

## To Prevent Tobacco-Related Deaths: Shift Advocacy-Focus from Tobacco Industry to Governments

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### Abstract

The major impact of tobacco epidemic has been the global burden of deaths- ~8 million annually. An analogy can be drawn from the corona pandemic in tobacco control about the perceived efficacy of the governments "to bring a change"- to prevent deaths due to tobacco-related diseases. The tobacco control advocates should consider changing their strategic working for a paradigm shift in focus of their advocacy from tobacco industry (TI) to the governments to demand weaning off of the tobacco industry instead of continuing to struggle with largely ineffective measures till date. While it may be perceived confrontational with a potential threat to collaboration, the advocates should not hold back in the interest of public health and preventable loss of lives.

**Keywords:** Tobacco; Deaths; Advocacy; Industry; Government

### Abbreviations

TI: Tobacco Industry; FCTC: Framework Convention on Tobacco Control; COP: Conference of the Parties; NGOs: Non-Governmental Organizations; COVID 19: Corona Virus 2019

### Introduction

The corona pandemic has changed our world and the way we have lived, may be forever! The burden of the diseases and the impact in terms of lives lost and recession has been overwhelming with ~13.5 million cases and over half a million deaths till date [1] and therefore, people did not resist the lockdown and other control measures implemented by the respective governments globally. Introspecting constantly during this public health crisis, I have also been questioning my colleagues working in tobacco control countrywide as to why there cannot be a similar sensitivity and uprising to demand a concrete action from the governments to prevent ~8 million deaths annually that are tobacco-related [2].

Hence, we were excited about the WHO FCTC [3] and its ratification by most of the collaborating member countries' governments to control tobacco effectively globally, now through a collaborative effort of 180 member countries. The FCTC and its subsequent COPs [4], therefore, have always been concluding its recommendations with one common point on their agenda for future, that is "there is a fundamental and irreconcilable conflict between the tobacco industry's interests and public health policy interests"-the lives and health of the

people; and therefore, the member countries must do within the limits of their capabilities of the governance to control it effectively. The recognized misdeeds of unethical and deceitful TI lead WHO to call for reduction in tobacco usage by 30% by 2030 [5].

### Case Study

In above context, it appears natural for tobacco control advocates, mostly the civil societies (NGOs) to sustain a major thrust to counter TI in an effort to reduce the humungous loss of lives. In India, these have been largely ineffective until the courts endorsed their stand. So, in toto, the courts and not the governments have provided a firm and concrete action that had impactful gains on countering the TI and its tactics [6,7]. But, it cannot be a usual path to travel by the NGOs in view of the uncertainties and the cost to be incurred. Also, why should tobacco control advocates be compelled to go to this path when the governments which control tobacco business through its various governing instruments can easily curb the nefarious and devastating activities of tobacco Industry by their own rights! More importantly, the governments have the prime responsibility to save the lives of its constituents over and above any other influence or gains these may be working for [8].

### Discussion

So, the question is should not the tobacco control advocacy make a paradigm shift, a major one in fact, from being the TI-centric to advocate with the governments that are “the decision makers”!?

But, advocating contrary to the viewpoint of the decision makers in government or pushing them to take a stronger, harsher measure that may potentially affect the “interest of the TI adversely” may be perceived both as a weakness as well as a threat to get out of the favor whatsoever and forever- an access. invites to the meetings or as a contributor, etc.

As such the governments do not have a strong argument to support tobacco industry, e.g. in India, the financial gain in form of revenue earned through taxation on tobacco products plus earnings out of exports to other countries is significantly lesser than their spending on managing tobacco-related diseases through direct- and indirect- spending plus losses incurred on account of productivity losses due to premature deaths [9].

Hence, if the governments that can lockdown their respective countries [10] at the cost of economic recession even “to save the lives from COVID 19”, why should civil societies and other health advocates feel shy in demanding a similar clamp down on TI that is causing many folds more deaths globally. In fact, the Central and the State governments did put a curb on selling chewable tobacco, temporarily though, to prevent spitting in public places in India to prevent spread of Corona [11,12]; and it succeeded too to some extent as tobacco users stayed quit due to its non-availability.

This itself can be the evidence to demand from governments world over to stop TI forever. Probably directing to wean it off in a shorter timeline will be a reasonable way forward to enable: (1) rehabilitation of the workers engaged in tobacco cultivation and TI to take up an alternative occupation; and (2) its users to quit tobacco through the various cessation portals “for free” that has evidence of a higher acceptance.

### Conclusion

So, to conclude, the tobacco-control advocates should change their focus of advocacy from the TI to be government-centric as their advocacy tools to curb the TI have not succeeded so far to achieve a reduction and eventual elimination of preventable deaths due to tobacco use. Demanding a clamp down on TI from the governments appears a simpler but a robust strategy to be impactful.

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