

The Sociological Impact of Attitudes Toward Smoking: Secondary Effects of the Demarketing of Smoking

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ABSTRACT. *Demarketing* (i.e., the act of discouraging consumption or use [of specific products or services]) of cigarettes has been a public policy objective for the past 40 years or more. The use of demarketing actions, such as antismoking advertising campaigns, has contributed to the decrease of the proportion of smokers in the general population. A consequence of demarketing efforts has been the development of negative stereotypes of smokers. The author investigated whether the negative stereotypes that are directed at smokers can be transferred by observers to services that the smokers use. The results of the scenario-based experiment indicated that participants who had read narrative descriptions of a customer had expectations of *service atmospherics* (physical characteristics, e.g., cleanliness, odors) that were more negative when associated with a smoker target than when associated with a nonsmoker target.

Key words: attitudes, consumer behavior, decision making, out-group derogation, stereotypes

DEMARKETING is "that aspect of marketing that deals with discouraging customers in general or a certain class of customers in particular on either a temporary or permanent basis," according to Kotler and Levy (1971, p. 75). Though individual firms may engage in efforts to reduce demand for specific products in times of shortage, governments through public policy initiatives often advocate one behavior over another. A particular behavior in American society that has witnessed a concerted 40-year demarketing effort has been cigarette smoking. In a public policy initiative, cigarette smoking has been demarketed through a combination of elements such as (a) mass media coverage of the ill effects of smoking and (b) directed government-sponsored campaigns. These demarketing

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efforts have had a profound impact on smoking behavior in the United States. Even though the cigarette industry combated demarketing efforts by spending over \$12.5 billion in advertising and promotions in the United States alone for the year 2002 (U.S. Federal Trade Commission, 2004), government reports have indicated that the proportion of smokers in the general population has continued to decline. The number of smokers in 2002, the most recent year for which statistics are available, formed 22% of the general population, down from 43% in 1964 when the U.S. Surgeon General first announced that smoking was a health risk (U.S. Centers for Disease Control and Prevention, 2004).

The primary effect of the ongoing demarketing campaign has been the development of social and cultural norms maintaining the view that smoking is an unacceptable behavior in public and private places (Kim & Shanahan, 2003). The demarketing campaign has resulted in increased negative attitudes toward smoking and a stigma toward individuals who smoke (Kim & Shanahan; Pechmann & Ratneshwar, 1994). Antismoking advertising alone is not responsible for changes in perceptions of smoking. Researchers (e.g., McAlister, Krosnick, & Milburn, 1984; Meier, 1991) have long noted that negative public sentiment as expressed through parents, peers, and siblings are important factors in the formation of unfavorable attitudes toward smoking. In the present article, I directly investigated the negative perceptions that have been fostered by the ongoing demarketing efforts that have been directed at smoking to determine whether there is a difference in (a) inferences about and attitudes toward a target person who is depicted as one who smokes versus one who does not and (b) attitudes, *atmospheric expectations* (physical characteristics, e.g., cleanliness, odors), and intentions toward a target service that is associated with either a person who smokes or one who does not smoke.

The remainder of the present article is organized as follows. First, I will briefly discuss the demarketing of smoking in society. Next, to understand the effect of other customers on service evaluations, I will synthesize the extant literature concerning customer interactions to support a set of hypotheses concerning the effects of the demarketing of smoking. Next, I will describe a study to test the hypothesized relations and will provide the results. Lastly, I will discuss the present findings.

The Demarketing of Smoking

The demarketing of smoking has primarily occurred along three fronts: mass media (i.e., the use of antismoking advertisements), regulatory measures (i.e., taxes and smoking bans), and public opinion (i.e., normative behavior).

The goal of mass media efforts of governments and some cigarette manufacturers has been to discourage and prevent smoking behavior (Logan & Longo, 1999). The goal of many of these social marketing campaigns has been to prevent adolescents from starting to smoke cigarettes (Bauman, LaPrelle, Brown,

Koch, & Padgett, 1991; Flynn et al., 1992). The targeting of adolescents is due to the majority of smokers taking up the habit before age of 18 years, even though tobacco sales to minors are illegal. Findings concerning antismoking advertising have shown that exposure of students to these ads has contributed to the enhancement of school-based prevention programs (Flynn et al.), resulting in decreased smoking rates, the formation of less favorable evaluations of peers who smoke (Pechmann & Ratneshwar, 1994), and the recall and use of negative smoker stereotypes (Pechmann & Knight, 2002).

Especially relevant here are Pechmann and Ratneshwar's (1994) and Pechmann and Knight's (2002) findings that an individual's exposure to the smoking behavior of others activates existing negative cognitive schemas concerning smoking behavior. *Cognitive schemas* refer to mental representations of a behavior in the individual's mind (Cohen & Ebbesen, 1979). Litz, Payne, and Colletti (1987) suggested that such a negative schema exists. The antismoking schema is composed of representations that are based on previously formed experiences or judgments and that influence how an individual interprets a current situation. An individual's inferences resulting from the activation of the smoking schema may result in lower evaluations of—among other characteristics—the abilities, appearance, personality, and likeability of a smoker as compared to those of a nonsmoker (Litz et al.).

Regulatory measures for the demarketing of smoking have most commonly taken the form of excise taxes levied on cigarettes (e.g., Brown, 1995) and the ban of smoking in public and private places (e.g., West, 2002). Increasing the excise tax on cigarettes reduces both the initiation of new smokers and the amount of cigarettes purchased by key consumer groups (Brown; Hyland et al., 2005; Leverett, Ashe, Gerard, Jenson, & Woollery, 2002). For example, Leverett et al. noted that a 10% increase in the price of a pack of cigarettes effectively decreases smoking in the young adult market by 4% and smoking among children and adolescents by 6%–7%. Therefore, tax increases are effective in preventing young smokers from becoming regular smokers. Hu, Sung, and Keeler (1995) and Liang, Chaloupka, Nichter, and Clayton (2003) have even argued that because demand can be managed through price, excise taxes may be more effective in reducing cigarette smoking than advertising.

Governments have instituted other regulatory measures, such as smoking bans and restrictions, because of the conflict from the interaction between smokers and nonsmokers in public places (Gibson, 1997). Smoking restrictions and bans serve to effectively limit locations and occasions of product use. The countries of Ireland and Cuba and some U.S. states, such as New York and California, (Savona, Suckling, & Moretti, 2005) have outlawed smoking in places of business, including restaurants, to decrease negative work-related health effects (West, 2002). These measures force patrons to leave the premises if they want to smoke. Regulatory measures such as these have contributed to an in-group (nonsmokers)–out-group (smokers) mentality, feeding the development of a negative stereotype of smokers (Gilbert, Hannan, & Lowe, 1998).

Stigmas apply to attributes that discredit the individual (Goffman, 1963). The stigma associated with smoking behavior has led to a negative stereotype of smokers as a group. The smoking stigma is based on the changing social attitude toward smoking as reflected in the propagation of antismoking media campaigns and the general population's acceptance of smoking bans. Over the past century, public opinion of and public sentiment toward smoking has essentially come full circle.

In the early 19th century, activists, such as the National Anti-Smoking League, portrayed those individuals who smoked as engaging in an immoral act (Kim & Shanahan, 2003). By the mid-1940s, smoking was not only acceptable but also a behavior that society viewed as desirable (Goldstein, 1991) and glamorized in movies.

In 1964, the U.S. Surgeon General declared that smoking was a health risk (U.S. Public Health Service, 1964), and society once again viewed smoking as a negative behavior. From that point forward, society has viewed smokers as willingly accepting an individual and public health risk. Most recently, mass media campaigns have portrayed smokers as individuals who allow themselves to be fooled by manipulative and false statements from the tobacco companies and who knowingly inflict harm on others from their smoking (Goldman & Glantz, 1998). As public sentiment toward smoking has become more and more rejecting and less favorable, smokers have become stigmatized and stereotyped. The negative stereotype of a smoker has become so ingrained that a smoker's evaluations of and inferences about another smoker are equally as negative as a nonsmoker's evaluations of and inferences about a smoker (e.g., Goldstein, 1991; Pechmann & Knight, 2002).

Other Customers in the Service Setting

Interactions between customers can influence both evaluations of the service experience and decisions to choose one service firm over another. In their service encounter model of the service encounter, Langeard, Bateson, Lovelock, and Eigler (1981) identified customer-to-customer interactions as important factors in the delivery of services. However, few empirical researchers have reported the effects of other customers on patronage decisions. Unlike a firm's controllable variables, such as the service atmospherics and contact person training, the behaviors of other customers can be difficult to control and predict (Grove, Fisk, & Dorsch, 1998). Though firms may view the behavior of other customers as uncontrollable, consumers consider firm management of guests and their behavior (e.g., someone smoking and their smoke drifting to a nonsmoker's table) as an important component of the service process, which influences a consumer's overall service evaluation (Bitner, 1990).

A growing stream of researchers have examined the effects of the social behavior of individuals within the service process and how it contributes to the

overall experience (e.g., Davies, Baron, & Harris, 1999; Grove, Fisk, & Dorsch, 1998; Martin, 1996; Martin & Pranter, 1989). Attribution theory provides support for the belief that consumers will make inferences about a product from knowledge of consumers who use it (Burnkrant, 1982). For example, in their analysis of customer segmentation and compatibility, Martin and Pranter (1989) suggested that positive customer interactions positively influence satisfaction with the service experience, future patronage intentions, and holistic evaluations. Additionally, Grove and Fisk (1997) found in their investigation of customer experiences at Florida theme parks that over half of their respondents reported that other customers' behavior—both good and bad—affected their overall evaluation of their experience. Similarly, Grove et al. reported that in comparison with other aspects of the service experience, such as the physical setting or service providers, a disproportionate number of dissatisfying events associated with visits to a theme park were the result of interactions with other customers.

McGrath and Otnes (1995) further explored the interpersonal influence of what they termed *unacquainted consumers* in the marketplace. Using observational methods, they identified 11 types of unacquainted-consumer behavior in the marketplace. These observed behaviors resulted in a range of outcomes such as making others happy in the service environment, causing another customer to not purchase a product because of overheard negative product evaluations, and leaving a store in disgust after observing other customers' personally objectionable behavior. Of the 11 types of customer interactions identified by McGrath and Otnes, 5 were noted as not even involving actual face-to-face encounters—but rather one customer's observation of another customer's behavior in the service place. Of these 5 types of interactions, a negative behavior of an unacquainted consumer whom they termed a *spoiler* is especially relevant here. The spoiler situation depicts one consumer simply observing another consumer's objectionable negative behavior in the service environment. The spoiler is a shopper who unknowingly violates the values of another shopper, resulting in a disgruntling experience for the observing shopper. For example, McGrath and Otnes (p. 268) noted that “. . . a shopper left the store, visibly disgusted with another consumer who sat on her boyfriend's lap while modeling sexy outfits for him.” Clearly, the mere observation of another's spoiler behavior can affect patronage decisions.

Hypotheses

Psychological studies concerning the influence of stigmas and stereotypes on inferences have often followed the Katz and Braly (1933) paradigm that suggests that a single attribute is used to define a person's status. The power of such an attribute reflects the belief that a stigma, such as that about smoking, can be a *master status* stigma (Hughes, 1971). A master status stigma is likely to override all other attributes about a person. The preceding discussion indicates the possibility that smoking has become stigmatized and that negative stereotypes have

been formed about those who smoke (Litz et al., 1987). It is interesting that it has been shown that these negative connotations are conveyed about both smokers and nonsmokers (Goldstein, 1991; Kim & Shanahan, 2003). Therefore, I would expect that overall, nonsmokers and smokers will make more negative inferences about an individual who smokes and perceive that person as less favorable than they would regarding one who does not smoke. We would also expect that attitudes toward the smoker will be less favorable than those toward the nonsmoker. With regard to the effect of other customers in the service environment, the customer-to-customer interaction literature and attribution theory indicate the possibility that inferences and attitudes can be influenced by the observation of another individual's behavior at a specific moment in time. Therefore, we would expect that the master status associated with smoking will carry over to a service in which a smoker is engaged. Formally, I proposed the following:

Hypothesis 1: People will stereotype smokers more negatively than they will nonsmokers.

Hypothesis 2: People's attitudes toward nonsmokers will be more positive than attitudes toward smokers.

Hypothesis 3: People's expectations of the service-setting atmospherics will be more negative when associated with a smoker than when associated with a nonsmoker.

Hypothesis 4: People's attitudes toward a service will be more positive when associated with a nonsmoker than when associated with a smoker.

Hypothesis 5: Patronage intentions will be greater for services associated with a nonsmoker than for those associated with a smoker.

Method

Participants

Participants were 152 undergraduate business students who participated for course credit. Demographically, the sample comprised 94 men (62%) and 58 women (38%) and averaged 22 years of age ($SD = 3.6$ years) with a range of 19–54 years.

Procedure

Prior to data collection, I obtained institutional approval for the present study. I provided participants with a written description of the general purpose of the study, and they signed an informed consent form that explicitly detailed the activities that they were to perform. After completion of data collection, I debriefed participants and informed them about the purpose of the present study.

At a regularly scheduled class section, after participants were seated, they were informed about the study and the activities that they were to perform. They were first provided with a 5-min survey with items for (a) demographic information, (b) how they would classify their own smoking behavior, and (c) covariates for smoking behavior of peers and parents and for the effects of smoking (e.g., Drobles, Munafò, Leigh, & Saladin, 2005; Kobus, 2003).

The cigarette smoking behavior items included questions that asked whether their parents smoked (*no, used to, yes*), how they would classify their own smoking behavior (*non-smoker-never smoked, non-smoker-used to smoke, occasional smoker, light smoker, medium smoker, heavy smoker*), how they would classify the majority of their friends' smoking behavior (*nonsmokers, light smokers, medium smokers, heavy smokers*), and whether someone close to them had become sick or died from cigarette smoking (*yes, no*). The surveys were collected, and class was conducted as usual. With approximately 15 min left in class, I randomly distributed booklets, each reflecting one of the conditions. Each booklet contained one of the two scenarios as well as dependent measures. Participants read that a firm (the fictitious "Corner Stop, a college student hangout") had developed a customer profile that would be used in future promotions and that their assistance in evaluating the profile was requested. After that introduction, participants read a four-paragraph description of a fictitious peer, "Chris." In the profile, several traits and activities were noted, including the fact that Chris was a customer of the Corner Stop. Appendix A and Appendix B show the complete profiles.

For the experimental group ($n = 76$), the profile developed the smoking target by including two indications of cigarette smoking behavior. For the control group ($n = 76$), the profile developed the nonsmoking target and was the same as the smoking profile except without those indications of smoking behavior. I used a narrative description of the target person because of past research with rich narrative descriptions in the psychological literature related to the influence of stigmas on person perceptions (e.g., Cooper & Kohn, 1989; Ferree & Smith, 1979; Rush, 1998) and because of numerous studies with similar written stimuli in consumer behavior literature related to the formation of attitudes and inferences (e.g., Laczniak, DeCarlo, & Ramaswami, 2001; Mizerski, Golden, & Kernan, 1979; Rose, Bearden, & Teel, 1992).

After participants read the profile, I next asked them to write down all that they could recall about the target person, Chris. This free-recall measure served as a manipulation check. Next, they proceeded through the booklet, responding to the dependent measures.

Measures

To assess the stereotype traits of the target, I had respondents rate the target person, Chris, on five 5-point Likert scale items (from 1 = *not at all* to 5 = *strongly agree*). The five items assessed the degree to which participants

agreed that the target person was active, energetic, offending, disgusting, and interesting, respectively. I chose the scales for the traits active and energetic because of the growing acceptance of the idea that smoking affects the health and physical stamina of the smoker. I chose the scales for the traits offending and disgusting because of the image of smoking as an unclean behavior (Goldstein, 1991). I chose the scale for the trait interesting because of its use by Burnkrant (1982) as part of a social-acceptability factor representing perceptions of individuals.

I assessed attitudes toward the target person (Chris) and attitudes toward the target service (Corner Stop) through summing and averaging four 5-point semantic differential items reflecting an overall evaluation. The items were *unfavorable/favorable*, *positive/negative*, *bad/good*, and *liked/didn't like*. I reverse scored items so that higher values reflected more positive evaluations of the target person. The scale exhibited internal consistency with a Cronbach's alpha of 0.83 for attitudes toward the target person and a Cronbach's alpha of 0.86 for attitudes toward the target service.

I evaluated the expectation of the target service atmospherics through the summing and averaging of responses to six 5-point Likert scale items that reflected the perceived atmosphere of the Corner Stop. The items indicated the degree to which participants agreed that the Corner Stop was clean, not well kept, rough, dirty, smelly, and irritating (from 1 = *not at all* to 5 = *strongly agree*). I reverse scored items so that higher values reflected more positive evaluations of the target service. The summated scale exhibited internal consistency with an alpha of 0.83.

I assessed patronage intentions of the service with the average of two 5-point Likert items (from 1 = *not at all* to 5 = *strongly agree*) that evaluated the degree to which participants agreed that the Corner Stop was "a place I would go to" and "a place for people like me," respectively. The summed items had a correlation of $r(152) = .72, p < .001$.

For the covariates, in the participants' assessment of the majority of their friends' smoking behavior, 57% of the participants regarded the majority as non-smokers, 19% regarded the majority as light smokers, 21% regarded the majority as medium smokers, and 3% regarded the majority as heavy smokers. I coded these choices as 1, 2, 3, and 4, respectively, with increasing numbers reflecting increased smoking behavior. For parental influence, 25% reported that their fathers either smoke or used to smoke, whereas only 20% reported that their mothers did so. I recoded this variable as an index. For each parent, I assigned 0 if the parent did not smoke, 1 if the parent used to smoke, and 2 if the parent smokes. Next, I summed the mother and father smoking behavior scores so that a range of values (0–4) could occur with higher values reflecting greater parental smoking behavior. I coded the covariate assessing whether someone close to the participant became sick or died from smoking as *yes* and *no*. Of the participants, 43% chose *yes*, and 57% chose *no*.

Results

Manipulation Check

For the free recall of the activities of Chris, the average number of recalled activities was six. There was no statistical difference in the number of comments on the basis of whether the target Chris was a smoker or nonsmoker. No one in the control group noted that Chris engaged in smoking. For the smoking condition, 83% recalled smoking behavior as the first or second trait, with 61% recalling smoking first, and 22% recalling it second. Though two participants in the control group failed to identify smoking as a trait for Chris, I used all cases in the analysis.

Further Results

For smoking behavior, 72% reported themselves as nonsmokers (62% chose *non-smoker-never smoked*, 10% chose *non-smoker-used to smoke*) and 28% reported themselves as smokers (14% chose *occasional smoker*, 6% chose *light smoker*, 7% chose *medium smoker*, and 1% chose *heavy smoker*). With the experimental manipulation factor (scenario with or without smoking cues) serving as the first factor, the participant's smoking behavior (*non-smoker/smoker*) served as a second factor.

I analyzed the proposed hypotheses using Multivariate General Linear Model. The model included nine dependent variables, two factors and their interaction, and three covariates. Covariate analysis showed a significant multivariate effect for the covariate reflecting whether someone close to the participant had become sick or died from smoking, $F(9, 137) = 2.59, p \leq .01, \eta_p^2 = .15$. This covariate was significantly associated with the perception that Chris was active, $F(1, 151) = 5.86, p = .02, \eta_p^2 = .04$, and the overall attitude toward Chris, $F(1, 151) = 4.82, p = .03, \eta_p^2 = .03$. Additionally, a significant multivariate effect for the scenario manipulation emerged, $F(9, 137) = 2.49, p \leq .01, \eta_p^2 = .14$. The multivariate tests for the other factor, participant's smoking behavior, and the interaction between the two factors were not significant. These results indicate the possibility that there were differences in responses to the experimental scenarios.

My hypotheses focused on the effects of the scenario manipulation factor. I used univariate analyses to directly test these hypotheses. Hypothesis 1 predicted that the evaluations of the target Chris as a nonsmoker would be more positive than of Chris as a smoker. For three of the five noted traits, active, $F(1, 151) = 7.86, p < .01, \eta_p^2 = .05$; energetic, $F(1, 151) = 7.99, p < .01, \eta_p^2 = .05$; and interesting, $F(1, 151) = 7.69, p < .01, \eta_p^2 = .05$, there was a significant difference between ratings for the nonsmoker and the smoker. Additionally, they are in the expected direction for each of these traits (for active, $M_{\text{nonsmoker}} = 3.8, SD = 0.49$, vs. $M_{\text{smoker}} = 3.5, SD = 0.86$); for energetic, $M_{\text{nonsmoker}} = 3.6, SD = 0.68$, vs. $M_{\text{smoker}} = 3.1$,

$SD = 0.85$; and for interesting, $M_{\text{nonsmoker}} = 3.5$, $SD = 0.77$, vs. $M_{\text{smoker}} = 3.0$, $SD = 0.89$). However, we did not find any difference in ratings for the traits offending and disgusting, $ps > .20$. Therefore, the results support Hypothesis 1 partially. Further inspection of the means for the traits offending and disgusting indicates that participants did not necessarily view Chris as either offending or disgusting ($Ms < 2.5$). This finding is not too surprising because I also included many positive traits in the description of the target person.

Inspection of the means for Hypothesis 2 shows that attitudes toward Chris—the nonsmoker were more positive than attitudes toward Chris—the smoker ($M_{\text{nonsmoker}} = 3.7$, $SD = 0.78$, vs. $M_{\text{smoker}} = 3.3$, $SD = 0.75$). However, this difference is marginally significant, $F(1, 151) = 3.91$, $p = .05$, $\eta_p^2 = .03$. Therefore, the results did not support Hypothesis 2 definitively. The results supported Hypothesis 3, which suggested that expectations of the service atmospherics will be more negatively evaluated when the service is associated with Chris—the smoker, $F(1, 151) = 4.77$, $p = .03$, $\eta_p^2 = .03$, with overall atmospheric values greater for nonsmoker associations than for smoker associations ($M_{\text{nonsmoker}} = 3.4$, $SD = 0.47$, vs. $M_{\text{smoker}} = 3.2$, $SD = 0.53$). However, the results did not support Hypothesis 4, which suggested that the attitude toward a service will be more positive when associated with Chris—the nonsmoker, $p > .20$, or Hypothesis 5, which suggested that intentions to use the service will be greater when the service is associated with Chris—the nonsmoker, $p > .20$.

Discussion

Typically, firms do not want unfavorable images associated with their product. Firms work hard to ensure that their advertising shows a positive context (Celuch & Slama, 1993), and firms match celebrity endorsers (Kamins & Gupta, 1994) and models (Solomon, Ashmore, & Longo, 1992) with the product carefully. The goal of these carefully orchestrated settings is the formation of an image in the minds of consumers that evokes positive inferences about the product. However, as shown in the present article, the social behavior of other customers can also influence consumers in the service environment (Grove & Fisk, 1997; McGrath & Otnes, 1995).

A demarketing strategy has targeted cigarette smoking for over 40 years. The purpose of the present study was to determine whether ingrained attitudes toward smoking influence perceptions that others will have of smokers and judgments toward a service establishment associated with the smoker. The present results support the notion that the demarketing effort has resulted in the development of a stigma toward those that smoke. As expected and hypothesized, participants evaluated several of the target's traits more negatively when the target was a smoker than when the target was a nonsmoker, and participants' overall attitudes toward a smoker were less positive than their attitudes toward a nonsmoker. These evaluations were consistent regardless of whether the participants themselves were smokers.



The present research also provides new information concerning the secondary perceptual effects of smoking. Though Gilbert et al. (1998) found that a smoking stigma can have a secondary influence on employee performance appraisals, to date no researcher has investigated the influence that other customers engaging in smoking behavior has on inferences about a target service. It is interesting that the mere presence of smoking behavior can negatively influence both nonsmoking and smoking customers' perceptions of their firm's atmospherics. This finding indicates the possibility that the master stigma status of smoking does have some secondary effects.

Service providers have sought to balance the nonsmoker's freedom from secondhand smoke and the smoker's right to a legal activity by limiting on-site smoking locations (i.e., smoking sections in restaurants and smoking rooms in airports). It seems that the demarketing effort toward smoking has reached the point that it may not be worth the effort to accommodate the needs of smokers at all. Additionally, with sweeping workplace bans in California, Connecticut, Delaware, Maine, and New York, it has also become illegal to allow on-site smoking (Frumkin, 2004). Gibson (1997) has speculated that such a separation between the smoking and nonsmoking populations may lead to actually decreasing negative attitudes toward smokers. Negative attitudes may be revised because nonsmokers would first encounter smokers in a nonsmoking environment allowing interactions before identification of smoker's stigma. As Asch (1946) noted, first impressions are strongly held and resistant to change. The positive interaction may activate the smoker stereotype with decreased efficiency because of conflicting information. In the long term, we could see that smoking stigma identification will have a lessened impact on secondary inferences.

Alternatively, managers could seek to limit the potential of customers' viewing of other customers engaging in smoking behavior. Designating smoking areas has been one of the most common methods to separate the two groups. However, the image of a group of smokers huddled together, such as at the entrance of a building as if cast out, serves to reinforce negative stigmas (Gilbert et al., 1998). Through the development of enhanced servicescapes and the use of atmospherics, firms can arrange physical settings to make it less apparent that smoking customers are present. As Gabbott and Hogg (2001) noted in their investigation of nonverbal communication in the service encounter, "Every time one person interacts with another, non-verbal communication takes place . . . the interpretation of this communication . . . has a central effect upon perceptions" (pp. 5–6) for the service manager. The task is in limiting potentially negative interactions.

Limitations and Future Research

The most significant limitations of the present study concern the participant sample, which affects the generalizability of the findings. Efforts in the demarketing of cigarettes are primarily targeted at those people under the age of 18

years. The participant pool used here were over the age of 18 years. However, the use of this participant pool is appropriate because of the exploratory assessment of the long-term impact that demarketing efforts have had on secondary inferences and attitudes that are based on formed smoker stereotypes. A second limitation is the depiction of the target service. It was a fictitious, college student hangout. The choice of a fictitious service eliminated potential bias that may be associated with existing service settings with which participants may have been familiar. An interesting extension of the present study would be to conduct similar scenario-based descriptions, but using either existing service firms or a series of service settings—such as a bowling alley, restaurant, and laundromat—to determine whether the findings are robust across service types.

A second area for future research concerns the societal development of a negative stereotype of smokers. We should recall that in the general U.S. population, one in five adults is a smoker (U.S. Centers for Disease Control and Prevention, 2004). This circumstance represents a large number of individuals being negatively stigmatized. Should social marketers be concerned with the schemas that successful cigarette demarketing efforts have created? This is not an easy question: Smoking has been linked to cancer (U.S. Public Health Service, 1964) to be a proven carcinogen, and secondhand smoke is dangerous. However, backlashes against antismoking efforts continue to create heated debate. For example, Connecticut restaurant owners have claimed decreases in business because of a workplace smoking ban (Frumkin, 2004).

Conclusion

Every day, individuals make decisions that determine the course of their behavior. Environmental cues that influence simple choices—such as selecting the clothes to wear to work, deciding to cross the street to avoid someone, or picking a place to eat lunch—guide many of these decisions. The present study showed that public opinion concerning smoking behavior influences the individual's attitudes and expectations. Future researchers must further investigate the robustness of these findings across service types to understand the extent to which the efforts to demarket smoking have secondary effects.

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APPENDIX A Nonsmoker Profile

The following text formed the nonsmoker profile.

Chris is a twenty-two year old college student. Chris is a student in the College of Business and Industry and is scheduled to graduate next year. Chris enjoys going to the Corner Stop to talk with friends and to meet new people.

Outside of school, Chris enjoys going to the movies with friends and being outside when the weather is nice. While in school, Chris has held a couple of different part time jobs. Though not careers, the jobs provide Chris with enough money to make ends meet and pick up some new things every now and then.

Much of Chris' life revolves around family. Contact with family members is either by telephone or the occasional letter and obligatory birthday card. On weekends during the school year, when able to, a road trip home to surprise the parents and wash some clothes is usually enough to “recharge the batteries” for the grind of the semester.

The future is not a great concern for Chris right now. Chris' philosophy is “I do the best I can, but I want to enjoy myself.” Chris' GPA per semester has averaged between a 2.5 and 3.3 since freshman year. Chris realizes that graduation and job hunting is only a year from now, but wants to live in the present.

APPENDIX B Smoker Profile

The following text formed the smoker profile. Boldface type is used for emphasis in the current presentation. Statements were not emphasized in the present study.

Chris is a twenty-two year old college student. Chris is a student in the College of Business and Industry and is scheduled to graduate next year. Chris enjoys going to the Corner Stop to **smoke a few cigarettes**, talk with friends and to meet new people.

Outside of school, Chris enjoys going to the movies with friends and being outside when the weather is nice. While in school, Chris has held a couple of different part time jobs. Though not careers, the jobs provide Chris with enough money to make ends meet, **buy some cigarettes** and pick up some new things every now and then.

Much of Chris' life revolves around family. Contact with family members is either by telephone or the occasional letter and obligatory birthday card. On weekends during the school year, when able to, a road trip home to surprise the parents and wash some clothes is usually enough to “recharge the batteries” for the grind of the semester.

The future is not a great concern for Chris right now. Chris' philosophy is “I do the best

I can, but I want to enjoy myself." Chris' GPA per semester has averaged between a 2.5 and 3.3 since freshman year. Chris realizes that graduation and job hunting is only a year from now, but wants to live in the present.

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