Big Tobacco's Next Target: Women and Children in Poorer Countries are Picking Up the Cigarette Habit

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From the pages of a recent edition of *Newsweek* shone the smiling face of a beautiful African woman. The caption for the two-page ad, in Swahili and English, read: "Kila mtu ana uzuri wake. No single institution has the copyright for BEAUTY. VIRGINIA SLIMS. Find Your Voice."

I found the ad particularly insidious in that, under the guise of promoting diverse standards of beauty, it encourages smoking by black African women. For cultural reasons, these women traditionally smoke much less than their North American sisters. In South Africa in particular, cultural prohibitions serve to maintain a female smoking rate of about 11 %, compared to 42 % for men.

**Aggressive advertising**

Aggressive advertising, designed to persuade women that to be modern and emancipated is to smoke, is one more problem the developing world does not need. Rather than empowering such women to find their own voice, such ads seek to ensnare them into dependency.

No part of the globe is immune. Tobacco advertising and sponsorship transcend borders. Even countries that have instituted bans on tobacco advertisements face ads beamed in via satellite.

**Much to gain**

No wonder: The tobacco industry has a lot to gain.

In China, 63 % of adult males smoke, but only 3.8 % of women. Increasing the female rate by only a few percentage points will greatly increase the size of the world tobacco market.

**Tobacco-control leader**

Developing countries could learn a lot from Canada as they mount battles against the pressures of the tobacco industry. Canada has long been recognized as a world leader in tobacco control. Our health warnings for cigarette packages have set a global precedent. Policies introduced here have set international standards and decreased tobacco use in Canada.

Because of this, Canada is positioned to play a significant role in the development of a meaningful international strategy to address the problem, much like the role we played in helping bring about the international land-mines convention.
**Framework Convention**

This October in Geneva, the World Health Organization began public hearings on the development of a Framework Convention for Tobacco Control (FCTC). The Canadian delegation took a leadership role. It pushed for a convention that would include comprehensive strategies that would serve as a basis for international control, and at the same time allow individual countries to move beyond that framework to develop specific national policies. Canada has also emphasized the importance of involving non-governmental organizations in developing the Convention and working with local governments to support its adoption.

Health Canada has played a pivotal role in supporting tobacco-control research in developing countries that could help them to develop effective policies. Our public-health experts know which interventions have proved to have the most impact on reducing tobacco use. Among them are: an increase in excise taxes; bans on tobacco advertising and sponsorship; restrictions on smoking in public places; expanding smokers' access to effective means of quitting; and effective counter-advertising.

**Economic fears**

Canada is also in a position to allay developing countries' fears — fostered by the multinational tobacco companies — that curbing tobacco consumption will mean lost jobs and revenues. And we should continue to help, for the sake of all those now being targeted by the tobacco industry.

There's little doubt that smoking is the leading preventable cause of death and disability among adults. In developing countries, it has reached epidemic proportions: These countries account for approximately 70% of global tobacco consumption. By the year 2025, they will also account for 70% of the anticipated 10 million annual tobacco-related deaths. Ominously, the age at which children in developing countries are smoking their first cigarettes continues to drop.

**Tobacco impacts**

Tobacco poses a major challenge to sustainable development. Its impacts can be felt not only on health-care budgets, but on trade, taxation, in social policy, as well as on power, gender and labour relations, at both the societal and household levels.

And there's the environment: Tobacco cultivation depletes soil nutrients faster than most other crops and requires the heavy use of fertilizers and pesticides. The environmental costs of this fall mainly on the farmers and their communities.

**200,000 hectares**

Curing tobacco consumes an estimated 200,000 hectares of woodland each year, mainly in the developing world — amounting to 1.7% of global net loss of forest cover annually.

Tobacco cultivation and processing pose major occupational hazards, especially for women and children who do most of the menial work on plantations and in smoke houses. While close to 70 per cent of the world's tobacco is now grown in developing countries, those farmers realize very little of the profits.
Legal instrument

Such issues dominated the discussions at the Geneva public hearings on the proposed international tobacco convention. When the convention comes into effect, like the land-mines convention, it will serve as a legal instrument for addressing issues as diverse as tobacco advertising and promotion, agricultural diversification, smuggling, taxes and subsidies.

The hearings for this tobacco convention marked a first in the World Health Organization's history because all interested parties, including the tobacco multinationals, were invited to present their views. WHO received more than 500 submissions, and more than 170 organizations testified. The tobacco companies predictably urged reasonable and appropriate action and supported policies that have been shown to do little to curb smoking among youths and adults. They also warned that international action to reduce tobacco use would lead to sudden and massive job losses, drive people further into poverty, and threaten the sovereignty of nations.

Public health concerns

But their views were countered by groups committed to public health — approximately three-quarters of those present. These groups expressed strong concern about the impact of tobacco use on the current and future health of populations, especially in developing countries, and urged rapid and decisive action.

Many developing countries, however, hesitate to curtail tobacco production. And they remain lukewarm toward control measures, because they reap significant revenue from excise taxes on cigarettes and the export of tobacco leaf.

Targeting the South

With the number of smokers in the developed world decreasing, the tobacco multinationals are now targeting developing countries. As negotiations begin on an international tobacco treaty, it won't be good enough for Canada to sit back and reflect smugly on the gains we've made to control tobacco use at home.

North Americans contributed to the tobacco problems of developing countries. It's time to help find the solutions.

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'It's Rude to Say No': Vietnamese Attitudes Toward Smoking, by Keane Shore

Lessons from Canada's Tobacco War, by Lauren Walker

Smoke & Mirrors: The Canadian Tobacco War, by Rob Cunningham

The Economics of Tobacco Control in South Africa, by Mogkadi Pela

The Global Tobacco War, by Michael Smith