

Japan Tobacco joined in efforts to persuade the government to implement the World Health Organization's Framework Convention on Tobacco Control (FCTC) more weakly than it proposed. Presumably several tobacco companies are at work behind the scenes at any one time on lobbying activities and recently, what was almost certainly a result of such work, was seen.

Having worked hard with the Ministry of Health to ensure tougher, not weaker FCTC implementation, health advocates are proud of Lithuania now having a smoking ban in bars, restaurants, discos and other places that the industry, at the very least, would like to make exceptions to workplace smoking bans. Indeed, the Lithuanian ban is one of the strongest in Eastern Europe. However, just after the law came into force, the tobacco industry found politicians willing to take up its cause to try for at least a partial reverse. These hired guns are now pushing discussions about the need for smoking rooms. In addition, the tobacco industry also sponsored a study about abolishing the state tobacco and alcohol agency.

As in so many other smaller, independent countries, tobacco control work in Lithuania has to be carried out by busy people who all have other, paid jobs, including doctors in highly demanding and responsible clinical posts. International tobacco control funding agencies please note: for the foreseeable future, Lithuania would benefit greatly from having a dedicated, independent tobacco control agency with a paid staff.

Iceland: a pioneer's saga

When people talk about the history of tobacco control, Norway and Finland are mentioned as the two western countries that pioneered tobacco advertising bans. During the 1980s, these nations' tobacco consumption data was endlessly analysed by other countries striving for a ban. It was also used, selectively of course, by the tobacco industry, desperate to show that the bans had no effect or that somehow they even increased smoking. In fact, another northern European country had got there first: Iceland.

With a population of under a third of a million, it is perhaps unsurprising, if unjust, that less is heard of Iceland than of the countries in other parts of Europe from which it is, geographically at least, relatively remote. In the first half of the twentieth century, few outside Iceland knew much about it. One factor for it beginning to be better known later may have been the award of the Nobel prize for literature in 1955 to its most famous

modern writer, Halldór Laxness. He is probably best known for his novel *Independent People*, a compelling saga of a poor farmer's endurance through thick and often very thin times. That work's title in Icelandic, *Sjálfstætt fólk*—literally self-standing people—gives a clue to one of the most important characteristics of Iceland: standing on its own feet, as it were, and doing things in its own way. This is as true in tobacco control as in any other aspect of this unusual nation's achievements.

It is almost 40 years since Iceland placed health warning labels on cigarette packs by law—this was in 1969, when “leaders” such as the UK were still consulting tobacco companies about what texts they might be prepared to print on their packs by “voluntary agreement”, as the infamous system was known. In 1971, Iceland scored its world first when it banned tobacco advertising in mass media, cinemas and outdoors, with 0.2% of total tobacco sales revenue being set aside for tobacco control; but warning labels on packages were no longer mandatory.

After all remaining tobacco promotion was banned in 1977, a national tobacco control committee was established and new proposals were developed. In 1984, the first comprehensive tobacco control act was passed. Warning labels on packages were made mandatory again; sales to minors under 16 were banned; and smoking was restricted in service areas of public and private buildings, in schools, healthcare premises and in public transport and in other workplaces. The total ban on promotion was reaffirmed and made clearer.

Subsequent changes, many still well ahead of most other countries, included provision of help for smokers to quit through primary health care (when 40% of adults aged 18–69 were smoking), smoking bans and restrictions in Icelandic aircraft and ships, and an increase in the proportion of revenue allocated to tobacco control, to 0.7%. An unusual addition in a market economy in recent times was the introduction of tobacco sales licences in 2001. At the same time, all mass coverage of tobacco was banned, other than warnings about its harmful effects; point of sale displays were swept away, with the requirement that tobacco products must not even be visible at the point of sale.

Through all this, smoking prevalence has continued to decline to just under 20.7% for males and 17% for females aged 15–89, down from levels of nearly 30.9% and 28.8%, respectively in 1991.

In June, all bars and restaurants became smoke free, except for those with special, separately ventilated smoking

areas. Reaction was highly favourable, to the extent that very few hospitality industry venues have implemented a smoking area. So Iceland now has among the world's most comprehensive tobacco control policies, showing what a small but progressive country can achieve.

India: death of a simple health warning

In recent years, health advocates in India have had something of a roller coaster ride. After years waiting for the thing to get going, at last they were up and away, only to feel that empty, falling feeling as they swooped down again, although still above their starting point. This is nowhere better illustrated than with tobacco pack health warnings.

Having at long last got a superb health minister and, having grown a tobacco control lobby worthy of its size and the massive task in hand, hopes were riding high that the federal government would press ahead with some truly world-leading warnings. Special factors had been taken into account, the most obvious being language. India, the second largest country in the world, still has large numbers of people who cannot read or write—40% is the commonly accepted figure. In addition, while Hindi is the national language, India must be the ultimate multi-lingual country: its constitution recognises 22 regional languages, but these also have dialects so, in total, there are more than 100 languages and 200 mother tongues. What sort of health warning could inform the maximum number of people about the unparalleled dangers of smoking?

One answer is to use a graphic image, but with so many who could not read the captions of a disease-specific image whose gory detail might not be recognisable, is there not a universally accepted danger sign that might warn the maximum proportion of Indians? As in so many countries, there



India: Mock-up of a health warning with the skull and crossbones, as originally proposed by the government.

is an answer: the skull and crossbones, not just familiar from the flags of cartoon pirate ships, but widely used on containers of poisonous chemicals and other dangerous products and on electrical installations. Together with graphic images of diseased organs, the government included the skull and crossbones in its wish list. But it was not to be.

In a lengthy period of debate, it emerged that the tobacco industry did not just oppose disease-related graphic warnings (though some more than others) but was particularly desperate to prevent the skull and crossbones from appearing. This may at first sight appear surprising, but the manufacturers of bidis, the leaf-wrapped, local product used by millions of lower income smokers, were especially desperate to prevent the government imposing a warning that was particularly effective at reaching their customers.

But how could tobacco interests counter such a simple, universally recognised symbol of poison and danger, especially when it was already part of the government's plans, which meant that an amendment would have to be debated in parliament? The debate generated much favourable comment and media coverage for the government's plans, which should have been quite sufficient for it to stick to its guns. However, a pernicious argument was then wheeled out by industry interests: the skull symbol would be offensive in a religious sense, especially to those people, such as Muslims, who bury their dead.

Public health researchers swung into action. A survey of more than a thousand people not only confirmed that the symbol was the most widely understood to mean danger, especially by less literate, rural people, but also that the religious argument was nonsense. More than nine out of ten Muslims shown the symbol said it would not hurt their religious sensibilities, with only 1.4% saying it would do so. Similar figures for Hindus and followers of other religions showed how baseless it was, but for reasons that may never be known, the industry prevailed and the amendment to remove the skull and crossbones warning was passed. But with proven and growing public and parliamentary support for more effective tobacco control, will the government not show greater political courage and let the roller coaster pick up speed again next time?

Mauritius: poorer people like tough warnings

Another country where health advocates have been researching the acceptability of



Mauritius: cigarettes marked with a skull and crossbones received overwhelming approval in a survey, even by smokers.

having a skull and crossbones on cigarette packs, as well as on each individual cigarette, is Mauritius. Health organisation ViSa carried out a detailed survey with people visiting prison inmates, which among other benefits got responses from a sample of the country's less affluent citizens. Both their mocked up packs and cigarettes got highly favourable ratings as to general acceptability, and concurrence with the view that such warnings might help smokers quit and deter those who do not yet smoke from starting. Such ideas would have been unlikely to be taken up by the government in the past when British American Tobacco (BAT), the dominant player in this small country with Africa's highest per capita cigarette consumption, seemed to hold great sway. However, times are changing, and in the face of declining tobacco consumption, BAT recently closed its factory in Mauritius. Perhaps the large sums BAT used to spend on schemes such as its undergraduate

scholarship scheme for gifted young people to study at the University of Mauritius may turn out not to have been money well spent.

South Africa: Swedish snus snare

British American Tobacco (BAT) recently sent a delegation of South African members of parliament to Sweden on a "fact finding" trip, to learn about the blessings of snus oral tobacco. The trip was organised by a group called the Association of Reduction of Tobacco-related Harm (ARTH).

When a draft programme came to light just two weeks before the start of the trip, it revealed that the snus manufacturer Swedish Match and other pro-snus promoters were to entertain members of the group, who were to stay at the most prestigious hotels and dine at the very best restaurants during their five days in Sweden. Strangely, no tobacco control experts or government officials in Sweden seemed to know anything about the visit until a copy of the draft programme came to the attention of Doctors Against Tobacco (DAT). In order to offer the group a broader picture of Swedish conditions and the snus issue in particular, DAT members then emailed the chairs of the two chambers of the visitors' parliament, inviting the group to a meeting during their stay in Stockholm.

A few days before the group's arrival, DAT was contacted by the South African embassy in Stockholm, expressing the



Mauritius: a Pall Mall cigarette pack from Thailand and one sold in Mauritius: Mauritian smokers strongly supported the idea of their government adopting Thai-style health warnings.