



Smoking in movies
Impact on European youth and policy options

Deliverable 1

Policy Status Report

Motion picture rating systems in the European Union

(Version June 30th, 2010)

Motion picture rating systems in the European Union

Summary

This report is based on a systematic internet search and a survey of N = 33 smoking prevention experts from 29 European countries. It summarizes the current movie rating systems in the Member States, with a special focus on rating criteria and previous efforts to consider movie smoking in the movie rating decisions. The research revealed a considerable variation in the modus operandi between countries. These differences do not only relate to names and labels, but also to the number of age categories, the highest age categories assigned, the legal basis of the rating systems, as well as profound differences in coverage and implementation fidelity. There seem to be some countries with high transparency regarding the institution conducting the ratings and the used criteria (especially Denmark, Germany, and Sweden), while other countries are less transparent and systematic in their approach (especially Greece, Lithuania, and Spain). Regarding the central question at issue we found no evidence that smoking in movies is considered in any of the movie rating systems, even though there are already efforts to change this fact in five EU countries. What this report points to is that a standardization of the EU movie rating labels and a systematic change of rating criteria in all EU countries faces the obstacle of heterogeneous legal regulations and vague responsibilities with regard to implementation and enforcement of movie ratings.

Introduction

Smoking remains the single greatest preventable cause of mortality in Europe.¹ Adolescents initiate smoking for social reasons, and social risk factors include influences such as parent and friend smoking.² Tobacco marketing has also been linked with youth smoking initiation,³ and this serves as the basis for controls on smoking marketing contained in the WHO Framework Convention on Tobacco Control (FCTC), which recognises that a comprehensive ban on tobacco marketing would reduce consumption.⁴

However, a comprehensive ban on tobacco marketing does not limit other mass media venues from projecting favourable images of smoking, such as smoking in motion pictures. Movies form an extremely pervasive dimension of young people's social environment, and they are full of tobacco images that might make smoking appear both more common and acceptable than it really is. It also strengthens the idea that cigarettes have social and cultural significance.

Smoking in movies has been recognized as a potential causal risk factor for youth smoking by WHO,⁵ the US National Cancer Institute,⁶ and now also by the Centers for Disease Control and Prevention (CDC).⁷ Incorporating smoking in movies in European tobacco control initiatives could contribute to prevent a substantial proportion of European adolescents to initiating smoking and ultimately lower the burden of morbidity and mortality which can be attributed to smoking.

Movie rating systems in the EU

Concern about the potential impact of motion pictures on undesired and/or harmful behaviours is as old as motion pictures themselves. Today, it can actually be assumed common sense that children and youth should be protected from movie and other media contents that are not suitable for their age and that might have potential detrimental effects on youth's development. However, there is less common sense on the definition of detrimental movie contents. In fact, there seem to be far reaching differences between (and sometimes even within) countries regarding the evaluation of movie contents.

One important step in the implementation of FCTC recommendations on the EU level and a consideration of smoking in movies as a relevant public health issue would be a standardization of the rating systems in EU countries. This seems to be especially important as movies that are produced in one country are not only distributed in the origin country, but are distributed internationally and presented to a broad audience. Distribution channels internationally include DVD's, cinema and TV delivery, and movies are delivered worldwide through the internet.

On the way to a standardization of movie ratings in the EU and the incorporation of movie smoking as an additional rating criterion there is need for a diagnosis of the current state of the different movie rating systems. We tried to approach this with a systematic internet search and a survey of experts in the field.

Method

1) Method of internet search

The internet search was conducted in two steps. The initial search started on Wikipedia (http://en.wikipedia.org/wiki/Motion_picture_rating_system) and was followed by a Google snowball search with search terms "film ratings", "movie ratings", "age ratings", "motion picture rating system", and "parental guidance". All informations were tracked by country, with additional phone contacts in case of language barriers. Step two was a verification

process of all information given in the expert surveys. Appendix XX summarizes the available online information on the topic.

2) Survey

Survey implementation

The survey was conducted with a six page questionnaire to be filled out digitally in a documentation form. The questionnaire was distributed among the representatives of the national coalitions of the European Network for Smoking and Tobacco Prevention (ENSP). These representatives either answered the questions themselves or forwarded it to experts in their country. In addition, the questionnaire was provided on our project website www.smokefreemovies-europe.eu. Whenever possible the information given in the questionnaire was double-checked by searching relevant information in the web. If more than one questionnaire was filled out for a country, information were matched or averaged in case of deviations.

Study sample

We reached a total sample of N = 33 experts from 29 countries, representing 89% of EU Member States and three non-member states (Table 1). Double information was achieved for Bulgaria, Ireland, Switzerland, and The Netherlands, no information were provided by Luxemburg and Slovenia. Fifty-four percent of the participants were male, 46% female, mean age was 45 years, with a range of 26 to 85 years. Respondents had diverse professional backgrounds, the majority came from a medical and/or public health background (66%), the rest work in film-related businesses.

Table 1. Countries that provided information on the motion picture rating system (N=29)	
Austria	Latvia
Belgium	Liechtenstein
Bulgaria	Lithuania
Cyprus	Malta
Czech Republic	Norway
Denmark	Poland
Estonia	Portugal
Finland	Romania
France	Slovakia
Germany	Spain
Greece	Sweden
Hungary	Switzerland
Iceland	The Netherlands
Ireland	United Kingdom
Italy	

Measures

The questionnaire included questions on (1) demographic data of the respondent, (2) formal aspects of the cinema and DVD rating systems, (3) rating decisions, (4) rating criteria, and (5) an evaluation of the quality of the rating system.

Results

Formal aspects of the different EU rating systems

With the exception of two countries (Estonia and Liechtenstein) all surveyed countries have a formal movie rating system. There is high variance in the number of age categories applied, range is two categories (Belgium) to 10 categories (Switzerland), median and mean is 5 categories. Most countries (74%) use 18 years as the highest age category, it is 17 years in one country (Greece), 16 years in four countries (Austria, Belgium, Estonia, Netherlands) and 15 years in two Scandinavian countries (Denmark, Sweden).

Eighty five percent of the countries have a legal basis for their movie ratings, in 4 countries the rating of movies is voluntary (Czech Republic, Estonia, Greece, and Poland). In most countries (76%) the rating system is governmental, in three countries it is accomplished by a paid company (Czech Republic, Poland, Slovakia), two raters name an independent non-governmental organization (France, Germany). About a third of the experts (29%) report that the movie industry has influence on the rating organisation, in five countries there is explicit funding by the movie industry (Czech Republic, France, Ireland, Latvia, and The Netherlands).

Handling of movie rating decisions

Once decided, the rating decisions can be seen as irrevocable in almost all countries, only the Austrian and Estonian experts approved the statement that there is “any evidence that state or local authorities can override the rating decisions”. However, about half of the raters (48%) assume that the rating decisions of their rating organizations are controlled by another institution regarding validity and adequacy.

We asked respondents to rate the reliability with which the movie rating decisions are displayed on different types of media (scale ranged from 0 = “never” to 3 = “often”), summarized in Table 2. A consistent labelling can only be considered for DVD packaging, but even there it is only 71% of the countries where the rating label appears “always”. Cinema guides display the rating of movies “always” in only about half of the countries

(56%). The internal consistency between media types is high (Cronbachs alpha = .81), indicating that countries with a high frequency of rating labels in one media type has also higher frequencies in other media types.

	never	rare	often	always
Print ads	8%	32%	28%	32%
Radio and TV ads for movies	26%	35%	26%	13%
Outdoor advertising	33%	9%	33%	25%
Internet sites	8%	4%	52%	36%
DVD packaging	0%	12%	16%	71%
Movie trailers (in cinema)	23%	32%	9%	36%
Movie trailers (DVDs)	22%	26%	17%	35%
Movie trailers (in TV)	28%	28%	19%	24%
Cinema guides	0%	16%	28%	56%
On screen before movie starts	30%	22%	13%	35%

Content and transparency of the rating criteria

The criteria that lead to the rating decisions are publicly available in about two thirds (68%) of European countries. We have compiled a link list in the Appendix of this report (see Appendix A). In the remaining third of countries it seems to be unclear on which characteristics of a movie the ratings are based on. Of the countries with published criteria, about a half (53%) publish also explanations of the specific ratings, i.e. why a movie got the respective rating.

In some countries (N=7) alcohol use in movies is explicitly mentioned as being a rating criterion, i.e. leading to higher age ratings. This information could be verified in the post-hoc control for three countries (Austria, Bulgaria, and The Netherlands), the other four countries belong to the group with unpublished criteria. Tobacco use is no rating criterion in any of the studied countries. However, there are NGO activities regarding the consideration of alcohol and tobacco use in movies in five European countries (Cyprus, Finland, Germany, Spain, and United Kingdom).

Evaluation of the rating system

We were interested in a general evaluation of the different rating systems, related to transparency, adherence, possibility of by-passing, and degree of successful child protection (see items in Table 3). Participants were asked to rate 7 items on a scale from 0 = “strongly disagree” to 3 = “Strongly agree”. The rating revealed, for example, that about 50% of the experts do not think that young people are successfully protected from contents not suitable for their age, and a similar amount (43%) assume that the ratings can easily be bypassed by underage kids.

	Strongly disagree	Disagree	Agree	Strongly agree
The criteria for the cinema and DVD rating are transparent	4%	20%	48%	28%
The process of the cinema and DVD rating is transparent	4%	19%	50%	27%
The public is well informed about the cinema and DVD rating	15%	12%	50%	23%
Cinemas adhere to the movie ratings	0%	12%	50%	38%
DVD sales and rental stations adhere to the movie ratings	12%	21%	45%	21%
The movie ratings can easily be bypassed by underage kids	8%	35%	46%	12%
Kids in my country are successfully protected from contents not suitable for their age	15%	35%	46%	4%

The seven items were summed up to built the perceived quality index (Cronbachs alpha = .86) of a country’s rating system (see Table 4). The highest values received the rating systems of Denmark, Germany, and Sweden, while the experts from Greece, Spain, and Lithuania assigned only 5 and 3 of possible 21 points.

Country	Quality index (range 0-21)
Denmark	20
Germany	19
Sweden	19
Ireland	18
Finland	17
Austria	16
Bulgaria	16
The Netherlands	16

Hungary	14
Malta	14
Slovakia	14
Estonia	13
France	13
Iceland	13
Cyprus	12
Norway	12
Portugal	12
Poland	11
Czech Republic	10
Italy	10
Latvia	10
Romania	9
Belgium	7
Greece	5
Spain	5
Lithuania	3
Liechtenstein	
Switzerland	
United Kingdom	

Another index of quality is the implementation rate, i.e. the percentage of movies that are rated. This rate is higher for movies shown in cinemas than distributed by DVD. In 62% of the countries all movies shown in cinemas are rated. Clear exceptions seem to be France and Belgium where only 30% and 40% of the cinema movies receive a rating (Table 5). DVD released are completely (100%) rated in about one third (35%) of the countries. Some countries like Cyprus and Switzerland do not rate DVD movies at all, countries like Austria, Lithuania and Greece rate only about 10% of the DVD releases.

	0%	10%	20%	30%	40%	50%	60%	70%	80%	90%	100%	Mean
Movies in cinemas				1	1		1		3	4	16	90%
DVDs	2	3		1	1	3		2	3	2	9	66%

We finally asked about the perceived primary aim of the movie rating system. Sixty percent of the experts assume the aim is “to protect children”, 3 experts (Cyprus, Greece and Malta) think that the primary aim is to “inform parents”.

Conclusion

There is high variation in the rating systems between EU countries. These differences relate to names and labels, the number of age categories, the highest age categories assigned, the legal basis of the rating systems, as well as coverage and implementation fidelity. Some countries have high transparency regarding the institution conducting the movie ratings and the used criteria (especially Denmark, Germany, and Sweden), while other countries are less transparent and systematic in their approach (especially Greece, Lithuania, and Spain). There were even countries where it was plainly impossible to gather any information about movie ratings at all. A standardization of the EU movie rating system and the consideration of smoking in movies as a health threatening movie content has to handle heterogeneous legal regulations and vague responsibilities with regard to implementation and enforcement of movie ratings.

References

- (1) Lopez AD, Mathers CD, Ezzati M, Jamison DT, Murray CJ. Global and regional burden of disease and risk factors, 2001: systematic analysis of population health data. *Lancet* 2006; 367(9524):1747-1757.
- (2) Tyas SL, Pederson LL. Psychosocial factors related to adolescent smoking: a critical review of the literature. *Tob Control* 1998; 7(4):409-420.
- (3) DiFranza JR, Wellman RJ, Sargent JD, Weitzman M, Hipple BJ, Winickoff JP. Tobacco promotion and the initiation of tobacco use: assessing the evidence for causality. *Pediatrics* 2006; 117(6):e1237-e1248.
- (4) Shibuya K, Ciecierski C, Guindon E, Bettcher DW, Evans DB, Murray CJ. WHO Framework Convention on Tobacco Control: development of an evidence based global public health treaty. *BMJ* 2003; 327(7407):154-157.
- (5) World Health Organization. Smoke-free movies: from evidence to action. Geneva: Switzerland: World Health Organization; 2009.
- (6) National Cancer Institute. The role of media in promoting and reducing tobacco use. Tobacco Control Monograph No. 19 (NIH Publication No. 07-6242). Bethesda, MD: U.S.: Department of Health and Human Services, National Institutes of Health, National Cancer Institute; 2008.
- (7) Glantz SA, Titus K, Polansky J, Kaufmann RB. Smoking in top-grossing movies-United States, 1991-2009. *MMWR Morb Mortal Wkly Rep* 2010; 59(32):1014-1017.