

UNITED STATES DISTRICT COURT
FOR THE DISTRICT OF COLUMBIA

_____)	
UNITED STATES OF AMERICA,)	
	Plaintiff,)	
and)	
)	Civil Action
TOBACCO-FREE KIDS ACTION FUND, <i>et al.</i> ,)	No. 99-CV-02496 (GK)
	Plaintiff-Intervenors,)	
)	Next scheduled appearance:
)	None Scheduled
	v.)	
)	
PHILIP MORRIS USA INC.,)	
f/k/a PHILIP MORRIS INC., <i>et al.</i> ,)	
)	
	Defendants.)	
_____)	

DECLARATION OF PAUL SLOVIC, Ph.D.

PAUL SLOVIC, hereby declares as follows:

1. I am the President of Decision Research and a Professor of psychology at the University of Oregon. My professional and educational background, credentials and experience are set forth in my Written Direct Testimony filed in this Court on January 10, 2005 at pages 1-6 ("WD"). The Court referenced some of my credentials in its August 17, 2006 Final Opinion at page 1000.
2. I testified during the trial of this matter, and was accepted by the Court as an expert psychologist in the field of risk perception, judgment, and decision making. Trial Tr. at 10271.

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3. I have reviewed this Court's August 17, 2006 Final Judgment and Remedial Order # 1015 ("Order 1015"), and particularly the provisions regarding "Corrective Statements" found at pages 4-6, ¶¶ 5-7.

4. I believe that my opinions I testified to at trial, along with the research on which I relied, are relevant to consider in the creation and dissemination of the corrective statements mandated by Order #1015.

5. Specifically, I testified that my and others' research on risk perception as it relates to smoking has revealed several misperceptions held by smokers and potential smokers. Many of those misperceptions are those identified by the Court intended to be remedied by the corrective statements. It is my opinion that the corrective statements should be drafted, designed and disseminated in a way that will effectively correct those misperceptions.

6. For example, I testified that many people do not understand the severity or the breadth of the diseases and other adverse health affects caused by smoking. Although many people have a superficial awareness of *some* of the diseases caused by smoking, few people have the deeper understanding necessary to make an informed decision about smoking. WD: 19-21.

7. I also testified that most smokers and potential smokers misperceive the strength of addiction associated with smoking. WD: 18, 21-26; 28. Moreover, at the point of initiation, smokers and potential smokers misperceive or underestimate the speed with which nicotine addiction can take hold. *Id.*

8. It is critical that the corrective statements be drafted, designed, and disseminated in an effective manner.

9. I testified that smoking behavior and understanding of the risks attendant therewith is influenced by experiential thinking more so than by logic, reason, or analysis of risk.

WD: 34-39. Experiential thinking centers around imagery, affect, and emotion. In order to effectively correct the misperceptions, therefore, the corrective statements should employ means to stimulate the target audience's experiential thinking.

10. I further testified that use of imagery is an effective tool to impact one's affective reaction to a message. WD: 34-35. Imagery associated with a communication may well enhance the recipient's ability to achieve a deeper, more meaningful understanding of the communication, as opposed to a superficial awareness.

11. It is thus my recommendation, based on my expertise in the field of risk perception, judgment and decision making and the research I relied on in the trial of this matter that a qualified marketing or advertising specialist should test potential statements, using appropriate imagery or other graphic or design techniques if deemed effective, to insure that the communication in fact corrects any misperception created by defendants' miscommunications over the decades.

I declare under penalty of perjury that the foregoing is true and correct. Executed on this 11th day of October, 2006, in Eugene, Oregon.



Paul Slovic