

The Millennium Development Goals and Tobacco Control

At the Millennium Summit in September 2000, world leaders adopted the United Nations' Millennium Declaration, committing their nations to a new global partnership to reduce extreme poverty. The Summit established the Millennium Development Goals (MDGs), a set of targets to address extreme poverty by 2015. The MDGs address the many dimensions of extreme poverty—income poverty, hunger, disease, lack of adequate shelter, and exclusion—while promoting gender equality, education, and environmental sustainability.

Tobacco use is the leading cause of preventable premature death and ill health in the world. Reducing tobacco use, especially among the poorest, will improve individual health, increase household spending on food and education, and improve economic productivity.

Tobacco control must be integrated into the MDGs because:

- Tobacco use is on the rise in many low- and middle-income countries, especially among populations living in poverty.
- Addiction to tobacco causes poor families to spend more on tobacco and less on food, health care and education. This diminishes the health and welfare of individual families and affects national growth and development.
- By controlling tobacco use in developing countries now, countries can greatly reduce the present and future tobacco-related deaths and disease and its associated costs, helping to lift countries and individuals out of poverty.
- Affordable, effective tobacco control measures, such as tax increases, exist and can be used to accomplish specific MDGs.

Recommendations. The WHO provides ten recommendations on how to incorporate tobacco control in the development agenda. The recommendations strengthen tobacco control policies, assist in the reduction of poverty, and improve health.

- 1 International organizations including the WHO and other development agencies should incorporate tobacco control into all MDG and poverty reduction funding and development strategies.
- 2 Developed countries should strengthen tobacco control and recognize the link to poverty in their own countries and encourage and financially support developing countries to do likewise.
- 3 International organizations and developed countries should work through their development agencies and international cooperation units for the inclusion of tobacco and selected noncommunicable diseases in MDG reviews.
- 4 Developing countries should review their commitment to the MDGs and tobacco control and in doing so should integrate tobacco control into strategies to achieve the MDGs.
- 5 All developing countries that do not appropriately tax all tobacco products should increase tobacco taxes as a revenue-generating mechanism. Additional government revenues from the tax increase should be used for health services and promotion related to the MDGs and tobacco control.
- 6 Developing countries should focus particularly on young people, women and the poor in their tobacco control activities.
- 7 Civil society organizations in developed and developing countries should join forces to mobilize in relation to both MDG implementation and comprehensive tobacco control.
- 8 On the country level, governments should develop the capacity for national tobacco control and incorporate tobacco control policies into all existing levels of government (federal, state etc). Also, the non-health sectors should be involved with the health sector to reach a multisectoral acceptance of tobacco control in a country.
- 9 Information on tobacco use, the health effects of tobacco, tobacco and poverty and the effectiveness of tobacco control measures should be included in health information and surveillance systems.
- 10 International agencies and donor countries should provide funds for more detailed research into the health effects of tobacco on the very poor, including those with HIV/AIDS, malaria and tuberculosis, and into the opportunity costs of tobacco use among the very poor.

The Goals and Tobacco Use

Goal 1: Eradicating extreme poverty and hunger

Tobacco related deaths deprive families of wage earners. Many poor households spend more on tobacco products than on health care or education. Reducing tobacco use will provide families with more money to spend on essential goods such as food and education.

Tobacco use impacts national economies. Tobacco-related diseases result in high health care costs which are borne by both the individual and the government. Smoking kills half of all life time users, most in their most productive years (30-69) reducing national productivity .

Goal 2: Achieve universal primary education

Poverty and child labor in the tobacco industry are key reasons why children are not sent to school. Increasing levels of education is essential to economic growth and better health.

Goal 3: Promote gender equality and empower women

The number of women who smoke is projected to increase from 218 million in 2000 to 259 million in 2025. Women play a vital role in household health decisions and they endanger the health of themselves and their families by smoking.

Goals 4 & 5: Reduce child mortality and improve maternal health

Money spent on tobacco deprives mothers and babies of food and medical attention and contributes to poor maternal health and infant mortality.

Goal 6: Combat HIV/AIDS, malaria and other diseases

Smoking causes complications for those living with HIV/AIDS or tuberculosis.

Goal 7: Ensure environmental sustainability

Deforestation done for tobacco farming and pesticides used for cultivation and tobacco manufacturing have a large negative impact on the environment

Goal 8: Establishing a global partnership for development

Many international development agencies like the World Bank and the Organization for Economic Cooperation and Development recognize that tobacco related disease are a burden on the poor and endorse global tobacco control as a method to alleviate the burden.

The same international cooperation and country level commitment that is essential for the implementation of MDGs is also essential to the implementation of the World Health Organization's (WHO) Framework Convention on Tobacco Control.