



# ALLIANCE BULLETIN

Framework Convention on Tobacco Control • Geneva, Switzerland • 4 May 2001 • Issue Eleven

Today's Weather: Cloudy Exchange Rate: 20 Swiss FR =  
 High 18 C Low 10 C Seychelles Rupee 67.36 Jamaican Dollar 526.261  
 66 F 50 F Trinidad/Tobago Dollar 71.442 Bermudian Dollar 11.463

## INB-2 FRIDAY

### Inside this issue:

<b>Today's Schedule</b>	<b>2</b>
<b>Views from the Alliance</b>	<b>3-4</b>
<b>La Convention Cadre pour la Lutte Antitabac, une chance à saisir par les autorités africaines</b>	<b>5</b>
<b>Etiquetado. Dónde estamos y hacia dónde debemos ir</b>	<b>5</b>
<b>Orchid &amp; Dirty Ashtray Awards</b>	<b>5</b>
<b>Views from the Alliance</b>	<b>6</b>

### TODAY'S DELEGATE BRIEFING

#### DEVELOPING COUNTRIES

4 May 2001  
 13.00-14.00  
 Salle III  
*Lunch will be served*

## DEATH CLOCK

Since the opening of the first working group for the Framework Convention on Tobacco Control on October 25, 1999,

**6,135,453**

people have died from tobacco-related diseases.

(As of 8am 4 May 2001)

## Delegates Favour Health Over Trade

The vast majority of delegates speaking during a working group Thursday called for including a provision in the

FCTC to make it clear that public health measures to deal with the tobacco epidemic would take precedence over trade considerations. Such a provision would help ensure that tobacco control measures could not be attacked under trade agreements.

The delegates called for revising or deleting Guiding Principal 5 of the Chair's text, which currently states that "Tobacco control measures should not constitute a means of arbitrary or unjustifiable discrimination in international trade." The United States was the only nation to unequivocally support the existing language.

Public health advocates have argued that the current language, which is borrowed from Article XX of the GATT, creates serious problems for tobacco control and should be deleted. They argue that the language does not define the relevant terms, appears to place the burden of proof in a trade conflict on the country defending a tobacco control measure, and leaves unclear what level of

scrutiny should be applied to a challenged tobacco control measure.

Many delegates agreed:

**Uruguay:** "The right to health and life should prevail over economic interests."

**India (for the Southeast Asian Region):** "Tobacco control measures taken for public health reasons should prevail

over trade."

**Jamaica:** "(The current language) seems to water down the principle we are working towards. Tobacco control measures should not be unduly constrained or discriminated against by other agreements."

Tobacco multinationals have a long history of using trade law as a tool to thwart tobacco-control policies. Several Asian countries, notably Thailand, were forced in the late 1980s to open their tobacco markets to foreign companies as a result of trade pressures. More recently, Japan Tobacco has threatened to challenge the European Union for banning the terms "mild" and "light" from cigarette packaging.

**THANK YOU DELEGATES**  
 For your loyal readership and attendance at our briefings.  
 Alliance materials are available online at <http://www.fctc.org>  
**We'll see you at INB-3.**

## Health Warnings: The Ugly Truth About Tobacco

What would be a fair warning for a lethal product that addicts children, kills when used exactly as intended, and every year causes millions of deaths worldwide? At a minimum, a warning that tells the truth.

Research shows that large, no-nonsense tobacco package warnings, in colour, with pictures and graphics, are effective at discouraging smoking. Strong warnings help motivate smokers to quit, and help persuade kids not to smoke.

Canada has established a precedent with new warnings, a precedent that should be included as a provision in the Framework Convention on Tobacco Control.

Canada requires that cigarette packages contain one of 16 picture-based rotated warnings on the top 50% of the front and back of the package, English on one side, French on the other. Inside



Canadian Warning Label

the package, Canada requires one of 16 rotated messages, nine providing advice on quitting and seven providing detailed health information.

Here are sixteen reasons why the FCTC should include a strong provision supporting large package warnings with colour pictures:

**1) Discourages Children.** Children who are not yet addicted would be discouraged

from starting smoking. Visual images have a particularly effective impact with children. Further, warnings would enhance the effectiveness of school education.

**2) Bigger is Better.** Large warnings are more effective than smaller warnings. This has been demonstrated by research conducted by the Canadian Department of Health, and by others. Expert opinion and basic logic also support larger warnings.

(continued on page 2)

**FACT:** As long ago as 1983, a World Health Organization Expert Committee urged consideration of picture-based warnings for the benefit of pre-literate populations.

## TODAY'S SCHEDULE

4 May 2001

Time of Negotiating Sessions  
Morning: 10.00-13.00  
Afternoon: 15.00-18.00  
Evening: 19.30-22.00

**9.00-10.00**  
FCA Women's Caucus Meeting  
Salle XVI/Room 16

**13.00-14.00**  
FCA Delegate Briefing:  
Developing Countries  
Salle III/Room 3

The Framework Convention Alliance (FCA) is an alliance of NGOs from around the world working to achieve the strongest possible Framework Convention on Tobacco Control. Views expressed in the *Alliance Bulletin* are those of the writers and do not necessarily represent those of the sponsors.

### FCA Women's Caucus

Dr. Prakash Gupta briefed the women's caucus stating that the tobacco industry often inflates the number of bidi workers to 24 million in India even though there are probably around 6 million. Diversification such as in the Ganeesh cooperative of Kerala have been highly profitable as long as the marketing was assured. Rudo Mungwashu (Zimbabwe) and Thais Corral (Brasil) emphasized the dangers that tobacco poses to sustainable agriculture and food security for families. Reports from Kenya and Bangladesh support the argument that tobacco work often leads to poverty among women tobacco workers instead of viable livelihoods.

## Health Warnings: Bigger is Better

(continued from page 1)

**3) A Picture Says a Thousand Words.** Warnings with pictures and text are more effective than warnings with text alone. Tobacco companies know this, and repeatedly use pictures in their advertising. One Canadian study found that warnings with pictures were 60 times more effective than text-only warnings.

**4) Delivers Results.** Larger, picture-based warnings would be effective at increasing public awareness of the health effects of smoking, and at decreasing smoking. Such warnings would increase noticeability, improve recall and increase impact, as compared to smaller, text-only warnings.

**5) Perfectly Targeted Education.** Warnings are an extremely effective public education campaign, targeting all smokers and potential smokers. There are also secondary targets, including family, friends and co-workers of smokers, who in turn can be influential. For increased effectiveness, the content of warnings can be coordinated with the content of other educational programs.

**6) Increases Awareness.** In its 1999 report, the World Bank noted that "People's knowledge of the health risks of smoking appears to be partial at best, especially in low- and middle-income countries where information about these hazards is limited." Awareness and appreciation of the health risks of smoking are important reasons why many people quit smoking. The World Bank recommends "adding prominent warning labels to cigarettes."

**7) More Information.** A larger area for warnings allows for the communication of more information. As well, more space allows for larger lettering, making the warnings easier to read.

**8) Always Working.** Warnings work 24 hours a day, 7 days a week. Warnings will be seen at the point of purchase, when a consumer pulls a cigarette out of a package, when a package lies on a table, and on many other occasions.

**9) Deals With Illiteracy.** Pictures greatly assist in communicating with illiterate populations, with immigrants who do not yet speak the official language(s), and with populations in countries where there are many languages.

**CORRECTION:** In issue 6 of the Alliance Bulletin, we incorrectly listed Tonga as a country that did not attend INB1. We are pleased to report that Tonga did send a delegation and we deeply regret our mistake.



Canadian Warning Label

**10) Supported By Evidence.** As long ago as 1983, a World Health Organization Expert Committee urged consideration of picture-based warnings for the benefit of pre-literate populations. Today, there is overwhelming evidence available to confirm the desirability of larger, picture-based warnings, as documented in a 2001 report.

**11) Right to Know.** Consumers have a right to be fully informed about all the

risks of tobacco products. Larger, picture-based warnings, as part of a rotated series, provide better consumer protection, allowing for better-informed decision-making.

**12) Low Cost.** The cost is paid by tobacco companies, not by the government.

**13) Makes Packages Less Attractive.** Large warnings help take away the promotional allure of packages, reducing the lifestyle imagery of brands created in part through packaging.

**14) 50% Is a Reasonable Size.** There is considerable evidence that plain packaging - using 100% of the package - would be effective at discouraging smoking. Thus if using 100% of the package would be reasonable, then using a mere 50% is surely reasonable. Health warnings are at least as important as a branded message.

**15) Warnings Are a Widely Accepted Strategy.** The recognized importance of package warnings generally has been highlighted by the very large number of countries in which warnings appear, and by recommendations of the World Health Assembly. What is needed now are warnings with greatly enhanced effectiveness.

**16) If Canada Can Do It, So Can Every Country.** There is no reason why children and adults around the world should not be able to receive warnings at least as effective as those found in Canada.

(Adapted, with permission, from a document prepared by the International Union Against Cancer, International Union Against Tuberculosis and Lung Disease, World Heart Federation and International Non Governmental Coalition Against Tobacco.)



Australian Warning Labels

# Views from the Alliance

## Why Nonsmokers' Rights ("No Smoking") Should Be a Major Component of the FCTC

*John Banzhaf, Action on Smoking and Health (U.S.A.)*

1. It is the most effective way to generate and mobilize strong public support for antismoking activities.
2. It can be -- as in the U.S. -- the most important single factor deterring people from smoking.
3. Unlike other measures, it costs nothing, and yet generates enormous and immediate savings.
4. It is one of only two antismoking measures that directly benefit the great majority of citizens.
5. It avoids the "intrusive government" "national nanny" argument against antismoking programs.
6. It builds upon a growing momentum already evident in airline smoking bans and elsewhere.
7. It works synergistically with other measures designed to reduce or discourage smoking.

**PUBLIC SUPPORT:** Because it is based upon the individual self-interest of the majority of citizens who are nonsmokers (their own health), rather than upon their abstract altruistic motives to help others, concern over ETS has been the backbone of public, political, and financial support for the antismoking movement. Prior to the emergence of the nonsmokers' rights movement in the 1970s, there was little support in the U.S. for conventional antismoking activities. Smokers obviously didn't support them, and nonsmokers -- not seeing why smoking affected them -- weren't very interested in "saving smokers from themselves." But with over 96 million Americans with chronic health conditions which make them especially susceptible to tobacco smoke, and growing concern about the deadly dangers of inhaling ETS nonsmokers formed hundreds of organizations which today generate most of the public pressure -- and supply the troops (e.g., at legislative and other hearings, by writing letters, electing candidates, etc.) -- in the war on smoking. In short, fighting ETS will help jump start and/or greatly strengthen the antismoking movement in many countries.

**2. DETER SMOKING:** Many studies as well as massive anecdotal evidence suggest that the growing nonsmokers' rights movement is the most important single factor in persuading smokers to quit. Smoking bans on long-distance airline flights, in shopping malls and other public places, etc. make it more difficult to remain a smoker. Prohibiting smoking in workplaces not only increases that difficulty; it also insulates smokers from many of the stressful workplace cues which often trigger the urge to light up, and from the horrible temptation posed by being surrounded by people smoking and blowing smoke into the air. But perhaps most importantly, the many "no smoking" signs serve as a constant reminder that smoking (contrary to the ads) doesn't make you sexy and sophisticated; instead, it makes you stinky and smelly and someone most people don't want to associate with. Smokers constantly report that these social pressures make them feel like "public pariahs," and

thus provide them with the major incentive to quit -- poetic justice since so many people were driven to start smoking because of public pressure. In short, restricting smoking, and the posting of numerous "no smoking" signs, is one of the most effective -- and also least expensive -- ways to discourage smoking, help persuade smokers to quit, and assist them in remaining nonsmokers.

**3. LOW COST, BIG SAVINGS:** Conventional antismoking educational campaigns can be terribly expensive, particularly for emerging countries, and thus encounter strong political opposition. But public smoking can be restricted at virtually no cost, thereby sending a very important inexpensive educational message. Moreover, business owners will experience immediate savings in terms of cleanup and maintenance costs, reduction in burn damages, heating and cooling expense, etc., as well as lower health and disability claims.

**4. BENEFITS THE MAJORITY:** It's obviously easier to justify, and obtain public and political support for, efforts which benefit the majority than those which help only a minority. While anti-smoking education and withdrawal programs are seen as benefiting only the minority who smoke or are likely to take up smoking, restrictions on smoking benefit the great majority by protecting them from a leading cause of premature death a major cause of physical irritation (especially to the 96 million smokers who are especially susceptible); and a significant annoyance while eating, shopping, or just enjoying public places.

**5. NO BIG GOVERNMENT:** The nonsmokers' rights movement avoids a major argument made in opposition to most antismoking programs: i.e., that the government is acting like a "national nanny" and forcing people to improve their own health. Many people already resent being required to wear seat belts or motorcycle helmets, being denied access to certain drugs, and being preached to and nagged at by their government. The nonsmokers' rights movement avoids this because it is based upon a basic governmental function: protecting people from harm by others, from toxic chemicals, air pollution, etc. Since ETS has now been found to be a known human carcinogen by several different countries, there can be no reasonable argument that people have a "right" to smoke in public places and subject nonsmokers to lung cancer.

**6. BUILDS UPON MOMENTUM:** While there is often very little public demand for actions to deter smoking, there is growing public pressure to protect nonsmokers from tobacco smoke. This is evident from the large number of airlines which have prohibited smoking because of passenger complaints; the growing number of restaurants which have banned smoking (in developed countries) or at least provided no-smoking sections (often in emerging countries); etc. It is always easier to take advantage of and to channel exist-

ing public support for a movement than to be forced to generate that support from scratch. In short, there is already far more public support for restricting smoking than for educating smokers, banning ads, etc.

**7. SYNERGISTIC EFFECTS:** Restrictions on smoking in public places have proven to be one of the most effective ways to discourage smoking, but to also work synergistically with other methodologies. Company after company has complained that simply providing antismoking educational materials to employees, providing smoking withdrawal clinics, and even financial incentives does little to reduce smoking. But a ban on workplace smoking, coupled with these measures, slashes smoking rates by providing a major additional incentive to quit, as well as providing a supportive atmosphere for former smokers.

ASH has proposed that the word "adequately" be deleted from the Chair's draft text -- "D 2. Every person should be fully informed about the addictive and lethal nature of tobacco consumption, and non-smokers should be {adequately} protected from exposure to tobacco smoke" because the use of the word "adequately" implies that some level of exposure short of a total smoking ban may be sufficient (adequate). However, tobacco smoke has been declared by numerous governmental reports in several countries -- as well as in dozens of scientific studies -- to be a known human carcinogen, and one for which no safe lower level has ever been found. Therefore no level of exposure can be "adequate."

ASH has also proposed adding additional text as follows -- "G 1 (a) implementation of legislation and other effective measures at the appropriate governmental level that provide for systematic protection from exposure to tobacco smoke in indoor workplaces, enclosed public places, {and} public transport, AND OUTDOOR AREAS WHERE PEOPLE CONGREGATE, with particular attention to special risk groups {such as} INCLUDING BUT NOT LIMITED TO children, THE ELDERLY, THOSE WITH CONDITIONS MAKING THEM ESPECIALLY SUSCEPTIBLE, and pregnant women." ASH believes that these additional areas of concern should be included to provide additional support in countries like the U.S. where progress is already being made; to provide aspirational goals for countries not yet ready to move this far, and to make other requests seem more reasonable and more clearly justified.

ASH strongly urges your cooperation in obtaining the strongest possible nonsmokers' rights statements in the FCTC and its implementing documents. Thank you for your active support. To read all of ASH's comments, please click on <http://ash.org/whocom> or <http://ash.org/whotext>

## Views from the Alliance

# Big Tobacco Seeks to Conquer Turkey with World Bank Help

*Sue Lawrence, Physicians for A Smoke-Free Canada*

The Turks were once proud rulers of an empire. They conquered other lands; they controlled mighty fortunes. They ruled their empire with passion and pride. But Turks, once conquerors, may now themselves be conquered by the marauders from Philip Morris.

By comparison to Turkey, tobacco control in some other countries is a relatively straightforward enterprise. One lobbies, one issues a few press releases, one discusses the situation with politicians who then pass a bill or bylaw. But in Turkey, tobacco control is a stormy battle fought in murky waters. Tobacco control lobbyists, determined but woefully few in number struggle to make steps forward and are quickly shoved back. They may occasionally taste victory in small skirmishes but later realize how mighty the enemy is.

Philip Morris has strongly lobbied the Turkish Parliament and influenced the writing and passing of tobacco laws. Tekel, the Turkish Tobacco Monopoly, controlled the price of cigarettes until 1991. That year, through determined lobbying, Philip Morris won the right to set its own prices and set up its own distribution system, thus gaining foothold in the Turkish market. Newly emboldened, and aided by a newly acquired and very influential Turkish business partner, Philip Morris shifted its lobbying machine into high gear, seeking nothing less to destroy the Turkish Tobacco Monopoly, Tekel.

By 1997, Philip Morris had increased its share of the Turkish tobacco market to 20%. Now, feeling

the heat of competition from Philip Morris, Tekel countered by licensing British-American Tobacco (BAT) to market Tekel brands Samsun and Yeni Harman. Tekel reasoned that an alliance with BAT would help them compete more effectively with Philip Morris. But tobacco lobbyists knew that this was the beginning of the end of Tekel. It would not long survive the presence of not one but two major transnational tobacco corporations (TTCs) on Turkish soil.

Earlier this year the already troubled Turkish economy spiralled further downwards overnight. The Turkish lire fell to just 30% of its former value, prompting the World Bank and the International Monetary Fund (IMF) to provide stern counsel to Turkey. Privatize! The World Bank and the IMF strongly urged Turkey to adopt 15 new laws to privatize industries in agricultural and banking sectors -- and the tobacco industry. It was music to the ears of the TTCs. Happily, they added their voices to the chorus, led by the World Bank and the IMF, in favour of privatization.

The Turkish government, left with little room to manoeuvre given the lamentable state of the Turkish economy, followed the World Bank/IMF advice and in April 2001, adopted all 15 privatization laws, including one to privatize the tobacco industry.

Henceforth, TTCs will be welcome in Turkey, with rights to establish their own distribution networks. Tekel was reduced to a mere shadow of its former self. Revenues from tobacco sales will

now no longer all stay in Turkey. A large part will flow to the headquarters of the TTCs.

Worse, tobacco policy in Turkey will now be set by a Tobacco Board. In all likelihood this Board will come to have several members that represent TTCs. During the legal drafting process, the task of creating a Tobacco Board was assigned to a tobacco sub-committee, and the chairperson of that sub-committee was none other than Corporate Affairs Director of Philip Morris in Turkey.

A few years ago, tobacco control lobbyists scored a significant victory when they succeeded in convincing the Turkish government to ban all tobacco advertising, a ban that has been reasonably well implemented and remains in effect to this day. But for how much longer? Tobacco control advocates in Turkey fear that the advertising ban will soon be dismantled. Their fears seem justified. Transnational tobacco companies have been invited inside the tent. Through the Tobacco Board, they now are official advisers to the government. Surely, high on their wish list is renewed tobacco advertising in Turkey.

It may already be too late for Turkey to be helped in this matter by the yet-to-be-negotiated Framework Convention on Tobacco Control. But it is not too late for other nations. A strong FCTC, with specific provisions to allow countries to take strong measures to control the actions of transnational tobacco companies, will help nations in the future to protect their citizens' from lifetime addiction and economic domination being served up by big tobacco.

## Views from the Alliance

# Protection of Non Smokers: Essential to a Strong FCTC

*American Lung Association (U.S.A.)*

The victims of tobacco-related disease include smokers...AND nonsmokers. Passive smoking is a leading cause of premature death in the United States. The Surgeon General estimates passive smoking claims the lives of over 55,000 American nonsmokers from lung cancer and heart disease every year. But the adverse health impact of passive smoking isn't limited to premature death and it isn't limited to adults.

Passive smoking is a cause of sudden infant death syndrome (SIDS). Around the world, hundreds of thousands of children suffer asthma attacks and upper respiratory infection from exposure to tobacco smoke.

The good news is that prohibiting smoking in the workplace, schools, child care facilities, hospitals, public buildings and conveyances is an inexpensive, highly effective public health measure that is popular with the public. Also, while prohibitions on smoking in the workplace have protected nonsmokers, they have also been shown to be an important factor in encouraging smokers to quit.

We were encouraged to see the Chair's draft include an important provision obligating states to protect the public from exposure to tobacco smoke by implementing a program of systematic protection. We believe the provision is a good place to start and could be strengthened by including specific smoking prohibitions, as the U.S. suggested at INB1, on smoking in daycare centers, schools, playgrounds and the indoor premises of bars and restaurants.

Yet we are deeply concerned by recent U.S. proposals which appear to weaken the Chair's text by moving away from the principle of systematic protection, and instead emphasize an ill-defined and potentially expensive program of public education and a narrow range of protections which could exempt most workplace settings from meaningful protections.

Tobacco smoke is a proven human carcinogen. There is no known safe level of exposure. A strong FCTC requires protections for smokers and nonsmokers. We urge agreement that all members of the public have a right to breathe air free from the contamination of tobacco smoke. The FCTC should articulate this right and offer effective strategies for implementation.

**FACT:** A 1999 World Bank report noted that "People's knowledge of the health risks of smoking appears to be partial at best, especially in low- and middle- income countries where information about these hazards is limited."

## La Convention Cadre pour la Lutte Antitabac, une chance à saisir par les autorités africaines.

Depuis que l'OMS a tiré la sonnette d'alarme il y a quelques années pour souligner l'ampleur des dégâts sur la santé publique liés à la consommation du tabac au niveau mondial, les pays développés ont considérablement renforcé les mesures de protection mises en place pour leurs populations.

L'industrie du tabac sentant ses intérêts menacés au niveau de ces derniers pays est en train de se déployer, avec force, dans les pays en développement et en Afrique en particulier.

En effet, les populations africaines sont entrain de subir ces dernières années, de la part de l'industrie du tabac, un marketing et une publicité qui sont d'une agressivité sans précédent.

Ce comportement de l'industrie du tabac est surtout encouragé par deux faits majeurs:

- l'absence de mesures législatives strictes constatée dans la majorité des pays africains et qui laisse à l'industrie du tabac la possibilité d'agir en toute liberté et en toute impunité.

- la jeunesse de la population africaine (plus de 50%), qui constitue une source de motivation réelle pour l'industrie du tabac, vu qu'elle privilégie largement la cible jeune.

Comme nous le savons tous par ailleurs, l'industrie du tabac est extrêmement puissante et il est difficile de la combattre de manière isolée, surtout lorsqu'on a des moyens trop faibles.

C'est pourquoi les pays africains, qui sont en général rudement frappés par le mal du sous-développement, ont sur tout intérêt à profiter de l'élan de solidarité internationale qui s'est créé pour

combattre le tabagisme.

En particulier, la Convention cadre pour la lutte antitabac, dont l'objet est de réguler la production et la consommation du tabac en vue de réduire, de manière régulière et sensible la prévalence du tabagisme est une chance réelle à saisir par les autorités africaines pour protéger leurs populations et en particulier les jeunes du fléau du tabagisme.

Cette Convention peut être considérée comme "le bateau de la chance," celui qui doit transporter les populations du monde actuel vers un monde sans tabac où l'industrie du tabac n'aura plus l'occasion de détruire la santé des autres pour satisfaire ses intérêts égoïstes. Il est donc très important pour les dirigeants africains de faire embarquer leurs populations dans ce bateau. S'ils ratent cette occasion, ils auront du mal à trouver tout seul un autre bateau qui pourra conduire leur population vers la même destination. Aussi, il ne sera plus évident de pouvoir bénéficier d'une solidarité aussi grande de celle qui existe actuellement pour combattre le tabagisme.

L'exemple du paludisme, mal dont la plus grande victime est l'Afrique, est assez édifiant. En effet, nous estimons qu'une solidarité totale des pays riches dans ce cas d'exemple aurait permis de mettre au point un vaccin pour protéger en particulier les Africains du paludisme.

Alors, dirigeants d'Afrique, votre chance est encore intégrale. Pendant qu'il est temps, nous vous invitons à participer tous activement, à la construction d'une Convention cadre pour la lutte antitabac très forte qui permettra de protéger contre le tabagisme les générations actuelles et futures au niveau mondial.

Merci de ne pas fumer.  
Médareï Bassene - MAT Sénégal

## Etiquetado. Dónde estamos y hacia dónde debemos ir.

El etiquetado de los productos del tabaco es una herramienta útil y clave para la información de los consumidores. Por ese motivo debe ser claro, preciso y veraz evitando inducir a errores y facilitando el conocimiento del contenido de los productos y sus riesgos.

Como ejemplo de ello, las advertencias en los paquetes deben ser destacadas y estar ubicadas estratégicamente en los mismos.

Los países de la región de las Américas en general, poseen advertencias fijas e insignificantes que no superan el 10 o el 15% de la superficie total del paquete, como es el caso de Bolivia, Chile, Cuba, Honduras, Panamá, Paraguay, Perú, Venezuela y Argentina entre otros.

Algunos países como Guatemala, Costa Rica y Brasil más recientemente, han avanzado notablemente y contienen mensajes rotativos, aunque todavía no demasiado destacados.

Es importante entonces que se refuerce el texto del Convenio Marco de Lucha Antitabáquica propuesto, especificando que por lo menos el 50% de los

paquetes de cigarrillos dediquen su espacio a esa información, que seguramente variará de país en país según las diferentes necesidades y culturas, información que deberá estar disponible en los diversos idiomas del país donde el producto será vendido.

Sin embargo frases como las consignadas en el **punto G d) iv 1)** del Convenio sobre **Medidas no relacionadas con los precios para reducir la demanda de tabaco**, referido a que se deberá "**indicar claramente la prohibición de venta de tabaco a menores de 18 años**", deberán ser suprimidas ya que podrían producir seguramente a un efecto contrario al que se quiere evitar, esto es, incentivar el consumo de tabaco por parte de los niños y adolescentes.

Por ello uno de los desafíos que tenemos en nuestra región es que los mensajes sean claros, destacados, evitando además consignar expresiones que puedan inducir a error e impedir que se logren con éxito los objetivos de protección de la salud.

## Orchid Award



### INDIAN DELEGATION

For making great strides on their positions since INB-1 – calling for a complete ban on advertising, opposing duty free sales, and putting health before trade.

## Dirty Ashtray

### BAT & CHINA

For discussing a joint venture that would subject the Chinese people to BAT's deadly products and marketing.



## The Negotiations: Quotes of the Day

Sri Lanka – "Locations not accessible to kids under 18 are mythical locations created by the tobacco industry."

Thailand – "Vending machines not only provide cigarettes, but act as advertising machines."

SEARO – "A vending machine can not be penalized even if it is instrumental in breaking the law."

Martin Broughton, Chairman, BAT, in Financial Times advert, 3 May 2001: "As an example of the growth opportunities that exist for us, I am delighted to be able to announce that British American

Tobacco and the Chinese Government are currently in discussions with a view to the establishment of a new joint venture company in China."

Response by Clive Bates, Action on Smoking and Health (London): "With this self-important announcement, BAT sent a blunt and dismissive message to the Framework Convention negotiators. The world's most aggressive tobacco multinational is displaying its influence in China to show that they can still grow their business with government blessing and even active co-operation - despite the efforts of delegates in Geneva this week.

But the China delegation to the FCTC of 17 persons must be embarrassed by such shameless public relations manipulation by BAT and its calculated choice of timing. How can the government of China negotiators convince the other parties that they are acting in good faith if they are involved with BAT behind the scenes? BAT has deliberately placed China in this embarrassing situation to express its own contempt for the FCTC. Let's hope that China recognises the bad faith of BAT and decides that these are not the sort of people with which their government should form a joint venture."

## Views from the Alliance

# NGO Intervention: Tobacco Advertising Kills

*Delivered in English, French and Spanish*

International Union Against Cancer

### Judy Wilkenfeld, U.S.A.

We would like to comment on the issue of limiting tobacco advertising bans to youth.

Banning advertising targeted at under-18s will not work. And this is for three main reasons. First, it is virtually impossible to define what age group an advert appeals to - and every tobacco company already claims not to advertise to under-18s.

Second, the sheer weight and ubiquity of all tobacco advertising is enough to convince anyone, whether teenager or long-term smoker, that tobacco is a part of normal adult society and something to aspire to - thereby concealing the reality of this deadly, addictive drug syndrome.

And third, it is important to remove tobacco advertising for the benefit of everyone, not just kids and teenagers. For adults struggling to break free of this powerful addiction, advertising is a constant invitation to continue or resume smoking. This treaty should never just be about children, but about the health of all people.

There is even a danger that the current text could be worse than merely ineffective - not only because it would not work, but it would have the authority of an international treaty and would effectively block measures that would work.

Coalition Internationale Anti Tabac des Organisations Non Gouvernementales

### Albert Hirsch, France

Les données scientifiques et économiques sont plus que démonstratives. Pour qu'une interdiction de la publicité soit efficace, il faut qu'elle soit totale, c'est à dire qu'elle s'applique à toutes les formes de la publicité, du parrainage et des modalités actuelles et à venir de la promotion. La région OMS de l'Afrique partage ce point de vue. Cette position recueille également le soutien de nombreuses délégations des pays développés et des pays en voie de développement. Il est indispensable que la convention comporte cette disposition, c'est une exigence pour la santé des populations.

Quant aux Etats qui pensent que leur Constitution ne leur permet pas d'adopter une interdiction totale de toutes les formes de publicité - qu'ils aillent jusqu'au bout de leurs possibilités constitutionnelles, qu'ils les épuisent et qu'ils en testent les limites.

Si toutes les contraintes constitutionnelles réelles ou presumées sont prises en compte pour élaborer la convention, il est à craindre que le résultat final soit nul - tout au plus une restriction limitée de la publicité trans-frontalière concernant les enfants.

En definitive, que les Parties trouvent une formulation qui réponde à la nécessité d'une interdiction totale de toutes les formes de publicité, et qui permette aux Etats, si nécessaire, de respecter les limites de leur Constitution. Nous sommes persuadés que cette façon de faire pourrait amener tous les Etats à se rejoindre sur ce point.

Unión Internacional contra la Tuberculosis y Enfermedades Respiratorias (UITER)

### Mirta Molinari, Argentina

Señor Presidente, la publicidad del tabaco mata y matará muchos millones de personas en las próximas pocas décadas. El Banco Mundial estima que la prohibición de la publicidad del tabaco reduciría el consumo del mismo en un 7%. Quizás esto no sea mucho en términos relativos, pero cuando nosotros consideramos que los científicos estiman que **un billón** de personas morirán por enfermedades tabaco-dependientes en este siglo, es claro que quizás 70 millones de vidas dependerán de ello si nosotros exitosamente podemos prohibir la publicidad del tabaco en este siglo. Por lo tanto ante tan importante tarea, nosotros debemos hacerlo de la manera correcta.

## FCA MEMBER ORGANISATIONS

### Member Organisations as of April 2001

Action Council Against Tobacco - India  
Action on Smoking and Health Australia  
Action on Smoking and Health Foundation Thailand  
Action on Smoking and Health Ireland  
Action on Smoking and Health London  
Action on Smoking and Health New Zealand  
Action on Smoking and Health Scotland  
Action on Smoking and Health USA  
Adventist Development and Relief Agency (Cambodia)  
Advocacy Institute  
African Centre for Empowerment and Gender Advocacy  
Alcohol and Drug Information Centre (Sri Lanka)  
Alcohol and Drug Information Centre (Ukraine)  
American Cancer Society  
American Heart Association  
American Lung Association  
American Public Health Association  
Argentine Union Against Tobacco  
Asociación Española Contra el Cáncer (Spanish Cancer Association)  
Asociación Mexicana de Estudios Para la Defensa del Consumidor (Mexico)  
Association for Consumer Action on Safety and Health (ACASH)  
Association of the European Cancer Leagues  
ATOM-AFIS Tobacco Control Commission for Africa  
Bangladesh Anti-Tobacco Alliance  
British Medical Association  
Campaign Against Foreign Control of Aotearoa (NZ)  
Campaign for Tobacco-Free Kids (USA)  
Canadian Cancer Society  
Cancer Foundation of Western Australia  
Cancer Institute (India)  
Cancer Society of Finland

Chinese Progressive Association  
CNCT (French Committee for Smoking Prevention)  
Comité Nacional Sobre Control del Tabaquismo - CONACTA (Honduras)  
Commonwealth Medical Association  
Community Health Cell (India)  
Conselho de Prevenção do Tabagismo (Portugal)  
Consumer Education and Research Centre (India)  
Consumers Association of Malawi  
Consumers Association of Penang (Malaysia)  
Consumers International Regional Office for Asia and the Pacific (CI-ROAP)  
Czech Committee of European Medical Association Smoking OR Health  
Environmental Rights Action (Nigeria)  
Essential Action  
European Medical Association on Smoking and Health  
European Network for Smoking Prevention  
European Respiratory Society  
FDI World Dental Federation  
Forum for Development Association (FFDA)  
Georgian National Counter Tobacco Center  
German Cancer Research Centre  
German Coalition Against Smoking  
German Medical Action Group Smoking and Health  
German Medical Association  
Grupo Universitario Anti-Tabaquico  
Health 21 Hungarian Foundation  
Heart and Stroke Foundation (Canada)  
Hong Kong Council on Smoking and Health  
Hungarian National Tobacco Control Forum  
Indonesian Association of Pulmonologists  
Indonesian Smoking Control Foundation ('LM 3')  
INFACT (USA)  
InterAmerican Heart Foundation

International Council of Women  
International Agency on Tobacco or Health  
International Network of Women Against Tobacco  
International Non Government Coalition Against Tobacco  
International Union Against Tuberculosis and Lung Disease  
IOGT Regional Council for South and South East Asia  
Japan Association Against Tobacco  
Japan Coalition on a Smokefree Environment  
Japan Medical-Dental Association on Tobacco Control  
Korean Association on Smoking and Health (KASH)  
Maori Smokefree Coalition - Aparangi Tautoko Auahi Kore  
Medical Women's International Association  
National Committee for the Control of Tobacco Consumption (Sudan)  
National Council Against Smoking (South Africa)  
National Heart Foundation (Australia)  
Network for Consumer Protection (Pakistan)  
New South Wales Cancer Council (Australia)  
Non-Smokers' Rights Association (Canada)  
Pakistan Society for Cancer Prevention  
PATH (Canada)  
Physicians for a Smoke-free Canada  
Public Services International  
REDEH-CEMINA - The Network in Defense of Humankind (Brazil)  
Robert Wood Johnson Foundation  
San Francisco Tobacco Free Coalition (USA)  
Saudi Charitable Anti-Smoking Society  
Senegal Anti-Tobacco Movement  
Smokefree Coalition  
Society for Research on Nicotine and Tobacco

SOS Tabagisme (Mali)  
Soul City  
Southeast Asian Tobacco Control Alliance  
The Environmental Action Network (Uganda)  
Tobacco Free Coalition (USA)  
Tobacco Law Project  
Tobacco-Free Las Cruces Coalition (USA)  
Transnational Resources and Action Centre (USA)  
Turkish Committee on Tobacco or Health  
UICC and ECL  
UICC Globalink  
UICC International Union Against Cancer  
Uruguay Anti-tobacco Commission  
Vietnam Standard and Consumer Association  
Women's Environment and Development Organisation  
World Federation of Public Health Associations  
World Vision International  
Zuna Women's Operation Green (Zimbabwe)

### FRAMEWORK CONVENTION ALLIANCE

c/o Belinda Hughes  
36/2 Pradipat Soi 10, Pradipat Rd.  
Samsen Nai, Phayathai, 10400  
Bangkok, Thailand  
FAX (66-2) 278-1830  
TEL (66-2) 278-1828  
FCTAlliance@inet.co.th

[www.fctc.org](http://www.fctc.org)