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Evaluating Receipt of and Inability to Discontinue Tobacco Industry Direct Mail

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Introduction

Direct mail (DM) from the tobacco industry delivers branded advertisements, cost-saving coupons, and even gifts to consumers who have opted-in to the brand's system. In New Jersey, one in three adult smokers in 2001 received DM, with current smokers 4.5 times more likely than never/former smokers to receive DM.¹ A more recent national survey found that 25% of 18–34-year-old smokers received DM.² Consumers can register for DM easily on a brand's website, through toll-free phone, or by attending a brand-sponsored event. Once registered, they receive targeted mailings designed to encourage product trial, increase consumption, build relationships with customers, and reinforce brand image.³ Other studies have documented DM's receipt by smokers and influence on smoking behaviors, including initiation and experimentation in youth and young adults.^{4,5,6} What has not been studied is smokers' interest and ability to stop receiving these mailings.

Methods

Once approved by the University's IRB, data were collected from 58 current smokers or quitters within the past 6 months who presented to a tobacco dependence program between July 2013–February 2014. Smokers were asked about receipt of direct mail/email from tobacco industry brands (e.g., Marlboro) including: Have you received DM ever/in the last 6 months? How did you get on the mailing list? If you wanted to stop receiving DM, would you know how to opt out?

Results

Nearly 2 out of 3 smokers (35/58; 60%) reported ever receiving DM and 29% (17/58) had received DM in the last 6 months. Of those who ever received DM, 77% (27/35) reported

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they received price-reducing coupons and 70% of these (19/27) had redeemed them. Merely 5% (2/35) of participants wanted to continue receiving DM. However, only 34% (12/35) reported knowing how to remove themselves from the mailing list.

Conclusions

Although limited by small sample size, our study found high rates of DM receipt, which is problematic since it is intended to increase smoking behavior. In addition, 70% of smokers in our study who received DM redeemed coupons, which may influence continued purchase of cigarettes.⁷ Finally, while just 5% of participants who received DM wanted to continue, only one-third said they would know how to remove themselves from the mailing list, leaving them susceptible to continued advertising. Direct mail interventions vary based on country. In the United States, DM aimed at adults is allowed under the First Amendment to the U.S. Constitution. Internationally, although many signatories to the WHO Framework Convention on Tobacco Control have banned direct mail marketing through Article 13,⁸ others have chosen not to address it or adopted limited bans, such as allowing DM addressed to adults.⁹ Tobacco dependence treatment should be aware of DM, inquire about it, and provide strategies for removing clients' names from industry databases. Opt-out directions are printed in small letters on DM envelopes and brand e-mails include links to unsubscribe. Supplying information on how to stop DM is important for eliminating one source of exposure to tobacco advertising and coupons which may influence smoking behavior.

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