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## **EDITORIAL NOTE**

Smoking as well as its effects on health is a focal point of scientific and professional discussion in different field of studies around the world.

Nowadays, the importance of harmful effects of smoking has increased in the view of the fact that not only does it have harmful effects on people's health, but it also causes disease and disorders; furthermore, it has detrimental effects on economical, social, and cultural issues.

As a case in point, World Health Organization (WHO) has been pioneered in setting full scale and serious principles as well as rules on smoking around the world. Moreover, WHO's innovation as well as **Dr. Harlem Brundtland's**, directorgeneral of WHO, tenacious and endeavor results in serious movement that can be noticed as a formation of Framework Convention on Tobacco Control (FCTC). Accordingly, because of the aforementioned issues as well as the important mission of pulmonologists in campaigning against this vicious phenomenon, we have determined to quote **Dr. Brundtland's** speech that was preached in the opening ceremony of INB5 (Geneva, 15 October 2002) in order that we might accomplish our mission in this serious and active movement while indicating the important issues of the speech.

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Editor in Chief

## Statement by the Director-General to the Intergovernmental Negotiating Body on the WHO Framework Convention on Tobacco Control at Its 5<sup>th</sup> Session

Chair, your excellencies, distinguished delegates, friends and colleagues,

This morning I unveiled a death clock, a clock that counts the number of tobacco-related deaths every minute. You may recall that we did this at the start of the negotiations when we told the world that tobacco kills four million people every year. Today, we are telling the world that tobacco kills 4.9 million people every year. The tick of the clock is constant. The death rates are not. They are going up even as we

speak. Never forget, therefore: delays mean more deaths. Delays mean a failure on our part to stand up to an epidemic for which we have solutions.

Ladies and gentlemen, welcome to the fifth round of negotiations on the framework convention on tobacco control (FCTC). A very real opportunity for progress has been made possible by the draft of the new Chair's text in front of us. It represents a consolidation of work commenced four years ago. No country is going to be completely happy with the outcome. That is the very nature of treaty negotiations. Maybe we should ask ourselves a single

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question, as we enter into a critical phase of our work: who will gain from delay?

Four years ago, we dared to dream. Together, we decided to walk down the uncharted path of writing global rules and regulations for the promotion, production and sale of a product that kills half of its regular users. The verdict from the medical community was very clear. It had been for several decades. Each of the deaths worldwide, caused by tobacco consumption, was preventable. The policy options were clear. Tobacco deaths could be prevented through tax increases, advertising bans and clean indoor air regulations.

Making tobacco control a priority as I took over this organization was a personal challenge for me.I remember my discussions with many of you present today when we agreed that if we did not act decisively, a hundred years from now, our grandchildren and their children would look back and seriously question how people claiming to be committed to public health and social justice allowed the tobacco epidemic to unfold unchecked.

This search for solutions took us to Article 19 of WHO's Constitution, which empowers Member States to negotiate global rules and standards. By deciding to focus the might of the Organization's treaty-making power to prevent tobacco-related deaths and setting in motion the FCTC, we were making public health history. The more I shared my concern, the more I was reassured that the FCTC was the way forward.

I recently visited all the regional committees for their annual meetings. I was struck by the commitment of WHO's Member States to work for a strong convention and related protocols. We have already been successful in some areas. For example, four years ago, many ministries of health did not have any tobacco control focal point. Today all of them do, or have set aside time and resources for it. The FCTC has been a catalyst for WHO

Member States to activate policy decisions necessary for robust national tobacco control. The process has highlighted the core components of robust public health norms, i.e. epidemiology, education, legislation including litigation, communications and economics. The FCTC has done many things, but above all, it has underlined the role of the State as the prime mover in public health. It has brought into sharp focus the role of the State in setting norms and standards.

Just as we into this round, an old refrain has surfaced. That tobacco control is a rich person's disease. Let facts speak for themselves. The trends in expenditures on tobacco use among poor people in developing countries are extremely worrying. In some countries (Indonesia, for example), tobacco expenditure has grown fastest among poorest groups. In China, smokers in houses surveyed in a district reported spending 60% of personal income and 17% of household income on cigarettes. In Bangladesh, the poorest citizens, with a household income of less than US\$ 24 a month, are twice as likely to smoke as the wealthiest citizens. Let us always be alert to mischievous distractions as we work on the FCTC.

The vector of the tobacco epidemic is present and, in most cases, thriving. The tobacco industry continues to act and react solely in its own interestsprofits and market shares. Highly engineered advertising, promotion and products lure and hook young women and men. Flawed science and propaganda flood the information stage. Companies court the public with seeming demonstrations of good corporate citizenship. There have been many other gains, but one stands out for some attention. Due, in large part to the work done by Member States and the FCTC process, the tobacco industry has nowhere to hide. The most recent glare of publicity that surrounded the decision by FIFA to declare the World Cup 2002 tobacco free has set in motion a process that is leading other major sporting

be alert and never let down our guard. Inquiries in

Member States about tobacco industry interference in

public health tell the same story of deception.

The time to rest is not now. As a contribution to INB5, a major tobacco company recently wrote to all of us with the recommendations on the treaty text. This comes on top of months of work by public relations agencies, advertising companies, consultants in universities as well as many commercial bodies, that have been seized by tobacco industry interests looking to derail our work.

During INB4, you will recall that all of us received a latter about voluntary codes of agreement for advertising and promotion of tobacco and its products. I plainly dismissed it because I still believe, as I did four years ago, that the tobacco epidemic is an advertised disease and that it should not be glamourized or subsidized. The tobacco industry's internal documents also show that its motivation in developing these programs is to gain influence with governments, distort health policy and undermine effective tobacco control measures.

Four years has given us time to work together and to think things through. With new knowledge come new challenges. The FCTC is expected to do many things. It is a tool with which we can curb youth smoking. That was, and remains, a critical challenge for all of us gathered here today and this house has unanimously called for rules to protect the world's young people from the scourge of tobacco. The tobacco industry instead refers to our children as "replenishment pools" necessary to replenish those who die every day. Our success in setting in motion a

global process to get rid of tobacco from the sports filed has strengthened our resolve.

I believe the world is ready for change. That is why the focus of World No Tobacco Day next year will be in an area that attracts the youth of the world. I am talking about films and fashion. We will focus on Hollywood and Bollywood in Bombay as we will on the catwalks of the world. There is no real reason ever to introduce a cigarette in a film. The same goes for the fashion houses. Cigarettes are not fashion accessories unless we are thinking of death and destruction.

We know that tobacco use among our youth has taken an enormous toll. The latest data from the Global Youth Tobacco Survey show that, in some countries, more than 60% of 13 to 15 year-olds use tobacco. Nearly one-quarter of 13 to 15-year-old smokers smoked their first cigarette before the age of 10. The majority of these young people want to stop smoking and have already tried to quit. The Macroeconomics and Health Commission's Report again reminds us that spiralling rates of tobacco consumption worldwide do harm unprecedented scale. It is our children who make up that "spiralling rate"- it is our children who are now the prime targets.

In defining smoking exclusively as a youth issue, the tobacco industry is in fact detracting from genuine efforts to prevent youth from starting to smoke and helping smokers to quit. Though many government health departments are short of funds, money from the tobacco industry will inevitably distort public health priorities and ultimately work against the health of the people. So we strongly advise governments to avoid such funding or any from of partnership with tobacco companies.

But, despite their very substantial role in causing and promoting the epidemic of tobacco-related disease which may claim one billion lives in the 21<sup>st</sup> century, tobacco companies are increasingly

attempting to position themselves as part of the solution by promoting "youth smoking prevention" initiatives in over 150 countries.

While tobacco companies fund and develop their own information campaigns to inform young people that smoking is an "adult choice", studies show that, at best, these campaigns have no effect to reduce or prevent youth smoking. In some cases, they may actually encourage young people to smoke. We must oppose this move and are calling on tobacco companies to stop all youth smoking prevention delay. To those tobacco initiatives without companies that want to be part of the FCTC process, my message is that they will be judged on the basis of their work, not their word. I have this to say- if you are serious about preventing youth smoking, support the raising of taxes and work towards a complete ban on advertising.

Another area where I believe we are ready to write a final version of the FCTC relates to smuggling. Over the years, we have learned about the role of smuggling in contributing to smoking initiation, especially among young people. In fact, all our Member States have recognized this pernicious phenomenon and many are calling for global ad bans and smuggling controls. Our call was heard by the Government of the United States of America which invited WHO to be part of a recent international meeting on tobacco and illicit trade. We know that tobacco smuggling does not only occur because of the operation of normal market forces and that it is, in fact, partly a supply-driven phenomenon- designed to increase market share through fraudulent and illegal evasion of taxes.

Tobacco smuggling undermines national pricing policies, deprives governments of revenues used to combat smoking permits tobacco companies to subvert and undermine international cooperation in tobacco control and, above all, undermines legal restrictions and health regulations, such as those that

deal with health warnings and sales minors. At a conservatively estimated average tax of US\$ 1.25 to US\$ 1.50 per cigarette pack, cigarette smuggling which involves some 20 billion packs each year, accounts for US\$ 25 to US\$ 30 billion lost annual revenue for governments.

We have reviewed tax levels worldwide and concluded that, in most countries, there is considerable room to increase cigarette prices through higher taxes. As has been the case in many countries, these increases would significantly contribute to reduced consumption especially among the young and the poor. Smuggling has to be fought at all levels.

Ladies and gentlemen, I said earlier that, in so far as the policy options are concerned, we know what works. The most important ingredient now, to make the FCTC a vibrant reality, is political commitment. The elements are in place and we are in the final, crucial stages that will determine how strong WHO's first international treaty will be. The time has now come for all of us to tell the world that tobacco kills. Neither semantics nor politics can alter that reality. A new treaty can make a real difference for the health and lives of so many people worldwide.

I look forward to a very successful INB5. Thank you.