these differences within the GCC to make sure that a unified approach was not adopted. A 1989 memo notes that the AGHMC had “positively responded to Philip Morris supplied argumentation” by adopting a specific duty and that:

The Bahrain and UAE Health Ministers have written to their respective Finance Ministers endorsing this proposal, and we will persuade the Health Ministries in Kuwait, Qatar and Oman likewise to recommend the proposal to their Ministries of Finance. The Health Ministers’ intervention with an amended proposal has clearly slowed down the process by which any GCC-wide agreement on tobacco taxation could be reached. We shall exploit this by lobbying within the quarrelling United Arab Emirates against any increase in incidence. We shall also fuel the debate with a proposal for a wholly specific tax instead of the present ad valorem rate of 30%.⁶²

Three years later, the issue was still being debated, with Philip Morris having “secured the endorsement of the specific duty concept by the Gulf Health Ministers Council.” Turning that support for the concept into a workable proposal that could pass was the next step. This time however they had a new ally: the US Trade Representative (USTR). The company noted that it had “secured USTR support to [sic] specific duty and ensured that such support is communicated to GCC Finance and Customs officials.”^{xi} The company also sought to:

^{xi} There are a number of references in the documents to the tobacco industry securing U.S. government support for its agenda in the Gulf on a whole host of issues, including SASO standards and differential taxes on domestic vs. foreign brands in Egypt. See, for example, December 1989, Philip Morris EFTA Eastern Europe Middle East Africa Long Range Plan 900000 – 920000 PM 2500066142/6294; DEVELOPMENTS IN THE GCC, 17 December 1985; PM 2044440393/0396; PM EEMA Region: 1987 ETS Plan, 9 March 1987; PM 2023544027-4039; 12th META Meeting 18 October 1991; PM 2028651392-1400.

- *Ensure the AAH (PM's distributor in the UAE) mobilizes all his contacts to delay a decision on a duty increase. To this end, seek renewed discussion of the structure (both as an end in itself and as a delaying tactic) and linkage of the cigarette duty with the thorny long-term external tariff harmonization issue....*
- *With the assistance of PM's Washington Relations Office determine the readiness of new US ambassadors in Riyadh and Oman to support PM's efforts.*⁶³

When the GCC Anti-Smoking Committee again rebuffed Philip Morris' call for a specific duty in November of 1992, the company sought to "Possibly seek to discredit Kuwait's representative within the Committee as a qualified authority to address a fiscal/trade issue of this nature."⁶⁴

Having managed to tie up the issue within the Health Ministers Council, they then sought to take their campaign to finance and customs officials and obtain more active US Government (USG) support, as this 1994 Philip Morris document makes clear:

STRATEGY

1. Capitalize on the GCC Health Ministers Council's support of the specific duty concept. Directly and through PM's in-market consultants, work with individual countries' health ministries to obtain a similar endorsement by finance and customs officials at an individual country and GCC-wide level.
2. With the assistance of the USG, continue to advance the duty level and structure as a US trade issue and work jointly with US diplomatic missions to GCC countries to present tailored submissions urging conversion to fully specific duty.
3. Seek to mollify proposals of further duty increases. Consider proposing (as a fall-back) semi-regular adjustments of the specific duty level.

ACTIVITIES

1. Brief the Director of the Middle East Desk at the USTR (done May 15). Submit written brief within May. Follow up by Mid-June to ensure US diplomatic missions in the GCC are instructed to assist PM efforts. Follow-up with joint efforts (PM and US trade representatives) with health, finance and customs officials at individual country and GCC-wide level.
2. Seek a renewed endorsement by the GCC Health Ministers Council of the specific duty concept which clearly calls for a conversion to a fully specific as opposed to the Saudi-type minimum specific duty (action prior to the next Council conference, December 1991).
3. Maintain efforts in Bahrain, Qatar and Oman with the assistance of in-market consultants and distributors to obtain individual countries' finance and customs officials support of a conversion to fully specific duty.
4. Meet with and re-brief the GCC Assistant Secretary General for Economic Affairs (possibly in conjunction with an invitation to address the New York Society) with a view to obtain his support of fully specific duty with the GCC Financial and Economic Cooperation Committee (Finance Ministers Committee).⁶⁵

5. CONCLUSION

“META has so far sought to avoid being perceived by interlocutors, particularly government officials, as an organised Industry lobby within the GCC, established to challenge government authority. For this reason, Industry action under the META umbrella has so far been limited to coordinated action agreed by META members but undertaken through distributors or other coalitions of natural allies of the Industry. A campaign...carrying the Industry’s signature would probably invite official resentment and would be provocative to decision-makers instead of creating the goodwill that is sought. The case is different if similar campaigns are undertaken separately, but in succession by different companies.”

-- Bisharah Baroudi, Philip Morris, 1991⁶⁶

The multinational tobacco companies in the Middle East have a long, well-documented history of collusion. They formed a series of trade associations (Middle East Working Group, then the Middle East Tobacco Association and its various working groups) which fought health regulations with everything at their disposal. The companies coordinated strategy and developed and executed action plans to fight advertising bans, public smoking restrictions, tax increases and product regulations. They sought to protect and promote an environment in which smoking was socially acceptable and, when this conflicted with Islamic teachings, they sought to manipulate religious leaders in the region.

The industry vigorously fought Gulf Cooperation Council policies designed to regulate the tar and nicotine delivers of cigarettes imported into the region, going so far as to provide several countries with new cigarette testing equipment and training for testing officials, while simultaneously opposing and working to dilute testing specification standards. Tobacco industry groups also worked to defeat all proposals to increase tobacco taxes, often succeeding in delaying such increases, and influencing proposals to their own advantage.

The tobacco industry actively lobbied prominent political figures, scientific standards officials, and the media. In addition, they planted pro-tobacco articles in newspapers and manipulated third party organizations to lobby on behalf of tobacco industry interests. The companies spied on and infiltrated potential foes, such as the World Health Organization and the Arab Gulf States Health Ministers’ Council, and were therefore eminently prepared to react forcefully against every tobacco control policy proposed.

Despite the best efforts of committed public health officials, politicians, and public health groups in the Middle East, the multinational tobacco industry continues to wield enormous power over the policymaking process in the region. Until their power is curtailed, and their efforts exposed, the tobacco industry will continue to profit at the expense of the health of the people of the Middle East.

Annex 1

PUBLIC SMOKING

THE INDUSTRY AND THE CAMPAIGN AGAINST PUBLIC SMOKING (ETS) IN THE GCC: ANALYSIS & ACTION PLAN PREPARED FOR META AND META COMPANIES' FIELD MANAGERS' MEETINGS, DUBAI, OCTOBER 19, 1992

A) Background - The Nature of the Problem:

- 1) The pace has quickened and the tone has sharpened in the last 18 months in the unfavourable publicity surrounding the industry and Public Smoking in GCC countries.
- 2) Anti-industry publicity in 1992 concerning Public Smoking is running at some ten times the pace of the industry's own MEMAC-placed articles in the regional and Pan-Arab press, the total of which is 10 placements on this issue since last January.
- 3) Some three-quarters of the anti-industry publicity is sourced from overseas, and three-quarters of this is generated from US-based reports.
- 4) The themes which are most frequently taken up in GCC publications are:
 - the direct health hazard of ETS; equating it for example with asbestos fumes (a US-based initiated theme).
 - children at risk from parents who smoke.
 - airlines' ban on smokers including an International Civil Aviation Organisation proposal which was covered four times in four different GCC papers.
- 5) Anti-industry bias includes an ill-concealed allegation by one UAE Arabic paper that one tobacco company bribed a US Scientist to give the industry a favourable report in a review on ETS by a quasi-government US agency.
- 6) There is no attempt by GCC publications to seek comments from industry or META company spokesmen to redress the balance. Tobacco-industry basling has official support. Journalists regurgitate international wire agency reports verbatim. If editing is done, they will first cut pro-industry comment. Objectivity cannot be expected from journalists who are occasionally Western but overwhelmingly Indian or Pakistani, and whose passports are retained by their newspapers on arrival and only given back when their contracts expire or they are deported for falling foul of their management. Articles which are opposed to official policy run the risk of official approval.

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No attempt is - or will be - made by GCC publications on their own initiative to question official or Western-led prejudice against tobacco smoke being solely to blame for the poor quality of indoor air ventilation.

- 7) The thrust of the campaign against the industry has been moving out of the public sector and progressively into the area of banning smoking in private sector places of work, airlines, and hotels/restaurants. Left to their own initiative, GCC and Pan-Arab publications will emphatically not question Western-source propaganda nor will they use editorial space to put the countervailing arguments that, for example, ETS is a symptom of poor ventilation and not its cause; that chemicals emitted from new carpeting, photocopiers, motor vehicle exhaust, and bacteria or fungi found growing in improperly-serviced air conditioning and ventilation systems, are far more unhealthy than ETS.
- 8) A good example of the general antipathy to the industry are the GCC Anti-Smoking Symposia in Bahrain from 25-27 October where proposals include:
 - a total ban on smoking in government departments and in all public places.
 - Total ban on smoking in the workplace.

These sessions will be given wide play in the GCC press.
- 9) The only countervailing factor against the hostility of GCC propaganda is that started by META via Memac, namely to circulate industry placements and to prevail on GCC publications that there is another side which merits a hearing.
- 10) Of its own, however, the META-led press strategy cannot change official-led hostility, particularly when this hostile prejudice actually starts in the West and is merely taken up second-hand by GCC officials, publications, and other camp-followers.
- 11) While acknowledging that a press campaign on its own is inadequate to take the sting out of the growing public and official prejudice, META cannot ignore a problem that is building up against the industry.
- 12) Left to themselves, hotel managers in the GCC are more inclined to follow trends imposed either by their own higher corporate authorities, or by official views in the countries in which they operate. These managers - and owners, employers and managers in other private sector work places - cannot be expected to resist these trends if their only point of reference is the occasional newspaper article putting the industry's case. They need more direct access to information to help them decide for themselves what - if any - restrictions should be imposed!

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B) Categories/Key Sections

I propose five main categories for META to consider targeting - (in ways proposed below).

- | | | | |
|----|--|----|----------------|
| 1) | Airlines & Public Transport i.e. taxis. | } | |
| 2) | Hotels & Restaurants. | } | Private Sector |
| 3) | Private sector working places i.e. offices. | } | |
| 4) | Quasi-government public sector
i.e. Chamber of Commerce | }} | Public Sector |
| 5) | Government offices | }} | |

The last two are listed last because it is in these public-sector areas where a proactive campaign runs the greatest risk of stiff opposition, not to say outright hostility leading to accusations of "meddling". However that does not preclude diplomatic overtures such as those suggested below. It does however mean that the focus of META's strategy should aim at the private sector.

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C) Policy Aims

- 1) Damage limitation including verbal overtures by individuals selected and approved in advance by META unanimously to reason with chosen public sector health and other officials to encourage these to consider industry arguments on merit rather than aping western authorities such as WHO, the Environmental Protection Agency (EPA) in Washington, EC commission etc.
- 2) Take the sting out of official and private sector prejudice.
- 3) Stopping or at least delaying more - and more comprehensive - restrictions in the private sector.
- 4) Change the mood among private sector managers from one of confrontation to one of "live and let live", or co-existence based on mutual courtesy between smoker and non-smoker.

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D) Strategy

- 1) To move the argument away from ETS in "sick-building syndromes" to the other well-documented causes: inadequate ventilation, inadequate filtration and contaminated ventilation systems as causes of sore eyes, dry throat, nose and chest irritation, fatigue, coughing, nausea etc.
- 2) To drive home the point that tobacco is a favoured target
 - a) for political reasons among those who have an in-bred prejudice against multi-national "big business"..
 - b) because tobacco smoke is the most visible component of indoor air, leading to assume that it is the cause of discomfort.
- 3) To advance "pseudo-scientific arguments" such as cigarette smoke being unfairly singled out because, being tangible and visible, it is easy to target, but at all costs to AVOID
 - a) the trap of scientific arguments which only carry weight if one scientist is talking to another, but which are incomprehensible to many laymen, and which most if not all laymen are ill-equipped to advance; and
 - b) any dispute or reference to tobacco and Islam.
- 4) To advance the argument that smoking bans fail to achieve their desired ends i.e. of making places of work and pleasure less unhealthy, for reasons cited above.
- 5) **TARGET** principally
 - a) private sector business owners, managers and employers.
 - b) GCC health officials who are rational and reasonable where tobacco issues are concerned:
 - i.e. - Dr. Abdul Wahab Al-Muhaideb (UAE Assistant Under-Secretary for Preventive Health).
 - Dr. Khalifah Al-Jaber, Director of Preventive Health, Qatar Ministry of Health.
 - Dr. Abdul Qader Al-Ghassany, Oman's Assistant Under-Secretary for Preventive Health.

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Annex 2

InterOffice Memo

To: Mr. Shg G. Carlson
 From: Mark Mansour
 Date: October 10, 1995
 Subject: **IARC PLAN FOR THE GCC REGION**

c.c.: BGB, CJN

I. INTRODUCTION

In light of the recent session in Lausanne addressing IARC's potential impact on consumer freedoms in the EEMA region, the following will provide our assessment of its potential impact in our markets, as well as our planned response given available resources weighed against such expected impact.

II. IMPORTANT CONSIDERATIONS

Several threshold observations warrant mention, and these should be kept in mind throughout any assessment of IARC's expected impact. These are as follows:

- Since early 1994, legislation/decrees significantly restricting public smoking have been adopted in Kuwait and Bahrain. The UAE is now considering similar action. The categorization of Kuwait as a priority market should be reconsidered, as broad public smoking restrictions have already been adopted and will be implemented there as of October 1, 1995.
- All of the measures noted above are predicated on the collective conviction of GCC health officials that environmental tobacco smoke poses serious health risks. These convictions were in place and actively influencing GCC health policy even before the EPA Risk Assessment was released in January 1993.
- The only impediment to broad-based adoption and implementation of these measures is the acknowledgement on the part of GCC regional and national health authorities that smoking has strong public acceptance in all of the countries of the area. Hence, they are focusing on health education as a means of paving the way toward gradual implementation of public smoking restrictions in all of the six GCC countries.
- The slow progress of public smoking restrictions is thus more attributable to social realities than to any acceptance on the part of regional authorities of Industry arguments regarding ETS.
- As further reinforcement, GCC Health authorities are supporting their arguments against public smoking by appealing to religious convictions. Increasingly, they are categorizing the use of tobacco as contrary to Islamic precepts, promoting the religious unacceptability of smoking.

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- Many of the traditional avenues of rebuttal available in other EEMA markets (use of trade unions, consumer surveys, smokers rights associations, etc.) are unknown, and would not be tolerated in the GCC region in any event.
- Although the industry will continue to oppose severe public smoking restrictions and bans through the avenue of government relations, the most likely result is that such measures would be temporarily forestalled or softened until authorities are able to prepare public opinion for the more draconian measures they have made clear they favor. IARC can be expected to provide support for this position, and health officials will exploit it to the greatest extent possible.

With the foregoing in mind, the remainder of this memorandum will assess the potential impact of IARC in this region, our proposed strategy for addressing its implications and resources we will need in order to implement these proposed strategies.

III. POTENTIAL IMPACT OF IARC

As suggested above, IARC's primary impact will be to reinforce existing convictions regarding ETS among the decision-making authorities in the GCC health hierarchy. These individuals all are closely associated, or in contact with the WHO and UICC, and have already formed opinions on the subject. Their convictions are such that, in Bahrain and Kuwait, they zealously promoted and succeeded in enacting sweeping public smoking restrictions that have largely been ignored in Bahrain and the subject of severe public opposition on the eve of their implementation in Kuwait.

The IARC activities in all probability will receive some press coverage in the region, much of which will be generated by press conferences and interviews led by health authorities eager to sway public opinion in favor of smoking bans. IARC will be used to buttress their case and erode the public acceptability of smoking, making such bans more acceptable to a thus-far tolerant and accommodating public.

IARC's overall impact will most likely be indirect. It is unlikely that much in the way of scientific analysis will reach the public. Rather, health authorities will package IARC in a manner designed to create tension between smokers and non-smokers, with the intention of eroding the tolerance that characterizes the popular response to smoking in public.

IV. RESPONDING TO IARC

In light of this, any effort to counter the IARC conclusions should focus on the preservation of social acceptability. As long as the public is open-minded to the counter-arguments regarding ETS, then social acceptability will remain strong.

Assuming the futility of attempting to change the views of policy makers, the following will address what we believe are the remaining avenues for countering the IARC threat: developing and expanding accommodation and workplace smoking programs, and addressing scientific arguments and emphasizing the success of accommodation/workplace programs through the media.

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must necessarily be made by the Industry to the aforementioned employers. In view of this, the following steps may be taken with a view toward forestalling an expansion of public sector smoking bans to the private sector:

- complete development of a workplace smoking package, based on existing packages in use in the U.S. and Europe;
- after developing a realistic list of key private sector and state-owned company employers in the UAE, Bahrain and Kuwait, present the package as an alternative to government-sponsored legislation;
- once a sufficient number of employers in each country agree to try the program, prepare and execute a media campaign similar to the one prepared for the "Courtesy of Choice" and
- promote a successful initiative to national authorities as an alternative to mandatory workplace smoking restrictions.

The number of employers and human resource limitations, but more importantly the lack of an ally such as the IIA, will make development and execution of a workplace smoking program much more difficult than has been the case for hospitality industry programs. Nevertheless, it is hoped that several well-publicized successes will generate interest and assist in the spread of such a campaign.

The Media

It is difficult to convey scientific, or any other, counter-arguments to the broader public in the GCC region. This is because, aside from our obvious inability to engage in religious debates, all local media, print and electronic, are controlled by government, thus limiting our capacity to argue our case regarding the science of ETS because it conflicts with the Mufti's established anti-smoking agenda. The lack of a professional, independent, investigative-oriented media effectively negates the utility of scientific briefings. As a result, conveying Industry arguments on this issue (and others) in the GCC media has proven extremely difficult in the past, and will remain so.

The following measures represent several of the more feasible approaches for conveying the industry's position, given the realities noted above:

- place Industry advertisements refuting the IARC conclusions;
- encourage the hospitality industry to intensify publicity for the "Courtesy of Choice" program, stressing courtesy and accommodation as being viable options for addressing concerns about public smoking (although this will be effective only if done in conjunction with forceful refutations of IARC conclusions);
- publish a series of Industry-sponsored advertisements promoting courtesy and accommodation as a solution to concerns regarding public smoking (such a campaign has been prepared and will begin running soon);
- seek to publicize each successful implementation of a workplace smoking program, with special emphasis on the voluntary nature of the undertaking;

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- seek to publicize each successful implementation of a workplace smoking program, with special emphasis on the voluntary nature of the undertaking;

- use the several Arabic-language pan-Arab magazines to publish detailed rebuttals of IARC conclusions, for the benefit of the general public.

In any event, timing is critical in the execution of any media program. If a media offensive is launched and IARC coverage in the region proves to be minimal, we will have drawn attention to it needlessly. If health authorities (as expected) exploit IARC findings and the industry does not respond promptly, it runs the risk of allowing the various health ministries throughout the region to redefine the debate over ETS.

V. AREA CA REQUIREMENTS

It would be most helpful if we had available for ready translation/adaptation to Arabic advertisements designed to address the scientific arguments relative to IARC. These could then be used at our discretion, depending on whether our information suggests that the authorities are prepared to make an issue of the IARC project's findings.

Additionally, continued support for the IFA "Courtesy of Choice" program will be vital if we are to sustain the program so that it provides impetus for a softening in the policy approach to public smoking.

Finally, any assistance in the development and initiation of workplace smoking packages that could be adapted to local circumstances would be most helpful.

Our ability to materially influence the impact of IARC will, regardless of the foregoing, be constrained by variables beyond FM's and the Industry's control, most notably the following:

- lack of personnel to manage the effort (two CA managers for a region encompassing seven countries) and,
- severe limitations in the areas of government relations, ally building and communications imposed by the restrictive governmental systems that characterize the entire region.

Kind regards,



Mark Mansour

Annex 3

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