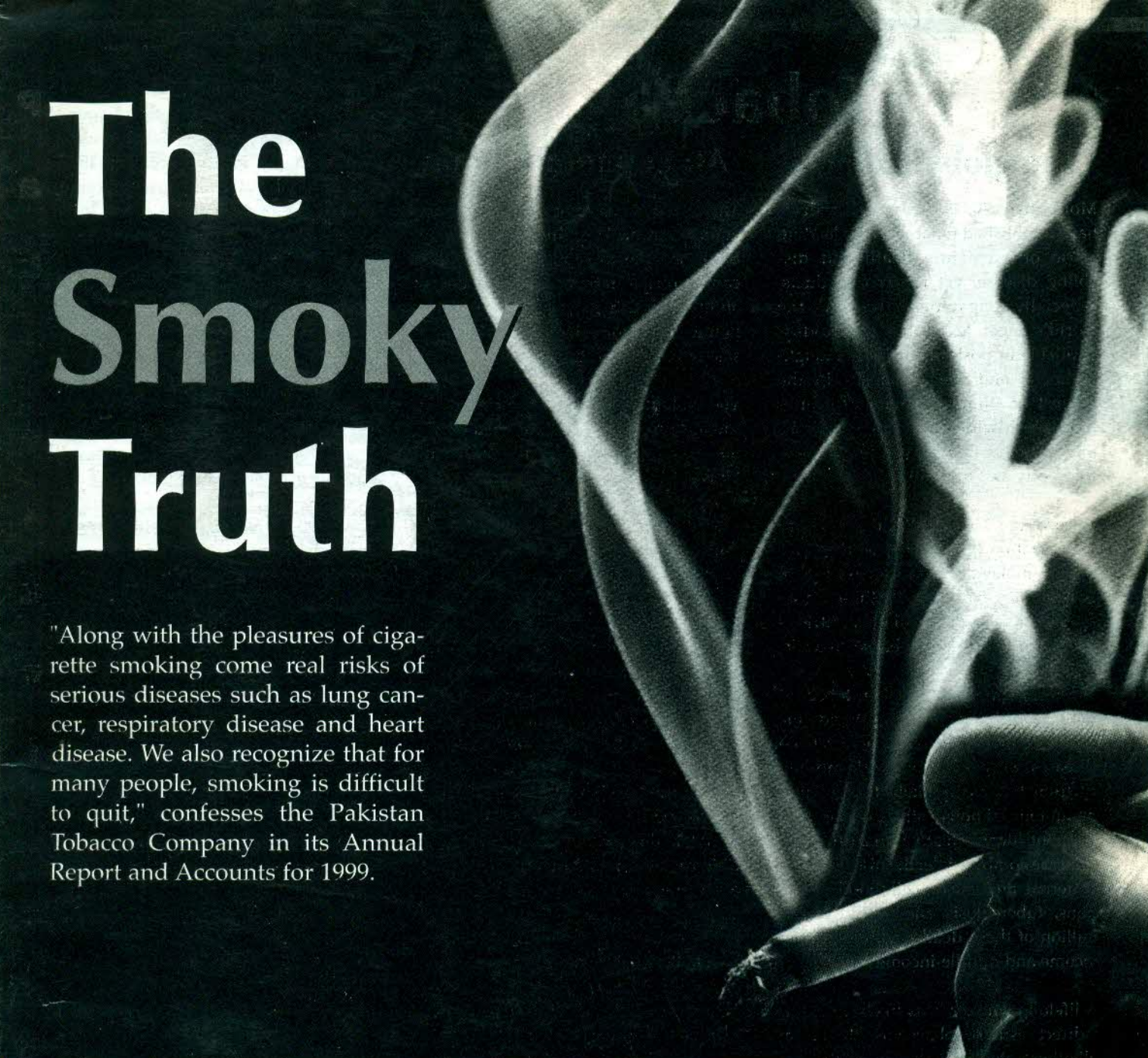


The Smoky Truth



"Along with the pleasures of cigarette smoking come real risks of serious diseases such as lung cancer, respiratory disease and heart disease. We also recognize that for many people, smoking is difficult to quit," confesses the Pakistan Tobacco Company in its Annual Report and Accounts for 1999.

Tobacco Free Initiative-Pakistan

Tobacco

The global killer

More than 70,000 scientific articles have established tobacco as the leading cause of premature death and disabling disease, yet tobacco products, especially cigarettes, remain the world's most accessible commodity. Available in posh malls of elite neighborhoods and ragged kiosks in the poorest of slums, cigarette consumption worldwide is rising sharply, increasing the incidence of preventable morbidity and mortality.

According to World Health Organization (WHO), the world's 1.15 billion smokers consume an average of 14 cigarettes every day. Of these smokers, 82% live in developing countries - a result of inadequate tobacco controls.

The latest global statistics on tobacco's toll on health are shocking. Worldwide 11,000 people die from tobacco-related diseases every day. Worldwide mortality from tobacco is likely to rise from about four million deaths a year in 1999 to about 10 million a year in 2030 - more than the combined deaths from malaria, maternal and major childhood conditions, tuberculosis and AIDS. And 7 million of these deaths will be in low-income and middle-income countries.

A lifelong smoker is as likely to die as a direct result of tobacco use than from all other potential causes of death combined. Half of all long-term smokers will eventually be killed by tobacco, and of these, half will die during productive middle age, losing 20 to 25 years of life.

Scientific evidence establishes that in populations where smoking has been common for several decades, about 90% of lung cancer, 15-20% of other cancers, 75% of chronic bronchitis and emphysema and 25% of deaths from cardiovascular disease between 35 and 69 years of age are attributable to tobacco.

An economic drain

The economic costs of tobacco use are equally mind-boggling. The World Bank says the cost to the international community in terms of death and disability is much greater than the economic gain from the production and sale of tobacco products.

The Voluntary Health Association of India estimates that tobacco-related illness cost the country (population 1 billion) \$11 billion a year in public health costs. In the small country of Costa Rica (population 3 million), smoking-related illness cost the social security system an estimated \$534 million per year.

Besides being a drain on the cash-strapped economies of developing countries, tobacco use forms an avoidable burden on household budgets. Money saved could be spent on basic needs like shelter, food, clothing, education, etc. In Bangladesh an average laborer must toil approximately half a day to purchase a pack of 20 cigarettes. In 1990, the cost of 20 cigarettes in China was estimated as being 25% of the average daily income.

In Pakistan, where more than 48 million people live in absolute poverty, the cost of cigarettes is strikingly high compared with average incomes. A daily pack of 20 cigarettes bought at Rs 10 totals Rs 3,650 a year - nearly 16% of the per capita income. Low-income earning men in rural areas are more likely to smoke, found the National Health Survey 1990-94 conducted by the Pakistan Medical Research Council (PMRC).

Broad categories of smoking costs

1. **Health care**
Medical services, Prescription drugs, Hospital and other institutional services
2. **Production losses resulting from:**
Death, Sickness, Reduced productivity
3. **Welfare provision**
4. **Fires and accidents**
5. **Pollution, litter and environmental degradation**
6. **Research and education**

The government of Pakistan identified smoking as among country's leading causes of morbidity and mortality in its December 1997 health policy. This admission came against the backdrop of a rising incidence of tobacco-related diseases.

A recent World Bank report said cardiovascular diseases account for 10%, malignant neoplasm (cancers) 4.3%, and non-communicable respiratory diseases 3.2% of the total burden of disease in Pakistan. Another study profiling heart diseases in South Asia in 1983 found that up to 83% of heart disease patients in Pakistan are smokers.

The 1990-94 National Health Survey cites tobacco use as a major risk factor for heart trouble, chronic bronchitis and emphysema, cancers of lung, larynx, pharynx, oral cavity, esophagus, pancreas and bladder, and respiratory infections and stomach ulcers.

Smoking prevalence in Pakistan

Despite numerous health and economic costs, the consumption of cigarettes continues to rise in Pakistan, making it a high cigarette consumption country. According to the Pakistan Pediatric Association, 1,000 to 1,200 children between the ages of 6 and 16 years take up smoking every day. Twenty-nine percent of men and 3.4% of women smoke cigarettes regularly, concluded the National Health Survey, while the Pakistan Society for Cancer Prevention says 37% of men and 4% of women over 15 years of age are smokers.

1. Smoking is most common and most likely to be heavy (20 or more cigarettes per day) among men 25-44 years of age in Pakistan.
2. Approximately 90% of lung cancer cases in men and 79% in women are attributable to cigarette smoking.
3. Twenty-four percent of illiterate rural young men smoke as compared to 19% of illiterate urban young men.
4. Among rural smokers (15-64 years of age), 26% smoke heavily compared to 37% in urban areas.

Who brought tobacco to Sub-Continent?

Tobacco was first grown by the original inhabitants of what is now North America. 'Tobacco' was their word for the Y-shaped tube they used to inhale smoke. The word 'nicotine', however, is of French origin, named after French Ambassador to Portugal Jean Nicot who was honored by the Queen of France when she was presented with a jeweled box containing snuff.

The Portuguese sailors brought this 'magic substance' to the Indian Sub-Continent in the early 17th century during Mughal King Akbar's reign. Although tobacco fascinated Akbar, he did not adopt it after a court debate between the physicians, clergy and nobles resulted in the rejection of tobacco use. His successor Jehangir also forbade tobacco use, as did his contemporary rulers in Persia.

The production of fine-cured Virginia tobacco was first initiated in lower Sindh in the 1950s and later extended northwards to the plains of Punjab. Subsequently, as its suitability for the higher altitude was established, it came to be grown exclusively in NWFP. Some accounts, however, say that Flue Cured Virginia tobacco was first grown on a limited scale in NWFP in 1948, a year after Partition.

Tobacco farming not that lucrative

It is popularly believed that tobacco is a lucrative crop, but that's not true. According to WHO, farmers do not benefit from tobacco cultivation as the lion's share of profits go to cigarette companies. In Malaysia, for example, the profit margin for farmers is only 2% as compared to 79% for the manufacturers.

Tobacco occupies 0.2 per cent of the total irrigated land in Pakistan and is grown in all four provinces. In 1995-96, tobacco was cultivated on an area of 46,100 hectares with the total production standing at 79,900 tonnes.

According to the Economics Wing of the Ministry of Food, Agriculture and Livestock, tobacco production from 1980-81 to 1995-96 has not been steady. During these years, the highest recorded yield was 101,600 tonnes in 1992-93 when the crop was grown on 582,000 hectares. The highest per hectare yield was 1,807 kilograms, in 1991-92.

The country registered an annual growth rate of 6% from 1981 to 1988. Moreover, Pakistan was ranked below only Japan and Korea in terms of per hectare yields.

As many as 80,000 people are engaged in tobacco production and marketing. The province-wise breakup of this figure is not available. However, NWFP has the highest number of people engaged in the tobacco production on a full-time basis.

The number of people turning to tobacco cultivation in NWFP is rising where the crop is considered economically beneficial and risk-free. Moreover, the government's drive to eradicate poppy cultivation and substitute it with tobacco is also luring people in various areas to replace one vice with the other.

"... the major beneficiaries are cigarette manufacturing companies who are looting all the labour, hard work and energy of the tobacco growers," said Ikramullah Khan, a prominent Pakistani tobacco grower, in a press statement published by The News on May 24, 2000.

Modes of tobacco intake

Tobacco use in Pakistan is not limited to cigarette smoking. Chillum, huqqah, chewing tobacco in pan, snuff and niswar are some other common ways of intake. Experts divide tobacco use into two broad categories - smoking and smokeless tobacco. Both uses of tobacco are very common in Pakistan as established by a survey conducted by the PMRC in 1994.

Smokeless tobacco includes primarily moist dry snuff and chewing tobacco. All forms of smokeless tobacco contain nicotine and their use can lead to nicotine dependence and cigarette use.

Smoking tobacco is used as cigarettes, huqqah and chilum, the latter two being the oldest means of tobacco intake in this region. Presently, cigarettes are most common, for they are ready to use and backed by aggressive promotion by manufacturers.

The tobacco industry in Pakistan

In Pakistan, two transnational companies British American Tobacco (BAT) and Philip Morris Industries (PMI) hold 78% of the cigarette market. BAT holds 67% shares in the Pakistan Tobacco Company (PTC), while PMI has a 30% share in Lakson Tobacco Company (LTC). PTC holds 38% of the market, while LTC has a market share of slightly over 40%. The rest of the market is held by local companies such as Sarhad Cigarette Industries, Khyber Tobacco Company, Souvenir Tobacco Company Limited and Saleem Cigarette Industries.

According to the Tobacco Statistical Bulletin 1994, there were 32 tobacco companies having 38 cigarette manufacturing factories with an installed capacity of over 87 billion sticks per annum.

However, unofficial reports put the number of factories much higher. According to one report, 75 unlicensed factories are in operation in the tobacco-rich Mardan Division and Lala Musa alone, which are manufacturing counterfeit major international brands and tax-evaded cigarettes.

The Frontier province has 25 factories with installed annual capacity of more than 35 billion sticks. The nine factories in Sindh and four in Punjab have annual capacities of nearly 22 billion sticks and nearly 30 billion sticks respectively.

Promotion or deception

The worst form of government patronage to the tobacco business is its reluctance to slap strict controls on the promotion and sale of cigarettes. The World Health Assembly in 1986 recommended the adoption of comprehensive tobacco control measures to eliminate the promotion of cigarettes in its member states. The Assembly reiterated its call in 1990 and urged member states to consider eliminating all direct and indirect tobacco advertising, promotion and sponsorship. These recommendations were aimed at protecting the young people from taking up smoking, assisting smokers to quit and challenging the social acceptability of smoking.

Ten years later the situation in Pakistan remains the same. Though the country is signatory to both resolutions, the tobacco companies continue to indulge in aggressive promotional activities.

Indeed, advertising is the industry's frontline in its ambitions to increase sales. Manipulative advertising and disinformation campaigns associate smoking with dreamlike promises of prestige, power, freedom and luxury. This promotes not only individual products but also tobacco use as a 'lifestyle'. Young people are especially susceptible to these messages and also more likely to develop nicotine addiction than people who take up the habit later in life.

Tobacco companies admit that advertisement campaigns result in increased sales. When PTC in March 2000 halved the price of its Gold Flake brand, in the words of the company, the campaign yielded positive results. "The response from the market was immediate, and demand for the brand escalated tremendously in some markets," read the February-March 2000 issue of PTC's in-house newsletter Pak Tobacco.

To advertise the Gold Flake price reduction, PTC ran an aggressive campaign

Who benefits from the

Tobacco companies sell 50 billion sticks (out of their 87 billion stick installed capacity) every year in Pakistan. Around 10 billion smuggled, counterfeit or tax-evaded cigarettes are also consumed locally. The tobacco companies are continuously increasing their market size. The cigarette production rose from 29.9 billion sticks in 1990-91 to 48.21 billion sticks in 1997-98, an increase of more than 70% over seven years. Both companies rake in huge profits every year that run into millions of rupees.

But the beneficiaries in this deadly business are not the tobacco companies alone. As elsewhere in the world, the government of Pakistan patronizes the tobacco business - at the expense of public health. The reason for this patronage is simple: the tobacco business generates much-needed taxes for the cash-strapped government.

According to "Tobacco Control in the Third World: A Resource Atlas", the Pakistani government collected Rs 15.86 billion (\$311 million) as tobacco tax in 1990, making up 10.5% of the total tax revenue. Tobacco taxes are continually rising since then. In 1999, only two companies, PTC and LTC, paid Rs 18.7 billion in government levies.

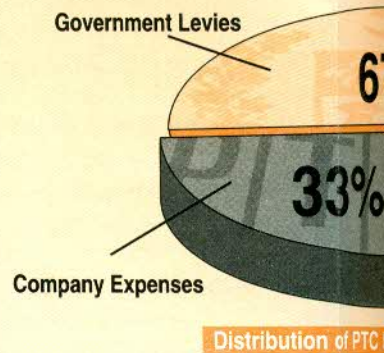
In fact, the revenues collected by the government from the tobacco industry each year exceed the profits posted by the companies. According to the Pakistan Tobacco Company's 1999 Annual Report and Accounts, the company paid Rs 10.03 billion in government levies, while it posted an after-tax-profit of only Rs 136 million. Similarly, Lakson Tobacco Company deposited Rs 8.66 billion in the government kitty during the fiscal year

on PTV during the Sharjah Cricket Cup and Triangular Series in the West Indies and bought three-day programming ownership on PTV World with Gold Flake Eid Hangama. A double-page advert also appeared in the Urdu-language newspaper Din.

Countrywide, 800,000 posters and buntings and 150,000 leaflets plastered market walls. Three thematic Gold Flake Floats operated in some cities for 10 days. They featured live music, male and female models and comedians and also sold the brand at the reduced price. The company sponsored a Gold Flake Canal Mela in Lahore featuring Gold Flake streamers on both sides of the

busy Canal Road and 35 banners throughout the city. All this only to advertise a single price cut!

According to the prestigious Advertising Age magazine, LTC was the third largest advertiser in Pakistan in 1998, spending an astounding Rs 328 million (US \$6.42 million). It was followed by BAT, which spent a staggering Rs 295 million (US \$5.77 million) during the same year. The marketing expenses of the two companies neared Rs 1.5 billion in 1999, with LTC spending Rs 804.75 million and BAT Rs 680.643 - all in the name of hooking new users, the lifeline of the tobacco industry.

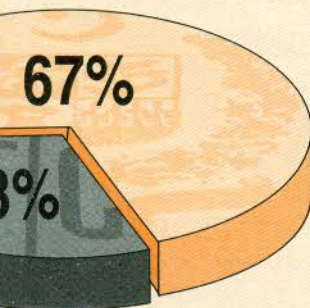


1998-1999 and it recorded a net profit of Rs 136 million. It is estimated that around 70% of revenues generated by the tobacco companies are paid as government levies.

How government patronizes tobacco industry

Addicted to tobacco revenues, the government patronizes the tobacco business in a number of ways. 1. The Pakistan Tobacco Board (PTB) was established in 1968 with headquarters in Peshawar. The government recognized 'tobacco potential' and established the Ministry of Commerce, the Board of Tobacco Cultivation on scientific lines for export. It regulates, controls, grades and certifies tobacco products; undertakes research and development in the tobacco industry; renders assistance for existing and new growing areas and establishes model farms.

he tobacco business



PTC Revenues During 1999

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2. The government ensures that the tobacco industry makes prompt payments to tobacco farmers, which is not the case for other crops like sugarcane, cotton and fruits. Under the Deferred Payment Leaf Voucher Scheme, introduced in 1975, the government constituted a consortium of nationalized commercial banks for providing additional loans to tobacco companies during the marketing season of tobacco. The scheme is aimed at ensuring that tobacco growers are promptly paid for purchases made by the industry. In 1994, Rs 434.14 million were handed out to tobacco companies under this scheme.

3. The Pakistan Sports Board and all sports associations under its aegis accept tobacco sponsorships. The monetary value of these sponsorships runs into millions of rupees.

4. The government gives tobacco companies a freehand to advertise their products on electronic and print media. While the total magnitude of tobacco advertisement in the print media is unknown, the state-owned Pakistan Television Corporation (PTV) earns almost 33% of its advertising income from the tobacco industry. According to press reports, PTV generated around Rs 280 million through tobacco advertisements during the Cricket World Cup 1999.

**Gold Leaf,
a brand marketed
by the Pakistan
Tobacco Company,
is sold at a retail
price of Rs 33 for a
pack of 20. The
government gets
Rs 24.96 while the
company keeps
Rs 8.04 only.**

A chronology of official anti-tobacco measures

1979: The government, through the Cigarettes (Printing of Warning) Ordinance, makes it mandatory for tobacco companies to print "Smoking is Injurious to Health" on all cigarettes packs.

Mid 1980s: The health ministry initiates its anti-tobacco campaign on electronic media through a meager allocation.

1988: State-owned Pakistan Television prohibits tobacco advertising before 10:00 p.m. and exaggeration of the pleasures of smoking. Ban is not

enforced.

1992: State-owned Pakistan International Airlines declares all domestic flights 'smoke-free'.

1993: Government reduces import duty on cigarettes from 90% to 80% in an attempt to make smuggling less attractive and to recover evaded taxes and excise duties.

1994: Pakistan's lone private television station, Network Television Marketing (NTM), bans all forms of tobacco advertisements including program sponsorships by cigarette manufacturers.

1997: Government bans, through a notification, smoking in all government offices and public transport. Ban is not enforced.

The landmark case: an unfortunate decision

The Pakistan Chest Foundation and Pakistan Anti-Tuberculosis Association in 1996 moved the Lahore High Court against the aggressive tobacco promotion on PTV and radio. After an exhaustive hearing that spanned more than a year, the court on March 21, 1997 banned any cigarette commercials or programs on television and radio that might induce people to smoke. Exempt for three years were advertisements during the live telecast of tobacco-sponsored sports events, which were not to show anyone smoking and were to be followed by a warning against smoking. The court ordered that only a statement naming the sponsoring company could be relayed during radio sports commentaries.

PTC and LTC along with other manufacturers promptly challenged the ban, filing an appeal a few days after the ban, and were able to get a favorable verdict. On September 18 1997, the Lahore High Court's divisional bench set aside the ban on "technical grounds".

Islam and smoking

"Smoking, in whichever form and by whichever means, causes extensive health and financial damage to smokers. It is also the cause of a variety of diseases. Consequently, and on this evidence alone, smoking would be forbidden and should in no way be practised by Muslims," says Grand Imam of Al-Azhar, Cairo, Egypt, Sheikh Gadul Haq Ali Gadul Haq.

Chairman of the Permanent Committee of Academic Research and Fatwa, Saudi Arabia, Abdul-Aziz bin Baz, along with the Vice-President of the Committee, Abdul-Razzaq Afifi and members Abdullah bin Ghadian and Abdullah bn Qa'oud also adjudged smoking as 'haram' in Islam.

As high-income countries increasingly tighten the noose around cigarette companies and introduce measures to bring down the number of smokers, the multibillion transnational companies are now creating new markets in developing countries, where controls are non-existent and governments in dire need of revenues. While the consumption of cigarettes declines in the United States by 1.5% every year, it increases annually by 1.7% in developing countries as a result of the increasing presence of these companies.

The three big tobacco transnational companies - Philip Morris Industries (PMI), British American Tobacco (BAT) and RJ Reynolds (RJR) - bear substantial responsibility for rising smoking rates and projected increases.

The American PMI, which manufactures Marlboro and holds 16% of the world tobacco market, has gained only a 4.7% increase in the US market since 1990, but its international sales during the same period have increased by 80%. In 1997 the company sold 235 billion cigarettes in the US, compared with 711 billion in international markets for a profit of Rs 239.7 billion (US \$4.6 billion). Shockingly, PMI

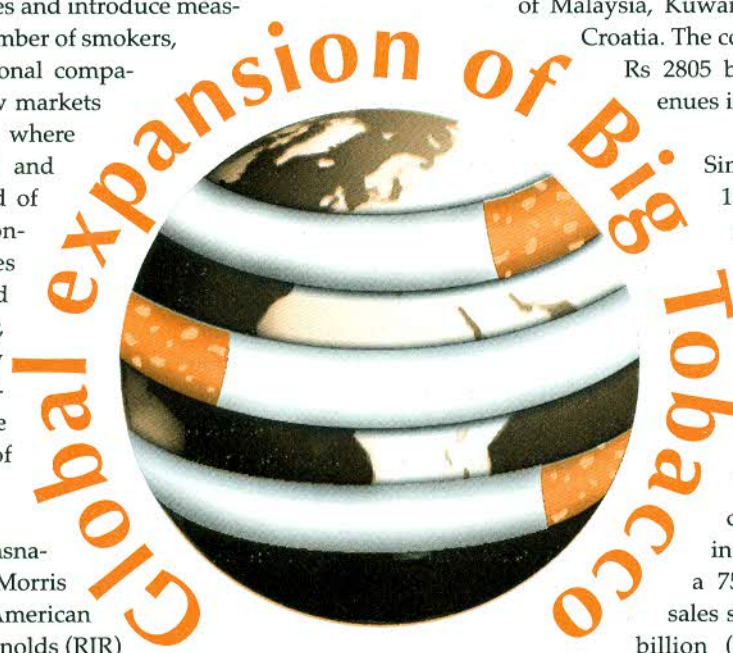
revenues in 1996 far exceeded the Gross Domestic Products of Malaysia, Kuwait, Guatemala, Pakistan and Croatia. The company generated 35% of its Rs 2805 billion (US \$55 billion) revenues in the international market.

Similarly, BAT, which holds 15% of the global cigarette market and has subsidiaries in 65 countries, made a profit of Rs 102 billion (US \$2 billion) on sales worth Rs 1209 billion (US \$23.7) billion in the international market during 1997.

The American RJR, which controls around 4% of the international market, has seen a 75% rise in its international sales since 1990, reaching Rs 173.4 billion (US \$3.4 billion) in 1997.

International sales, particularly in Eastern Europe and Central Asian Republics, now account for almost 41% of the company's total tobacco sales.

While these transnational companies are having a field day in the markets of developing countries, it becomes all the more important for governments and people to put in place effective checks on tobacco consumption and to save future generations from falling prey to a deadly addiction.



Several countries have effectively reduced the smoking rates through a mix of price and non-price measures.

A good example is **Thailand**, which has adopted a comprehensive control program. Smoking in cinemas and buses was banned in Bangkok in the 1970s. National advertising bans and other anti-smoking measures followed, and in 1993 the government raised the cigarette tax on health grounds. In 1997, Thailand became the second country (after Canada) to require tobacco companies to reveal the ingredients of their cigarettes. Overall smoking prevalence has dropped as a result.

The **United Kingdom** has reduced smoking substantially, through both price and non-price measures:

- ◆ From 1965 to 1995 annual UK cigarette sales fell from 150 billion to 80 billion.
- ◆ Annual UK tobacco deaths in the 35-69 year age group decreased from 80,000 to 40,000.
- ◆ In December 1998, the UK government announced a major campaign to help 1.5 million people stop smoking by the year 2010; it said taxes on tobacco products would continue to be increased. Its targets include reducing smoking among children from 13% to 9%, reducing adult smoking from 28% to 24% or less, and reducing the number of women who smoke during pregnancy from 23% to 15%.
- ◆ Tobacco taxes were increased to reduce cigarette consumption and increase the government's tobacco revenues.

France has had a comprehensive tobacco control law in force since 1993. The law bans tobacco advertising and requires strong health warnings on both the front and the back of packaging. It also controls smoking in transport, public places and workplaces by either banning it altogether or limiting it to smoking areas. Between 1991 (when the law was adopted) and 1995, tobacco consumption - measured in weight of tobacco products sold - had fallen by 7.3%.

Among Latin American countries, advertising controls apply in **Chile, Colombia, Costa Rica, Mexico and Panama**. Smoking is banned in domestic and international flights throughout the Americas. National tobacco control plans have been drafted in Brazil and Mexico.

WHO's Tobacco Free Initiative

The deadly impact of tobacco on health now and in the future is the primary reason for WHO's strong and explicit support to tobacco control on a worldwide basis. WHO established the Tobacco Free Initiative in July 1998 to coordinate an improved global strategic response.

The long-term mission of global tobacco control is to reduce smoking prevalence and tobacco consumption in all countries and among all groups, and thereby reduce the burden of disease caused by tobacco. In support of this mission, the goals of the Tobacco Free Initiative are to:

- ④ Contribute in galvanizing national support for evidence-based tobacco control policies and actions;
- ④ Build new partnerships for action at national and local levels and strengthen existing ones in the country;
- ④ Heighten awareness of the need to address tobacco issues at all levels of society;
- ④ Commission policy research to support rapid, sustained and innovative actions;
- ④ Mobilize resources to support required actions at the national and local levels;
- ④ To muster government support for the Framework Convention for Tobacco Control being finalized under the auspices of the WHO.

The Framework Convention on Tobacco Control (FCTC)

On 24 May 1999, the World Health Assembly (WHA), the WHO governing body paved the way for multilateral negotiations to begin on a set of rules and regulations that will govern the global rise and spread of tobacco and tobacco products in the next century. The 191-member WHA unanimously backed a resolution calling for work to begin on the Framework Convention on

Tobacco Control (FCTC) - a new legal instrument that could address issues as diverse as tobacco advertising and promotion, agricultural diversification, smuggling, taxes and subsidies.

A record 50 nations took the floor to pledge financial and political support for the Convention. The list included the five permanent members of the United Nations Security Council, major tobacco growers and exporters as well as several countries in the developing and developed world which face the brunt of the tobacco industry's marketing and promotion pitch. The European Union and 5 NGOs also made statements in support of the Convention and the Director-General's leadership in global tobacco control.

The Tobacco Free Initiative-Pakistan

TheNetwork for Consumer Protection, which has been working to protect and promote consumer rights in the area of pharmaceutical products and baby milks and foods, has launched the Tobacco Free Initiative-Pakistan (TFI-Pak) with initial support from the WHO. The primary goal of TFI-Pakistan is to mount resistance to the onslaught by the tobacco industry, to educate the people about the hazards of tobacco use and to pressure the government to introduce adequate controls on tobacco sale and promotion.

TFI-Pak, in collaboration with WHO, the international anti-tobacco movement and domestic health groups, will mount a countrywide tobacco campaign to reduce smoking prevalence and tobacco consumption, thereby reducing the related burden of disease.

TFI-Pak's objectives include:

- ④ Effective advocacy by mustering national support for evidence-based tobacco control measures e.g. ban on all kinds of tobacco promotion.
- ④ Contribution towards development of comprehensive anti-tobacco legislation.

- ④ Building a national awareness campaign about the hazards of tobacco through partnerships at all levels.
- ④ Undertaking policy and operational research to fill knowledge gaps for effective anti-tobacco action.
- ④ To lobby for and contribute towards the development of the Framework Convention for Tobacco Control at national and international levels.

TFI-Pak believes that the tobacco issue should be tackled in a holistic manner through a mix of price and non-price measures such as progressive taxation and bans on promotion. TFI-Pak considers a total ban on the direct and indirect promotion of tobacco products on print and electronic media the first and foremost step, but this ban should accompany pricing measures that have proved very effective in many countries.

According to the World Bank, evidence shows that price increases on cigarettes are highly effective in reducing demand. Higher taxes induce some smokers to quit and prevent other individuals from starting.

A recent World Bank report (Curbing the Epidemic) on the economics of tobacco control recommends a multi-pronged approach to curbing tobacco. Tailored to individual country needs, the strategy would include raising taxes to between 2/3 and 4/5 of the retail price of cigarettes, adopting comprehensive bans on advertising and promotion of tobacco, publishing and disseminating research results on the health effects of tobacco and increasing access to nicotine replacement and other cessation therapies.

Although Pakistan already has high tobacco taxes, customers have not felt the brunt of tobacco taxation as various brands of cigarettes remain within the financial accessibility of different income groups. In such a situation, the government could set a minimum price for the sale of tobacco to prevent the tobacco industry undercutting price controls introduced by higher taxation.

TFI-Pak's Anti-Tobacco Charter*

1. Promotion

- a. Ban on direct and indirect promotion of tobacco products on electronic and print media.
- b. Ban on tobacco sponsorship of sports, musical or cultural events.
- c. Ban on product placement by tobacco companies in all types of media, movies, sports, musical or cultural events.
- d. Ban on images of smokers on print media as well as on TV and movies.
- e. Ban on tobacco-sponsored advertisements of other products and services.
- f. Ban on use of tobacco brand names for promotion of other products and services

2. Restrictions to access

- a. Ban on juvenile smoking envisaging punishment for sellers.
- b. Restricted availability of tobacco products through licensed outlets.
- c. Ban on sale of cigarettes by sticks.
- d. Packing requirement of 25 sticks per pack should be made compulsory for all cigarettes brands.

3. Fiscal Measures

- a. A progressive tax should be imposed on all tobacco products at the existing retail price. The proceeds thus collected should go to a National Health Fund.
- b. A portion of excise duty collected from sale of tobacco should be spent on the strengthening of the public health delivery system.
- c. Set a minimum price for the sale of tobacco to avoid the tobacco industry

undercutting the price controls introduced by higher taxation.

4. Health warnings

- a. Implement a public education program on the risks of tobacco use and second-hand smoke through money generated by tobacco taxes.
- b. Industry should be bound to print clear and categorical health warnings mentioning instances of specific diseases. These messages should be highly visible on tobacco packs and use words and symbols that communicate effectively. These messages should also include specific health warnings for tobacco and its affects on children and in pregnant women. Hazards of passive smoking should be included in the purview of these messages.

5. Quit Smoking Programs

- a. Medical students should be required to attain special courses on smoking cessation counseling.
- b. Smoking cessation programs in all public and private hospitals should be established and the Health Fund could be used for the purpose.

6. Nicotine standards

- a. Maximum nicotine and tar level per stick standards should be adopted and enforced.
- b. The tobacco companies should be required to display the nicotine and tar content per stick on every pack.

7. Social acceptability

- a. Establish smoke-free environment in all enclosed public places, particularly workplaces, health care facilities, schools, public transport, hotels and restaurants, etc.
- b. Schools curriculum should include materials that could link tobacco with death and disease with a view to discouraging children from taking up smoking or any other tobacco use.

8. Phase out of tobacco crop

- a. Funds should be made available into research for alternative crops that could be grown in tobacco growing areas.
- b. Tobacco farmers should be encouraged through interest-free loans and subsidies to switch to other crops.

9. Elimination of government patronage

- a. Immediate abolition of the Deferred Leaf Payment Voucher Scheme.
- b. Abolition of all forms of subsidies to tobacco growers.
- c. Role of the Pakistan Tobacco Board should gradually be minimized and eventually be abolished.

*The charter also provide elements for a comprehensive anti-tobacco legislation in Pakistan.

Let's join hands

TFI-Pakistan will strengthen with the support and cooperation of smokers and non-smokers, health workers, teachers and parents, politicians and opinion leaders, trade unions, commercial and industrial organizations, media, schools and other educational institutions, consumer groups, health services and medical associations, religious groups and researchers. Anybody and everybody can have a role to play in saving ourselves and future generations from death and disease. So, don't wait, join hands with TFI-Pakistan now!

For more information about TFI-Pakistan and other consumer protection work, please contact:

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