Public Health and tobacco control in Brazil

According to estimates by the World Health Organization (WHO), smoking accounts for 5 million deaths annually and may reach 10 million a year in the next 15 years if nothing is done to prevent the expansion of tobacco consumption, currently concentrated in the developing countries.

This scenario led 190 countries to propose, during the World Health Assembly (WHA) in 1999, the negotiation of the first international public health treaty, the WHO Framework Convention on Tobacco Control (WHO FCTC), which aims to "protect the present and future generations from the devastating health, social, environmental, and economic consequences of tobacco consumption". The Convention sets international tobacco control standards in the areas of advertising, tax and price policy, product labeling, illicit trade, passive smoking, and others.

After four years of negotiations, the treaty was adopted by consensus at the WHA and opened to countries for signing, from June 2003 to June 2004, with 168 countries joining. This was followed by a stage of ratification of the treaty, involving adoption by the respective National Congresses. In November 2004, the Convention reached the minimum of 40 ratifications needed for it to take force, which occurred on February 28, 2005. The Convention has thus made history as the quickest United Nations international treaty to gain adherence and take force.

Within a year after the Convention takes force, the Conference of the Parties (COP) will be established, as a body consisting of the Member States that have ratified the treaty. The functions of the COP are to promote technical and financial mechanisms for the countries to proceed to its implementation, as well as to negotiate protocols involving technical details in the measures to be adopted jointly by the countries. The first session of the COP will be decisive, since it will define the rules for procedures, financing, a secretariat, and participation by civil society, among others. Brazil played an outstanding role in negotiating the COP, since it was elected by consensus to chair its Intergovernmental Negotiating Body (INB), as well as being the second country to sign.

As for the Framework Convention, Brazil is in a comfortable situation, since it complies with the proposals virtually in their entirety. Although Brazil is the largest tobacco producer and exporter in the world, smoking dropped by nearly 50% from 1989 to 2003 (as measured by the proportion of smokers) thanks to the efficacy of the National Program to Control Smoking, coordinated by the Ministry of Health through the National Cancer Institute (INCA).

The ratification process by Brazil is under way in the National Congress, having been adopted by the Chamber of Deputies in May 2004. However, it currently faces major difficulties in the Senate due to lobbying by the tobacco industry, which has used economic arguments to obstruct ratification, thus provoking a clash between public health and economic interests (for more details, see http://www.inca.gov.br/tabagismo).

In order for Brazil to participate in the first session of the COP as a State Party, it must file its ratification with the United Nations by November 7, 2005. This means that the country will have to ratify by October 2005 at the latest.

I emphasize that if Brazil is not a State Party of the COP at the first session, it will not be allowed to decide on the organization's rules in relation to procedures and financing. These decisions are certain to influence the way resources will be used for measures by the COP, in the sense of supporting countries, and especially the developing countries, in the implementation of the COP. In this context, the discussions are likely to include potential mechanisms for financing alternative crops to tobacco farming, an issue that has been exploited blatantly by the tobacco industry in the Senate and media in the attempt to obstruct Brazil's ratification of the COP.

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