

Meeting of the Interagency Committee on Smoking and Health (ICSH)

Mauricio Hernandez Avila, MD, DSc., General Director, Instituto Nacional De Salud Publica, Mexico

Slide 1:

Text: Meeting of the Interagency Committee on Smoking and Health (ICSH).

Improving tobacco control in developing world.

Mauricio Hernández Avila, General Director, National Institute of Public Health, Mexico

Washington, DC, USA April 13-15

Slide 2:

Text: Introduction

- In Mexico, tobacco kills over 31,000 people every year.
- The Mexican Government has enabled the following actions:
 - To ensure that young people don't start smoking
 - To protect people from pollution by tobacco smoke
 - To help smokers quit and to reduce the risks for those who continue to smoke
- Over the last decades we estimate that fewer people are smoking and less tobacco is being consumed. However much needs to be done
 - There are 13 million active smokers in Mexico
 - Young people are smoking more frequently and at earlier ages, specially young girls

Slide 3:

Text: Raising cigarettes prices through taxes

Recently, Mexican Government implemented a more aggressive tax policy to tobacco products. Until 2001, excise tax was very low, 20.9% for dark tobacco and 100% for the others.

Today, the excise tax is 110% for all types of tobacco and tax as a proportion of cigarette price is close to 51%.

Slide 4:

Text: Cigarette taxation, price and household tobacco consumption from 1980 to 1999, Mexico.

Graphics:

Line Graph

Tobacco Taxes

1980—99%

1981—155%

1985—156%

1986—188%

1988—187%

1989—160%
1990—161%
1993—90%
1994—88%
1995—92%
1998—92%

Cigarette average price. Source: PROFECO

1980—\$3.25
1983—\$3.90
1985—\$3.90
1987—\$6.00
1988—\$3.00
1990—\$2.50
1991—\$3.25
1992—\$3.50
1995—\$5.00
1997—\$4.75
1998—\$3.75

Bar Graph

Prevalence of households reporting expenditures in tobacco. Source National Income & Expenditure survey

1984—22%
1989—15.3%
1992—24%
1994—12.5%
1996—18%
1998—19%

Slide 5:

Text:

Despite the fact that tax is still low, taxation has shown a positive effect reducing the proportion of households which spend in tobacco.

In the first year of this measure, tobacco revenues grew up 10.3%

Graphics:

Bar Graph

Proportion of households with expenditure in Tobacco

1998

Quintile1—4.4
Quintile2—7.9
Quintile3—9
Quintile4—10.8
Quintile5—10.5
Total—9.0

2000

Quintile1—3.7
Quintile2—7.8

Quintile3—9.57
Quintile4—10.0
Quintile5—12.7
Total—9.0

2002

Quintile1—2.9
Quintile2—5.8
Quintile3—6.2
Quintile4—7.7
Quintile5—11.3
Total—7.0

Slide 6:

Text: Healthy Policies for tobacco are difficult to implement

Graphics: Pictures of Spanish newspaper articles. In English the headlines read: “They fear cigar boxes more contraband” and “They evaluate to eliminate tax to tobacco.”

Slide 7:

Text: Smoking prevalence in México (urban population)

13-15 years olds GYTS 2003: male **19.6%** females **19.1%**

18 -65 years olds NSA 2002: male **45.3%** females **18.4%**

(GYTS) During the past 30 days on how many days did you smoked?

Graphics:

Bar Graph

Boys

Tijuana—12.4
N.Laredo—16.8
C.Juarez—20.8
Guadalaj—21.4
Mexico City—20.1
Cuernavaca—17.6
Puebla—25.3
Oaxaca—14.0
Chetumal—21.5
Tapachula—16.3
GLOBAL Mexico—19.6

Girls

Tijuana—10.4
N.Laredo—15.3
C.Juarez—23.2
Guadalaj—22.8
Mexico City—19.3
Cuernavaca—22.9
Puebla—23.9
Oaxaca—11.7

Chetumal—14.3
Tapachula—10.8
GLOBAL Mexico—19.1

Slide 8:

Text: Smoke free policies in Mexico

Restaurants are required to reserved 30% of their space for nonsmoking areas

The law is not working in restaurants. Almost none is smoke-free and owners seek legal protection against the ruling for enforcing smoke free areas

Young children including babies are allowed into smoking areas

Nonsmoking in Public Buildings

No laboratories to conduct biochemical validation of smoke free places

Graphics: Picture of representatives finishing their pack of cigarettes before a new tax of 20 percent to the cigars are applied.

Slide 9:

Text: Tobacco industry, through diverse ‘philanthropic’ agreements, offers money in order to protect its interests.

FCTC Preamble, paragraph 19

“Recognizing the need to be alert to any efforts by the tobacco industry to undermine or subvert tobacco control efforts and the need to be informed of activities of the tobacco industry that have a negative impact on tobacco control efforts”

Graphics: Image a document from the Department of Health in Mexico

Slide 10:

Text: The INSP is profoundly concern for this agreement

- It does not mean raising cigarettes taxes
- This agreement for two years is conditioned upon cigarettes sales do not decrease during that period
- In addition, it is conditioned on the tobacco companies involved keep control over 97% of the market
- Money collected from this agreement can not be used for preventing tobacco use

Slide 11:

Graphics: Pictures of tobacco advertisements on billboards and in stores.

Slide 12:

Text:

The Global Youth Tobacco Survey (GYTS) is a useful tool to measure the impact and to evaluate the enforcement of the Framework Convention on Tobacco Control (FCTC).

Slide 13:

Text: GYTS is designed to gather data on:

- Prevalence of cigarette smoking
- Knowledge and attitudes towards cigarettes
- Role of the media and advertising
- Access to cigarettes
- Tobacco-related school curriculum
- Environmental Tobacco Smoke (ETS)
- Cessation of cigarette smoking

Source: http://www.cdc.gov/tobacco/global/gyts/GYTS_intro.htm

Slide 14:

Text: Protection from exposure to tobacco smoke (**FCTC art.8**)

Mexico GYTS 2003

Graphics:

Bar Graph

Exposure in public places

Tijuana—47.9%

N. Laredo—49.0%

Cd .Juárez—57.0%

Guadalajara—59.0%

Mexico City—56.0%

Cuernavaca—53.0%

Puebla—48.0%

Oaxaca—39.0%

Chetumal—46.0%

Tapachula—38.0%

Global Mexico 2003—54.0%

Exposure at home

Tijuana—34.9%

N. Laredo—40.0%

Cd .Juárez—47.0%

Guadalajara—46.0%

Mexico City—49.0%

Cuernavaca—39.0%

Puebla—41.0%

Oaxaca—22.0%

Chetumal—33.0%

Tapachula—28.0%

Global Mexico 2003—46.0%

Slide 15:

Text: Education, communication, training and public awareness (FCTC art.12)
Mexico GYTS 2003

Graphics:

Bar Graph

During this school year, were you taught in any of your classes about the dangers of smoking?

Global Mexico 2003—51.7%

Tijuana—55.8%

Nuevo Laredo—60.7%

Cd .Juárez—53.7%

Guadalajara—71.1%

Mexico City—46.8%

Cuernavaca—56.4%

Puebla—56.7%

Oaxaca—61.1%

Chetumal—63.0%

Tapachula—73.7%

Do you think it is safe to smoke for only one year or two as long as you quit after that?

Global Mexico 2003—9.8%

Tijuana—9.2%

Nuevo Laredo—9.4%

Cd .Juárez—9.4%

Guadalajara—8.5%

Mexico City—10.0%

Cuernavaca—9.2%

Puebla—11.7%

Oaxaca—6.4%

Chetumal—9.2%

Tapachula—10.1%

Slide 16:

Text: Sales to and by minors (FCTC art.16)

Mexico GYTS 2003

During the past 30 days, has anyone refuse to sell you cigarettes because of your age?

61.8% NO, MY AGE DID NOT KEEP ME FROM BUYING CIGARETTES

Graphics:

Bar Graph

Has a cigarette representative ever offered you a free cigarette?

Global Mexico 2003—16.9%

Tapachula—19.6%

Chetumal—17.2%

Oaxaca—17.6%

Puebla—17.2%
Cuernavaca—17.4%
Mexico City—17.1%
Guadalajara—15.0%
Cd .Juárez—16.0%
Nuevo Laredo—16.7%
Tijuana—16.2%

How did you usually get your own cigarettes? I BOUGHT THEM IN A STORE

Global Mexico 2003—37.0%
Tapachula—41.7%
Chetumal—28.4%
Oaxaca—41.3%
Puebla—38.4%
Cuernavaca—32.9%
Mexico City—38.4%
Guadalajara—34.3%
Cd .Juárez—30.5%
Nuevo Laredo—25.3%
Tijuana—26.9%

Slide 17:

Text: Proposals for improving tobacco control

- I. INVOLVING WORLD BANK AND INTERAMERICAN DEVELOPMENT BANK TO SUPPORT HEALTHY TOBACCO POLICIES
- II. CAPACITY BUILDING THROUGH REGIONAL COURSES ON TOBACCO CONTROL AND PREVENTION.
- III. CREATING REGIONAL CENTERS FOR STUDYING SMOKING PATTERNS, ANALYZING DATA AND EVALUATING PROGRESS AND RESULTS WITH COUNTRY BENCHMARKING
- IV. INCREASING FUNDS FOR TOBACCO CONTROL

The goals of this proposal are

- To boost the political and financial support the FCTC needs
- To enhance the capacity of countries to implement and evaluate tobacco control programs.
- To generate genuine relevant information that support and empowers tobacco control programs.

Slide 18:

Text: Capacity building through regional courses on tobacco control and prevention

Some good reasons

- People's knowledge of the health risk of smoking appears to be partial at best, especially in low- and middle-income countries
- Young people underestimate the risk of becoming addicted to nicotine
- Policymakers frequently argue against raising tobacco taxes
- Industry carries intensive lobbying

Source: Curbing the epidemic. Governments and the economics of tobacco control. P Jha & FJ Chaloupka

Slide 19:

Text: Collaboration with the IGTC

PERSPECTIVAS DE CONTROL DEL TABAQUISMO EN AMÉRICA LATINA Y EL CARIBE

Instituto Nacional de Salud Pública Cuernavaca, Morelos. MÉXICO

23 -27 de agosto de 2004

- The tobacco diseases attributable cost for the Mexican Institute of Social Security
- Laboratory capacity building for cotinine and nicotine determinations
- Training tobacco control

Graphics: Pictures of flags from:

Bolivia

Ecuador

Peru

Costa Rica

El Salvador

Dominican Republic

Colombia

Guatemala

Venezuela

Cuba

Panama

Mexico

Image of South America

Logo for the Johns Hopkins School of Public Health Institute for Global Tobacco Control

Slide 20:

Text: Creating regional centers for studying smoking patterns, analyzing data and publishing results

- Despite the fact that most developing countries are participating in the GYTS, a lack of information about tobacco epidemic issues persist. It is hard to find some results from many countries but the descriptive statistics that appears in the US CDC Web site

- It is important to put the valuable results of the GYTS at the disposition of policymakers and health authorities at different levels and to achieve that, papers and short communications are needed
- Beyond the prevalence, it is possible to do multivariate analysis to identify risk factors for tobacco consumption, susceptibility to smoke among never smokers, and other variables
- In addition, many items in the GYTS questionnaire are useful as indicators of the measures proposed by the FCTC, so workshops for preparing both diagnostic and progress reports would boost the ratification and enforcement of the FCTC in many countries

Slide 21:

Text: Experience of the Mexican National Institute of Public Health with the GYTS Data Management and Training Workshop , 2003 and 2004

Graphics: Image of the Global youth Tobacco Survey Data Management and Training Workshop. With logos from Centers for Disease Control and Prevention, Pan American Health Organization, and Instituto Nacional De Salud Pública, Centro de Investigación en Salud Poblacional Departamento de Investigación sobre Tabaco. Cuernavaca, Morelos, México, October, 25-29. With flags from different South American countries. www.insp.mx/tabaco

Slide 22:

Text: Collaboration with CDC

Mexican version of the Surgeon General to be released May 2005

Graphics: Banner from the 2004 Surgeon General Report. *“The Health Consequences of Smoking, A Report of the Surgeon General.”*

A Poster from the Department of Health. A picture of standing cigarettes with one wilted.