Editorial

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Curbing the tobacco epidemic in the Americas

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Though the devastating health effects of tobacco use are well known, tobacco's negative repercussions extend well beyond the obvious health outcomes. Tobacco consumption creates a significant economic burden on societies because of both the high costs of health care and the associated lost productivity (1). In addition, tobacco use contributes to health inequalities and exacerbates poverty within and between countries through the diversion of resources away from food and other essential needs as well as through foregone income (2).

These and other adverse consequences of the tobacco epidemic disproportionately affect low- and middle-income countries, where more than 80% of the world's smokers now live, including 127 million (or 11.4%), in the Region of the Americas (1, 3). Considering its tremendous health and economic costs, the tobacco epidemic has the potential to undermine both social and economic development.

The global response to tobacco is the WHO Framework Convention on Tobacco Control (FCTC), which has been ratified by 180 countries worldwide and 30 countries in the Americas. The FCTC provides a blueprint for governments to effectively curb the tobacco epidemic by implementing specific evidence-based interventions to reduce consumption. These include: adopting tax and price measures to reduce tobacco consumption; banning tobacco advertising, promotion and sponsorship; creating smoke-free work and public spaces; requiring prominent health warnings on tobacco packages; and combating illicit trade in tobacco products (4). These interventions have been identified as "best buys" in the *WHO Global Action Plan for the Prevention and Control of Noncommunicable Diseases*, which calls for a 30% relative reduction in the prevalence of tobacco use by 2025 (5). Of note, raising taxes has proven to be the single most potent and cost-effective strategy for reducing tobacco use (6, 7).

There is now clear evidence that appropriately structured tax policies can provide the dual benefit of reducing tobacco consumption as well as generating additional tax revenues (8). A recent global study found that increases in tobacco taxation in low- and middle-income countries could prevent millions of deaths while also creating new fiscal space for financing development (9).

Despite the clear path forward set forth by the FCTC and abundant evidence on the effectiveness of increasing taxes to reduce tobacco consumption, taxation remains the least widely implemented FCTC measure (2, 3). This is largely due to industry tactics to block, delay, and weaken tobacco control policies (10–12). In the specific case of fiscal policies, governments often abstain from taking action because of claims propagated by the tobacco industry that higher taxes harm economies by increasing levels of illicit trade and by decreasing tax revenues (8, 11). Published data refute these claims (8, 13). However, the relative paucity of country- and region-specific evidence on the economic aspects of tobacco control limits the ability of health authorities to effectively advocate for comprehensive implementation of the FCTC. This thematic issue of the *Pan American Journal of Public Health* addresses this gap by presenting systematic regional evidence on the effectiveness of tobacco taxes that is consistent with global findings.

The dissemination of regional evidence is a first step in challenging the tobacco industry's unfounded claims about the detrimental economic effects of tobacco control and informing evidence-based policies to reduce national tobacco consumption and the associated burden of disease. It is our hope that health authorities will use the evidence presented in this issue to advocate for effective implementation of the FCTC, in particular its mandates aimed at making tobacco less affordable through increased taxes.

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REFERENCES

1. Guindon GE et al. The cost attributable to tobacco use: a critical review of the literature. Geneva: World Health Organization; 2006.
2. World Health Organization. Systematic review of the link between tobacco and poverty. Geneva: WHO; 2011.
3. Pan American Health Organization. Tobacco Control Report for the Region of the Americas. WHO Framework Convention on Tobacco Control: 10 Years Later. Washington, DC: PAHO; 2016.
4. World Health Organization. WHO Framework Convention on Tobacco Control, 2003. Geneva: World Health Organization; 2003.
5. World Health Organization. Global action plan for the prevention and control of noncommunicable diseases 2013–2020. Geneva: World Health Organization; 2013.
6. United Nations. Addis Ababa Action Agenda of the Third International Conference on Financing for Development. New York: United Nations; 2015.
7. United Nations. Transforming our world: the 2030 Agenda for Sustainable Development. New York: United Nations; 2015.
8. International Agency for Research on Cancer. IARC Handbook of Cancer Prevention: Tobacco Control- Effectiveness of tax and price policies for tobacco control, Vol. 14. Lyon: International Agency for Research on Cancer; 2011.
9. Goodchild M, Perucic AM, Nargis N. Modelling the impact of raising tobacco taxes on public health and finance. Bull World Health Organ. 2016;94(4):250–7.
10. Ross H, Tesche J. Undermining government tax policies: common strategies employed by the tobacco industry in response to increases in tobacco taxes. Chicago: University of Cape Town, School of Economics, Economics of Tobacco Control Project and University of Illinois at Chicago. Institute for Health Research and Policy, Health Policy Center, Tobacconomics; 2015.
11. Alderete M, Gutkowski P, Shammah C. Health is not negotiable. Civil society against the tobacco industry's strategies in Latin America. Case Studies 2014. Buenos Aires Fundación Interamericana del Corazón Argentina; 2014.
12. World Health Organization. Tobacco Industry Interference: A Global Brief. Geneva: World Health Organization; 2012.
13. Chaloupka FJ, Yurekli A, Fong GT. Tobacco taxes as a tobacco control strategy. Tobacco Control. 2012;21(2): 172–80.