Worldwide news and comment

INDIA: THE ENDGAME FOR TOBACCO CONFERENCE 2013

2013 is a strategic year for the global, as well as Indian, tobacco control movement. Apart from marking a decade since the adoption of the WHO Framework Convention on Tobacco Control (FCTC), it is also 10 years since India's comprehensive tobacco control law, COTPA 2003, was enacted. It is also exactly 100 years since R J Reynolds launched Camel, the first manufactured cigarettes available by the pack. The unprecedented ravages of the tobacco industry across the world have caused 100 million deaths in the past century. Global tobacco control efforts have progressed rapidly over recent years, with some countries now adopting specific targets to reduce tobacco use, availability and prevalence. However, a number of countries, particularly low-and middle income countries, are yet to embrace the FCTC and strong tobacco control frameworks.

With tobacco related deaths rising, serious steps to strangle the tobacco supply side must be considered, along with measures to reduce demand. Following calls by global tobacco control experts for more radical steps to eliminate tobacco—an 'endgame'—the International Conference on Public Health Priorities in the 21st Century: The Endgame for Tobacco (New Delhi, 10–12 September 2013), was organised by the Public Health Foundation of India and HRIDAY, in partnership with the Ministry of Health and Family Welfare, Government of India and WHO, among others. The conference was joined by 23 Indian and international organisations as partners, and more than 600 speakers and delegates from 52 countries. Dignitaries included the Jamaican health minister; India's opposition leader; several members of the Indian Parliament and senior WHO officials. More than 200 abstracts on eight endgame themes were presented over 2 days.

Offering a roadmap for the conference, Dr Margaret Chan, WHO director general said, "Experience tells us that industry

will challenge the science, distort the findings, or fund its own studies with a predictable bias. An impeccable scientific foundation is the best defence." She also said, "A diversity of endgame strategies, as opposed to a single global strategy, might be needed to accommodate these different contexts." (The full text of Dr Chan's speech can be downloaded at http://www.who.int/dg/speeches/2013/tobacco_endgame_20130911/en/index.html). The opening ceremony was presided over by Mr. Ghulam Nabi Azad, the Union minister for health and family welfare, India, Mr. Keshav Desiraju, health secretary, government of India, Prof. Pekka Puska, director general of the National Institute for Health and Welfare, Finland and the conference president, Prof. K. Srinath Reddy among others. The prime minister of India, who addressed the gathering via a pre-recorded message said, "Together, multi-sectoral policies and public awareness must drive down both demand and supply (of tobacco). India is firmly committed to the vision of a tobacco free society."

A wide range of scientific sessions focused on various demand and supply side strategies pointing towards tobacco endgame solutions, particularly alternative livelihoods, trade issues, plain packaging and tobacco-free generations. The main focus of the meeting was to foster multi-sectoral partnerships for tobacco control, beyond the health sector and build a strong case for integrating the endgame for tobacco in the post-2015 sustainable development agenda.

A major highlight was the launch of a global, youth-led campaign 'No More Tobacco in the 21st Century' (NMT

No More Tobacco in the 21st Century—NMT21C campaign logo launched at the Endgame for Tobacco Conference, held in India from 10-12 September 2013.

21C), which was unanimously recommended for inclusion in the conference declaration as a global symbol for elimination of tobacco. The conference declaration defines 'endgame' as a reduction of tobacco use prevalence to less than 5%. It also proposes 23 recommendations to world leaders and other stakeholders, to work towards the vision of tobacco free society.

Organising Committee

Endgame Conference, New Delhi, India
endgameconference2013@hriday-shan.org

UK: TOBACCO INDUSTRY & E-CIGARETTES—NEW ISSUE, FAMILIAR TACTICS

A report by the Institute of Economic Affairs' (IEA) Director of Lifestyle

WHO Director General Dr Margaret Chan addresses the inauguration of the endgame conference.

All articles written by Marita Heffler unless otherwise attributed. Ideas and items for News Analysis should be sent to: marita.heffler@menzies.edu.au

Economics, Christopher Snowden, on Free Market Approaches to Public Health: The Case of Nicotine was launched at the think-tank's London offices in July. The event, chaired by IEA director-general Mark Littlewood, began with a brief introduction by the report's author, followed by responses from panellists Axel Klein (lecturer in Addictive Behaviour, University of Kent), Clive Bates (former director of Action on Smoking and Health (ASH) UK), Katherine Devlin (president of the Electronic Cigarette Industry Trade Association) and Rebecca Taylor (Liberal Democrat member of European Parliament). Contributors from the audience included prominent figures in the UK retail sector, the tobacco industry and anti-tobacco control campaigners.

As a longstanding recipient of tobacco industry funding, the IEA has consistently opposed tobacco control measures. The publication of this report is particularly notable given widespread allegations that the IEA and other participants with tobacco industry connections—including the Hands Off Our Packs! campaign supported by Phillip Morris—played a crucial role in influencing the UK government's decision to reject cigarette plain packaging. The meeting also coincided with deliberations on the European Union Tobacco Products Directive and the recent decision by the UK Medicines and Healthcare Products Regulatory Agency to classify e-cigarettes as medical devices.

The report argued that technological innovations in the form of electronic cigarettes, accompanied by effective marketing to encourage smokers to switch to 'vaping', rather than regulation, hold the key to reducing tobacco-related harms. To underline their point, some panel and audience members smoked e-cigarettes throughout the event. There was clear agreement between e-cigarette and tobacco industry representatives on key issues. The claim was repeatedly made that e-cigarettes are not a form of nicotine replacement therapy (NRT), but consumer products for those choosing to enjoy nicotine. The medicalisation of e-cigarettes, it was argued, will increase harm by curtailing the migration of smokers to an apparently safer mode of nicotine delivery.

The IEA meeting raises questions about the strategic importance of e-cigarettes to the tobacco industry, as they begin to enter this market. As well as offering brand synergies with its core products, their use throughout the meeting demonstrates the potential of e-cigarettes to renormalise smoking. While the

impact of e-cigarette use and advertising on smoking rates remains unclear, tobacco companies are actively seeking to shape public debate on their regulation. This includes funding think tanks which produce and publicise favourable research. Regulators and the tobacco control community must remain vigilant about how these familiar tactics are being applied to this new issue. Past experience of industry tactics suggests that 'vaping' is being used to cloud policy debates in ways that serve the interests of big tobacco.

Benjamin Hawkins and Kelley Lee

London School of Hygiene & Tropical Medicine, UK

Ben.Hawkins@lshtm.ac.uk

SOUTH KOREA: 'THIS AFRICA' BRAND CIGARETTES LAUNCHED

Recalling Philip Morris' 2005 ill-fated marketing of a brand called 'Maori Mix' in Israel, in early September the Korean Herald reported the launch of 'This Africa', a new brand from Korea's largest tobacco company K T & G. According to the report, "While most cigarettes with tobacco leaves (sic) use direct heat for dehydration, 'This Africa' uses smoke-dried leaves that gives a unique scent with a slight tint of sweetness. Smoke-dried tobacco leaves are rare... taking up only about 1 percent of processed tobacco leaves worldwide."

K T & G may do well to recall that Philip Morris' use of the Maori name and

imagery was not only considered culturally insensitive, it also highlighted the devastating impact of tobacco on Maori and other Indigenous peoples around the world, and ultimately drew an unprecedented apology from Philip Morris. With tobacco in Africa linked to environmental destruction, child labour and poverty, K T & G are unwittingly providing a reminder to smokers of the true social cost of the tobacco industry.

WORLD: TOBACCO DIVESTMENT ON RADAR OF INSTITUTIONAL INVESTORS

Following the recent dumping of over AUD\$1 billion in tobacco stocks by Australian governments and superannuation funds, the case for tobacco divestment has become a hot topic. The backlash against tobacco companies has firmly caught the attention of institutional investment experts, and was on the agenda of a United Nations (UN) conference held in Cape Town, South Africa in October. Conference panellists included major Australian superannuation funds Cbus and HESTA as well as health group ASH Australia.

The global conference was organised by the UN-supported Principles of Responsible Investment initiative (<http://www.unpri.org/>), which has over 1200 signatories from funds that determine how billions of dollars are invested. Significantly, each signatory has endorsed six principles of investment, which

'This Africa' cigarette packets, as shown on the Korea Herald report at <http://www.koreaherald.com/view.php?ud=20130902000648>.

incorporate environmental, social and corporate governance (ESG) issues into decision-making processes. Together with cluster munitions, tobacco is increasingly under the ESG spotlight, as both are known causes of preventable deaths and are subject to treaty obligations.

The tobacco divestment trend has come a long way since health groups, coordinated by ASH Australia and a dedicated cancer specialist Dr Bronwyn King, joined forces to present the case for tobacco divestment to governments and superannuation funds. In recent years, the Australian government's AUD\$80 billion Future Fund, four state and territory government funds and six major industry superannuation funds have adopted investment policies that specifically exclude both direct and indirect tobacco investments from all investment options. The South Australian government has since admitted that they still have exposure to tobacco stocks in pooled investment vehicles, indicating that public claims of tobacco-free investments need to be validated.

The main barriers that funds overcame were concerns that tobacco divestment would be seen as a breach of the fiduciary responsibility of fund trustees to act in the best interest of members, and that divesting tobacco would be the start of a 'slippery slope', soon to be followed by demands for divestment in other industries with the potential to be perceived as 'undesirable' such as alcohol, mining and gambling. Comprehensive briefing papers that directly addressed these concerns were developed to explain the rationale for tobacco divestment. Powerful arguments included the fact that tobacco kills people when used as intended, combined with treaty obligations under the WHO FCTC to reverse the annual tobacco death toll of nearly 6 million people.

Some fund managers also examined the ethics of the tobacco industry, including use of child labour, decades of interference in government health policy and deliberate marketing strategies targeting the most vulnerable communities in the developing world. Other funds were concerned about reputation risk, future regulatory risk and the long tail of litigation liabilities. Most of the funds that divested tobacco first performed financial modelling that demonstrated an inconsequential financial impact from divesting, thus maintaining fiduciary responsibility. First State Super reported they divested after strong feedback from health members and its trustee board was 'cognisant of significant national and state health

policies directed to minimising tobacco consumption'.

Calls for tobacco divestment in Australia started with health groups including ASH, the Heart Foundation, the Australian Council on Smoking and Health, Lung Health Alliance, medical leaders and members of super funds who expressed strong opposition in surveys to investments in products causing death and misery.

In Cape Town, around 400 institutional investors considered the case for tobacco divestment. Health leaders in every country should seize the opportunity to be part of the process that makes tobacco investment no longer acceptable for governments, institutional investors or fund managers.

More on the campaign is at http://www.ashaust.org.au/lv4/Lv4action_investment.htm

Anne Jones & Stafford Sanders
Action on Smoking and Health, Australia
annej@ashaust.org.au

ASIA PACIFIC: APACT CONFERENCE ADOPTS INDONESIA DECLARATION

The tenth Asia Pacific Association for the Control of Tobacco (APACT) was held from 18–21 August in Chiba, Japan. Attended by 785 delegates from 42 countries, the conference recognised the uneven implementation of tobacco control in the region, particularly Indonesia, which remains the only Asian country that is not a party to the FCTC. The delegates adopted a declaration on tobacco control in Indonesia, which calls for Indonesia to accede to the FCTC and introduce strong tobacco control legislation. The first ASEAN Tobacco Control Atlas was also launched at the conference.

A full report and link to the atlas is available at <http://blogs.bmj.com/tc/2013/08/29/reports-from-the-asia-pacific-association-for-the-control-of-tobacco-apact-2013-conference/>.

A cigarette pack in Chiba, Japan featuring Argentine revolutionary Che Guevara. Photo supplied by Mary Assunta.

AFRICA: TOBACCO INDUSTRY MONITORING REPORT LAUNCHED

A new report on the tobacco industry provides a comprehensive picture of the state of tobacco industry activities in Africa. Covering Benin, Cameroon, Senegal, Angola, Kenya, Mauritania, Uganda, Ghana, Nigeria, Burkina Faso, Chad, Cote D'Ivoire and Niger, the report details poverty and credit bondage among farmers, the use of child labour, brand stretching and other aggressive marketing including corporate social responsibility, and industry interference in policy making.

The report is a collaborative effort led by the Centre for Tobacco Control in Africa in conjunction with The American Cancer Society, The Campaign for Tobacco Free Kids, and the International Union Against Tuberculosis and Lung Disease, and supported by the WHO and governments in each country. The report can be downloaded from http://ctc-africa.org/images/documents/reports/Regional%20_Report_for_Africa_Aug13.pdf

USA: FACE OF ANTI SMOKING CAMPAIGN DIES OF CANCER

Terrie Hall, the 53-year-old 'face' of a graphic anti-smoking campaign in the USA, died in September of tobacco-caused cancer. Her story, an all-too-common example of the suffering and death caused by tobacco addiction, poignantly gave the lie to the industry-peddled myth that tobacco is an informed adult choice. Terrie first tried smoking at the age of 13, and became a regular smoker while still a school student. In speaking tours at US schools, she described in horrifying detail the treatment she underwent in a vain attempt to save her life, and the addiction which kept her smoking even as she received radiation treatment. US Centers for Disease Control and Prevention Director Dr Tom Frieden paid tribute to her courage, noting "Terrie put a face to the 440 000 killed by smoking each year in the US."

SPAIN: SMOKE FREE CHALLENGED BY US CASINO MAGNATE

Spain's 2010 smoke free law, which banned smoking in all public places, has come under fire as part of negotiations surrounding a planned gambling resort in Madrid. Dubbed 'Eurovegas', it is expected to be the largest gambling resort in Europe. The exemptions to the law are being demanded by Sheldon Adelson, chairman of Las Vegas Sands, and on Forbes' 400 list of the richest Americans. Full reports about the challenge, and the Spanish government response, are on our blog at <http://blogs.bmj.com/tc/2013/10/03/eurovegas-and-the-challenge-to-spains-smoke-free-law-neoliberalism-vs-public-health/> and <http://blogs.bmj.com/tc/2013/09/18/spain-government-urged-not-to-bow-to-us-casino-boss-on-smoking-ban-challenge/>.

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CDC: Tips from Former Smokers - Terrie's Ad

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Terrie Hall in a US Centers for Disease Control and Prevention public service video.