

## History of Tobacco

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Slide 1:

**Text:** History of Tobacco

- Tobacco cultivation has a history of about 8000 years.
- Europeans were introduced to tobacco when Columbus landed in America in 1492.
- Portuguese traders introduced tobacco in India during 1600. Tobacco became a valuable commodity in barter trade and its use spread rapidly.
- Gradually tobacco got assimilated into the cultural rituals and social fabric due to presumed medicinal and actually addictive properties attributed to it.

**Graphics:** Picture 1: Columbus taken over the new country

Picture 2: New settlers coming to new country

Picture 3: Portuguese traders smoking tobacco in India

Slide 2:

**Text:** Increase in Tobacco Production during British rule

- Introduced initially in India as a product to be smoked, tobacco gradually began to be used in several other forms.
- The entry of European colonial powers into India spurred the import of tobacco into India.
- Investment in production and export came later during the British rule.
- The policies of strong governmental support for tobacco agriculture, initiated during British colonial rule, have continued after Independence.

Slide 3:

**Text:** Types of tobacco use in India

- **Smoked forms of tobacco use**
  - *Bidis, Cigarettes, Cigars, Cheroots, Chuttas, Dhumti, Pipe, Hooklis, Chillum, Hookah.*
- **Smokeless forms of tobacco use**
  - *Paan (betel quid) with tobacco, Paan masala with tobacco*
  - *Tobacco, areca nut and slaked lime preparations, Mainpuri tobacco, Mawa, Khaini, chewing tobacco, snus, gutkha*
  - *Tobacco products for application: Mishri, Gul, Bajjar, Lal dantmanjan, Gudhaku, Creamy snuff, Tobacco water, Nicotine chewing gum.*

**Graphic:** Picture of the inside of a store with available tobacco products for sale

Slide 4:

**Text:** Tobacco in Indian Economy —I

- Tobacco cultivation has sustained despite social disapproval because of domestic demand (beedi tobacco) and the international market (flue-cured Virginia tobacco).
- Tobacco plays a significant role in the Indian economy as it contributes substantially in terms of excise revenue, export revenue and employment.
- India is the world's second largest producer of tobacco and also the second largest consumer of unmanufactured tobacco. It is a major exporter of unmanufactured tobacco.
- The total social costs of tobacco products exceed the direct outlay on them, owing to morbidity, mortality and negative externalities associated with the consumption of tobacco products.

Slide 5:

**Text:** Tobacco economy in the post-Independence period

Year	Area (x1000 hectare)	Production (million kg)	Excise revenue (Rs in million)	Export revenue (Rs in million)	Tobacco consumption (million kg)
1950–1951	360	260	258	150	245
1960–1961	400	310	540	160	328
1970–1971	450	360	2284	320	367
1980–1981	450	480	7553	1400	360
1990–1991	410	560	2,6957	2630	474
2000–2001	290	490	8,1824	9034	470
2001–2002	-	601	-	8885	-

*Source: Tobacco Board 2002; Directorate of Tobacco Development 1997*

Slide 6:

**Text:** Tobacco in Indian Economy —II

- The costs inflicted by tobacco consumption extend much beyond the direct users to cover secondary smokers as well as non-users, and are spread over a period much beyond the period of actual consumption of tobacco.
- The recognition of the costs of tobacco has been obfuscated and made opaque by the unethical tactics and practices of the tobacco lobbies.
- Total cost entailed by three major tobacco-related diseases is estimated to be about USD 7.2 billion for the year 2001–2002.

Slide 7:

**Text:** Prevalence of Tobacco Use

- Tobacco use prevalence : 51.3% males and 10.3% females (1995 –1996) and 46.5% males and 13.8% females (1998 –1999)

*National Sample Survey 52nd Round and National Family Health Survey-2*

- 55.8% of males currently use tobacco (12 – 60 years of age)  
*National Household Survey of Drug and Alcohol Abuse, 2002*
- Tobacco use prevalence among males is higher compared to females and among older age groups compared to the younger age groups.
- The prevalence of tobacco use is higher in rural population compared to that in urban areas.
- India has a huge problem of widespread smokeless tobacco use among women, particularly among disadvantaged women.
- The prevalence of tobacco use in pregnant women is similar to that in non-pregnant women of the same age.

Slide 8:

**Text:** TOBACCO CONSUMPTION IN NORTH INDIAN MALES IS INVERSELY RELATED TO EDUCATIONAL LEVEL AND PROFESSIONAL STATUS: RESULTS OF THREE CROSS SECTIONAL SURVEYS

<b>Educational Level</b>	<b><u>Urban</u> n=1456 Age: 34-65</b>	<b><u>Rural</u> n=1070 Age: 35-64</b>	<b><u>Industrial</u> n=2273 Age: 22-58</b>
Illiterate	61.4%	83.3%	78.6%
Semi-Literate	48.6%	88.1%	73.7%
Undergraduate	41.3%	70.3%	52.8%
Graduates / Postgraduates	22.3%	44.2%	35.6%
Period of Surveys: 1990-1998			
<i>Reddy K S et al, 2000</i>			

<b>Professional Class</b>	<b><u>Urban</u> n=1456 Age: 34-65</b>	<b><u>Rural</u> n=1070 Age: 35-64</b>	<b><u>Industrial</u> n=2273 Age: 22-58</b>
Professional/Big Business/Landlord	17.6%	33%	24.8%
Clerical/Middle level Business/ Middle level farmer	32.1%	61%	36%
Skilled labourer/Small businessman / Marginal landowner	57.1%	81%	45.2%
Unskilled and semi skilled labourer	64.1%	82.4%	63.5%
Period of Surveys: 1990-1998			
<i>Prabhakaran D et al ,2000)</i>			

Slide 9:

**Text:** Tobacco Use Among Youth in India

- Tobacco is used by the youth all over India with a wide range of variation among states.
- Two in every ten boys and one in every ten girls use a tobacco product.
- Initiation to tobacco products before the age of 10 years is increasing.
- There are currently about 240 million tobacco users aged 15 years and above (195 million male users and 45 million female users) in India.

Slide 10:

**Text:** Tobacco Toll in India

- 700, 000 deaths per year due to smoking
- 800, 000 to 900, 000 per year due to all forms of tobacco use/exposure
- Fastest trajectory of rise in tobacco related deaths forecast for the next 20 years
- Many of the deaths (>50%) occur below 70 years of age

Slide 11:

**Text:** Health effects of tobacco in India

- The relative risk for death due to tobacco use in cohort studies from rural India is
- 40%-80% higher for any type of tobacco use;
- 50%-60% higher for smoking;
- 90% higher for reverse smoking;
- 15% and 30% higher for tobacco chewing in men and women, respectively;
- 40% higher for chewing and smoking combined.
- Overall, smoking alone currently causes about 700,000 deaths per year in India.

Slide 12:

**Text:** BEEDI SMOKING IS EVEN MORE DANGEROUS

- Cohort of 52568 individuals ( $\geq 35$  years); follow-up of 5-6 years
- Ratios of excess deaths in tobacco users

100 male non-smoker deaths : 139 male cigarette smoker deaths

100 male non-smoker deaths : 178 male beedi smoker deaths

100 female non-tobacco user deaths : 135 female oral tobacco user deaths

- *Mumbai Cohort Study; Gupta et al, WHO Bulletin, 2000*

Slide 13:

**Text:** Tobacco Use and Related Diseases

Studies in India have shown that tobacco use in its various forms is directly responsible for increase in cardiovascular diseases, cancers of the oral cavity, esophagus, pharynx etc, and chronic obstructive lung disease, TB, poor reproductive health outcomes, oral precancerous lesions, and green tobacco sickness.

Slide 14:

**Text:** TOBACCO AND TUBERCULOSIS

- **Prevalence of TB is about 3 times as great among the ever-smokers as among the never-smokers.**
- The heavier the smoking, either cigarettes or bidis, the greater the prevalence of TB among smokers.
- **Mortality from TB is 3 to 4 times as great in ever-smokers as in never-smokers.**
- Smoking contributes to half the male deaths from TB in India and a quarter of all male deaths in the middle age (25-69 years); of these 200,000 deaths, half occur in men who are in 30's, 40's or early 50's.

Slide 15:

**Text:** Origin Of Tobacco Control Efforts In India—I

India's Journey from appreciating potential of tobacco production to emerging as a leader in global tobacco control efforts:

- Increasing scientific evidence about mortality and morbidity attributable to tobacco use provided impetus for legislative action in India for tobacco control (Mid 1970s)
- Cigarettes (Regulation of Production, Supply and Distribution) Act, 1975

Health Warning on Packages and Advertisements of Cigarettes:

“Cigarette Smoking is Injurious to Health”

Slide 16:

**Text:** Origin Of Tobacco Control Efforts In India—II

- Tobacco Board Act of 1975 brought tobacco under a single Jurisdiction (The Central Government)
- Civil society groups, media and other agencies played a vital role in raising public awareness of tobacco-related health issues (1980s and 1990s)

This led to

- Civil litigation and favorable verdicts by courts
- Demands for tobacco control in Indian Parliament
- Increased pressure on government to impose restrictions
- Resolutions of World Health Assembly in 1986 and 1990 urged member states to impose stronger legislative measures to protect people from dangers of tobacco

- Regional and national consultations on “Tobacco or Health,” convened by government of India (Ministry of Health) and WHO in 1991

Slide 17:

**Text:** Battle for Tobacco Control in India

Anti-Tobacco Influences

- Activism and advocacy efforts by civil society organization in India
- Strong role played by Indian judiciary
- Role of media in building positive public opinion on tobacco control
- Commitment by the Government of India (Ministry of Health and Family Welfare) towards effective tobacco control efforts
- Support of well informed Parliamentarians and Policy-makers

Pro-Tobacco Influences

- Tobacco industry’s continuous resistance to strong tobacco control laws or regulations
- Violation of regulations by the industry (e.g., ad ban)
- Economic issues related to tobacco production and tobacco control, distorted by the industry.
- Over emphasizing employment issues in connection with tobacco control
- Industry’s efforts to create fears of adverse impact of tobacco control on poor

Slide 18:

**Text:** Land Mark Events — I (1970s to 2005)

**1975:** Cigarettes (Regulation of Production, Supply and Distribution) Act

**1980:** Central and State Governments imposed restrictions on tobacco trade and initiated efforts for comprehensive legislation for tobacco control

**1990:** Central Government issued directive for prohibiting smoking in public places, banned tobacco advertisements on National Radio and T.V. channels, advised State Governments to discourage sale of tobacco around educational institutions and mandated display of statutory health warning on chewing tobacco products.

**1991:** Regional and National Consultations on “Tobacco or Health”

**1991:** Central Government directed the Central Board of Film Certification to comply with the Cinematograph Act of 1952

Slide 19:

**Text:** Land Mark Events — II (1970s to 2005)

**1995:** The Parliamentary Committee on Subordinate legislation of the Tenth Lok Sabha examined the rules framed under Cigarette (Regulation of Production, Supply and Distribution) Act, 1975 and made specific suggestions for stronger provisions to achieve better results in tobacco control

**1995:** Expert Committee on the economics of tobacco use constituted by the Central Ministry of Health.

**1999:** High Court of Kerala announced ban on smoking in public places

**1999:** Ministry of Railways banned sale of cigarettes and beedis on railway platforms and in trains  
**2000:** Central Government banned tobacco advertisements on cable television  
**2001:** Supreme Court of India mandated a ban on smoking in public places.

Slide 20:

**Text:** Land Mark Events — III (1970s to 2005)

**2001:** Ministry of Railways imposed ban on sale of gutkha on railway station, concourses, reservation centers and in trains

**2001:** The National Human Rights Commission of India (NHRC) convened a South-East Asia Regional consultation on ‘Public Health and Human Rights’, and advocated tobacco control as an essential measure to protect human rights.

**2001-2003:** Ban on Gutkha production and sale of gutkha and paan masala containing tobacco or not containing tobacco in states of Tamil Nadu, Andhra Pradesh, Maharashtra, Madhya Pradesh, Bihar and Goa using the provision of the Prevention of Food Adulteration Act.

**2003:** The Cigarettes and other Tobacco Products (Prohibition of Advertisement and Regulation of Trade and Commerce, Production, Supply and Distribution) Act, 2003

Slide 21:

**Text:** Indian Law— At a Glance

**Key Provision of cigarettes and other tobacco product Act, 2003**

- Ban on smoking in public places (including indoor workplaces)
- Ban on direct and indirect advertising of tobacco products
  - Point-of-sale advertising is permitted
- Ban on sales to minors
  - Tobacco products cannot be sold to children <18 years
  - Tobacco products cannot be sold within a radius of 100 yards of educational institutions
- Pictorial health warnings
- English and one or more Indian languages to be used for health warnings on tobacco packs
- Testing and Regulation: Ingredients to be declared on tobacco product packages (Tar and Nicotine)

Slide 22:

**Text:** Implementation of Indian Law — I

**Rules Notified and Enforced from May 1, 2004**

- **Prohibition of smoking in public places**
  - mandates display of board containing the warning ”No Smoking Area-Smoking Here is an Offence”
  - Hotels and Restaurants should ensure
    - physical segregation of smoking and non-smoking areas
    - these areas should be labeled as ”Smoking Area/Non-smoking Area”

- proper location of smoking and non-smoking areas
- Prohibition of advertisement of cigarettes and other tobacco products
  - Point of sale advertisement not to exceed two boards
  - This board should contain health warnings “Tobacco Kills or Tobacco Causes Cancer”
- Prohibition of Sale to Minors
  - Display board containing the warning “Sale of tobacco products to a person under the age of 18 years is a punishable offence” to be put at point of sale

Slide 23:

**Text:** Implementation of Indian Law—II

**Rules notified and enforced from December 1, 2004**

- **Prohibition on Sale of Cigarettes and other Tobacco Products around Educational Institutions**
  - Board outside the premises to be displayed stating that sale of cigarettes and other tobacco products in an area within a radius of 100 yards of educational institution is strictly prohibited
  - Distance of 100 yards shall be measured radially starting from the outer limit of boundary wall or fence of the institution

Slide 24:

**Text:** Proposed Indian Health Warning on Gutkha Pack

**Graphic:** Picture of a man with mouth cancer. Poster reads: Tobacco Kills. Tobacco Causes Mouth Cancer

Slide 25:

**Text:** Proposed Indian Health Warning on Cigarette Pack

**Graphic:** Picture of a man smoking close to a young lady. Poster reads: Smoking kills. The smoke from your cigarette harms people around you.

Slide 26:

**Text:** Implementation challenges being faced

- **Violation of Ad ban through:**
  - Surrogate methods (Red & White Bravery Awards-GPI)
  - Brand stretching (Wills Life Style Apparel-ITC)
  - Sponsorship of events (Formula 1 news in print media-Marlboro)
- **Violation of ban on smoking in public places due to:**
  - Lack of awareness among stakeholders (managers of restaurants, hotels etc.)
  - Low compliance levels among the management of public places
  - Low motivation at Health Ministries at State Level
- **Violation of provision allowing point-of-sale advertisement**
  - Display board specifications being violated
  - Health warning area specified on this board has been reduced by the industry

Slide 27:

**Text:** Other measures that need to be taken to strengthen tobacco control

- **Tax Net to be Uniform**
  - Current financial budget (2005-06) increased specific (excise) rate on cigarettes by about 10% and a surcharge of 10% ad valorem duties on other tobacco products (gutkha, chewing tobacco, snuff and pan masala)
  - Bidis to be brought under similar tax regime to avoid cost influenced product choice by youth and poor
- **Ban on Gutkha by Centre**
  - State governments to request the Centre to impose such a ban (as per Supreme Court judgment)

Slide 28:

**Text:** FCTC Implementation in India

- The Indian Act enactment preceded the adoption and enforcement of the FCTC
- Indian Legislation needs to be upscale to comply with the provisions of FCTC
  - Tax and price measures to be implemented to reduce tobacco consumption
  - Duty free sales to be tackled by Ministry of Finance
  - Prohibiting use of misleading terms to label tobacco products
  - Mobilize stakeholders, engage civil society to promote and strengthen education, communication, training and public awareness on tobacco control issues
  - Promote effective measure for tobacco use cessation
  - Elimination of all forms of illicit trade in tobacco products including smuggling, illicit manufacturing and counterfeiting
  - Sale to and by minors
  - Curb cross-border advertising
  - Promote economically viable alternatives for tobacco workers, growers and individual sellers (as appropriate)