Globally, 84% of smokers live in developing and transitional economy countries.*

In these countries, the poor smoke the most and bear the greatest economic and disease burden from tobacco use.

The poor can ill-afford to spend scarce household income on tobacco.

Addiction to nicotine drives them to spend money on tobacco, limiting resources available for vital necessities.

What Is the Nature of Tobacco-Poverty Relationship?

- Dimensions of the tobacco and poverty relationship:
  - Tobacco and poverty associations-analytical perspective
  - Perceived short-term benefits of tobacco to the poor
  - Adverse impacts of tobacco on the poor
  - Effective ways of breaking the tobacco-poverty relationship

Learning Objective

- Discover creative ways of lessening the impact of the tobacco epidemic on the poor
### Known Relationships between Tobacco and Poverty

- The poor and the poorest tend to smoke the most and bear most of the economic and disease burden of tobacco use
  - Of the estimated 1.3 billion smokers worldwide, 84% live in developing and transitional economies
- Smoking prevalence among men tends to be higher in low- and middle-income countries
  - In 2003, it was nearly 50% in low-and middle-income countries, and about 35% in high-income countries


### Known Relationships between Tobacco and Poverty

- Country-specific studies:
  - A 1997 study of smoking prevalence among men in Chennai, India
    - Highest rate of 64% found among the illiterate population, decreasing rate with increasing number of years of schooling
    - For men with more than 12 years of education, the rate declined to 21%
  - A 1998 study in the United Kingdom
    - 10% of women and 12% of men in the highest socio-economic group were smokers compared with 35% of women and 40% of men in the lowest socio-economic group

Known Relationships between Tobacco and Poverty

- Little attention has been paid to the link between tobacco and poverty

- Tobacco contributes to poverty at the individual, household, and national levels


Tobacco Contributing to Poverty: Household Level

- Opportunity cost
  - Money spent on tobacco is money that is not available for basic necessities such as food, shelter, education, and health care

- Lost earnings
  - Result from the higher risks of illness and premature death that tobacco users face from tobacco-related diseases

- Risks of tobacco farming
  - Financial and health related
**Tobacco Contributing to Poverty: National Level**

- **High health-care costs**
  - Tobacco use related costs run between 6% and 15% of total health care costs in high-income countries*

- **Lost productivity**
  - In the U.S., from 1995-1999 health-related economic costs associated with tobacco use were more than U.S. $157 billion per year†
  - If current trends persist, 650 million people alive today will eventually be killed by tobacco‡, half of whom will be killed in productive middle age, each losing 20-25 years of life**

- **Loss of foreign exchange**

**Sources:** *World Bank. (1999); †Centers for Disease Control. (2002); ‡WHO. World Health Report. (2003); **The World Bank.

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**Tobacco Contributing to Poverty: National Level**

- **Smuggling**
  - Estimated total lost revenue by governments due to cigarette smuggling is about U.S. $25-30 billion annually*

- **Environmental degradation**
  - About 200,000 hectares of forests are consumed each year by tobacco farming
  - One study concluded almost 5% of all deforestation in developing countries where tobacco is grown was due to tobacco production†
  - Pollution from pesticides and fertilizers applied to tobacco fields
  - Solid and chemical waste from tobacco manufacturing

**Sources:** *Joossens, L. (1998); †Geist, H. J. (1999)."
Perceptions of the “Benefits” of Tobacco

- Achieving a “cool” lifestyle
- Being successful
- Being independent and action-oriented
- Taking a vacation and having fun

Image source: Trinkets & Trash. Permission granted for educational use.

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Perceptions of the “Benefits” of Smoking

- It has a calming effect in social situations
- It relieves depression
- It suppresses hunger
The Adverse Impacts of Tobacco on the Poor

- Opportunity cost
- Lost earnings due to higher risk of illness and premature death
- Financial risks of tobacco farming


Opportunity Cost

- Money spent on tobacco is money that is not available for basic necessities such as food, shelter, education, and health care

<table>
<thead>
<tr>
<th>Example studies of low-income household expenditures on tobacco</th>
<th>Tobacco expenditures as a percentage of total expenditures</th>
</tr>
</thead>
<tbody>
<tr>
<td>Egypt*</td>
<td>10%</td>
</tr>
<tr>
<td>Indonesia†</td>
<td>15%</td>
</tr>
<tr>
<td>Niger‡</td>
<td>40%—students 25%—manual laborers</td>
</tr>
<tr>
<td>Bulgaria**</td>
<td>10.6%—low-income households with at least one smoker</td>
</tr>
<tr>
<td>Mexico†</td>
<td>11%—the poorest 20% of households</td>
</tr>
</tbody>
</table>

### Opportunity Cost: Bangladesh

- A 2004 WHO study showed that over 10.5 million people in Bangladesh who are currently malnourished could have an adequate diet if money spent on tobacco was spent on food instead.
  - Potentially, the lives of 350 children under age five each day could have been saved.

- The poorest households in Bangladesh spend almost 10 times as much on tobacco as on education.


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### Lost Earnings

- Lost earnings result from the higher risks of illness and premature death that tobacco users face with respect to tobacco-related diseases such as cancers, heart attacks, and respiratory diseases.

- Ill-health caused by tobacco use is often the trigger for a downward slide into more extreme poverty.

- “Eggs? Where will the money come from to buy them?”
  - Dhaka rickshaw driver who could feed each of his three children an egg a day if he bought eggs instead of tobacco.


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Tobacco Farming Risks

- Labor-intensive
- Child labor
- Expensive pesticides and fertilizers
- Occupational hazards (e.g., green tobacco sickness)
- Debt


Breaking the Tobacco-Poverty Relationship

- Culture
- Context
- Consequences

“Everyone lives within a cultural context.”
— The Encyclopedia of World History, 2001
**Case Study Cambodia: Buddhist Monks as Champions**

- 2001 survey of tobacco use among monks:
  - Weighted prevalence across five provinces = 36.3%

- Tobacco is a popular offering to monks

Source: adapted from David A. National Conference on Tobacco or Health. (2005).

**Monks as the Choice for Tobacco Control Champions**

- 95% of Cambodians are Buddhist and highly respect the monks

- Cambodia has more than 3,820 wats (temples) and 35% of more than 55,000 monks are smokers

- Monks comprise a significant proportion of adult men, whose education and behavior are largely influenced during their time in the temple

- The smoke-free monks/smoke-free wats project targeted chief monks in each of the 22 provinces and gained support from the two leading monks in the country

Source: adapted from David A. National Conference on Tobacco or Health. (2005).
The Monks’ Powerful Influence

- The establishment of smoke free policies, especially in large wats that serve as teaching hubs, became a focus of the project.


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Reaching the Buddhist Population: Sermons

- Messages propagated by monks:
  - Inappropriateness of tobacco as an offering to monks
  - Contrary nature of tobacco use with Buddhist teachings of bodily purity

Text source: adapted from David A. National Conference on Tobacco or Health. (2005).

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“Now 72, Ung Pac says he began smoking at 18. But at the urging of monks from the neighboring pagoda, he gave up cigarettes . . .”

“. . . now Ung Pac points proudly to a no-smoking sticker on one of the wooden stilts that hold up his house. . . . this is the payoff—“the message going on, from monk to community . . .”

Text source: adapted from David A. National Conference on Tobacco or Health. (2005).
Prevalence of Smoking Monks by Province in Cambodia

Source: adapted by CTLT from David A. National Conference on Tobacco or Health. (2005).

Prevalence of Smoking among Community Members

Source: adapted by CTLT from David A. National Conference on Tobacco or Health. (2005).
Monks as Champions

Source: adapted by CTLT from David A. National Conference on Tobacco or Health. (2005).

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Cambodia: Social Development Environment

- Cambodia Cyclo Centre Project
  - Smoking cyclo drivers spend an average of 800 riel per day on cigarettes (between 200 R and 5,000 R)
  - 12.8% of daily income
  - 90% of the smokers would like to quit

Source: adapted from David A. National Conference on Tobacco or Health. (2005).

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Case Study Cambodia: Cyclo Centre Project

- Cyclo drivers who choose to become smoke-free are provided assistance to purchase their own smoke-free cyclo

- Drivers pledge to keep their cyclos smoke-free and to post health messages on their cyclos

- Cessation services are provided at the Cyclo Centre

Source: adapted from David A. National Conference on Tobacco or Health. (2005).

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Case Study Cambodia: Cyclo Centre Project

- The project started with 12 smoke free cyclos
  - As of 2005, nearly 80 smoke-free cyclos were currently on the road in Phnom Penh

- A cyclo driver who quits smoking and pays off his cyclo can increase in his daily income by an average of 2,390 riels per day, or 71,700 riels per month

- Self-reported quit rate among cyclo drivers as of 2005 was 90%

- After one year of implementing the program 87.7% of participants were non-smokers, while 12.3% still smoked

Source: adapted from David A. National Conference on Tobacco or Health. (2005).

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Summary

- Understand the local context
- Relationships are critical
- Partnerships are essential
- Local champions are crucial
- Situate interventions in the social development environment
- Timing is more important than time

Quotes

- “... if global adult smoking prevalence declines to 20% by 2020, at least 100 million fewer people currently alive will be killed prematurely by tobacco”
  — Frieden and Bloomberg (2007), Lancet

- “It takes bitter medicine to cure a disease properly and it takes blunt advice to put us on the right track.”
  — A Chinese proverb, 100 Pearls of Chinese Wisdom (1999), Sinolingua, Beijing, China