

Tobacco control

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1. global health history of tobacco use
2. ...with an inequalities slant (how cig smoking follows the contours of socioeconomic inequalities within countries)
3. implications for tobacco control policy

- *Draw on UK examples that highlight issues for tobacco control globally*
- *Every society has its own unique history of tobacco use*

1. global health history of tobacco use

- **backed by advertising, manufactured cigarettes displace traditional patterns of tobacco use, fuelling rapid rise in consumption - evident first in high-income countries, then globally**
- **common pattern is for existing tobacco users to switch & increase consumption, and new users to take up smoking**
- **lagged health effects of smoking: decades later a sharp rise in smoking-related disease & death to become ‘the single most preventable cause of death in the world’ WHO 2008**
- **smoking epidemic tackled through TC policies which drive down prevalence, particularly when integrated into a comprehensive strategy (FCTC)**
- **run through these stages...**

In early industrialising countries (US, UK, Netherlands..)

- **late 19th century, new tobacco product ('milder' & more addictive) & new technology (machine-made cigs - larger scale, lower cost: 200 cigs per min by machine/200 per hr by hand)**
- **created a market commodity: a cheap standardised product looking for a mass market to sell to...**

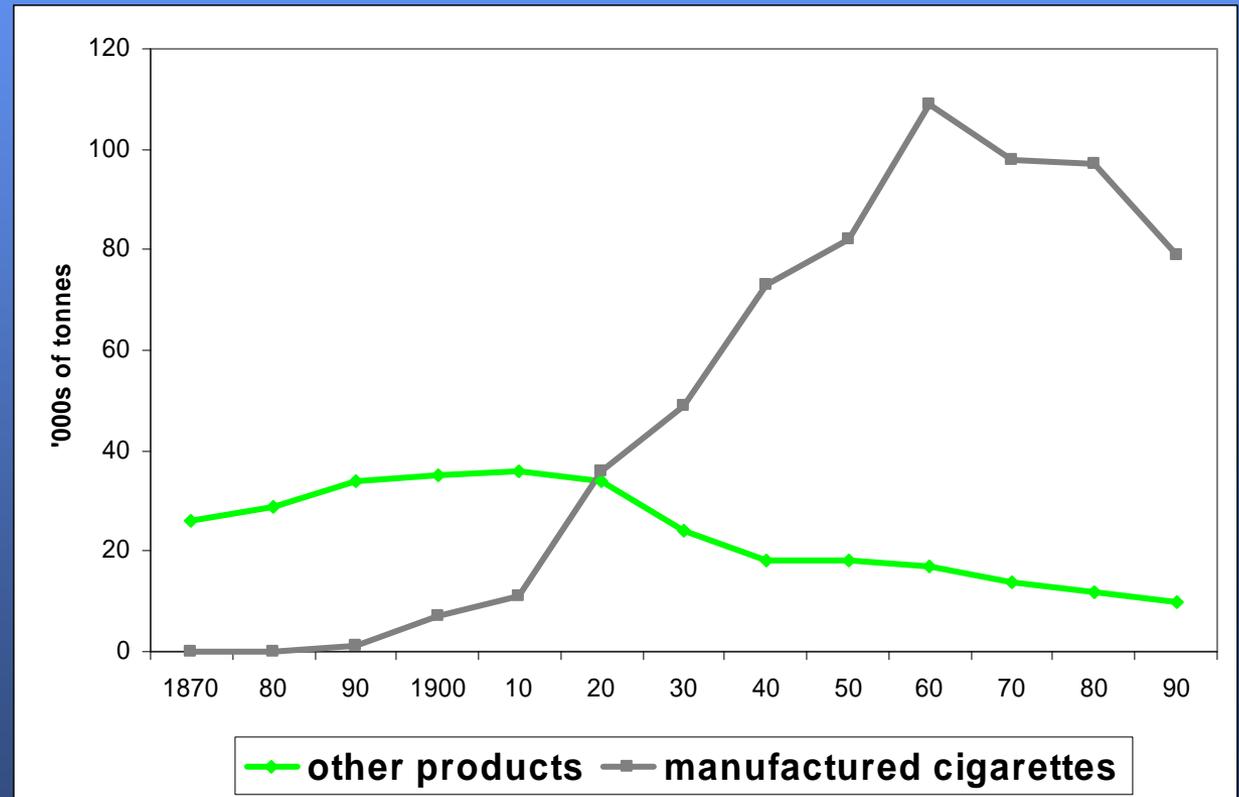
*backed by advertising,
the introduction of
manufactured cigarettes
displaces traditional
patterns of tobacco
use...*

Advert for Pall Mall, 1916



Annual sales of manufactured cigarettes + all other tobacco products (in thousand tonnes of manufactured weight) UK 1870-1990

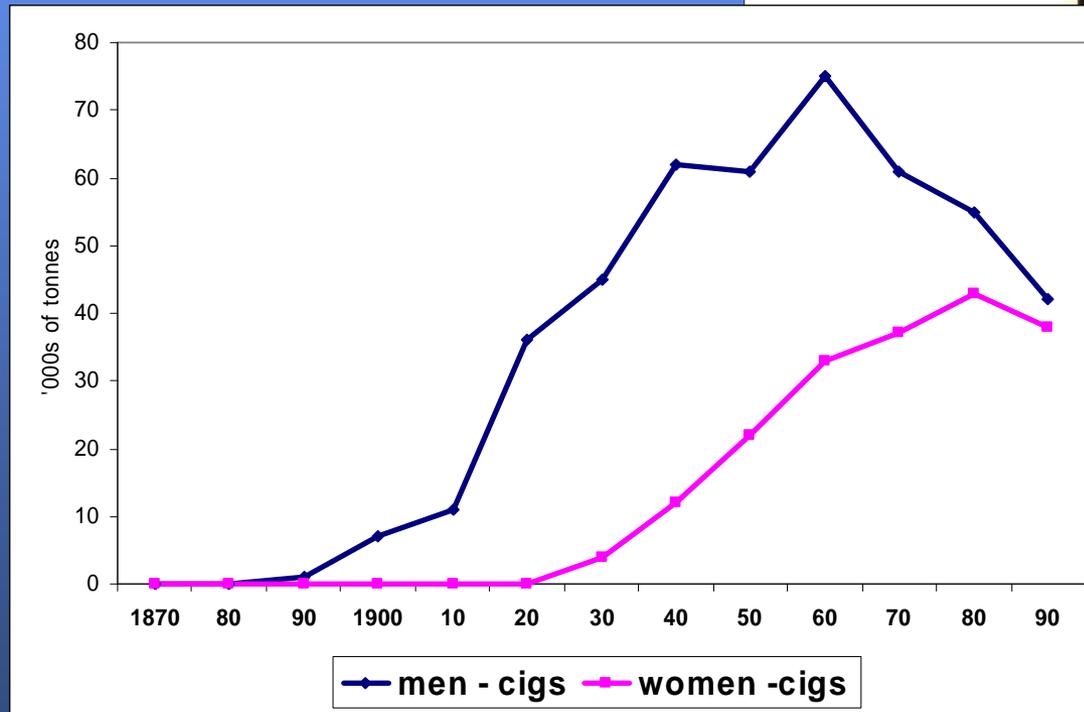
introduction of manufactured cigarettes displaces traditional patterns of tobacco use, fuelling rapid rise in consumption



Source: Wald and Nicolaides-Bouman, 1991

Annual sales of manufactured cigarettes to men & women (in thousand tonnes of manufactured weight) UK 1870-1990

typical pattern is for existing tobacco users to switch & increase consumption, and new users to take up smoking



1928



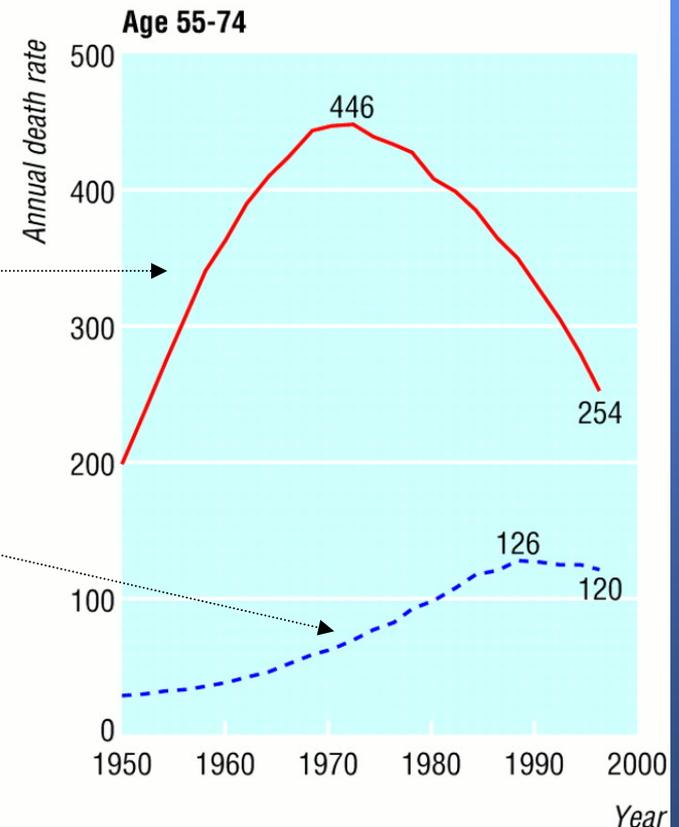
Source: Wald and Nicolaides-Bouman, 1991

lagged health effects: decades later, a sharp rise in smoking-related disease & death

Annual death rates per 100,000 from lung cancer, 55-74yrs, UK 1950-2000

Men

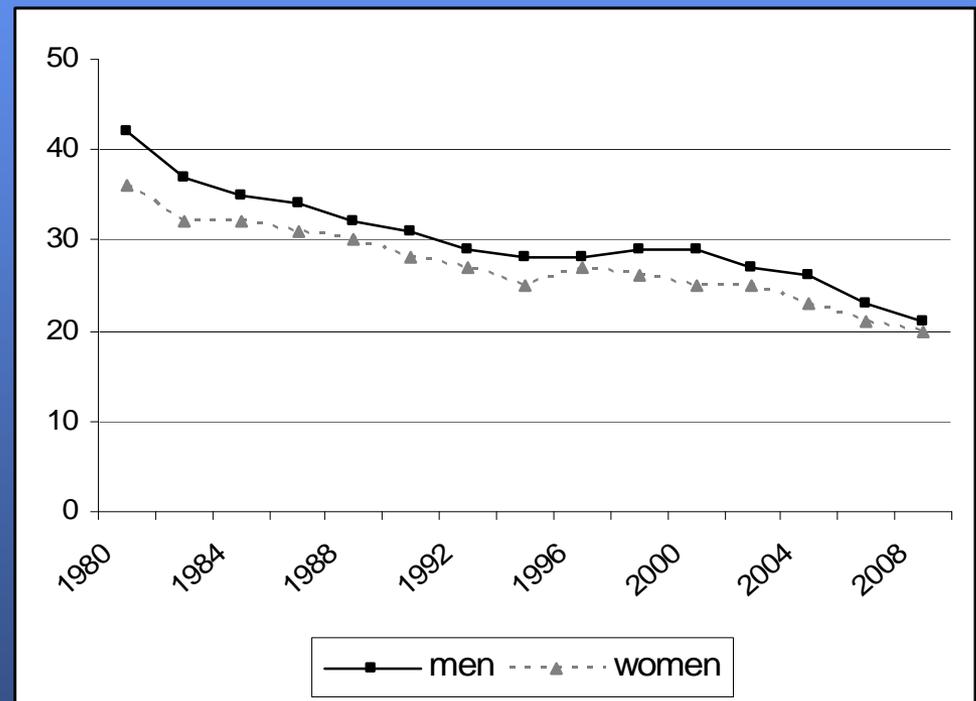
Women



Source: Peto et al. 2000

smoking epidemic tackled through tobacco control policies which drive down prevalence, particularly when integrated into a comprehensive strategy

Prevalence of cigarette smoking among men and women, England, 1980-2008



2. global health history of tobacco use ...with an inequalities slant (how cig smoking follows the contours of socioeconomic inequalities within countries)

part of the global history but harder to evidence & more challenging to address – how over time & across place, cigarette smoking becomes entrenched as a habit of the poor

Lopez et al: model of 'the smoking epidemic'

- ❑ Younger adults in advantaged groups (men, city-living, well-off) take up manufactured cigs first (symbol of power & prestige)
- ❑ Then taken up by younger women & poorer groups → overall prevalence increases (no longer mark of social distinction)
- ❑ Prevalence falls first in advantaged groups
- ❑ As overall rates fall, smoking is increasingly concentrated in disadvantaged groups

- **a model only!**
- **based on high-income market economies in 20th century (companies competing to ‘grow the market’ for cigarettes in ways that increases their market share)**
- **& not middle and low-income countries with cultural & religious practices, undergoing rapid urbanisation & opening up economies to global companies, including tobacco companies**
- **run through stages of ‘smoking epidemic’**

Advantaged groups (men, city-living, well-off) take up manufactured cigs first

...illustrate with patterns of smoking (traditional products and manufactured cigarettes) among men by educational level in Mumbai in early 1990s

Traditional –bidis

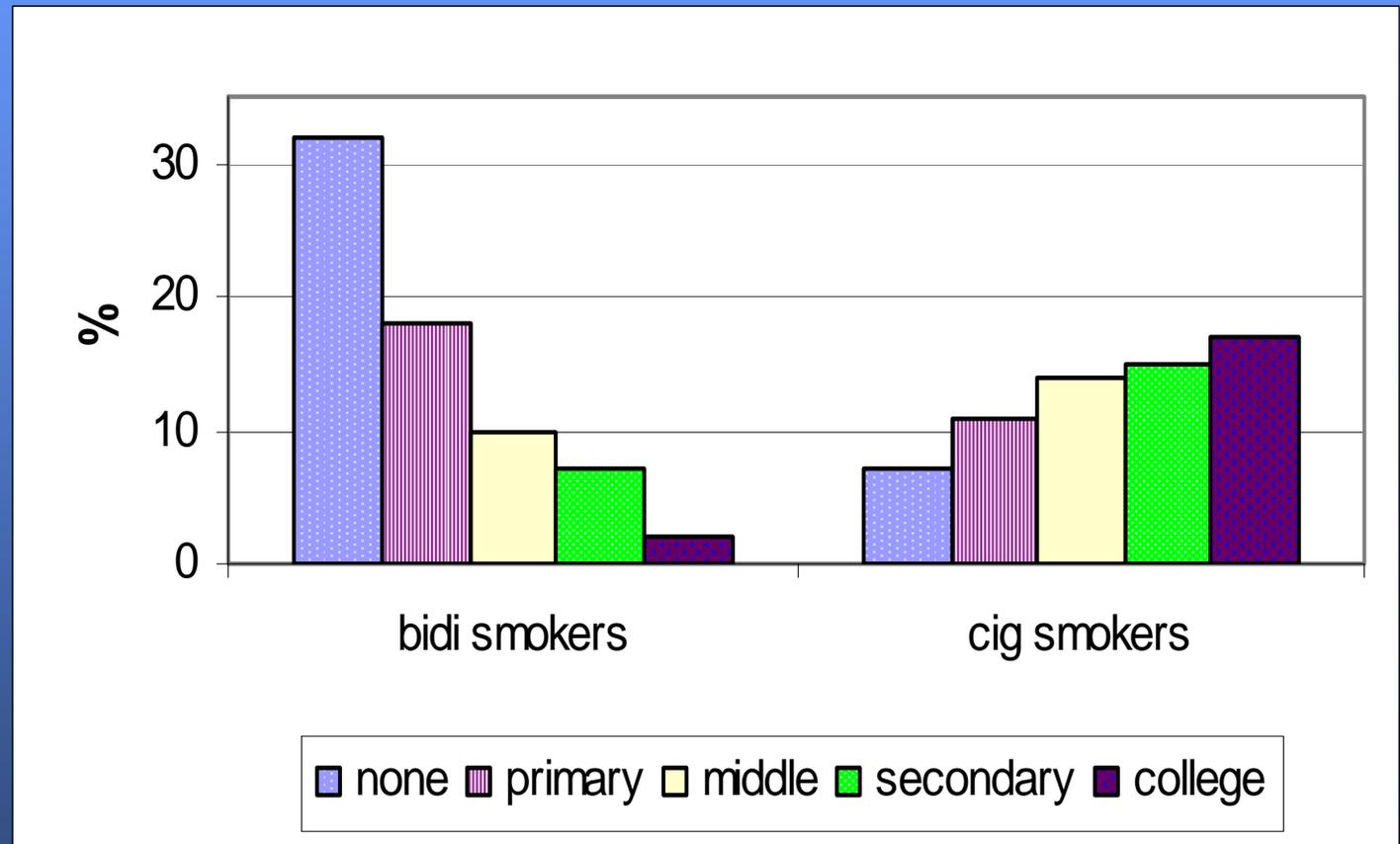


New- manufactured cigarettes



Cigarette advertising in Mumbai in 1990s was 'ubiquitous and associated smoking with aspiration ..' Bansal et al 2005

Prevalence of smoking among men by educational level, Mumbai, 1992-4



Source: Sorensen et al, 2005

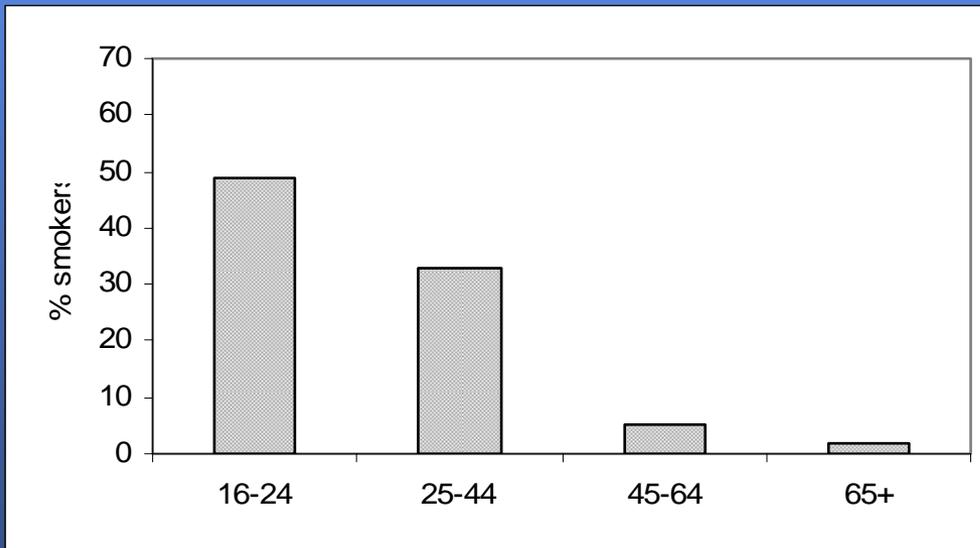
Then taken up by younger women & poorer groups → overall prevalence increases (loses its association with social distinction)

...illustrate with patterns of cigarette smoking among women by educational level in Spain in 1980s

- **Strong cultural prohibitions against female tobacco use in Spain until 1970s**
- **When widening opportunities for women post Franco regime coincided with transnational tobacco companies gaining entry into the Spanish cigarette market**
- **Spending on cig advertising increased 8fold from 1982-88, predominantly through TV advertising**

In Spain by late 1980s, 55% of men and 23% of women smoked cigarettes - among women, marked age differences...

Cigarette smoking among women by age Spain 1987

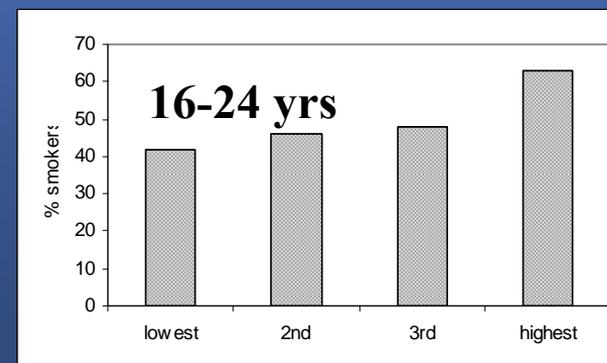
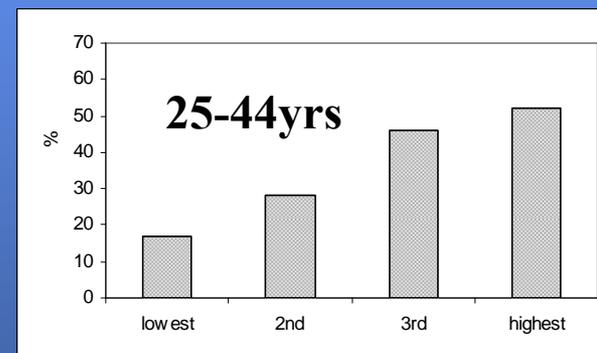
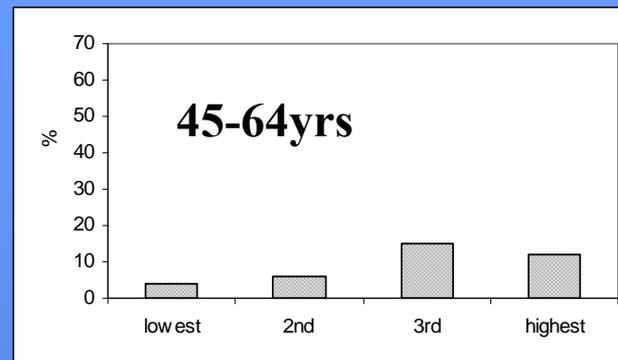


It was younger women (<45yrs) who led the way – rates very low among older women

....younger women from advantaged backgrounds led the way....but prevalence quickly rose among women from less advantaged backgrounds (by mid-1990s, social gradient had reversed)

Cigarette smoking among women by age & educational level Spain 1987

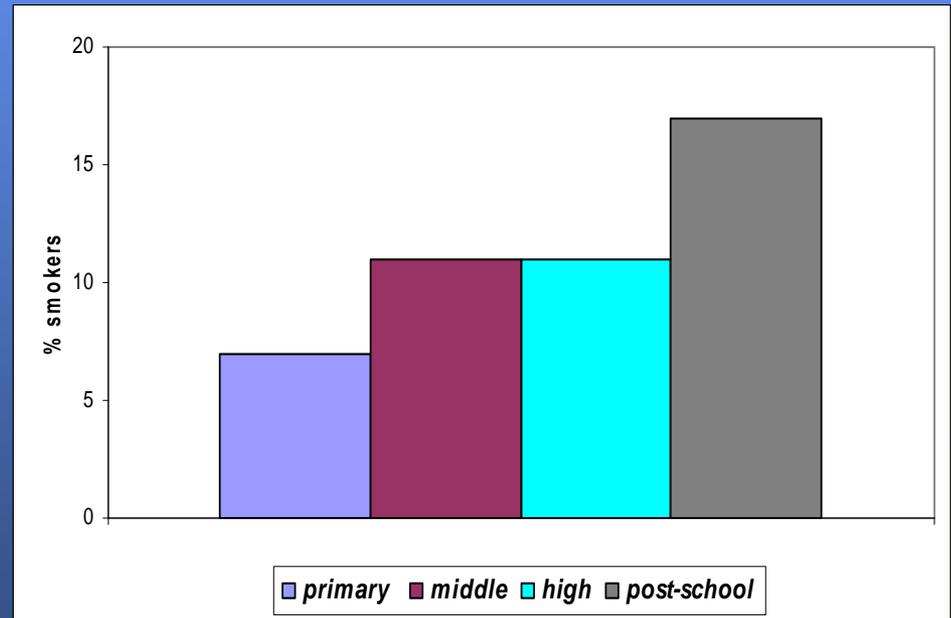
Source: De Onis & Villar, 1991



China – low rates of female smoking ($\leq 4\%$) but will it avoid history repeating itself? Rural-to-urban migrants may capture trends that took decades to unfold in high-income countries

(rates among men over 50% - with highest rates in lowest educational group)

Smoking prevalence among female rural-to-urban migrants in Beijing, China, by educational level, 2002 (average age: 22yrs)

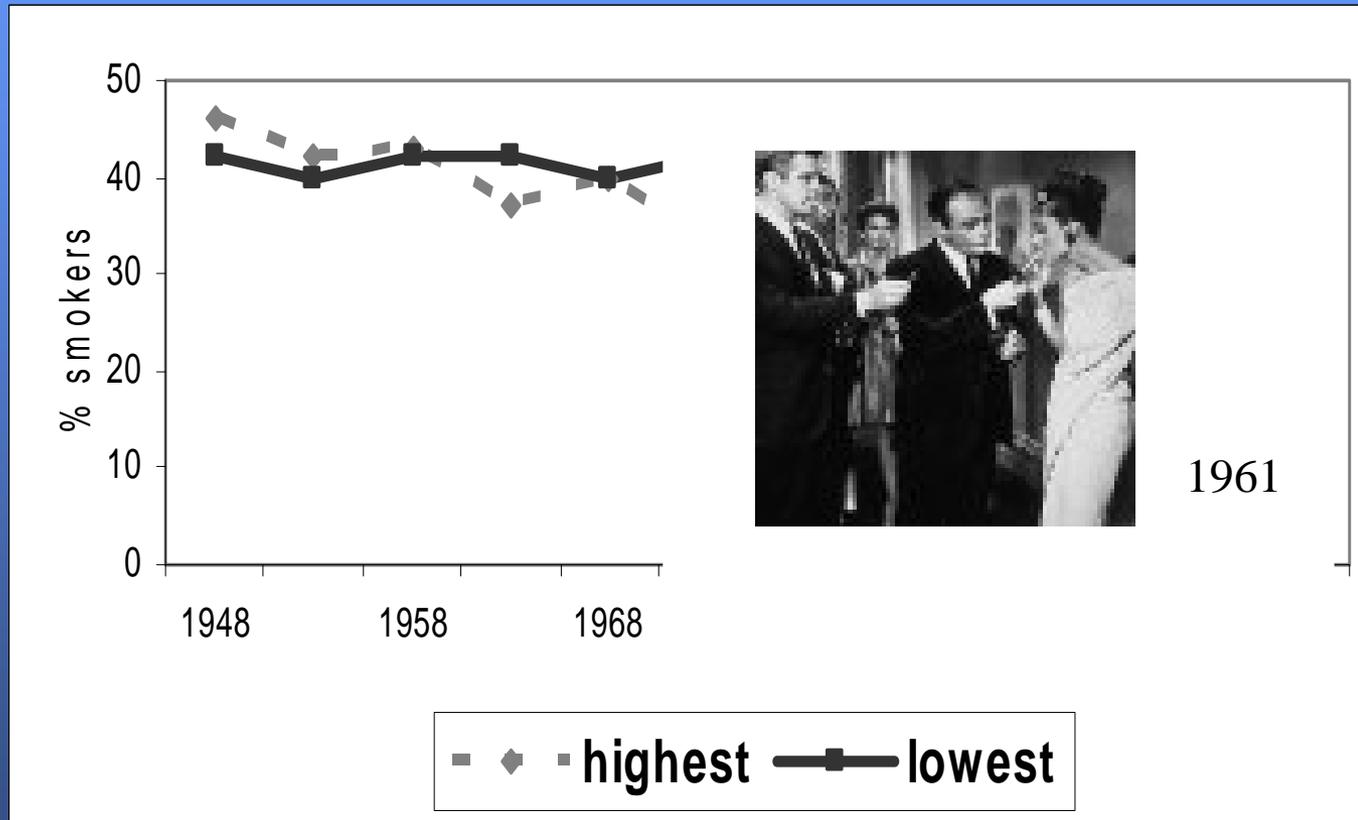


Source: Chen et al, 2004

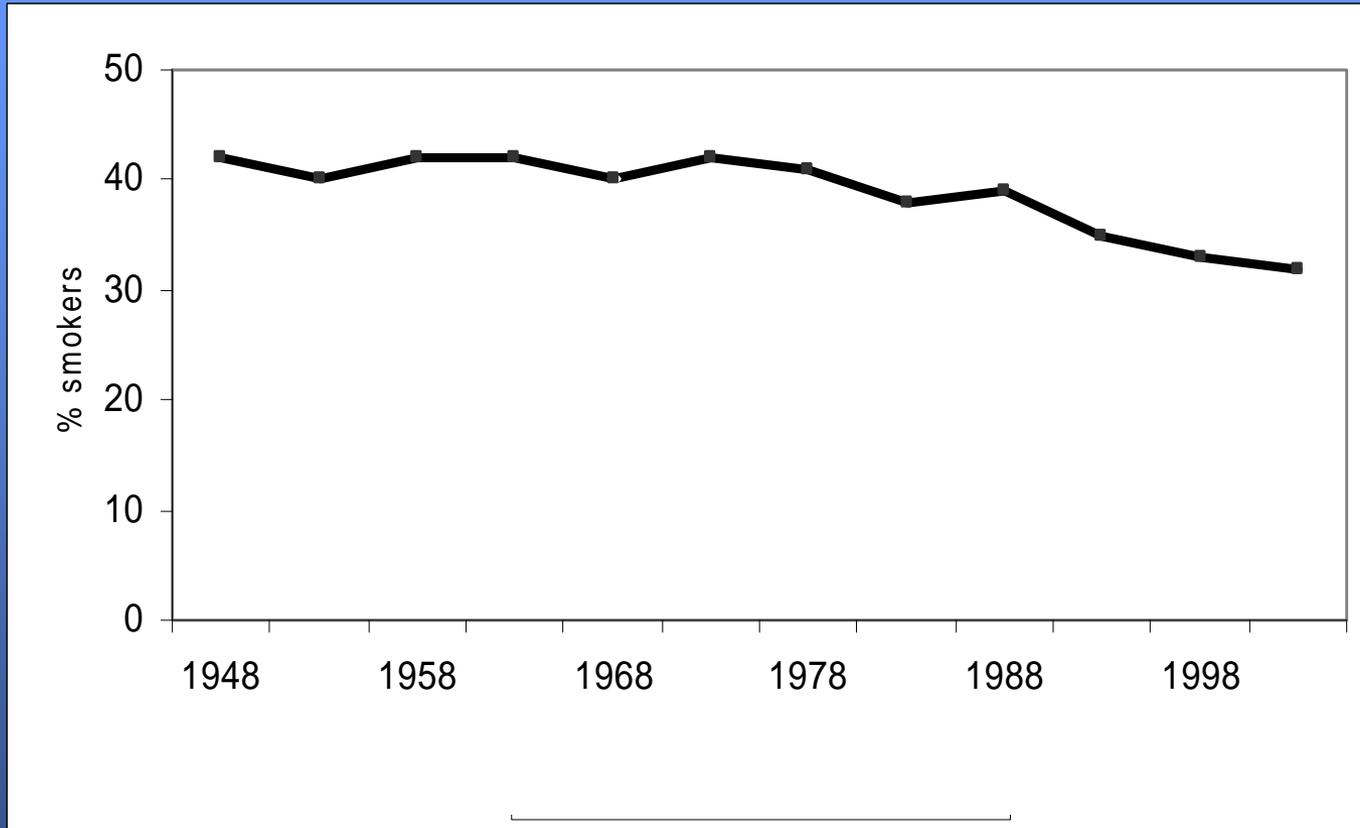
Prevalence tends to fall first in advantaged groups - as overall rates fall, smoking is increasingly concentrated in disadvantaged groups

...illustrate with patterns of cigarette smoking in UK among women from 1940s (longest run of historical data)

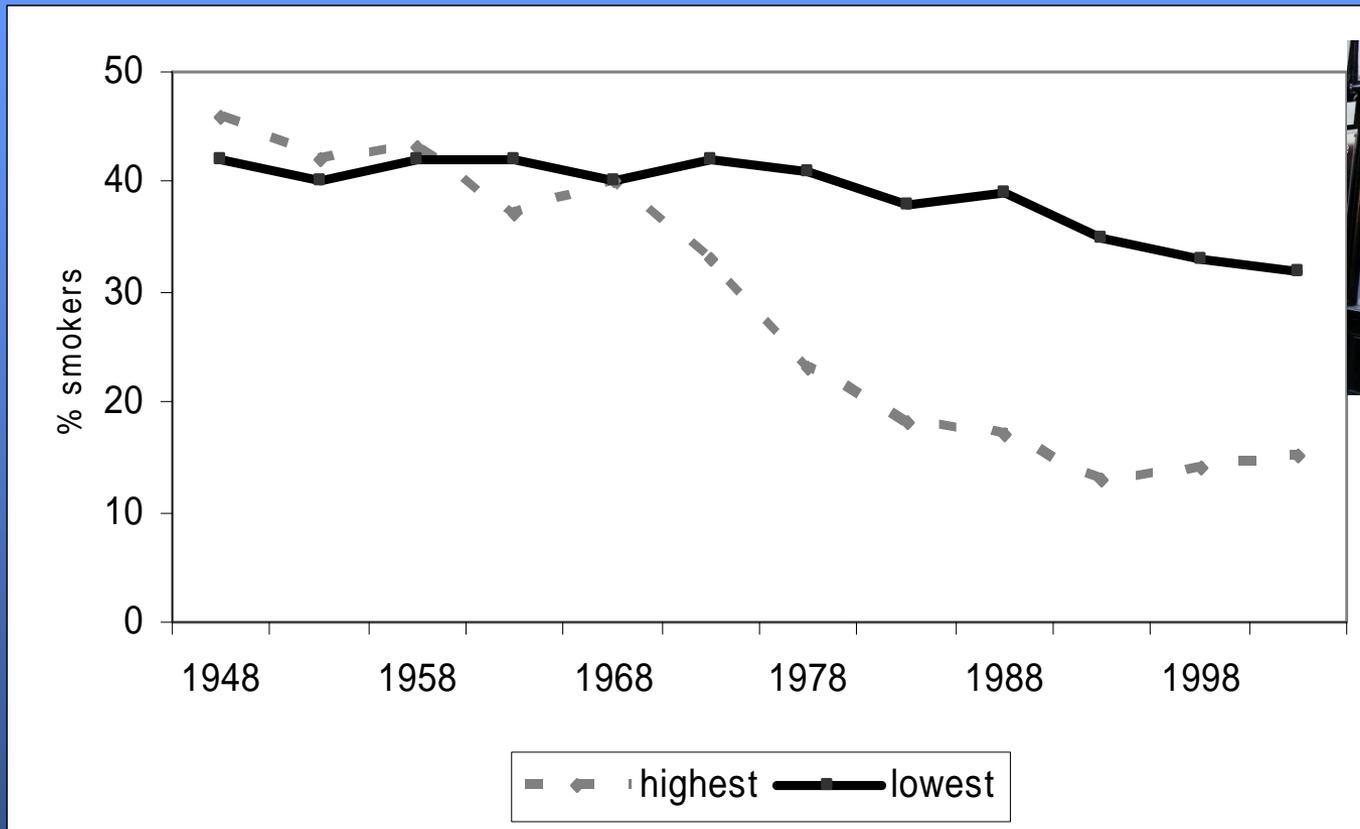
Prevalence of cigarette smoking among women in highest & lowest socio-economic groups, 1948-68



Prevalence of cig smoking among women in the lowest socioeconomic group, 1948-2004



Prevalence of cig smoking among women in highest & lowest socioeconomic groups, 1948-2004



2009



3. implications for tobacco control policy

- WHO Framework Convention on Tobacco Control ‘The Parties to this convention *determined* to give priority to their right to protect health, *recognising* that the spread of the tobacco epidemic is a global problem (and)...*seriously concerned* about the impact on the poor’ (Preamble)
- The global poor – *and* poorer groups within countries

- **Limited evidence on impact of policies on social inequalities in smoking**
- **What does the evidence suggest?**

Weak policies - widening inequalities in smoking?

- Evidence from patterns across high-income societies (Europe, North America etc)
- UK as example - prevalence of cig smoking among men in highest & lowest socioeconomic groups, 1948-2004

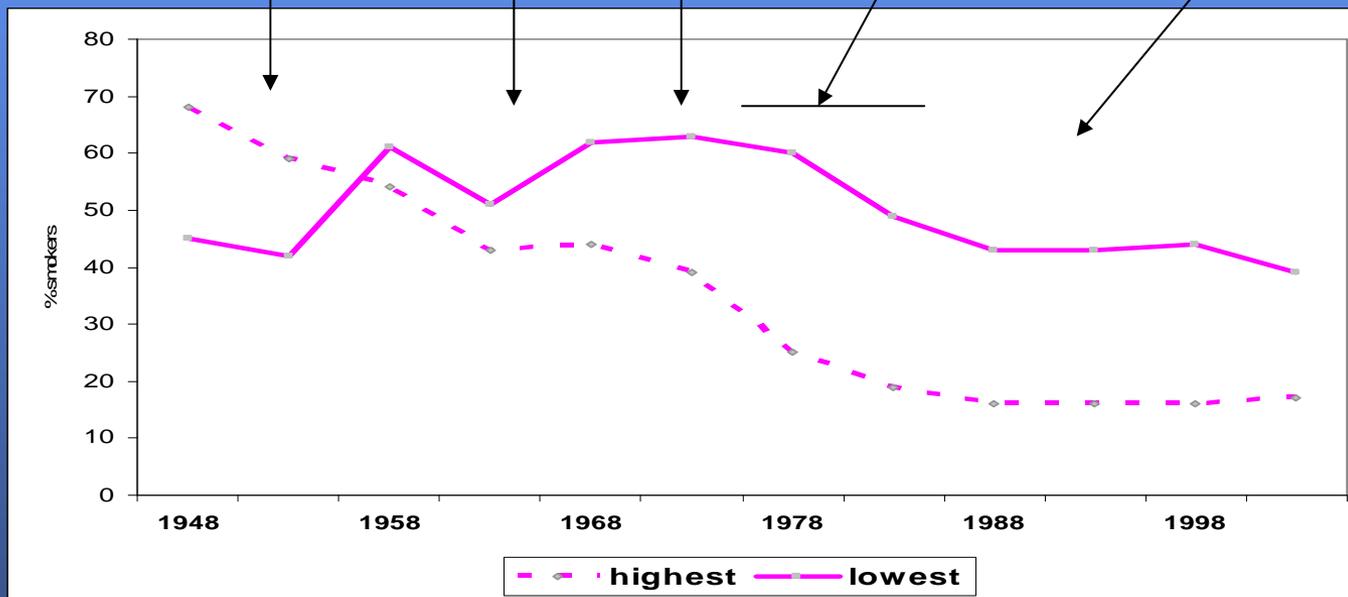
1950: Doll & Hill, Smoking and carcinoma of the lung, BMJ

1969: first major antismoking campaign

1970s: beginnings..1st tv campaign; 1st smoking in pregnancy campaign; 1st health warnings on packs

1965: ban on tv cig adverts before 9.0pm

1980-90s: policies slowly strengthened



Cigarette smoking among men in highest & lowest socioeconomic groups, 1948-2004

Suggests...

- **socioeconomic inequalities will widen in the absence of strong and co-ordinated TC policies –**
- **strong, comprehensive policies are needed both to reduce overall rates *and* to narrow inequalities in smoking**
- **such TCPs now in place in UK - ranked 1st in Europe in 2007 for its TCP**

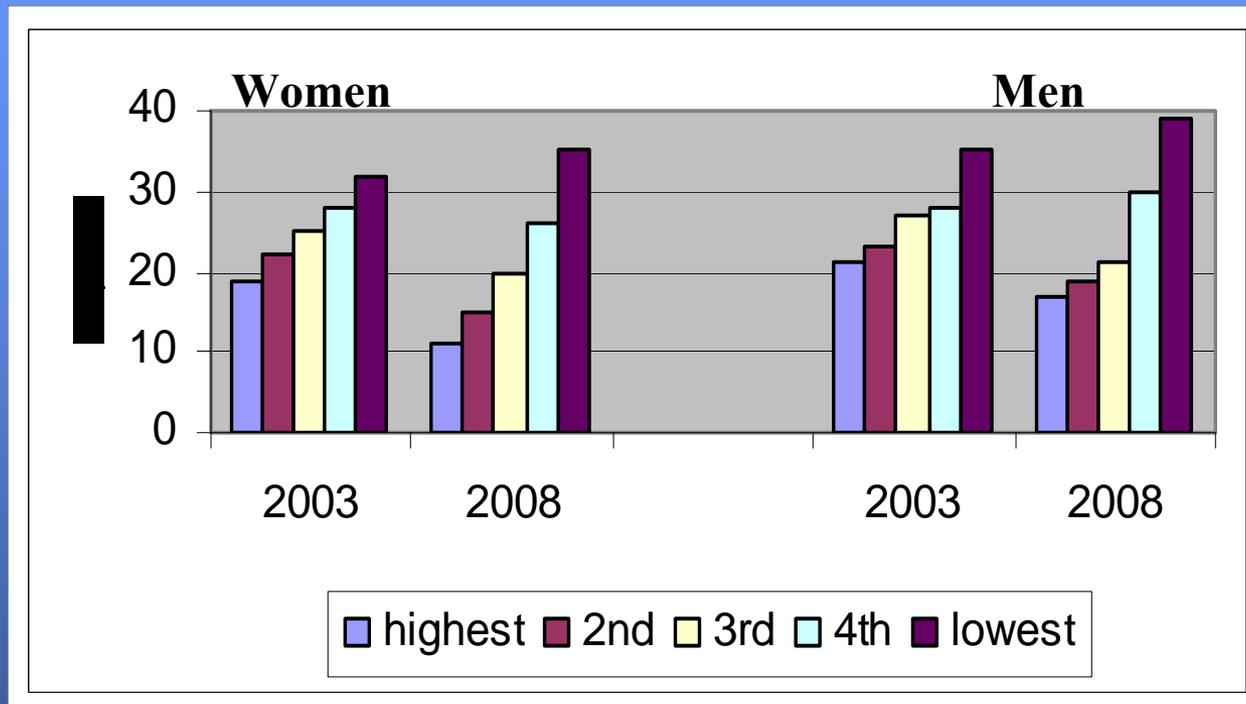
Strong policies – narrowing inequalities in smoking?

(we might expect prevalence to continue to fall in all socioeconomic groups – but to fall faster in poorer groups?)

UK policies over last decade:

- Cig tax increases (1997-2010)
- Bans on smoking in enclosed public places (introduced 2006-7)
- Smoking Cessation Services (from 1999; by 2003, across UK)
- Consumer information (picture warnings from 2008)
- Ad bans extended to branded goods & sport sponsorship (from 2005)
- Picture pack warnings introduced (2008 - graphic pictures of rotting lungs, throat cancer, bodies in morgue)

Prevalence of cigarette smoking among men and women by income quintile, England 2003 and 2008



rates fell – except for poorest groups, where they rose

inequalities in smoking widened across a period of stronger TCP

Suggests that strong, comprehensive policies may be necessary but not sufficient to narrow inequalities in smoking – it may be important to address wider inequalities in people's lives

In UK, inequalities in the living standards of poorer and richer households have widened dramatically since the 1980s – and are continuing to widen. Similar patterns in the US and in many low and middle income countries, including China and India

‘Tobacco use disproportionately affects lower socioeconomic groups in developed and developing countries...Efforts to prevent and control tobacco consumption among disadvantaged groups are not likely to succeed other than through an integrated approach that seeks to reduce underlying social inequities’ WHO 2010 ¹

¹ Blas & Sivasankarakarup (eds) *Equity, Social Determinants & Public Health Programmes*

Conclusions

- **global history of social inequalities in tobacco use is important area to investigate, with insights for TCP**
- **declining prevalence has historically been associated with widening inequalities in smoking - and with weak tobacco control policies**
- **but, on their own, strong policies may not be enough to reduce inequalities in smoking**
- **suggests that TCP need to be embedded in wider policies to reduce inequalities in life chances & living standards**

Thank you