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I Dr. Sharad Vaidya, National chairman, National Organisation for Tobacco Eradication (NOTE India) representing a National federation of 20 NGOS fighting tobacco menace in India since the last 8 years, have the privilege of making the following submission to WHO in respect of FCTC with the following concerns about Tobacco and Health in India and support the FCTC.

National Organisation for Tobacco Eradication (NOTE India) is a federation of 20 organisations in India working for policy changes to control and reduce tobacco and aim at eradication of tobacco from as many homes as possible.

NOTE India at present active in 14 States in the country and is nationally and internationally known for its aggressive advocacy.

NOTE India firmly believes that the only way to counteract the global expansion of tobacco industry is global treaty of United Nations to fight this menace. A legal international framework is therefore a necessity of the day to forestall the epidemic of this century initiated in the last century.

The organization has, no interest in or institutional position on the FCTC. Neither Dr. Vaidya nor NOTE India received any funding for the preparation of this submission.

Introduction

I am proud to say that the Government of India is supporting the FCTC. In fact, the first International Conference on Tobacco-Free Initiative (TFI) was held in New Delhi in 7-9 January 2000.

However, while this conference was going on, Tobacco industry was successfully negotiating with the Ministry of Commerce and the Secretariat of Industrial Licensing to allow Foreign Direct Investment (FDI) and to start 10 cigarette factories in North Eastern States at a cost of US$ 350 million. The reason for the interest in this region is the exemption of cigarette manufacturing from excise duty by the central government. Hence all these small-scale industries, contracted by the multinational corporations, are attempting to form a major manufacturing base in this region and unfortunately getting away with it. All these events are totally against the very basic recommendations by FCTC and WHO.

The above exemption of cigarette manufacturing from excise has been a result of pressure from the multinational cigarette corporations (MNC) and Indian cigarette industry giants with the connivance of the partners of the coalition Government.

World Health Organization’s decision to have treaty for international control on advertisements, and promotion of tobacco is welcome move to reduce the scale of the tobacco epidemic.
There is no doubt that tobacco industry's global efforts to thwart WHO initiative would have serious repercussions on the effectiveness of this treaty. Despite the treaty having honest intentions we fully realise that process of Treaty is essentially a political one. It is therefore necessary to push the Treaty to its logical conclusion particularly because US government's hegemony, which has opposed the treaty and rules the world economy today and likely to continue for the next couple of decades.

This is all the reason why the peoples of the world, need to come together and strengthen the hands of WHO to make the treaty a success. WHO succeeded in eradication of small pox and is in the process of eradicating another scourge of polio, for the sole reason that these were not a political or trade issue.

1. Literacy and lack of awareness but a ray of hope

With a literary rate of about 56%, creating awareness is a stupendous task for India. However, there is awakening in urban India and a number of State governments are in the process making laws, some courts have passed orders to regulate smoking in public.

The magnitude of illiteracy, poverty, sanitation, malaria and tuberculosis and other health problems, tobacco control is still a low priority in Indian psyche. The industry is fully exploiting the lack of awareness of the public and known to obfuscate legislation against tobacco through political manipulation.

NOTE India has the mandate to highlight this problem in the minds of the government and the people.

2. Population

With the population of one billion and expanding fast, India has over 250 million tobacco users above the age of 15 and about 20 million children below age of 15 years addicted to tobacco. Next to China India thus is fertile ground for the expansion of the market of tobacco- a deep concern of all the health activists.

Making of this treaty by WHO will encourage developing countries like India to formulate similar policies.

Tobacco Free Initiative and FCTC is akin to freedom movement away for Imperial colonisation in both, South-East Asia and the USA. It is essentially a political movement to free the societies from the clutches of tobacco industry, which has infiltrated the socio-political-economic fabric of the nations beyond health considerations.

It is therefore necessary that WHO does not understate or underestimate this perception while formulating the Treaty.

3 Judiciary

**Beginning of success**

Goa a small territory of India with about 1.3 million population has succeeded in unanimously passing a very stringent law to control tobacco use and sale. The local government and people have welcomed the law and it has been very successfully implemented. The states of Delhi and Rajasthan have similar but less stringent laws. The governments are however yet to be more affirmative against the aggressive marketing of the tobacco industry;

To cite an example of few industry strategies and tactics:

**Inadequate and imprecise definition of advertisement in the Delhi Act has left a large loophole for the leading cigarette Industry to undertake surrogate advertising by opening cigarette brand leisure wear, sports gears, thus continuing it promotion of its brands.
** Aggressive marketing of products to children in India. Arena sports have been exploited by the cigarette industry to the hilt. WILLS 96 Cup was supposed to be 'marketing marvel' of the last century (WILLS is a popular cigarette brand with 65% market share). It has laid the foundation of a large market of the millions of youth to lifetime addiction.

** Chess sponsorship is exploited to create an impression that smoking improves intelligence and memory.

** The smokeless tobacco -Gutkha and pan masala- has adopted with newly acquired financial clout- has adopted the marketing and merchandising strategies similar to those of cigarette industry in the west, through the internet and modern methods of sleek promotions.

All these are sinister and dangerous signals for developing countries in general and India in particular.

** The NGOs are still busy in educational or research efforts and do not seem to have realised that economic and political policy changes pari passu with education are not only a faster but essential way of reducing tobacco use. With the result very few organisations are concentrating on advocacy against tobacco. NOTE India and VHAI are thus only two known organisations pursuing advocacy, coalition, and networking as their main mandate.

** The tobacco industry is still using front groups and lobbying to delay the legislation being brought on the floor of the Parliament.

** The tobacco industry continues to contribute large sums of money to politicians particularly in tobacco growing States like Andhra Pradesh, Gujarat, Orissa, Maharashtra and Karnataka, which are strong allies of the present Government of India.

For all these reasons, we strongly support WHO to pursue the treaty making process on the assumption that the tobacco industry will continue to behave the way it has behaved during the last half a century in the west, work through powerful surrogate politicians and organizations, and use all its wits clandestinely to subvert the treaty making process and the efforts of the national governments to control tobacco.

I strongly support the opinion of Dr. Stan Glantz “In advancing the treaty making process, WHO should not allow the United States Government delegation to influence the process. It is extremely unlikely that the United States will actually ratify any treaty that is negotiated, and the framework should not be watered down in a vain effort to achieve United States participation.”

We do hope that Government of India, supported by the NGOs, extends its full support to the Treaty and will be able to withstand the pressures of MNCs, TNCs and WTO and other trade organisations and provide better tobacco-free environment for the future generations.

4. Political stability or instability of coalition governments

Presently, the Government of India is a coalition government of about 10 parties and strong political pressures from its partners particularly from the tobacco growing States does not allow the government to make policies for effective tobacco control. To the contrary, recent pronouncements have been favourable to the growth of the cigarette industry.

5. Taxation.

India is the only country in the world where the specific duty of excise tax is based on the length of the cigarettes. This allows the cigarette companies to increase the retail price without a portion of the tax being transferred to the exchequer. Only international pressure and the obligation of the Treaty may help change this excise structure.

Excise on cigarettes is thus forms about 34% of the retail price and probably lowest in the world.
The Treaty

** NOTE India strongly supports WHO in formulating this treaty

** NOTE India feels that the Treaty would make easy for the NGOs and the Government of India to further and hasten the process of legislation in different states and by the Central government

** The treaty would help in changing the Excise structure.

** To contain the MNCs with their subsidiaries and the Indian tobacco industry trying to get hold of the youth for its market,

** Ultimately to eradicate tobacco industry as it stands today.

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