

*Public Comment by the Campaign for Tobacco Free Kids to  
the Office of Public Health and Science,  
U.S. Department of Health and Human Services  
Regarding the Framework Convention on Tobacco Control  
March 15, 2000*

## **Introduction**

The Campaign for Tobacco-Free Kids is a nationwide organization with 135 member groups, including many of this country's major public health organizations and other groups concerned about the health and welfare of our nation's children. The Campaign was created to protect children from tobacco by raising awareness that tobacco use is a pediatric disease, by working to change public policies to limit the marketing and sales of tobacco to children, by altering the environment in which tobacco use and policy decisions are made, and by actively countering the tobacco industry and its' special interests.

The Campaign's interest in global tobacco issues extends back to our founding in 1996 out of the belief that action to control the scourge of tobacco not stop at our country's borders. Last year, we co-sponsored the International Policy Conference on Children and Tobacco that was attended by more than 60 health ministers, legislators and other senior policymakers from 30 countries and 6 international organization. At the Conference, speaker after speaker described the growing presence of U.S. tobacco companies in their countries and the harmful impact that presence was having on public health and public policy. They described the active resistance by these companies towards government and private efforts to implement sound and sensible public health measures. By the end of the Conference, it was clear that even the most well-designed and implemented national tobacco control policies would never be completely successful unless multilateral action was also taken.

Thus we were heartened by the news that in May 1999, the United States joined the other member states of WHO in unanimously endorsing the start of negotiations for the Framework Convention on Tobacco Control (FCTC). If these negotiations are successful and produce a strong Convention, the FCTC will make an enormous contribution to stemming the growth of the tobacco epidemic. It will raise national and international awareness of the problem, provide technical and financial resources for effective national tobacco control measures, and foster multilateral cooperation on aspects of tobacco control that transcend national boundaries, such as the global marketing and promotion of tobacco products and smuggling.

We at the Campaign are committed to doing our part to make the FCTC negotiations a success for public health. Recently, the Campaign received a grant from the Robert Wood Johnson Foundation to help build support for the FCTC in the United States by working with other concerned organizations to educate the American public about just what is at stake in these negotiations. As U.S. organizations and the American public learn more about the Convention and the extent of the problem, we are certain that they too will want the U.S. to play an active leadership role. In the coming months and years, you will hear often from the Campaign and our partners. We look

forward to giving you our input, and we offer our support and assistance to progress towards U.S. ratification of the Framework Convention. We would also like to encourage you to continue this process of consultation on a regular basis and hope that you will solicit the views of a broad range of organizations not only in Washington, but also throughout the United States. This continuous contact will help you to build broad-based support for the FCTC.

### **Scope Of The Problem**

The problems caused by tobacco are enormous and are growing worse. Based on current smoking trends, tobacco will soon become the leading cause of death worldwide, causing more deaths than HIV, tuberculosis, maternal mortality, automobile accidents, homicide and suicide combined.<sup>1</sup> Globally, around 4 million people die from tobacco-related illness each year.<sup>2</sup> And, if current trends continue, even more will die. By the year 2030, 10 million people will be dying each year from tobacco use, 70 percent of them in developing nations.<sup>3</sup>

Many of tomorrow's tobacco victims are today's children. According to the World Bank estimates, approximately 80,000 to 100,000 young people around the world become addicted to tobacco each and every day.<sup>4</sup> If current trends continue, 250 million children alive today will die from tobacco-related disease.<sup>5</sup>

In addition to the terrible human toll, smoking-related illnesses are also imposing increasing economic costs on governments, businesses and individuals which must pay for the cost of caring and treating sick smokers and victims of environmental tobacco smoke. In the next few decades, already strained medical services in many developing countries will have to contend with a flood of people needing treatment for tobacco-related illnesses. Caring for these people may end up displacing funding from other public health priorities, such as immunization, communicable disease control and child health programs.

In addition, people who smoke die younger than non-smokers and tend to be absent from work more often due to smoking-related illnesses. This represents a cost not only to the business that employs and trains them, but to the government that may have paid for their education. At the household level, since smoking often kills people during their working years, tobacco use deprives many households of years of potential income. During their lives those smokers may also spend a large part of their disposable income on tobacco, leaving their households poorer. But the true cost of tobacco use is the human misery it causes. Intangible costs such as the loss of life and the pain and suffering inflicted upon smokers, passive smokers and their families are incalculable.

What makes the tobacco epidemic so different from other non-communicable diseases is that it is caused and exacerbated by an extremely powerful industry which is becoming increasingly international in its vision and scope. In spite of the known public health and economic costs, the tobacco industry continues to aggressively promote its product in every corner of the globe. Faced with increased regulation in Europe and North America, greater awareness of health risks of smoking, and declining sales, the tobacco multinationals are stepping up their activities in developing countries. Taking full advantage of the global trend towards the liberalization of trade and investment rules, the multinational tobacco companies have been engaged in an aggressive expansion overseas.

Philip Morris, Japan Tobacco and British American Tobacco (BAT), the world's three largest multinational cigarette companies, now each own or lease plants in at least 50 countries.<sup>6</sup> In 1998,

these three companies had combined tobacco revenues of more than \$88 billion, a sum greater than the total GNP of Albania, Armenia, Bahrain, Bolivia, Botswana, Bulgaria, Cambodia, Cameroon, Estonia, Guyana, Honduras, Jamaica, Jordan, Laos, Latvia, Madagascar, Moldova, Mongolia, Nepal, Nicaragua and Togo combined.<sup>7</sup>

Despite the global scope of the tobacco industry, there are very few countries where it accounts for even one percent of national economic activity. Thus industry claims that tobacco control will have devastating economic consequences is simply a diversion, as the World Bank so ably demonstrated in its 1999 report, *Curbing the Epidemic: Governments and the Economics of Tobacco Control*. Even under the most optimistic scenarios, global tobacco consumption is set to increase over the next three decades. WHO forecasts that if current trends continue, the absolute number of smokers will increase from the current 1.1 billion to 1.64 billion in 2025 (due in part to an increase in global population), even as overall prevalence falls in some countries. While future declines in consumption will clearly reduce the number of tobacco farming and manufacturing jobs, those jobs will be lost over many decades, not overnight. This provides governments with a unique opportunity to plan a long-term and orderly transition.

While tobacco use has attracted a great deal of attention in the United States, fewer than five percent of the world's smokers live in the United States. With millions of their customers either dying from tobacco-related illnesses or quitting, it is obviously crucial for the success of the tobacco industry to keep recruiting new smokers. Every day, these companies increase their marketing efforts to addict more smokers worldwide, focusing special attention on the "untapped markets" of women and children in the developing world. To get their message across, they spend billions of dollars each year promoting their brands in every way imaginable. Since studies show that the majority of smokers begin during adolescence (90 percent in the United States<sup>8</sup>), the logic of the industry dictates that it must somehow entice young people to take up smoking. And, while approximately 25 percent of women in industrialized countries smoke, only about 7 percent of women in developing countries smoke, making them a prime target for the companies.<sup>9</sup>

In the past, our government played a dubious role in assisting U.S. based companies expand overseas. During the 1980s, cigarette companies convinced the U.S. government to force countries in Asia to open up their markets to imported cigarettes or face trade sanctions. The results were catastrophic. Smoking rates in Japan, South Korea, Thailand and Taiwan rose 10 percent higher than they would have following the massive inflow of American cigarettes after the U.S. Trade Representative forced these countries to open their markets to tobacco imports, according to a study by the National Bureau of Economic Research. Price competition and advertising were largely responsible for this increase.<sup>10</sup> In South Korea, the smoking rate among teenage boys was 18 percent in 1988 – a year later, after U.S. cigarette imports were allowed, it rose to 30 percent. Smoking rates for teenage girls climbed during the same period from 2 to 9 percent.<sup>11</sup> Elevated smoking rates in Asia as a result of U.S. pressure is expected to result in millions of additional future deaths.<sup>12</sup>

### **The Importance of Active U.S. Participation in the Framework Process:**

The negotiation and implementation of the FCTC could make an enormous contribution to stemming the growth of the tobacco epidemic by raising national and international awareness as well as technical and financial resources for effective national tobacco control measures. A strong Convention will also serve

as a platform for multilateral cooperation on aspects of tobacco control that transcend national boundaries, including global marketing/promotion of tobacco products and smuggling. In addition to the specific benefits of the Convention and related protocols, the process leading to the passage of the FCTC is likely to give new impetus to efforts to strengthen national legislation and action to control the harm caused by tobacco and will help mobilize national and global technical and financial support for tobacco control.

A strong Framework Convention is essential to addressing this global public health challenge, and the United States has a pivotal leadership role to play in the upcoming negotiations. The stakes are enormous. If the Convention fails or is weak, it may impede the process of public policy change in the United States and will retard or halt nascent tobacco control activities abroad. If the U.S. government fails to support the Convention or urges the adoption of a weak convention, the United States could effectively undermine efforts elsewhere in the world. On the other hand, a strong Framework Convention on tobacco would be a powerful catalyst for positive public policy change in the United States as well as in other countries. Finally, as home to the largest multinational tobacco company on the globe, Philip Morris, the United States has a special responsibility to help mitigate the impact of our multinational corporations on this worldwide health epidemic.

### **Principles That Should Guide Framework Convention Negotiations**

In order to ensure that the Framework Convention and its protocols provides the opportunity for protecting global health, the Campaign and other public health groups have prepared and subscribed to a set of core principles that we believe should guide the negotiation and implementation of the Convention. We have appended a copy of these principles, along with a full list of the signatories.

First, above all else, public health considerations must drive the Framework Convention process and govern all positions taken by the parties. In this regard, we are counting on the U.S. delegation to play a strong leadership role in making sure that the protection and promotion of global public health remains front and center throughout the negotiating process. Commercial and trade interests simply must take a back seat to efforts to protect global public health.

Second, the Convention should recognize that there is no single policy that will solve the problems caused by tobacco. In order to be effective, tobacco control efforts must be comprehensive and multi-faceted. Some tobacco issues are transnational or international in character and will call for enforceable international arrangements and agreements. Tobacco smuggling and the sale of duty free tobacco products are two such issues. Other issues that will be dealt with in the Convention are crucial elements of effective domestic tobacco control policy, such as protecting children, passive smoking restrictions, and product regulation. These issues may be better handled through international cooperation and the transfer of information and technical assistance. In several areas, merely providing a means for governments to gain greater access to scientific research and examples of what has worked in tobacco control and what hasn't will allow developing countries to learn from the successes and failures of countries with more advanced tobacco problems.

Third, nothing in the Framework Convention or related protocols should reduce, relax or in any other way diminish existing national tobacco control initiatives, regulations, laws, or practices. Countries must be able to implement the most far-reaching tobacco control policies achievable and the U.S. must insure that this option is available to them. Simply put, the FCTC should set a floor – not a ceiling.

Fourth, negotiation and implementation of the Framework Convention must recognize that tobacco companies, their subsidiaries, agents and consultants do not have public health concerns as their priority. Given their history of impeding sound public health policy, tobacco company representatives should not serve on any official body connected with the development or implementation of the Framework Convention.

Fifth, because of the vital contribution that civil society can make in assisting and monitoring the Convention negotiations, non-governmental organizations (NGOs) should be fully integrated into the Framework Convention process. Rules for NGO participation should rely on the precedents set at other recent UN conferences and treaty negotiations. Moreover, in order to ensure that developing countries are included, the United States should work with the World Health Organization, other governments, and private organizations to secure strong representation for developing country NGOs.

## Conclusion

Since negotiators first met in Geneva in October 1999, over 1.5 million people have died from tobacco use. The stakes in these negotiations could not be higher. It, therefore, is incumbent upon the United States to display constructive leadership and support for the Framework Convention process. This will involve, among other things, ensuring that there is high-level representation at the negotiations from the United States with a strong focus on public health and committing political and financial support to the Framework process. The Campaign strongly supports and urges U.S. commitment of proper and effective resources in order to assure the strongest possible Convention with the broadest base of support.

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<sup>1</sup> Howard Barnum, "The Economic Burden of the Global Trade in Tobacco," Paper presented at the 9<sup>th</sup> World Conference on Tobacco and Health, October 1994.

<sup>2</sup> World Health Organization, *World Health Report 1999* (Geneva: WHO, 1999).

<sup>3</sup> World Health Organization, *World Health Report 1999* (Geneva: WHO, 1999).

<sup>4</sup> World Bank, *Curbing the Epidemic: Governments and the Economics of Tobacco Control* (Washington: World Bank, 1999).

<sup>5</sup> C.J. Murray and A.D. Lopez, eds. *The Global Burden of Disease: A Comprehensive Assessment of Mortality and Disability from Disease, Injuries and Risk Factors in 1990 and Projected to 2020* (Cambridge, MA: Harvard School of Public Health, 1996).

<sup>6</sup> "International Cigarette Manufacturers," *Tobacco Reporter*, June 1998.

<sup>7</sup> Philip Morris and BAT 1998 Annual Reports; Dow Jones Newswires, "Japan Tobacco/Results," 21 May 1999; UNDP, *Human Development Report 1999* (New York: UNDP, 1999).

<sup>8</sup> U.S. Centers for Disease Control, *Preventing Tobacco Use Among Young People: A Report of the Surgeon General* (Washington: U.S. Dept. of Health and Human Resources-CDC, 1994).

In high-income countries, 80% of smokers begin in their teens. In middle- and low-income countries, most smokers start by their early twenties, but the trend is toward starting at younger ages. World Bank, *Curbing the Epidemic: Governments and the Economics of Tobacco Control* (Washington: World Bank, 1999).

<sup>9</sup> *Smoking and Women: The Next Wave of the Tobacco Epidemic*, (Geneva: World Health Organization, 1997).

<sup>10</sup> Glenn Frankel, "US Aided Cigarette Firms in Conquests Across Asia," *Washington Post*, 17 November 1996.

<sup>11</sup> Ruth Roemer, *Legislative Action to Combat the World Tobacco Epidemic* (Geneva: World Health Organization, 1993).

<sup>12</sup> Coalition on Smoking OR Health, Trade Policy on Tobacco Exports Public comment on Federal Register notice Vol. 59, No. 083, 59 FR 22714: 27 May 1994.