



Consultation for a Joint Africa-Europe Partnership Strategy

The Smoke Free Partnership and the Framework Convention Alliance

The Smoke Free Partnership (SFP) is a new strategic, independent and flexible partnership between the European Respiratory Society, Cancer Research UK and the Institut National du Cancer. It aims to promote tobacco control advocacy and policy research at EU and national levels in collaboration with other EU health organisations and EU tobacco control networks.

The Framework Convention Alliance (FCA) is made up of more than 250 organizations representing over 100 countries around the world. It was created to support the development, ratification, and implementation of the WHO Framework Convention on Tobacco Control (FCTC).

The burden of tobacco related diseases in developing countries

- New Partnership for Africa's Development (NEPAD) health strategy notes that 'non-communicable diseases are a growing cause of both death and disability. (...) emerging diseases of lifestyles, including diabetes and hypertension and the consequences of tobacco and alcohol consumption, contribute substantially to the health burden.'¹
- The WHO Eleventh General Programme of Work (2006-2015) estimates that chronic non-communicable diseases represent 60% of the current global disease burden²
- WHO puts the annual number of tobacco related deaths at 5 million worldwide. This number will double between 2025 and 2030, if current smoking trends continue³
- In 1990 about one million tobacco related deaths were in the developing world, but this will increase to 7 million soon after 2025⁴
- It is estimated that the number of smokers in developing countries will rise from 800 million in 1997 to 1.4 billion by 2025⁵
- Almost 1 billion men in the world smoke – about 35% of men in developed countries, and 50% of men in developing countries⁶
- The number of women smoking is set to increase from 218 million in 2000 to 259 million in 2025⁷
- Tobacco kills one in two long-term users⁸
- In 2000, three tobacco related diseases – heart disease, stroke and cancer – cost the Indian government \$5.8 billion. Productivity lost due to tobacco-related premature deaths is already \$2.4 billion in China⁹
- In March 2007, the Guardian reported that the developing world boosted British American Tobacco earning per share and raised its dividends¹⁰. In

¹ NEDAP health strategy, p.5 <http://www.nepad.org/2005/files/home.php>

² http://whqlibdoc.who.int/publications/2006/GPW_eng.pdf

³ <http://www.bmj.com/cgi/content/full/315/7108/563/e>

⁴ <http://www.bmj.com/cgi/content/full/315/7108/563/e>

⁵ <http://www.bmj.com/cgi/content/full/315/7108/563/e>

⁶ ACS & UICC, The tobacco atlas, 2nd edition, 2006, p. 22

⁷ WHO, The millennium Development Goals and Tobacco Control, 2005, p.5

⁸ WHO, The millennium Development Goals and Tobacco Control, 2005, p.3

⁹ http://www.who.int/tobacco/publications/mdg_final_for_web.pdf

¹⁰ WHO, The millennium Development Goals and Tobacco Control, 2005, p.4



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February, the Financial Times reported that Mr Camilleri, Altria chief executive, 'said the tobacco company's greatest opportunities were in developing economies such as China and India'¹¹.

The Framework Convention on Tobacco Control

The WHO adopted the FCTC in May 2003 and the Treaty became international law in February 2005. As of 22 March 2007, 168 countries signed the Treaty and 144 countries have become parties.

The objective of the FCTC is 'to protect present and future generations from the devastating health, social, environmental and economic consequences of tobacco consumption and exposure to tobacco smoke'.

Key provisions of the FCTC encourage parties to

- Ban tobacco advertising, promotion and sponsorship (article 13)
- Adopt and implement large, clear, visible and legible health warnings; and ban the use of misleading and deceptive terms such as 'light' and 'mild' (article 11)
- Implement comprehensive smokefree laws and policies (article 8)
- Implement tax policies on tobacco products to contribute to reducing consumption and effective measures to eliminate the illicit trade in tobacco products (article 15 and article 6)
- Regulate tobacco products (article 9 & 10)

Some aspects of tobacco control, such as smuggling and advertising, are transboundary and therefore require coordinated international action in order to be effectively tackled. Thus protocols on cross-border advertising and illicit trade may be developed. Guidelines on the implementation of Parties' obligations, including in relation to smokefree places, advertising, promotion and sponsorship and product regulation may also be developed.

The Conference of the Parties to the FCTC will meet every year until 2008, to discuss protocol negotiation, provide further guidance on proper implementation of the Treaty and promote the mobilization of financial resources. After 2008, it is expected that it will meet every 2 years.

General comments

The SFP and FCA welcome the African Union and European Commission initiative to draft a joint Africa-Europe Partnership Strategy and to consult with civil society and all relevant stakeholders. The success in the fight against poverty depends on the involvement of local, national and international actors. Strategies are

¹⁰ <http://business.guardian.co.uk/story/0,,2023953,00.html?gusrc=rss&feed=24>

¹¹ <http://search.ft.com/ftArticle?queryText=Altria&aje=true&id=070201001072>



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ultimately implemented by local actors and their involvement at the earliest moment possible is of the utmost importance.

The SFP and FCA believe that the EU should support African efforts towards engagement of civil society at local, national and international level.

However, we believe that the scope of such strategy should be clarified, as well as how it will fit with already existing agreements and programmes.

The SFP and FCA believe that the European Commission and African Governments should acknowledge the immense social and economic burden of tobacco use to society, and the role of tobacco control measures to advance economic growth and the Millennium Development Goals agenda¹².

We call on the Commission to:

- Promote coherence among its policies, so that decisions taken in one EC DG do not adversely impact on the work of other EC DGs
- Acknowledge the immense social and economic burden of tobacco use to developing countries
- Acknowledge and promote the role of tobacco control measures to advance economic growth and the Millennium Development Goals agenda
- Promote implementation of the FCTC by investing more on capacity building of local and national actors and promote exchange of best practices around the globe

Specific comments

1. Governance, Democracy and Human Rights

The FCA and the SFP believe that long-term change such as that required by the FCTC should encompass economic, institutional and social considerations. We believe that broad involvement and empowerment of local and national actors in national life is a key dimension to support change. Thus, the FCA and SFP strongly believe that the Commission should invest more on capacity building of local and national actors and provide them with the necessary tools to build a solid and knowledge based society.

The European Commission has a role to play in promoting good governance. However, European-African cooperation should be based on an open and transparent dialogue, where African institutional efforts to promote governance are supported. Empowerment of local and national actors, especially civil society,

¹² http://www.who.int/tobacco/publications/mdg_final_for_web.pdf



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is of the utmost importance in order to promote good governance and increasing accountability.

The European Commission should work towards a more consistent policy not only towards its partners, but also across its various Directorates General (DGs). EU priorities and objectives across all EC DGs should be in line so that decisions taken in one DG do not adversely impact on the work of other EC DGs. The SFP and FCA understand that the Commission should be accountable to all EU tax payers, however effective results often require long term investments, particularly in development policy.

Corruption is defined by the World Bank, in its paper 'Myths and Realities of Governance and Corruption, as 'the privatization of public policy'¹³. Corruption is viewed as a process where both public and private agents share responsibility, and where many acts which are not ethical (and thus may be regarded as corrupt) may not necessarily be illegal. This includes private firms' engagement in undue influence to shape state policies, laws and regulations for their own benefit¹⁴.

A number of studies and reports show how the tobacco industry has used its wealth and political influence to minimise adoption and implementation of effective tobacco control legislation in Europe¹⁵ and more recently in the Developing world^{16,17,18}.

A study published by ASH UK in April 2005 indicates how the tobacco industry has sponsored events and promoted other health issues to divert politicians' and legislators' attention from the burden of tobacco use to society. The study, which was based on the analysis of BAT public statements and internal documents, also demonstrates the different tactics used by the tobacco industry to influence Health and Finance Ministers. Further studies published in the British Medical Journal, suggest that BAT's political connections in Kenya and Uzbekistan, contributed to the dilution and delay of health legislation^{19,20}

Cigarettes are the world's most widely smuggled legal consumer product²¹. The smuggling of cigarettes is a major health concern as it makes cigarettes more affordable to low-income consumers and youth in developing countries. Also, many governments are concerned by the link between tobacco smuggling and

¹³ http://siteresources.worldbank.org/INTWBIGOVANTCOR/Resources/2-1_GCR_Kaufmann.pdf

¹⁴ http://siteresources.worldbank.org/INTWBIGOVANTCOR/Resources/2-1_GCR_Kaufmann.pdf, p.82

¹⁵ http://ec.europa.eu/health/ph_determinants/life_style/Tobacco/Documents/tobacco_fr_en.pdf, chapter 6. The influence of the Tobacco Industry on European Tobacco Control Policy

¹⁶ <http://www.bmj.com/cgi/content/extract/332/7537/313>

¹⁷ <http://tc.bmj.com/cgi/content/abstract/16/1/e1?maxtoshow=&HITS=10&hits=10&RESULTFORMAT=&author1=gilmore&fulltext=influence+in+East+Africa&andorexactfulltext=and&searchid=1&FIRSTIND EX=0&sortspec=relevance&resourceType=HWCIT>

¹⁸ www.ash.org.uk/html/conduct/pdfs/bat2005.pdf

¹⁹ <http://tc.bmj.com/cgi/content/abstract/16/1/e1?maxtoshow=&HITS=10&hits=10&RESULTFORMAT=&author1=gilmore&fulltext=influence+in+East+Africa&andorexactfulltext=and&searchid=1&FIRSTIND EX=0&sortspec=relevance&resourceType=HWCIT>

²⁰ <http://www.bmj.com/cgi/content/full/332/7537/355>

²¹ ACS & UICC, The tobacco atlas, 2nd edition, 2006, p. 56



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criminal and terrorist organisations²². The International Tobacco Evidence Network also found that tobacco smuggling tends to rise in line with the degree of corruption²³.

Quotes from key tobacco industry documents, available on the Action on Smoking and Health website²⁴, suggest that BAT has been intricately involved in smuggled tobacco markets across Africa and the developing world²⁵. These documents have been found among millions of pages in the BAT document depository, established after litigation in the USA, and describe the nature of the smuggled markets in Africa.

By tackling cigarette smuggling and the influence of big tobacco manufacturers in developing countries, countries will be promoting good governance.

More globally the SFP and FCA believe that the tobacco industry should be excluded from making any decision in the field of health especially concerning smoking prevention programmes.

2. Key development issues

The SFP and the FCA believe that any sustainable strategy should take into account both socio-economic and political considerations. Economic growth and development is possible so long as social initiatives are in place to improve access to eg health, education and employment.

Priority setting should involve all relevant stakeholders at all levels – local, national and international, and should take into consideration already existing activities and strategies to avoid duplication. The Commission and recipient countries should work together with civil society, to identify the gaps and areas where funding and support would mostly be needed.

Civil society organisations can play a particularly important role in contributing to the implementation and enforcement of legislation in countries lacking the resources to monitor implementation of national legislation and international Treaties such as the FCTC. Civil society organisations can also support national governments identifying local, regional and national priorities, as well as developing and implementing national action plans. Furthermore, civil society organisations can voice concerns of marginalised groups, provide services, and engage citizens in the process of policy making.

Civil society was instrumental in the FCTC process, and the prompt entry into force of this first international public health treaty would not have been possible without the involvement of Civil Society. Civil society organisations have helped

²² L Joossens, FCA briefing paper setting out why COP1 should prioritise starting a process to develop a protocol to combat the illegal tobacco trade <http://fctc.org/documents/FCApp3.pdf>

²³ http://www.tobaccoevidence.net/pdf/sea_activities/KL_May05.pdf

²⁴ www.ash.org.uk

²⁵ Lee, K. Gilmore, A B and Collin J. Breaking and re-entering: British American Tobacco in China 1979–2000 Tobacco Control, Dec 2004; 13: ii88 - ii95.



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shape much of the public climate that is providing momentum for global tobacco control. Without the scientific, educational, media and organizing expertise of hundreds of public health, tobacco control, consumers, human rights, and other organizations worldwide, a strong FCTC would not have been possible. Now that the FCTC has entered into force, it is crucial that civil society maintains the momentum by assisting governments in their efforts to effectively implement the treaty at the national level. Weak interpretation and poor implementation of the FCTC's provisions will not promote public health or save lives.

In December 2006, the first African Conference on Tobacco Control took place in Casablanca to discuss tobacco control with an emphasis on the needs of the low-income and middle-income countries. During the conference critical reviews of the current status of knowledge on tobacco smoking prevalence, smoking-related diseases and tobacco control were presented in order to design effective tobacco control policies in developing countries.

While diversifying sources of development assistance could contribute to diversifying the focus/priorities of aid, a large number of funding instruments could make it more difficult to ensure transparency and accountability in the implementation of projects. Moreover, it could lead to duplication of initiatives as it would become more difficult to map ongoing initiatives.

Good health, as defined by WHO, is crucial for economic growth and sustainable development. As noted in a NEPAD document 'the most obvious effects of health improvement on the working population are the reduction in lost working days due to sick leave, the increase in productivity and the chance to secure better paid jobs. Eventually, improvement in health and nutrition directly contributes to improved well-being as the spread of diseases is controlled, infant mortality rates are reduced and life expectancy is higher'²⁶. Health should be seen as a driver for economic growth. Effective health interventions are a cross cutting issue that need to be incorporated into a variety of sectors.

Tobacco control is a key example. Tobacco has a great impact not only on people's health but on society as a whole. Scientific evidence shows that tobacco use significantly increases risk of death from a number of cancers, especially lung cancer, as well as from heart disease, stroke and emphysema. Exposure to passive smoking also impacts on people's health. Tobacco growth and use poses a heavy burden on governments and the environment. Tobacco use hugely increases healthcare costs, imported cigarettes lead to the loss of foreign exchange, and tobacco growth diverts agricultural land that could otherwise grow crops. The impact of tobacco use and cigarette smoke also impacts on employee absenteeism due to sick leave, decreases workers' productivity, and has widespread environmental costs due to large scale deforestation, as well as pesticide and fertilizer pollution²⁷.

²⁶ <http://www.nepad.org/2005/files/documents/18.pdf>

²⁷ ACS & UICC, The tobacco atlas, 2nd edition, 2006, p. 42



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By implementing tobacco control measures locally and nationally, governments would be tackling a number of issues linked to poverty reduction, environmental sustainability, agriculture and good governance:

- Tobacco is a major drain on the income of households in which it is used. Ten and a half million children in Bangladesh alone would have enough to eat if their families' tobacco expenditure was allocated to food²⁸
- Growing tobacco traps people into poverty- about a third of growers finish the harvest owing more to tobacco companies than they earn²⁹
- Globally, 5.3 million hectares of arable land are currently under tobacco cultivation – land that could feed 10-20 million people³⁰
- Tobacco production requires intensive farming techniques and heavy use of chemicals, depleting soil resources and contaminating watercourses. In the Southern African region as a whole, more than 1400 square kilometers of indigenous woodlands disappear annually to supply fuel wood for tobacco curing, accounting for 12% of the overall annual deforestation in the region³¹
- It has been estimated that a third of all internationally exported cigarettes are smuggled into countries and sold illegally, evading taxation³²

The WHO Framework Convention on Tobacco Control adopted in May 2003 will greatly contribute to curb tobacco consumption. However, and as indicated by the late Dr Jong-wook Lee, WHO Director General in 2005 'While the WHO FCTC provides the framework for action against tobacco, the actual work to combat tobacco use must necessarily occur at country level. The success of the WHO FCTC will depend almost entirely on the ability of countries to implement and enforce its provisions'³³.

The potential benefits of implementing tobacco control measures are extensive and would contribute to the implementation of a long-term strategy for growth and sustainable development. The FCTC encourages countries in the developed and developing world to protect citizens' health against the burden of tobacco use, to promote economically viable alternatives for tobacco growth and to implement effective measures to eliminate illicit trade and illicit manufacturing and counterfeiting of tobacco products. It is therefore crucial that the European Union supports the implementation of the FCTC by making resources available and promoting best practices around the globe.

²⁸ WHO, Tobacco and Poverty: a vicious circle, 2004, p.4

http://www.who.int/tobacco/communications/events/wntd/2004/en/wntd2004_brochure_en.pdf

²⁹ WHO, Tobacco and Poverty: a vicious circle, 2004, p.6

http://www.who.int/tobacco/communications/events/wntd/2004/en/wntd2004_brochure_en.pdf

³⁰ WHO, The millennium Development Goals and Tobacco Control, 2005, p.5

http://www.who.int/tobacco/publications/mdg_final_for_web.pdf

³¹ WHO, Tobacco and Poverty: a vicious circle, 2004, p.8

http://www.who.int/tobacco/communications/events/wntd/2004/en/wntd2004_brochure_en.pdf

³² WHO, Tobacco and Poverty: a vicious circle, 2004, p.7

http://www.who.int/tobacco/communications/events/wntd/2004/en/wntd2004_brochure_en.pdf

³³ ACS & UICC, The tobacco atlas, 2nd edition, 2006, p.70