TOBACCO
A BARRIER TO SUSTAINABLE DEVELOPMENT

Tobacco is extraordinarily dangerous to human health and highly damaging to national economies.

Nearly 1 billion people in the world smoke every day; about 80 percent of them are in low- and middle-income countries (LMICs).1

Over 6 million people die from tobacco use every year, the majority in their most productive years (30-69 years of age).2

Over-burdened health systems in all countries are already caring for countless people who have been disabled by cancer, stroke, emphysema and the myriad other non-communicable diseases (NCDs) caused by tobacco.

Tobacco-related illnesses and premature mortality impose high productivity costs on economies because of sick workers and those who die prematurely during their working years. Lost economic opportunities in highly-populated developing countries will be particularly severe as tobacco use is high and growing in those areas.

The vector of the tobacco epidemic is a wealthy, powerful, transnational industry.

From 1970 to 2000, cigarette consumption tripled in developing countries3 due to aggressive acquisition and marketing strategies.

Tobacco industry revenue dwarfs the GDP of many countries. Manufacturers’ worldwide profits were about US$50 billion in 2012.4 The industry uses its wealth to battle for market share in the developing world.5

We know exactly how to tackle the scourge of tobacco.

We have an internationally negotiated, legally binding package of evidence-based tobacco control measures, the WHO Framework Convention on Tobacco Control,6 the first modern-day public health treaty. Parties to the FCTC include 179 countries and the European Union. Unfortunately, the slow pace of FCTC implementation costs countless lives and imposes economic hardship on governments facing rising health care costs and lost opportunities to invest in sustainable development.

31 MAY 2017: WORLD NO TOBACCO DAY
“TOBACCO – A THREAT TO DEVELOPMENT”
#NoTobacco  http://www.who.int/campaigns/no-tobacco-day/2017
The intersection of tobacco and the SDGs

Goal 1: End poverty in all its forms everywhere

Tobacco use is highest among the poor. Money spent on tobacco is unavailable to be spent on basic necessities such as food, education and health care.

For those families living on very low incomes, even a small diversion of resources to buy tobacco can have a significant impact on health and nutrition.

In the poorest households in some African countries, 15 percent of disposable income is spent on tobacco.

Health care costs for tobacco-related illnesses in Bangladesh amount to 10 percent of monthly household expenditure.

Goal 2: End hunger, achieve food security, improved nutrition and promote sustainable agriculture

Tobacco growing occupies about 3.8 million hectares of agricultural land.

About 90 percent of commercial tobacco leaf is grown in the global south, often in countries where undernourishment and child labour are major problems.

In 2011, Malawi, a top tobacco-producing country with an undernourishment rate of 20 percent, dedicated 4.5 percent of arable land to growing tobacco.

Many other crops, crop combinations, farming systems and livelihood strategies offer better opportunities for farmers.

Goal 3: Ensure healthy lives and promote well-being for all at all ages

Tobacco use is a leading driver of the NCD epidemic and the number one cause of preventable disease and death worldwide, killing over 6 million people each year.

Exposure to second-hand smoke is responsible for at least 600,000 deaths each year among non-smokers; nearly half of these deaths occur among women and over a quarter among children under the age of five.

Goal 4: Ensure inclusive and equitable quality education and promote lifelong learning opportunities for all

In Viet Nam, smokers spent 3.6 times more on tobacco than on education in 2003.

Child tobacco workers are regularly denied opportunities to pursue education.

Goal 5: Achieve gender equality and empower all women and girls

Women comprise about 20 percent of the world’s smokers and are ruthless targeted by tobacco companies to increase uptake of smoking.

Goal 6: Ensure availability and sustainable management of water and sanitation for all

Tobacco farming in LMICs causes environmental damage, including pollution of waterways.

Goal 7: Ensure access to affordable, reliable, sustainable and modern energy for all

Reduced costs associated with the tobacco epidemic could generate funds to be invested in developing renewable energy infrastructure.

Goal 8: Promote sustained, inclusive and sustainable economic growth, full and productive employment and decent work for all

Global cigarette production is dominated by a few transnational countries, with profits largely flowing to a few Northern countries. The tobacco business worsens LMICs’ balance of trade, destroys human capital and diverts resources into a product that significantly drains government and household finances.

Goal 9: Build resilient infrastructure, promote inclusive and sustainable industrialisation and foster innovation

Researchers are using tobacco plants as hosts for bioengineering processes to produce new medicines, biodegradable plastics and industrial solvents. Most recently, these techniques were used to develop ZMapp for the treatment of Ebola patients.

Among the revenue proposals I have examined, tobacco taxes are especially attractive because they encourage smokers to quit and discourage people from starting to smoke, as well as generate significant revenues. It’s a win-win for global health.

— Bill Gates
Goal 10: Reduce inequality within and among countries

By 2030, tobacco use is projected to kill over 8 million people a year, more than 80 percent of these deaths in LMICs. Reducing tobacco use and exposure is a key to reducing economic and health disparities, and eliminating this threat to development.\(^{24}\)

Goal 11: Make cities and human settlements inclusive, safe, resilient and sustainable

Tobacco smoke is a major source of indoor air pollution.\(^{25}\)

Smoke-free work places and public places across cities are a vital part of de-normalising tobacco.

Goal 12: Ensure sustainable consumption and production patterns

Tobacco farming as it is practised in LMICs today leaves many farmers accumulating debt under contracts with transnational leaf buyers.\(^{26}\) Tobacco companies routinely offer inducements and loans to farmers to begin growing, often based on unrealistically optimistic forecasts of prices and yields.\(^{27}\)

Goal 13: Take urgent action to combat climate change and its impacts

In LMICs, tobacco farming causes deforestation: trees are cut down to make room for tobacco crops, and more trees are removed and used during the curing process and for the construction of curing barns.\(^{28}\)

Around 600 million trees are cut down every year to produce tobacco products.\(^{29}\)

Goal 14: Conserve and sustainably use the oceans, seas and marine resources for sustainable development

Cigarette filters are made from cellulose acetate, a type of plastic that can take up to 12 years to decompose. The 2013 International Coastal Clean-up in 92 countries found that cigarette butts constituted 15 percent of the total pieces of debris collected, the most common single item.\(^{30}\)

Goal 15: Protect, restore and promote sustainable use of terrestrial ecosystems, sustainably manage forests, combat desertification, and halt and reverse land degradation and halt biodiversity loss

Tobacco farming in LMICs causes severe land and soil degradation and a host of other ecosystem disruptions.\(^{31}\)

Goal 16: Promote peaceful and inclusive societies for sustainable development, provide access to justice for all and build effective, accountable and inclusive institutions at all levels

The tobacco industry abuses domestic and international legal systems in order to prevent or delay tobacco control measures, often launching cases without legal merit in order to apply “regulatory chill” to governments and maintain its markets.\(^{32}\)

Goal 17: Strengthen the means of implementation and revitalise the global partnership for sustainable development

WHO, World Bank, UNDP, the wider UN system and other global and regional organisations have emphasized the importance of prioritising tobacco control within the development agenda.
It is vital and high time to intensify work on the implementation of the health SDG (Goal 3):

- **3.4 By 2030 reduce by one-third pre-mature mortality from non-communicable diseases (NCDs) through prevention and treatment, and promote mental health and wellbeing**

- **3a Strengthen implementation of the Framework Convention on Tobacco Control in all countries as appropriate**

The return on investment in tobacco control is enormous. Prioritising FCTC implementation in all countries is critical to the achievement of the NCD target and health goal, but cannot be done without meaningful financial and technical assistance.
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