



Secondhand Smoke and the Framework Convention on Tobacco Control Comments on the Chair's Text February 2003

Secondhand Smoke – Not Just a Nuisance but A Mortal Threat

The guiding principles of the Framework Convention on Tobacco Control appropriately describe secondhand smoke as a “mortal threat” to nonsmokers. Cigarettes do not just harm the people who smoke them – they also harm the people around them. The adverse effects of secondhand smoke are both immediate and long-term and are felt by both children and adults. Globally, the WHO estimates that nearly 700 million, or almost half the world’s children, breathe air polluted by tobacco smoke. The effects in children include impairment of fetal growth, an increased risk of death from Sudden Infant Death Syndrome, life-long damage to the lungs, the initiation of chronic asthma and an increase in the incidence of pneumonia, ear infections and bronchitis. Children brought up in an environment where smoking is the norm are also more likely to become smokers themselves. The effects of secondhand smoke in adults include an increase in asthma attacks, an increase in the incidence of angina and potentially fatal heart attacks and an increased incidence of lung cancer. A 1994 study published in the *British Medical Journal* found that non-smoking women in the Xi’an province of China had an 85% increased incidence of lung cancer if they were exposed to secondhand smoke at work. In the United States alone, which has only 5 % of the world’s population, over 38,000 people die annually from heart disease and lung cancer due to exposure to secondhand smoke. International Agency for Research on Cancer (IARC) has concluded that secondhand smoke causes lung cancer and other health problems. The Environmental Protection Agency, the U.S. Public Health Service National Toxicology Program and the IARC have classified secondhand smoke as a cancer-causing agent in humans.

Strong Smokefree Air Policies – The Achilles’ Heel of the Tobacco Epidemic

Comprehensive policies that ban smoking in public places and workplaces have been proven to be effective not only in reducing exposure to the deadly toxic components of tobacco smoke, but also in encouraging smokers to quit and in discouraging youth from starting to smoke. A 1999 study published in the journal *Tobacco Control* found that “requiring all workplaces to be smoke free would reduce smoking prevalence by 10%. Workplace bans have their greatest impact on groups with the highest smoking rates.”

The tobacco industry has long known that comprehensive smokefree air policies decrease smoking. A 1992 Phillip Morris memo highlights the industry’s concern: “Total prohibition of smoking in the workplace strongly affect industry volume. Smokers facing these restrictions consume 11%-15% less than the average and quit at a rate that is 84% higher than average.” Faced with growing public pressure for smokefree air laws, Phillip Morris’ strategy has recently changed from outright opposition to all smokefree air laws to pushing for “accommodation” of smokers. This strategy seeks to weaken smokefree air laws by pushing for smoking sections or expensive, ineffectual ventilation systems. Phillip Morris’ strategy has been likened to trying to

chlorinate half a swimming pool – it does not work! There also is no safe threshold for the carcinogens in tobacco smoke. The only effective way to eliminate secondhand smoke in public places and workplaces is to ban it.

Chair's Text: Article 8 – Opportunity to Protect People from Secondhand Smoke

While recognizing the deadly effects of secondhand smoke the current Chair's text fails to include language that would protect people from its dangers.

Recommended text:

We strongly recommend that the text add a finding that states:

The Parties recognise that there is overwhelming evidence that exposure to environmental tobacco smoke is a cause of serious disease in non-smokers, including cancer, cardiovascular disease and respiratory illnesses and that action to eliminate this serious environmental hazard is justified on health, welfare and civil liberties grounds.

Article 8 "Protection From Involuntary Exposure to Tobacco Smoke" states:

*"Each party shall **adopt and implement** effective legislative, executive, administrative or other measures at the appropriate governmental levels, **banning** tobacco smoke in public places, public transport and indoor workplaces."*

The ambiguity of the Chair's text is found in the call for "protection". The tobacco industry and its allies would consider separate smoking areas or ventilation as adequate "protection". All scientific evidence points to a comprehensive smoking ban as the only way to sufficiently protect people from secondhand tobacco smoke. The Chair's text should reflect this evidence and be bold in its efforts to protect people from this mortal threat. Our recommendation is for the text to call for states to **adopt and implement** measures, at the appropriate government levels, that **ban** secondhand smoke in public places, public transport and indoor workplaces.

This change is crucial if the Framework Convention is to have the desired effect of reducing the death and disease caused by tobacco products. Half-measures in tobacco control do not work and often play into the hands of the tobacco industry. The Framework Convention should include bold measures that empower states to protect their citizens from tobacco. A total ban on secondhand smoke in public places and workplaces accomplishes this goal.