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India's first E-Resource Center for Tobacco Control, which has been a boon for the people working in tobacco control, is a joint venture of Post Graduate Institute of Medical and Research Chandigarh (PGIMER) with The International Union against Tuberculosis and Lung Diseases (The Union). The portal encompasses all aspects of tobacco use, its prevention and cessation that can promote a tobacco-free society. The aim of this initiative is to stimulate, promote and disseminate research involving tobacco use, prevention, policy implementation at a regional, national and international level. It also encourages the governments and policymakers to adopt and effectively implement the tobacco control laws and also provide a forum for research, commentary, analysis, and debate on policies, programmes, and strategies that are likely to strengthen the existing tobacco control policies. .....



This E-Resource Centre for Tobacco Control (E-RCTC) works as a gate way to knowledge and information on tobacco control themes and activities from across the India and globe. Such a resource pool would definitely be helpful for researchers, academicians, implementers, policy making bodies and stakeholders. It is high time to refrain the people from tobacco use, focusing on youths and adolescents in particular. These groups are very much vulnerable, we need to protect them, schools and all educational institutes should be free from tobacco use. The ill effects of tobacco use is highly alarming. Let us join hands to work for tobacco free educational campuses. The e-platform will be a motivational platform for our young minds. Best wishes for more success.

- Dr Ramesh Chandra Behera, State NSS Officer-cum-Deputy Secretary, Department of Higher Education Government of Odisha

#### OR'S **Speak**



BACCO-FREE

monthly newsletter published by E-RCTC focuses

control and achieving sustainable development goals, this

- Dr Sonu Goel

## EXPERTS SPEA



The Resource Centre for Tobacco Control is a unique knowledge exchange for strengthened tobacco control action in India. e-RCTC will provide a central focal point for all relevant stakeholders including decision makers, civil society organizations and academicians to collaboratively engage on the tobacco control agenda, with a particular focus on learning from national level leadership and sub-national

level successes. E-RCTC will have user engagement as a central principle to its course modules and be designed to primarily connect, benefit and leverage the public health community,

- Ms Prachi Kathuria,



'The e-Resource Centre for Tobacco Control is the first of its kind an online hub contains latest information, policy initiatives and best practices from across the country. This helps policymakers and implementers in government and nongovernment settings in advancing tobacco control initiatives and supports in strengthening of National Tobacco Control Program.

#### - Mr Awadhesh Kumar,

Executive Director, Balajee Sewa Sansthan (BSS) Member Secretary, Uttarakhand Tobacco Free Coalition (UTFC)



#### **Tobacco Free Times 14th Edition released**

The 14th edition of Tobacco Free Times highlights the notion of World No Tobacco Day 2021 theme "Commit to Quit". It was successfully released during the celebration of National Doctor's Day on 1st July, 2021 by Prof. Jagat Ram, Director, PGIMER, Chandigarh (Chief Guest) and

many other senior medical professionals viz. Dr. Amandeep Kaur Kang,Director Health Services, Punjab; Dr. Jasbinder Kaur, Director Principal, GMCH Chandigarh and Prof. G. D. Puri, Dean Academics, PGIMER Chandigarh; Dr. Parmjit Singh, Deputy Medical



Superintendent, Govt. Multi Specialty Hospital Sector-16, Chandigarh; Dr. Manjeet S Trehan, District Immunisation Officer Chandigarh; Dr. Sanjiv Palta, Department of Anaesthesia and Intensive Care, GMCH; Dr. Deepak Chawla, Professor, Department of Neonatology, and Nodal Officer for COVID vaccination, GMCH,

Chandigarh; Dr. Mini Singh, Professor and Nodal officer for COVID 19 Department of Virology, PGIMER Chandigarh; and Dr. Vipin Kaushal, Addl. Prof. Deptt. of Hospital Administration, PGIMER Chandigarh.



#### E-workshop on framing the guidelines for implementation of FCTC 5.3: Telangana

An e-workshop on framing the guidelines for implementation of FCTC 5.3 was successfully organized by PGIMER Chandigarh and State Tobacco Control Cell Telangana in support of International Union against Tuberculosis and Lung Disease (The Union South-East Asia) on 27th July,2021. The workshop was attended by 80+ participants. Various eminent dignitaries were the speakers of the workshop viz. Dr. Sonu Goel, Professor, PGIMER Chandigarh; Mr. Rajeev Chaudhary, Project Coordinator, PGIMER Chandigarh; Dr. Shravan Kumar, State Program Officer, Telangana and Dr. amit Yadav, Senior Technical Adviser, The Union. V.C. Sajjanar, IPS, Commissioner of Police, Hyderabad Telangans dignified the workshop by being present as the Chief Guest. Dr. R Pushpa, Additional Director NCD, NHM Telangana; Dr. Rana J Singh, Deputy Regional Director, The Union(SEA) graced the occasion by being the Guest of honors.



#### A national webinar on "Sustainable Development Goals and Tobacco Control"

A webinar on "Sustainable Development Goals and Tobacco Control" was successfully organized by by E-Resource Centre for Tobacco Control (E-RCTC) in collaboration with The Union South-East Asia (The Union) and Strategic Institute for Public Health and Research (SIPHER),)PGIMER Chandigarh on 12th August, 2021. 160+ participants accorded their presence in the event. Various eminent dignitaries were the speakers of the webinar viz. Dr Jagdish Kaur, Regional Adviser (Tobacco Free Initiative), WHO SEARO office, Dr Suneela Garg, Director - Professor & Head, Dept. of Community Medicine, Maulana Azad Medical College, New Delhi; Dr Gopal Chauhan, State Nodal Officer – NTCP, Himachal Pradesh Ms. Prachi Kathuria, Deputy Diretor, HRIDAY; Dr Rakesh Gupta, President, Rajasthan Cancer Foundation, Jaipur; Dr L. Swasticharan , Additional Deputy Director General of Health Services, MoHFW, Govt of India. Dr. P.C. Gupta, Director ,Healis, Sekhsaria Institute of Public Health, Navi Mumbai , Dr Rana J Singh, Deputy Regional Director, NCD & Tobacco Control, The UNION SEA Office, New Delhi; and Dr Mira B Aghi, Behavioral Scientist Communication Expert graced the occasion by being the Guest of Honors.





PROJECT UPDATES

## Celebration of National Doctor's Day 2021: A Webinar



A celebration of National Doctor's Day 2021 was done by conducting a webinar to honour the Covid heroes who have turned tragedy into triumph during the pandemic on July 1st 2021 which was jointly organized by Resource Centre for Tobacco Control and Strategic Institute of Public Health Education and Research, Chandigarh. Dr. Parmjit Singh, Deputy Medical Superintendent, Govt. Multi Specialty Hospital Sector-16, Chandigarh; Dr. Manjeet S Trehan, District Immunisation Officer Chandigarh; Dr. Sanjiv Palta, Department of Anaesthesia and Intensive Care, GMCH Dr. Deepak Chawla, Professor, Department of Neonatology, and Nodal Officer for COVID vaccination, GMCH, Chandigarh; Dr. Mini Singh, Professor and Nodal officer for COVID 19 Department of Virology, PGIMER Chandigarh; and Dr. Vipin Kaushal, Addl. Prof. Deptt. of Hospital Administration, PGIMER Chandigarh were given tribute to provide uninterrupted support to serve the community against Covid 19. Prof Dr. Jagat Ram Director PGIMER graced the occasion by being the Chief Guest and Dr. Amandeep Kaur Kang DHS Cum MD NHM Chandigarh, Dr. Jasbinder Kaur, Director Principal, GMCH Chandigarh and Prof. G. D. Puri, PGIMER as Guest of Honours of the webinar.

#### Conducted Yellow Line Campaign: Puducherry



A 'Yellow Line campaign' for Indira Gandhi Institute of Dental Sciences, Puducherry along with State Tobacco Control Cell team was successfully conducted.

#### Broadcasting of video spots (voice over to Odia language) at digital platforms in all 30 districts: Odisha



The state program officer, Odisha had a discussion with the IEC Consultant, NHM and IEC Consultant, SIHFW, Government of Odisha regarding broadcasting of video spots (voice over to Odia language) at digital platforms of all 30 districts. The process will be commenced soon.

# Four (4) Successful publication of a research paper in Indian Journal of Tuberculosis

The research paper entitled "Communicating risk: status of health warning labels on various tobacco products in Indian market" was accepted for publication in Indian Journal of Tuberculosis (IJTB). In addition to this three (3) papers are in line for publication viz. National level E-Resource Center for Tobacco Control (E-RCTC):One stop solution to information on tobacco



control in India, Prevalence and factors associated with the sale of loose cigarettes at Point of Sale: A cross-sectional analytical study from four Indian States and Pricing of tobacco products: Pre and Post GST implementation.

#### **One-one-meetings**

Twenty seven (16) meetings with high level officials / Nodal Officers like State Nodal Officer, State Consultant - NTCP, Communication / IEC, NHM, , DNO, SNO-NTCP, Commissioner of Police, Chief Medical Health officer, Additional Director NCD, Deputy Director Food and Safety, Deputy Director School education for issuing various notifications regarding COTPA and apprising them about project activities, were being done.





## Tobacco Control and Sustainable Development Goals

"Sustainable development is development that meets the needs of the present without compromising the ability of future generations to meet their own needs"

#### -Brundtland Report 1987



#### **Background and Introduction:**

Tobacco costs lives, causes economic loss, contributes to environmental degradation, and poses significant threats to sustainable development. Tobacco use and production is linked to negatively impacting all 17 United Nation (UN)'s Sustainable Development Goals (SDGs).

The governments across globe face tough task in resourcing and implementation of decisions to achieve the ambitious SDG agenda (17 goals and 169 targets). Despite inclusion of a specific target for implementation of the WHO Framework Convention on Tobacco Control (FCTC; target 3.a), there is a risk that tobacco control will remain a focus for the health community only. Reducing tobacco use plays a major role in global efforts to achieve the SDG target of reducing premature deaths from non-communicable diseases (NCDs) by one third by 2030. All the 17 Goals have a direct or indirect relationship to tobacco control.

Tobacco Control for Sustainable Development

World Health Organization

## What are the SDGs?

The Sustainable Development Goals (SDGs) are a United Nations initiative, formally adopted by the United Nations General Assembly on 25 September 2015 in a resolution entitled Transforming our world: the 2030 Agenda for Sustainable Development. The SDGs build on and succeed the Millennium Development Goals. They include 17 goals and 169 targets to be achieved over the next 15 years, with the aim to "end poverty, protect the planet, and ensure prosperity for all as part of a new sustainable development agenda". Alongside the SDGs are governmental commitments to action that will enable progress towards the targets. The SDGs apply to all countries, rich and poor, and recognize the crucial interrelationship of health, poverty, education, gender, and many other issues.





# How tobacco impedes sustainable development?

More than 17 million people work in tobacco cultivation worldwide, mainly in low- and middle-income countries with low labour standards, where more than 90% of the global tobacco harvest is produced. Smallholder farmers find it difficult to earn a living from tobacco cultivation (irreconcilable with SDGs 1 and 2) and need the help of their children as contribution to their livelihood, even at the expense of their education (irreconcilable with SDGs 8.7 and 4). Dangerous chemicals are intensively used in the fields, and due to the lack of protective clothing, occupational accidents such as poisonings are widespread (irreconcilable with SDGs 3.9 and 8). In addition, nicotine is absorbed through the skin when workers get into contact with tobacco leaves, eventually causing acute nicotine poisoning, the so-called 'green tobacco sickness' (irreconcilable with SDG 8.8). Thus, the widespread use of child labor is particularly worrying. On top of it, tobacco cultivation damages the environment: tobacco depletes the soil of nutrients and, consequently, forests are cleared to develop new fertile fields as well as to obtain firewood for curing the green tobacco leaves. The curing process requires globally around 8 million tonnes of fuelwood every year (irreconcilable with SDGs 12.2, 13 and 15.2). Furthermore, the chemicals used in tobacco growing enter water bodies and adversely affect aquatic life biodiversity (irreconcilable with SDGs 6.3 and 6.6). (Eichborn, 2020).

A recent report published by National Cancer Institute (NCI )of USA and WHO entitled "The Economics of Tobacco and Tobacco Control" concludes the following:

- Tobacco control reduces the disproportionate burden that tobacco use imposes on the poor.
- Tobacco (Smoking and smokeless) use is concentrated among the poor and other vulnerable groups such as children ad women and tobacco use accounts for a significant share of the health disparities between rich and poor.

SDG	Problem Caused by Tobacco Use	How Tobacco Control Help in achieving Sustainable Development Goals	
1 <sup>no</sup> poverty <b>Ř¥ŘŤŤŤŤ</b>	Tobacco use leads to • Chronic diseases that are costly to treat. • Premature deaths that cause financial burden. • Keep farmers in a debt cycle	Tobacco Control can lead to poverty alleviation efforts by • Banning on advertising • More smoke free places • Higher tobacco taxes, etc. These efforts will allow income to be redirected towards necessities like food, education, and other investments that could lift the poor out of poverty.	
2 ZERO HUNGER	<ul> <li>Spending on tobacco products often represent more than 10% of household expenditure, taking away income for necessities like food.</li> <li>Tobacco cultivation eats up large areas of land which could otherwise be used for food production.</li> <li>Tobacco is one of the major causes of soil and land degradation, stripping the nutrients of soil faster than other crops, contributing further to food insecurity as the land becomes unsuitable or less productive for purposes of growing food crops.</li> </ul>	<ul> <li>Reducing tobacco use can:</li> <li>Redirect spending to ease hunger (food and nutrition), from tobacco products and health costs for tobacco-related illnesses.</li> <li>Sift land used for tobacco production to the growing of food crops with support from the government as mandated under the World health Organization (WHO) Framework Convention on Tobacco Control (WHO FCTC)</li> </ul>	
<b>3</b> GOOD HEALTH AND WELL-BEING	<ul> <li>Tobacco use causes:</li> <li>Death, disability and disease. Kills over 8 million people every year</li> <li>Costs the world economy nearly 2% of its gross domestic product.</li> <li>Strips land and soil of their viability.</li> </ul>	One of the SDG targets is strengthening the implementation of WHO FCTC, a treaty which sets forth measures proven to be effective in reducing tobacco consumption. If nothing is done, 1 billion people could die from tobacco-related diseases in this century.	

#### What is the role of tobacco control in attaining sustainable development goals?



4 QUALITY EDUCATION	Tobacco use results in: • Children being forced to drop out of school to take care of a sick relative or to find work to make up for lost wages. • Children (14 and under) work in tobacco fields depriving them of education. • Smoking among adolescents and exposure to second-hand smoke leads to learning problems/ cognitive impairment.	<ul> <li>Money can be used for the education of children, rather than on tobacco addiction or tobacco-related diseases.</li> <li>Without tobacco, families can better afford to keep kids in school.</li> <li>Reduced tobacco production means that more children kept in from schools rather than working tobacco fields.</li> <li>Reducing adolescent smoking reduces the risks of learning disabilities and of cognitive impairment later in life</li> </ul>
5 GENDER EQUALITY	<ul> <li>Tobacco use has been rising among women, as women have been specifically targeted by the tobacco industry.</li> <li>Women face gender-specific health risks from tobacco, such as the disproportionate burden in exposure to second-hand smoke and use during pregnancy.</li> </ul>	Tobacco control measures can stop the rise in tobacco use among women and girls, and also reduce problems associated with second-hand smoke exposure.
6 CLEAN WATER AND SANITATION	Both tobacco consumption and production cause: • Water pollution. • Cigarette butts are the most widely littered product globally, often dumped into oceans, lakes and other water sources, which causes toxicity due to arsenic, lead, nicotine and ethyl phenol are leached into aquatic environments • Tobacco growing is water-intensive and disperses chemicals into nearby waterways, contaminating even deep groundwater.	Tobacco control provides a comprehensive approach in achieving the goal of having clean water and sanitation. The reduction in tobacco use will result in less littered cigarette butts, and less chemical contamination of waterways
	<ul> <li>The tobacco consumption:</li> <li>Unable the common people to buy sustainable source of energy e.g. L.P.G. etc.</li> <li>Like factories effect our environment, same way tobacco smoking does.</li> </ul>	<ul> <li>Tobacco Control will help in:</li> <li>Energy efficiency and increase use of renewables.</li> <li>Maintaining and protecting ecosystems allow using and further developing hydropower sources of electricity and bioenergy.</li> </ul>
8 DECENT WORK AND ECONOMIC GROWTH	<ul> <li>Tobacco farmers are often trapped in a cycle of indebtedness towards the tobacco industry, as they are exploited and forced to sell tobacco leaves at fixed low prices.</li> <li>Tobacco farming uses child labor, taking children away from school.</li> <li>Tobacco growers are moreover exposed to the health risk posed by "green tobacco illness" due to nicotine toxicity in handling tobacco leaves</li> </ul>	<ul> <li>Tobacco control can:</li> <li>Avoid losses to productivity and GDP which result from "premature mortality, sick leave and unwell workers who remain on the job but perform below capacity.</li> <li>Also advance better and safer working conditions, as workplaces become smoke-free spaces.</li> <li>Supports families to shift from tobacco growing, and the "debt-bonded and child labor it often entails," to alternative economic activities which can be more lucrative and do not harm growers' health.</li> </ul>
9 INDUSTRY, INNOVATION ANDINFRASTRUCTURE	The manufacturing, distribution and/or sale of tobacco or tobacco-related products; entities working to specifically further the interests of the tobacco industry through: • lobbying, advertising, legal advice or similar activities; • Entities being funded, supported or influenced in their governance by tobacco-related entities; • Entities having tobacco industry or their representatives among their members.	Effective tobacco control measures require quality and up-to-date research, and the ability to harness innovations in technology, by adapting to new platforms (e.g. social media) and disciplines (e.g. behavioral science) in order • To raise awareness. • Support cessation and unmask tobacco industry tactics.



	Tabagan uga ia biabagtan ang	
	Tobacco use is highest among:	Tobacco control can close gaps in inequality by:
	• The poor.	<ul> <li>Increasing Tobacco taxes which will reduce consumption most among the poor, especially</li> </ul>
<b>10</b> REDUCED INEQUALITIES	• Those with low literacy rates	when revenues from taxes are reinvested into
	• Those with a mental health condition.	disadvantaged communities.
	Those already facing social disadvantage, living	Reducing tobacco use through effective tobacco
	in neighbourhoods that are unsafe or with limited recreation or with limited access to health	control measures as provided in the WHO FCTC
	services.	will improve health and increase opportunities
		in education and labor, among others, which can further reduce inequalities
	Tobacco smoke causes:	Tobacco control helps to produce safe and
<b>11</b> SUSTAINABLE CITIES	Lowering and degrading air quality	sustainable cities and communities by:
AND COMMUNITIES	Compromising the safety of housing,	Reducing pollution from second-hand smoke and
H .	workplaces, transport systems and public spaces.	disposed cigarette butts.
	Globally, 570,000 children under five die	Implementing tobacco taxes as mandated by the
	each year from respiratory infections, such as	WHO FCTC can provide additional, sustainable
	pneumonia, that are attributable to indoor and	sources of funding for health care and other social causes.
	outdoor air pollution and second-hand smoke.	
	Tobacco consumption generates:	Tobacco control can enhance responsible consumption and production by:
	• Tons of waste and releases thousands of chemicals into the planet's air, water and soil.	Reducing tobacco use and its resultant waste.
12 RESPONSIBLE CONSUMPTION	Cigarette butts that are the most discarded	Farmers shifting from tobacco production toward
AND PRODUCTION	waste item worldwide, amounting to 1.69 billion	activities that are friendlier to people and planet.
$\sim$	pounds of toxic trash each year.	Supporting tobacco users to quit or reduce
	Indoor Particulate Matter (PM)	consumption and non-users to never start.
	Smokers are at higher risk of dying from	
	cardiovascular disease and lung cancer, because	
	air pollution "combines synergistically with cigarette smoking for mortality.	
	Tobacco production, including growing and	The implementation of tobacco control and climate
19 CLIMATE	curing, causes:	action can help:
13 CLIMATE	Aggressive deforestation.	<ul> <li>In raising awareness and provide solutions to</li> </ul>
	Increased greenhouse gas emissions (e.g.	climate change, as measures like the support
	carbon dioxide and methane), global warming	for alternative economic livelihoods for tobacco
	and changes in rainfall	growers.
	Irreversible biodiversity loss.	• Tobacco cessation can help tackle the problem of climate change.
	•Tobacco is a major cause of marine pollution	Tobacco control can reduce water pollution and
	and toxicity, causing harm to aquatic life.	improve aquatic life. The WHO FCTC provides a
	Cigarette butts is the most common single	means by which to reduce tobacco production and
<b>14</b> LIFE BELOW WATER	debris item collected representing 15% of the	use, which will help reduce water pollution and protect life under water.
	total debris which are harmful to beaches and oceans, and harm aquatic life, including marine	protect me under water.
	and freshwater fish.	
	Pesticides and agrochemical residues from	
	tobacco growing pollute nearby waterways,	
	jeopardizing not only clean water for human use	
	but also the welfare of aquatic organisms.	
	Tobacco is one of the major causes of:	Tobacco control can improve life on land by
15 LIFE ON LAND	Deforestation	Reducing and preventing further environmental
ON LAND	Soil and land degradation.	damage
	• Stripping off the soil nutrients Destructive forest fires.	Supporting economic alternatives to tobacco growing under Article 17 of the WHO FCTC
	Changing of local streams from permanent to	Contribute to the reduction of tobacco production
	seasonal.	and use, which will in turn, contribute to the
		protection of land resources and help restore biodiversity, and thereby, improve life on land.
		biouversity, and thereby, improve me of fand.



	Tobacco industry interference weakens institutions and the rule of law by interfering with:	Tobacco control promotes good governance and strong institutions. The implementation of the WHO FCTC can thus promote:
	Policy making	Enhancing capacities for intersectoral
<b>16</b> PEACE, JUSTICE AND STRONG	By aggressive lobbying	engagement.
AND STRONG INSTITUTIONS	• Hijacking the legislative process	<ul> <li>Conflict of interest management</li> <li>Promoting greater transparency and accountability</li> <li>Reducing corruption.</li> <li>Placing stronger protection against undue interference in policy making, and progress in combating organized crime (with respect to illicit trade of tobacco products).</li> <li>Strengthening the legislative and oversight capacities of lawmakers and parliamentarians</li> </ul>
	Tobacco industry partnerships with government and other institutions form part of its public relations strategy, designed to:	• Parties must protect public health policies from the commercial and vested interests of the tobacco industry.
17 PARTINERSHIPS FOR THE GOALS	• Enhance their image, by lending them credibility and legitimacy, and thereby sending a deceptive message that their products are safe and benign.	• The implementation of Article 5.3 will ensure compliance with the foregoing obligation, including the rejection of partnerships and other agreements with the tobacco industry.
	• Corporate social responsibility (CSR) contributions and activities, to gain access to high-level officials, which allows them to help in crafting policies that are in line with their commercial interests.	• Full compliance with Article 5.3 of the WHO FCTC ensures transparency and that policies adopted and implemented are in line with the standards provided in the treaty.

# How WHO Global Conference on NCDs Pursuing Policy Coherence to achieve SDG Target 3.4 On NCDs (Montevideo, Uruguay, 18-20 October 2017)?

### MONTEVIDEO ROADMAP 2018-2030 ON NCDs AS A SUSTAINABLE DEVELOPMENT PRIORITY

WHO Global Conference on Noncommunicable Diseases

Pursuing policy coherence to achieve SDG target 3.4 on NCDs

(Montevideo, 18-20 October 2017)

The draft Outcome Document "Montevideo Roadmap 2018-2030 on NCDs as a Sustainable Development Priority" outlines the commitment of the Heads of State and Government, Ministers and representatives of State and Government, in the following:

- Reinvigorating political action.
- Enabling health systems to respond
  more effectively to NCDs
- Increasing significantly the financing of national NCD responses and international cooperation
- Increasing efforts to engage sectors beyond health
- Seeking measures to address the negative impact of products and environmental factors harmful for health and strengthen the contribution and accountability of the private sector
- Reinforcing the role of non-state actors.

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#### What is the multi-sectoral action [MSA] led by multiple stakeholders for tobacco control?

- Tobacco control provides a good example for the need and the potential impact of multi sectoral action in NCD prevention and control.
- Effective tobacco control involves not only addressing it at the individual level (preventing use by individuals, helping users to quit) but also leveraging MSAs to address production, trade, taxation, and implementation of tobacco control laws.

### What was the Baseline measurement of SDGs in 188 countries in 2015?

Name of the Country		SDG Index
Iceland-1		85
Singapore -2		85
Sweden -3		85
UK-5		82
Japan-27		76
U <mark>SA -28</mark>		75
India -143		42
Central African Republic- 1	88	20

### What integrations have been done with developmental agenda?

- International Labour Organization (ILO) ILO is an observer to WHO FCTC. In 2019, endorsed its new integrated strategy for tobacco sector.
- It aimed to end ILO's involvement in tobacco industry CSR
   schemes.
- ILO tried to cut the financial ties with tobacco companies because this industry exploits labour and leaves the farmers in poverty trap. ILO also ended its PPP with ECLT and JTI.
- 2. WTO (World Trade Organizations)- There was a legal challenge posed by tobacco industry to oppose plain

packaging of tobacco products in Australia. But in 2018, the WTO panel decided that Australia's policy for plain packaging was consistent with WTO Laws. It was accepted on the grounds that Australia aimed to improve public health by reducing tobacco consumption.

- **3.** Role of Environmental Health Agencies : Conduct variety of activities to control Tobacco exposure through enforcement of local codes, ordinances and statues restricting tobacco use.
- Providing educational resources and creating awareness on tobacco cessation.

# What are the initiatives undertaken by Ministry of Health and Family Welfare for attaining Tobacco related SDG's?

- Strengthening National Tobacco Control Policy
   Although, many activities have been going on for tobacco control viz. a dedicated tobacco control program with many components, NCD program and other related program but now there is a need to focus and strengthen the tobacco control policy with which we can not only attain sustainable development goals but also a total endgame of tobacco.
- 2. Revisiting National Tobacco Control Programme and revision of operational guidelines
- Mapping of all the activities in ministry and different state governments

- Accelerating agendas of NTCP in the states and districts and covering all its components
- Focussing on 2003 amendment.
- Access the monitoring of SLCC and DLCC through Health Management Information System.



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## What can be done to achieve SDG's by focusing on tobacco control?

- Strengthening national tobacco control and NCD policies, in addition to reorienting health systems to address prevention of NCDs, most notably through tobacco control.
   Implementing WHO Best Buys-Tobacco taxation is the
- subject of FCTC Article 6 and best practice guidelines on implementation were approved by all Parties to the treaty in 2014.
- Research that cuts across disciplinary boundaries and is embedded within the implementation of cross-cutting policies is critical in ensuring that efforts to achieve SDG targets in one sector are optimized to support achievement of targets in another – recognizing that the inherent contradictions within some of the SDGs (notably those related to economic growth and environmental sustainability) will need to be acknowledged and addressed.
   Systems approaches for localizing the SDGs: co-production of
- place-based case studies, in accordance with MSAP.

#### What can people working in tobacco control do to increase awareness of the SDG's and ensure further action?

For the SDG's goals to be achieved, everyone needs to do their part: "Governments, the private sector, civil society and people like you."

- 1. The governments have the primary responsibility for followup and review, at the national, regional and global levels, in relation to the progress made in implementing the Goals and targets so far and plan for next activity.
- 2. The essential role of national parliaments is through their enactment of legislation and adoption of budgets and their role in ensuring accountability for the effective implementation of commitments towards SDG's.
- 3. Governments and public institutions should work closely on implementation with regional and local authorities, sub-regional institutions, international institutions, academia, philanthropic organizations, volunteer groups and others.
- 4. Vital roles for civil society include:
- Increasing public awareness of the SDGs and governments' commitment to their implementation; developing appropriate national or international coalitions to ensure support for the SDGs [(these may be subject-specific, for example, on tobacco control (as with the Framework Convention Alliance) or more broadly based, for example, on reducing NCDs)];
- Ascertaining what governments are doing about the SDGs both in specific sectors and across government;
- Monitoring and reviewing progress; and, when appropriate, reminding governments of their obligations and the need for plans, programmes and reports;
- Drawing continuing attention to the potential to address not only tobacco and NCDs but also many other SDGs and targets through increase in tobacco taxes, which remain the single most effective means of reducing tobacco use.
- Further promoting awareness that tobacco taxation can play an important role in financing action on the SDGs; and maintaining pressure for strong action on tobacco and comprehensive approaches to tobacco control, consistent with the commitments from governments set out in both the SDGs and the WHO FCTC.

## EXPERTS COMMENTS



There is a direct and indirect link between all the 17 SDG goals and tobacco control and the governmental commitment is integral to achieve tobacco control. There is an urgent need to adhere with WHO Framework Convention on Tobacco

Control(WHO-FCTC). Most importantly, the demand for political courage to progress further on the END game is needed.

Dr Mira B Aghi, Behavioral Scientist Communication Expert



It depends upon the tobacco control professionals on how they project the advancement in tobacco control and take this as an advantage in attaining a sustainable development goals in every area. In this way, we will definitely succeed in achieving the targets of

sustainable development goals that will go a great way in multi sectoral and real advancement in tobacco control.

Dr PC Gupta, Director of Healis - Sekhsaria Institute of Public Health, Navi Mumbai



Tobacco itself is a biggest risk for noncommunicable diseases as it accounts for 70-80% mortality everywhere. Tobacco control is related to almost all the SDG's. There's a need that countries focus on tobacco control and then they might

achieve the SDG's targets. There is need to enhance the collaborations with tobacco control organizations. All the departments and health sectors needs to come together and work for a common goal. Sdg's concern everybody and the entire global and not only health economy but a lot of other things depend upon this.

Dr Jagdish Kaur, Regional Adviser (Tobacco Free Initiative), WHO SEARO office



In 2015, the United Nations has formally adopted implementation of FCTC as an important goal to achieve sustainable development goals which is a plan to eradicate global poverty. United Nations made it very clear that SDG's formally

recognize the negative impact of tobacco consumption on health, wealth and development. UN wanted all the member countries to commit to combat the ongoing tobacco epidemic especially through the implementation of WHO FCTC.

Dr Rana J Singh, Deputy Regional Director, NCD & Tobacco Control, The UNION SEA Office, New Delhi







#### Vendor licensing to regulate sale of tobacco products: Tamil Nadu

The health department, in coordination with the police and local administration departments, has launched a two-month drive to check the sale of banned, chewable tobacco products such as gutka and pan masala. In this line, the need to implement vendor licensing is being reiterated as it was the next step in tobacco control which will further help in reducing the availability and accessibility of tobacco products and also limit the density of tobacco retailers in the community, schools, colleges, parks and hospitals.

## Parliament needs to take up the pending amendments in Tobacco Control Laws

The country is reporting over 13 lakh deaths every year due to disease, mainly cancer, caused by the consumption of tobacco products such as gutkha, beedi, supari, cigarettes, etc. The implementing agencies should come forward and take a stand in declaring tobacco a classified product, so that the highly hazardous product be sold with reasonable restriction.



## Legal action to be taken against the tobacco products sold by minors: Faridabad

The state government has urged the authorities to keep an eye and take legal actions against the tobacco products especially sold by minors. In addition to this, the government will also monitor the implementation of COTPA 2003 and anyone who will be found guilty will have to pay the fine according to the provisions of the act under various sections.



#### State to collect fine for Smoking in Public Places: Madhya Pradesh

The implementation of Cigarette and other Tobacco Products Act (2003) will be monitored strictly in the Narsinghpur district of Madhya Pradesh. Under this the state authorities will collect 200 fine if anyone found smoking in public places.



#### Hyderabad restaurants go smoke-free for health & wealth

The harmful effects of cigarette-smoking should not come across as news, even to smokers. During the Covid-19 pandemic, lung and respiratory complications were reported in many patients. Hence, more restaurants and hotels in Hyderabad are not permitting smoking on their premises to attract more customers and business.



## Surrogate ads face stricter rules

The Advertising Standards Council of India (ASCI) has brought in more stringent rules to clamp down on surrogate advertising of tobacco and liquor, as distribution of these new brand extensions has become easier with the boom in e-commerce.











## Smoking-related cancer twice as prevalent among poor in England

According to the Cancer Research UK, smoking causes almost twice as many cancer cases among the poor than the welloff and underlines the close link between cigarettes and deprivation. Although, the overall cancer rates are higher among the wealthy but smoking and its cancers are now concentrated among the poor, the research suggests.



### Virtual Conference 5th National Conference on Tobacco or Health (NCTOH)

Multisectoral convergence for tobacco-Free India by2030: Leading the way towards SDGs

25th – 27th September 2021 PGIMER, Chandigarh

### Register at: www.nctoh2021.com

(f) @nctoh2021 (y) @nctoh2021

## Anti-tobacco department to resume drive to prevent sales of cigarettes near schools: Noida

With educational institutions set to resume in-person classes, the district tobacco control cell (DTCC) of Guatam Budh Nagar will resume its vigilance around them to prevent sale of tobacco and other products.



Send us your feedback, comments and suggestions at rctcupdates@gmail.com,

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#### WHO reports progress in the fight against tobacco epidemic

According to a WHO report, more than half of all countries and half the world's population are now covered by at least two MPOWER measures at the highest level of achievement. This reflects an increase of 14 countries and almost one billion more people since the last report in 2019.



#### Law no deterrent for Chandigarh clubs serving hookah

The Chandigarh Administration has already imposed a ban on serving of flavoured hookahs, including tobacco molasses containing nicotine, for smoke or consumption in hotels, restaurants, bars, taverns and hookah bars. However, many bars and clubs have repeatedly failed to adhere to the directions. Regarding this, a case was registered under Sections 188, 269 and 270 of the IPC and Section 58 of the Disaster Management Act, 2005 on August 1 and sealed the club for three days.



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