
The Development of an Advertising Campaign to Discourage Smoking Initiation among Children and Youth

Laura A. Peracchio and David Luna

The authors describe the development of an age-appropriate analogy-based advertising campaign to discourage tobacco use initiation among children and youth. The campaign was based on an assessment of young smokers' and nonsmokers' attitudes and beliefs about smoking and the development of young children's analogical reasoning ability. The ad campaign was tested to assess the age appropriateness of the ad analogies and then was implemented.

Laura A. Peracchio is Professor of Marketing and **David Luna** is a doctoral candidate in Marketing at the School of Business, University of Wisconsin-Milwaukee. The authors thank the American Cancer Society of Wisconsin for assistance with the research.

Youth tobacco consumption has been called the single most important public health issue of our era (Tuakli, Smith, and Heaton 1990). Every day in the United States, 3,000 children and teenagers under the age of 18 years begin smoking (Light 1996). According to the U.S. Food and Drug Administration (FDA), at least 1,000 of those children and teens will die eventually from a tobacco-related disease. Children and adolescents are the only group that continues to take up smoking in large numbers, causing the FDA to define smoking as a "pediatric disease." Nearly nine of 10 smokers begin in their childhood or teenage years (Light 1996; Tuakli, Smith, and Heaton 1990).

Given the high rate of smoking initiation among children and youth and the adverse health effects of smoking, discouraging young people from beginning to use tobacco is essential. Non-profit organizations and government agencies are turning increasingly to social marketing to devise advertising that prevents children and youth from initiating smoking (Andreasen 1993; Pechmann and Ratneshwar 1994). To create effective advertising messages that discourage tobacco use initiation, we first must understand the differences between young smokers' and nonsmokers' attitudes and beliefs about smoking. From that understanding, ad messages can be developed that address young people's perceptions of tobacco. Further, age differences in children and youth's ability to comprehend antismoking advertising must be considered. Much research has documented that young children often do not understand advertising content (John and Cole 1986; Macklin 1994; Peracchio 1992). One method for enhancing children's understanding of advertising designed to discourage smoking initiation is to employ age-appropriate analogies between the impact of smoking and items familiar to children.

We describe the development of an age-appropriate advertising campaign designed to discourage tobacco use initiation among children. The campaign was based on young smokers' and nonsmokers' perceptions of tobacco and the emergence of children's analogical reasoning ability. In study 1, we used a youth-adapted focus group method to assess teenagers' attitudes and beliefs toward smoking. From the understanding of youth tobacco perceptions garnered in that research, a print advertising campaign thought to be age appropriate was developed by the American Cancer Society and BVK McDonald, an advertising agency. The campaign employed analogies to relate the negative aspects of smoking to items familiar to children. In study 2, we tested the campaign with children seven to 11 years of age to assess

the age appropriateness of the analogical messages developed. After the testing, the ad campaign was implemented.

Youth and Smoking

Smoking kills one-half million Americans every year, resulting in more deaths than all other preventable causes of death combined (Bristow 1994). Adult smoking rates declined over the last decade, presumably as more adult smokers became aware of and took action to prevent the adverse health effects of smoking. Over the same time period, smoking rates for high school seniors rose to 34% (Saatchi & Saatchi 1997) and the mean age for smoking initiation declined to 12-years (McGee and Stanton 1993). Despite the health risks, young smokers continue to take up smoking in large numbers.

Researchers have investigated many factors that may predict youth smoking initiation, such as considering smoking a positive behavior, having a family member who smokes, living in a single-parent or low socioeconomic status household, and expecting to be a smoker in the future. Less research emphasis has been placed on identifying the differences in attitudes and beliefs toward smoking between teenage smokers and nonsmokers (Conrad, Flay, and Hill 1992; Goddard 1990; McGee and Stanton 1993). Pechmann and Ratneshwar (1994) have suggested that more research is needed on the issue. The differences in attitudes toward smoking between teenage smokers and nonsmokers may be an important component in the decision to initiate tobacco consumption and may provide some insight to how to discourage youth from smoking.

Study 1

Method

Overview. To maximize the accuracy and usefulness of the focus group information generated, we used a youth/child-adapted focus group method (Segall and Paine 1995; Summers 1994). The design of the research included employing moderators with whom youth could easily gain rapport, conducting focus groups in familiar and comfortable settings, limiting the length of the focus group to no more than one hour, and separating male and female respondents.

Respondents. Study respondents were 48 male and 58 female high school students 15 to 18 years of age. Fifty-five of the study respondents were smokers and 51 were nonsmokers. Study respondents attended a

very large public high school in the Midwest. The school was chosen because its student body came from both urban and suburban areas and represented a diverse socioeconomic population that was felt to be representative of the target population. Twenty-five percent of the students at the school and of the study respondents were people of color.

Moderators. The four moderators were college students 20 to 21 years of age. They were selected to be several years older than the respondents to enhance credibility with the teen respondents (Grandstaff 1996). Two of the moderators were female and two were male. The moderators were trained extensively in techniques for moderating focus groups developed by Krueger (1988). They also received training in how to work with and elicit responses from teenagers.

Procedure. Respondents participated in the focus groups during a scheduled class period. They were asked to come to a lounge area/classroom furnished with sofas. They were told that they would be discussing issues of interest to teens. Once in the lounge, they completed a screening questionnaire that asked about their smoking behavior. Respondents were then divided into four groups based on their gender and smoking behavior: female smokers, male smokers, female nonsmokers, and male nonsmokers. Five focus groups of each type were conducted for a total of 20 focus groups. Each focus group had an average of five or six members. Female moderators conducted groups with female respondents, and male moderators conducted groups with male respondents. Moderators remained with the same group type (e.g., female smokers) for the entire study to ensure internal consistency.

After the respondents had been divided into the four group types, moderators explained that the purpose of the study was to investigate teenagers' opinions about smoking. All focus group discussions were audiotaped. Respondents were informed that the tape recordings would be used to facilitate analysis of their responses. They were told that all responses would be reported in summary form and that no individuals would be identified by name. Moderators then asked the respondents if they had any questions.

Next, focus group discussions began on the topic of smoking and proceeded to specific issues, including the content of antismoking messages and the target audience for such messages. Following the procedure outlined by Krueger (1988), moderators drew their questions from a discussion guide that included general questions and specific probes. Each group discussion lasted approximately 50 minutes.

After completion of the focus groups, moderators transcribed the audiotapes and made additional notes. Typed transcripts were used in conjunction with the notes to prepare a summary of the focus group findings.

Results

The analysis of the focus group transcripts was conducted systematically according to procedures defined by Krueger (1988). Responses were analyzed by both gender and smoking behavior. Because responses were not moderated by gender, that variable is not discussed further. As suggested by Krueger (1988), the four focus group moderators assisted with the analysis of the transcripts. Clear trends and patterns emerged among the focus groups. In the following summary, all findings are illustrated with representative comments from the respondents.

Initiation of Smoking Behavior. Smokers reported that they began smoking as a means of group affiliation.

"If you see other people do it then you crave to join in the group."

"If you're in a group, it just kinda happens."

"I wanted to fit in with older people and everyone else was smoking."

Smokers reported that they continued to smoke as a perceived way to relieve stress and that they were unable to quit.

"If you're really stressed it seems [to] be relaxing, but constantly smoking doesn't seem relaxing after a while."

"It seems like it's supposed to relax you, but it really doesn't. It's tough to quit."

"I started to smoke because I thought it was cool, but now it's an addiction."

Nonsmokers felt a sense of support from others for their decision not to smoke.

"Some of my friends would be unbelievably mad at me if I even did start to smoke. It's like there is an opposite pressure almost, too."

"Well, so many people don't smoke and the people who do, a lot of people don't like that they do. There's a lot of nonsmokers. It's like you don't have any pressure to smoke because people may not like you if you do."

"...people I hang with don't smoke. I can choose my friends."

A major difference between smokers and nonsmokers appeared to be whether or not their peers smoked. Smokers indicated that they had begun smoking as a "social thing" and then found they "needed" to smoke regularly with or without peers. Several smokers also indicated that their parents as well as their peers smoked.

"My Mom smoked so I always knew I would smoke."

"I think a lot of it starts off at the family level and I think that people who are raised in a family with smokers in it are a lot more inclined to smoke."

Negative Aspects of Smoking. The most commonly mentioned drawbacks of smoking were the bad smell and effect on eyes. They were mentioned universally by all nonsmokers and by the vast majority of smokers.

"It's a gross habit. It smells."

"Even just being around people who smoke, you know, my eyes start to water and burn."

"I hate the smell. I also have contacts and it kills my eyes."

"It stinks. It gets on your clothes. It gets on your breath."

Long-term health effects, such as lung cancer, were mentioned by nonsmokers as reasons for not smoking. Nonsmokers often paired the long-term health risks with the short-term effects of smoking.

"What probably makes me not smoke are all the health risks. Talking about lungs and can't breathe. Health hazards. It's not worth it."

"I don't smoke because I know what it does to your health. All that tar and your lungs turn black and decrepit."

"The fact that you can die from it is a turn-off, but also the fact that you smell like it especially when you are around others."

Smokers rarely addressed the long-term health effects of smoking. When probed about those effects, smokers commented:

"It's hard to imagine what is going on inside your body; hard to see the immediate effects; out of sight, out of mind."

"Maybe if I could imagine what it was really doing to my body."

Targeting Youth. Both smokers and nonsmokers agreed that antismoking messages should be directed to younger children. They indicated that attitudes toward smoking were already well formed by adolescence.

"They have to start really young. I mean, probably young enough that they really don't understand what smoking really is. I mean, if you wait until seventh or eighth grade, that's already the peak of when they start trying the stuff. I think they should start younger."

"I don't think they would convince anybody unless they start at elementary. By the time they get to high school, it's too late."

"If I was a smoker and I saw those pictures I'd be 'Oh yeah. Right.' But if I was a little kid and kept seeing those posters as I got older, that picture would stick in my mind in the long-run."

"At our age most teenagers think those ads are stupid. That's why I think they have to start younger. That's when they're not as prone to worry about what other people think."

Antismoking Message Content. Both smokers and nonsmokers offered advice on the content of an advertising message targeting children. A common theme throughout their comments was the "grossness" of smoking.

"It smells so gross."

"Gross thing to do."

"Gross. Smokers should get a life."

Both smokers and nonsmokers suggested a focus on the negative effects of smoking.

"It makes it hard to breathe."

"Getting sick from it."

"It's a dirty habit."

"How it really can affect your health."

"Takes so much out of you physically."

"Smoking bothers your eyes really bad."

Smokers also offered suggestions on how to design advertising that would be attention-getting.

"They have to use some tactics that really jolt you."

"If it's something that sticks in the back of your head."

"They may look at the pictures, but not really focus on the issues."

Discussion

Study 1 examined the differences in attitudes and beliefs about smoking between young smokers and nonsmokers. The results indicated that by the age of

12 or 13, both smokers and nonsmokers had already made long-term smoking decisions and no longer listened to or accepted smoking prevention messages. The teenage respondents indicated that young children are a more appropriate target for such educational messages. That finding supports previous research suggesting that age-specific messages should be directed toward children younger than 12 years of age (Bristow 1994; Fergusson and Horwood 1995). Thus, we determined that an ad campaign to discourage smoking initiation should target young children from seven to 11 years of age.

The results also had implications for the content of smoking prevention advertising campaigns. They indicated that the short-term negative effects of smoking, the bad smell and effect on eyes, are of primary importance to both young smokers and nonsmokers when they consider the consequences of smoking. Only nonsmokers spontaneously focused on the negative long-term health effects of smoking and made connections between the short- and long-term negative effects of smoking. When young smokers were probed about the negative health effects of smoking, they indicated that they had difficulty imagining what effects smoking might have on their bodies. That difference between smokers and nonsmokers suggests that if the long-term health risks of smoking are to be conveyed effectively to both future nonsmokers and smokers, the health risks must be communicated in a concrete rather than abstract form.

One starting point for designing a message that concretely communicates the health risks of smoking would be to draw a parallel between smoking and items or behaviors that are analogous to smoking and have the same short-term negative characteristics as cigarette smoke (e.g., the bad smell and effect on eyes). Theories about the development of children's analogical reasoning were used to create such ad messages (Gentner and Toupin 1986). Analogical reasoning involves recognizing the similarities or relationships between objects in one domain and mapping them onto objects in a second domain. Gentner (1983) devised a developmental theory of analogical reasoning that suggests that young children tend to rely on surface details or attribute-based similarity when using analogical reasoning. Such attribute-based reasoning tends to result in erroneous interpretations when the objects do not have similar surface features. In contrast, older children and adults are thought to abstract the relationships between objects when reasoning by analogy and are not constrained by surface features. Gentner's research suggests that

children undergo a shift from a focus on surface features to a reliance on abstract relations as they develop. She suggests that major changes occur in children's ability to reason by abstract analogy at the age of nine or 10 years, depending on the difficulty of the analogy.

Age-appropriate analogies between the negative effects of smoking and items familiar to children were developed. The analogies were designed to assist in creating connections between the short-term effects and the long-term health consequences of smoking. They were used to develop an ad campaign that made the long-term health consequences of smoking concrete by drawing analogies between smoking and things familiar to young people that they know are harmful, such as insecticide and car exhaust. Both substances have the same short-term negative effects, bad smell and effect on eyes, as cigarette smoke.

We designed a second study to assess age differences in children's understanding of the analogies presented in the ads.

Study 2

Method

Respondents. Study respondents were 50 male and 54 female grade school students seven to 11 years of age. Forty-five of the respondents lived in smoking households and 59 lived in nonsmoking households. They attended a large public grammar school in the Midwest. Parents' permission was obtained for children to participate in the focus groups.

Moderators. The four moderators were the same college students who had conducted the focus groups in study 1 with one exception. The one new moderator was trained in the same way as the others. All moderators were given additional training in how to work with and elicit responses from children. As in study 1, the two female moderators worked with female respondents and the two male moderators worked with male respondents.

Smoking Prevention Ads. Three smoking prevention ads designed by BVK McDonald, an advertising agency, for use by the American Cancer Society were tested. One of the ads, "Sock", depicts a dirty, grimy sock with the caption, "Gross," next to an ashtray full of cigarette butts with the caption, "Really gross." The analogy developed in the ad required that children create a simple association between the sock and the ashtray based on their similar surface features.

The second ad, "Insect", contains the following copy: "Every year nicotine is used to kill millions of insects and thousands of smokers. Considering they contain the same basic chemicals, smoking a cigarette is equivalent to spraying insecticide in your own face. And why would you want to do that?" Below the copy is a picture of a dead fly. The analogy was designed to be more complex than the one in the sock ad as it asks the child to abstract the relationships between smoking and the objects presented.

The third ad, "Tailpipe", reads, "Inhale a lethal dose of carbon monoxide and it's called suicide. Inhale a smaller amount and it's called smoking. Believe it or not, cigarette smoke contains the same poisonous gas as automobile exhaust. So if you wouldn't consider sucking on a tailpipe, why would you want to smoke?" Below the copy is a picture of a tailpipe. The ad was designed to be the most complex in the campaign. First, children had to comprehend the relationship between exhaust fumes and tailpipe and then draw a parallel to the relationship between smoke and cigarette. The analogy is particularly complex as it makes reference to abstract concepts (Small 1990). In addition, the illustration does not explicitly communicate the consequences of smoking, which must be inferred from the ad copy. Finally, children had to comprehend a second analogy that suggests exhaust fumes are as harmful to a person as smoking.

The three ads represent varying levels of analogical complexity. The sock ad offers the simplest analogy, the insect ad is more complex, and the tailpipe ad requires the most complex analogical reasoning. All of the ads feature situations familiar to children and focus on short-term negative consequences (e.g., sucking on a tailpipe). The ads then relate the short-term consequences to the long-term health effects of smoking.

Procedure. The procedure was similar to that used in study 1. Children participated in the focus groups during scheduled class time. They were asked to come to an empty classroom furnished with small tables and chairs for the younger children and larger tables and chairs for the older children. They were told they would be discussing issues of interest to kids. Once in the classroom, they completed a screening questionnaire that asked about the smoking behavior in their household. Respondents were then divided into four groups based on their gender and household smoking behavior: girls from smoking households, boys from smoking households, girls from nonsmoking households and boys from nonsmoking households. Four

focus groups of each type were conducted for a total of 16 focus groups, which had an average of five to seven members. Moderators remained with the same group type (e.g., females from smoking households) for the entire study.

After the respondents had been divided into the four group types, the same introductory procedure used in study 1 was followed. Discussions focused on the sample ads. The children were shown the ads and asked to tell a story about what was happening in each one. Specific probes were used to assess the children's understanding of the individual elements and terminology in each of the ads. As in studies by Donaldson (1978) and Peracchio (1992), the ads were visible and available during the sessions to provide a context for the verbal discussions. The children frequently incorporated the ads into their responses, using words and gestures. Each group discussion lasted approximately 40 minutes. After completion of the focus groups, moderators transcribed the audiotapes and prepared a summary of the focus group findings.

Results

The analysis of the focus group transcripts was conducted in the same way as in study 1. In accord with the study 1 findings, children's responses were not moderated by gender or household smoking behavior. A clear pattern of results emerged from the focus groups. In the following summary, the findings are illustrated with representative comments from the children.

Sock Ad. Even the youngest children understood that the sock ad was meant to portray the sock and the cigarette butts as "gross." Some of the younger children commented:

"That's gross [pointing to the sock] and that's gross [pointing to the ashtray]."

"They're both really smelly."

"Ugly gross. Stink gross."

Children seven to 11 years of age indicated an understanding of the simple analogy and message in the sock ad.

Insect Ad. The youngest children, seven- and eight-year-olds, had difficulty understanding the insect ad. They commented:

"Someone sprayed [the fly] with bug spray."

"I don't think smoking is good for killing flies."

"He's dead [the fly]. Cause of all that smoke."

Children nine to 11 years of age showed a deeper understanding of the ad.

"Smoking and insecticides are the same thing. They both can kill you. You shouldn't smoke, you'll die."

"I wouldn't spray insecticide on me. Why would I smoke?"

Tailpipe Ad. All but the oldest children had difficulty understanding the tailpipe ad. Most of the youngest children, seven to eight years of age, understood that exhaust fumes are harmful. However, they failed to relate the tailpipe and vehicle exhaust to smoking. They commented:

"Never stand behind a bus because you could get poisonous in your face."

"People sometimes get sick from exhaust."

"It's putting pollution in the air."

Children eight to 10 years of age showed some understanding of a connection between smoking and the tailpipe. They had a variety of hypotheses about the connection, but did not seem to completely comprehend the ad.

"About smoke, that it is turning the tailpipe into a cigarette."

"The person who's driving is smoking."

"No matter what kind of smoking it is, it can always make you sick."

Only the 11-year-olds had an adultlike understanding of the analogy between smoking and the tailpipe.

"You could hurt yourself with that stuff. The same stuff in car exhaust is in cigarettes... You should be warned about smoking."

"The tailpipe of a car is like the same as smoking and smoking could kill you...both of them could kill you."

Discussion

The results of study 2 indicate age differences in children's understanding of advertising analogies designed to discourage smoking initiation. The youngest children, seven- and eight-year-olds, understood the smoking prevention message in only the most straightforward analogy based on surface features, the sock ad. That ad offers the least complex anti-smoking message as it is based on the analogy between smoking (the ashtray) and something undesirable to children (the grimy sock).

The insect ad presents a more complex analogy

between cigarette smoke and insecticide. Seven- and eight-year-olds had difficulty comprehending the analogy as they attempted to connect the dead fly and the cigarette smoke in a literal way. They frequently suggested that cigarette smoke must have killed the fly. Older children, nine- to 11-year-olds, had a more complex understanding of the ad and were able to create an analogy between cigarette smoke and insecticide. For those children, the ad successfully conveyed the long-term effects of smoking in a concrete way by analogy to something familiar, insecticide.

Finally, the tailpipe advertising analogy was difficult to comprehend for all but the oldest children, the 11-year-olds. The seven- and eight-year-olds focused on a commonly known negative effect of car exhaust, pollution. They did not try to create an analogy between the ad and smoking. The nine- to 10-year-olds tried to develop some type of analogy between smoking and the tailpipe. They expressed a variety of hypotheses about the connections between vehicle exhaust and smoking (e.g., that the driver was smoking and that all smoke, presumably both from cigarettes and cars, makes you sick). Only the oldest children, the 11-year-olds, created an adultlike analogy between the effects of car exhaust and cigarette smoke. Like the insect ad, the tailpipe ad communicated the long-term effects of smoking concretely to those children by relating smoking to something they knew about, car exhaust.

Our findings are consistent with those on the development of inference-making ability and analogical reasoning in children (Gentner 1983; Gentner and Toupin 1986). As expected, the younger children did not efficiently use the strategies necessary to make inferences and comprehend analogies. Instead, they relied on surface features when performing analogical reasoning. The older children showed improved analogical abilities and were able to employ relational reasoning in their processing of analogies. Hence, in study 2, the development of analogical reasoning and inference making was evident. The youngest children, seven- to eight-year-olds, were able to understand only the simplest analogy presented in the sock ad. The nine- to 10-year-olds showed ability to understand the moderately complex analogy in the insect ad, but not the more complex analogy in the tailpipe ad. Apparently the nine- and 10-year-olds were undergoing a shift to relational reasoning and their ability depended on the complexity of the analogy presented. The oldest children, the 11-year-olds, comprehended even the most complex analogy based on relational reasoning presented in the tailpipe ad.

The research findings demonstrated that the three ads in the campaign target children in an age-appropriate way. The sock ad targets seven- to eight-year-olds, the insect ad targets nine- to 10-year-olds, and the tailpipe ad targets 11-year-olds. The ads were distributed as school posters that could be hung in or outside the classroom of the target age group. The sock ad was also produced as a billboard for use on outdoor signs near schools.

Conclusions

Youth smoking has become a dominant public policy issue as society has become aware of the negative health effects of smoking as well as the early initiation of smoking among young people (Andreasen 1993). Despite the importance of the issue, few studies have explored how to develop effective advertising message content to discourage youth smoking initiation (Pechmann and Ratneshwar 1994). We therefore examined young smokers' and nonsmokers' attitudes toward smoking and assessed children's ability to comprehend age-appropriate analogies to develop an advertising campaign that would discourage youth from beginning to smoke.

Our research makes several contributions to knowledge about youth smoking initiation. One contribution is the development of an advertising campaign to discourage youth smoking initiation. The ad campaign focuses on communicating the long-term health effects of smoking in a concrete way by creating analogies between the effects of smoking and things with which children are familiar, such as insecticide and vehicle exhaust. The objective of the campaign is to provide both potential smokers and nonsmokers with relevant and meaningful images and messages about the long-term effects of smoking.

Second, the research elucidates some of the attitudinal differences between teenage smokers and nonsmokers. The results indicate that teenage smokers do not have concrete internal images of the negative health effects of smoking, but nonsmokers do seem to have such images. If attempts to communicate the long-term negative health effects of smoking are to influence potential future smokers, they must portray those effects in a way to which children can relate. Care should be taken, however, to ensure that ads do not provoke high levels of arousal or anxiety, which may have a negative effect on persuasion (Keller and Block 1996; Henthorne, LaTour, and Nataraajan 1993). Finally, efforts to reduce youth smoking initiation should be directed to children younger than 12

years of age who have not begun to make decisions about smoking.

Another contribution of our research is the testing of the smoking prevention ad campaign to ensure delivery of age-appropriate messages. The testing indicated that the youngest children in the target group did not comprehend two of the ads. The target group was then divided into three age groups—seven- to eight-year-olds, nine- to 10-year-olds, and 11-year-olds—and ads were directed toward children in an age-appropriate way. Our research results underscore the importance of pretesting child-directed ads to ensure that children can comprehend the advertising message.

Previous research clearly indicates that cigarette advertising influences children's and teenagers' perceptions of smoking (Pechmann and Ratneshwar 1994). Several studies have found that tobacco advertising is a central factor in encouraging teenagers to start to smoke and that cigarette smoking among youth rises with the amount of money spent on cigarette advertising by the tobacco industry (Light 1996). Hence, advertising seems to influence children's decisions to initiate smoking. Our research provides some insight to how advertising can be used to discourage the initiation of tobacco consumption. More research is needed, however, to explore other methods and other types of advertising to achieve that goal. Research is also needed to measure the effectiveness of advertising attempts to reduce tobacco initiation. Greater funding of advertising efforts and programs to discourage smoking initiation is essential if the smoking prevention message is to be heard by youth over the appeals of the tobacco industry.

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