

## Africa at the crossroads of tobacco control

If current trends continue, by 2030 tobacco use cause eight million deaths a year – and 80% of these occur in the developing world, the World Health Organization estimates.

Developing countries that already have alarmingly high rates of tobacco consumption will be most affected. But, unless control measures are greatly intensified, the countries of Africa will be counting large numbers of tobacco-related deaths, adding a new element to the heavy burden of deadly disease they already carry.

By international standards, most African countries have relatively low rates of tobacco use. The rates are low even compared to other developing countries, as the table below suggests.

### Percentage of population smoking any type of tobacco product

Selected African countries			Other selected developing countries		
Country	Males	Females	Country	Males	Females
Burkina Faso	20.3%	8.2%	Argentina	34.6%	24.6%
Dem Rep of Congo	13.8%	1.6%	Mexico	37.6%	12.4%
Ghana	8.2%	0.7%	Venezuela	33.4%	27.8%
Kenya	24.1%	1.6%	Egypt	26.0%	4.1%
Mali	19.2%	2.5%	Pakistan	31.7%	5.1%
Nigeria	11.7%	0.9%	Bangladesh	44.5%	2.9%
South Africa	27.1%	8.9%	India	30.8%	2.8%
Uganda	17.3%	2.5%	China	60.8%	4.2%
			Malaysia	55.5%	2.5%

Source: WHO Report on the Global Tobacco Epidemic, 2008

The problem is that tobacco consumption across Africa is increasing sharply in response to a marketing onslaught by multinational tobacco companies, seeking to compensate for their loss of sales in wealthier countries by exploiting new opportunities in Africa.

A World Bank report showed that cigarette consumption in the African region increased by 38.4% in just five years, between 1995 and 2000. And in most African countries, smoking rates among the teenagers are substantially higher than in the general population, which does not augur well for the future.

The deliberate and semi-covert strategies of tobacco multinationals to target the youth in African countries have been exposed repeatedly by investigative journalists.



### **Africa on the brink**

In short Africa is teetering on the brink. The continent still has a chance to escape *relatively* lightly harmed by the global tobacco epidemic. But will it make use of this opportunity? Will its decision-makers have the foresight to prioritise tobacco control, introducing uncompromising measures in the interests of preventing disease? Or will they only be persuaded once mortality rates begin to climb and compete with the death toll due to HIV/AIDS, malaria and tuberculosis?

African tobacco control advocates from 22 countries believe that the decisions taken by the African delegation to the 3<sup>rd</sup> Conference of the Parties to the Framework Convention on Tobacco Control will be critical in determining the future course of the epidemic. Meeting recently in Abuja, Nigeria under the auspices of the Framework Convention Alliance, this group of well-informed campaigners described the spread of the tobacco epidemic in Africa as alarming. "Its effect is devastating on the health, economy and environment of our continent," their closing communiqué stated.

They called on delegates from African governments to support the strongest possible measures for implementation of the FCTC's articles on:

- Packaging and labelling. (Article 11 requires mandatory health warnings and bans on misleading industry information on packaging.)
- Advertising, promoting and sponsorship. (Article 13 requires bans on tobacco advertising, promotion and sponsorship.)
- Protecting public health policy from tobacco industry interference. (Article 5.3 deals specifically with this issue.)

### **Time to reclaim the FCTC legacy**

Africa's role in the development and adoption of the FCTC was exemplary:

- A group of African countries played a key role in crafting this powerful treaty.
- The region worked constructively with NGOs during the course of negotiation.
- The continent refused to be divided into blocs of tobacco producing and tobacco consuming countries, but voted in unity for the FCTC.

Furthermore, a total of 36 nations in sub-Saharan Africa have acceded to or ratified the FCTC, binding themselves voluntarily to passing laws and developing programmes to give effect to the treaty.

The conduct of African countries speaks of a desire to protect their people from the onslaught of an epidemic that is entirely preventable. It is unfortunate that in most of Africa – as in many other parts of the developing world, and in some wealthy nations – there is a huge gap between intention and effective tobacco control.

- For example, the World Health Organization calculates that only 9% of high income countries, 4% of middle income countries and 3% of low income countries have smoke-free legislation covering all institutions and places assessed.
- And, at the other end of the scale, 15% of high income countries have a complete absence of smoke-free legislation or legislation so weak that it fails to cover even healthcare and educational institutions. The corresponding figures for middle and low income countries are 49% and 31% respectively.  
(World Health Report on the Global Tobacco Epidemic, 2008)

The challenges and difficulties of implementing the FCTC effectively are therefore not unique to Africa. But the African continent has more to gain by taking concerted action now – and much to lose if it does not. The adoption of strong and explicit guidelines by the 3<sup>rd</sup> Conference of the Parties is, as African tobacco advocates have highlighted, of critical interest to the people of the continent.

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The Framework Convention Alliance is an international network of more than 350 NGOs dedicated to achieving the goals of the FCTC.

