



TOBAKSFAKTA

OBEROENDE TANKESMEDJA

The Framework Convention on Tobacco Control in Sweden

March 2012



How well is Sweden living up to the WHO Framework Convention on Tobacco Control?

Tobaksfakta Think Tank comments on the Swedish government's official report to the FCTC Secretariat

Sweden ratified the World Health Organization's Framework Convention on Tobacco Control (FCTC), the first worldwide public health convention, in 2005. The FCTC is a legally binding international agreement which over 170 nations have committed themselves to implement. With its 38 articles, the purpose of the convention is to protect both children and adults from ill health and death caused by tobacco use. In this report, the think tank Tankesmedjan Tobaksfakta focuses on the most important provisions of the convention and comments on the current level of compliance as stated by the Swedish government's latest report to the FCTC Secretariat (see our conclusions on page 13).

Foreword

I have worked in the field of public health and have followed tobacco control efforts in Sweden for 27 years. It has been dismaying to note that around 16,000 more youths under age 18 have begun to use tobacco during each of those years. That amounts to nearly a half million young people whom we have failed to protect against the enticements of the tobacco industry.

Of course, we have been able to reach some young people with tobacco control efforts, which have been worthwhile and important for those individuals. But we could have done much more. Our efforts have not always been sufficiently strong and clear. They have also been met by counterarguments such as “tobacco use is a personal choice” and “tobacco use is an adult behaviour”. All too often, it has been the arguments of the tobacco industry that have won the attention of key decision-makers.

As Secretary-General of the Tobaksfakta Think Tank, I cannot agree with those arguments when I know that over 6000 people in Sweden die prematurely of tobacco-related illnesses every year, and when smoking continues to be the single largest cause of ill health.

The overarching goal of public health policy, as decreed by the Swedish parliament in 2003, is to create conditions in society for good health on equal terms for the entire population. Public health refers to the general level of health and its distribution among the population. And that is something for which no single individual can be responsible. Civil society, the business community and governments at all levels — national, county and municipal — must therefore take action on the basis of their respective capacities and roles.

Furthermore, it is not a question of blaming individual smokers and snus users, but rather of providing decision-makers and professionals with knowledge that will enable them to protect children and young people from tobacco smoke and the tobacco industry’s sophisticated marketing techniques.

In addition, everyone who wants to stop using tobacco must be supported with various measures. Most tobacco users want to quit, but usually find it difficult to do so on their own.

Achieving greater success in our work requires bold and straightforward political leaders who are capable of making decisions and have the courage to implement a broad variety of measures. That is the only way to gradually inhibit the opportunities for the tobacco industry to market and sell its products. The ultimate goal is a tobacco-free society.

Both you and I are responsible for our own health, just as parents are responsible for the health of their children. All too often, children and parents have been solely responsible when, in fact, that personal responsibility also needs support from society.

How many young people will begin using tobacco, and how many will die prematurely before we make a serious effort to abolish tobacco?

There is a solution to the tobacco problem — WHO’s Framework Convention on Tobacco Control from 2003 which 174 nations had ratified as of March 2012. The FCTC is based on a strong desire to protect current and future generations from the devastating consequences of tobacco use. WHO and the ratifying member states have understood that the problem cannot be solved with voluntary measures. The convention includes provisions and evidence-based measures for significantly reducing tobacco use. Sweden ratified the FCTC in 2005; but unfortunately, not much has been done since then.

The intent of this report by Tobaksfakta is to stimulate a more active approach to the measures prescribed by the FCTC, because the work of tobacco control in Sweden is far from complete. Surely, Swedish decision-makers cannot accept that during the next 27 years another half million young people will be enticed by the tobacco industry into lifelong use of its products.

Enjoy the report and welcome to the task of protecting the health of our children and young people. We must work together in order to fill all the remaining gaps in protection against tobacco.

Eny Thörnqvist
Secretary-General
Tobaksfakta Think Tank

About this report

Countries that have ratified the FCTC are required to submit regular reports on progress each has made in implementing stronger tobacco control in accordance with the guidelines. In February of 2008, the government submitted its first report to the FCTC Secretariat regarding the extent to which Sweden has fulfilled the requirements. A commentary on the report was also issued the same year by the Swedish Network for Tobacco Prevention.

The government's second report was submitted in November of 2010. The analysis presented here by Tobaksfakta, issued in May of 2011, deals with the most important provisions of the convention and is based on our assessment of the current situation compared with the government's latest report.

Objectives of the Framework Convention on Tobacco Control

"To protect present and future generations from the devastating health, social, environmental and economic consequences of tobacco consumption and exposure to tobacco smoke by providing a framework for tobacco control measures to be implemented by the Parties at the national, regional and international levels in order to reduce continually and substantially the prevalence of tobacco use and exposure to tobacco smoke."

The Framework Convention on Tobacco Control – a legally binding international agreement

After nearly four years of negotiations, the world's first international treaty on a public health issue was adopted in May of 2003 by a unanimous decision of the *World Health Assembly* (WHA), the highest decision-making body of the *World Health Organization* (WHO) which is part of the UN system. The Framework Convention on Tobacco Control is an evidence-based, legally binding international agreement for the reduction of tobacco's harmful effects on both individuals and societies.

The FCTC is thus a binding agreement between countries. By ratifying the treaty, governments commit themselves either to adopting the Convention as the law of the land, or to modifying existing laws and policies to conform with the requirements of the convention.

Internationally, extensive efforts are under way to implement the convention. Among other things, the work

involves developing guidelines and protocols for the interpretation of the convention's 38 articles. Sweden ratified the FCTC in July of 2005 and since then has failed to live up to the high legislative and practice standards achieved by other Parties.

"Surely, Swedish decision-makers cannot accept that during the next 27 years another half million young people will be enticed by the tobacco industry into lifelong use of its products"

In addition, all of the countries that have ratified the convention gather for regular Conferences of Parties (COPs) which are forums on issues relating to the convention's future development. Participating countries are expected to strengthen their legislation and tobacco policies in step with progress made at the COPs.

The entire Framework Convention on Tobacco Control, with supporting material, is available on the World Health Organization's website at: www.who.int/fctc/en. Information in Swedish is available on Tobaksfakta (www.tobaksfakta.se) and the Swedish National Institute of Public Health (www.fhi.se).

What has been done in Sweden following ratification of the FCTC?

Tobaksfakta notes with regret that not much has been done since ratification in 2005. Few initiatives have been implemented, apart from some tax rises (*Convention Article 6*), maintaining an age limit to purchase tobacco products (*Article 16*) and increased funding of tobacco cessation activities (*Article 14*).

No initiative of any kind has been taken with regard to the tobacco industry's influence on policy (*Article 5.3*), guidelines for pictorial health warnings (*Article 11*), guidelines for continuous long-term action programmes for education, public information and opinion formation (*Article 12*), or guidelines for implementing a total ban on tobacco advertising and sponsoring (*Article 13*).

WHO FRAMEWORK CONVENTION ON TOBACCO CONTROL

Article:

3. Objective: To protect present and future generations
4. Guiding principles
5. General obligations
6. Price and tax measures
8. Protection from exposure to tobacco smoke
11. Packaging and labelling of tobacco products
12. Education communication, training and public awareness
13. Tobacco advertising, promotion and sponsorship
14. Tobacco cessation
15. Illicit trade in tobacco products
16. Sales to and by minors
20. Research
26. Financial resources

The FCTC is the guiding light in our co-operative efforts: The first international convention on a public health issue
Ratified by over 170 countries;
by Sweden in 2005

The Swedish government's official report indicates that its current priorities are: national support for and local initiatives on tobacco prevention; better enforcement of the age limit; and increased support for tobacco cessation. These are certainly important areas of concern, but far from what ought to be Sweden's highest priorities today. Protecting public policy from the tobacco industry's influence, effective measures for inhibiting the tobacco industry's marketing by such means as ad bans at point-of-purchase, and plain packaging of tobacco products are urgent policy issues. These measures have been given priority in the co-operative efforts of the parties to the convention.

Probably, an important explanation for the low level of activity in Sweden is that decision-makers and public officials possess inadequate knowledge of the FCTC. Based on the results of a 2010 survey, the Swedish Cancer Society concluded that only 15 per cent of the members of parliament were aware of the FCTC's existence. Knowledge and awareness of the convention are low throughout society.

Article 4 The most important guiding principles of the FCTC

- Every individual should be informed about all aspects of the tobacco problem, including the tobacco industry's tactics.
- Forceful political engagement.
- All forms of tobacco, including snus (oral tobacco), are covered by the Convention.
- A diversified programme including several measures applied in combination (legislation, active price policy, tobacco cessation, public information and opinion building).
- Active participation of civil society.
- International co-operation and financial support.

Article 5 General obligations of participating countries include:

5.1 – Develop, implement, periodically update and review comprehensive multi-sectoral national strategies, plans and programmes for tobacco control

What is the situation in Sweden?

The government states that it has fulfilled this obligation.

Tobaksfakta finds it remarkable that, six years after the parliament ratified the FCTC and three years before the year 2014 deadline for fulfilment of the national public health goals regarding tobacco control established by the parliament, there is still no political action plan for achieving those goals. An action plan for continued implementation of the FCTC and the attainment of related public health goals must therefore be given high priority.

5.2 – Establish and finance a national coordinating mechanism or focal points for tobacco control

What is the situation in Sweden?

The government states that it has fulfilled this obligation, with certain limitations.

Tobaksfakta believes that the government must assign priority to tobacco control in action, as well. Our principal criticisms concern the lack of effective methods for tobacco control in the national strategy. The recent Alcohol, Narcotics, Doping and Tobacco (ANDT) strategy is too vague, and inadequately clarifies similarities and differences between various narcotic substances.

The dismantling of the Swedish Institute of Public Health's tobacco prevention programme, which became final after its special tobacco-related assignment was completed in 2010, is also a matter of concern, given the institute's important role as the national co-ordinating agency for tobacco control work. It is also important for other actors, including all government offices and other public authorities, to develop their tobacco-prevention competence.

5.3 – Protect public health from the influence of commercial and other interests within the tobacco industry

In 2008 the parties to the convention agreed upon special guidelines on how this article best be implemented in order to prevent tobacco control policy from being influenced by the tobacco industry. The guidelines also emphasize the importance of informing the general public about the tobacco industry's tactics.

What is the situation in Sweden?

The government reports that it still lacks written policies in this area.

Tobaksfakta finds it inexcusable that the Swedish government has worked to oppose this article and has failed to

implement a single measure to shield the formulation of tobacco control policies from tobacco industry influence. The government's tobacco policy seems to be developed primarily by the Foreign Ministry, the Minister for Trade and the tobacco industry.

That is reflected not only in government support for Swedish exports of snus and its efforts to eliminate the European Union's ban against sales of snus. It is also reflected in its repeated rejection, during the recent consultations on the EU's Tobacco Products Directive, of all important proposals currently being discussed to tighten tobacco control policy. The proposals rejected by the government concerned plain packaging and taste-enhancing additives used by the tobacco industry to make its products more attractive to children and young people.

The Swedish government's actions against the interests of public health and in support of the tobacco industry have caused public health organizations throughout Europe to regard Sweden as one of the tobacco industry's last remaining bastions.

Article 6 **Price and tax measures to reduce demand for tobacco**

The Parties recognize that price and tax measures are an effective and important means of reducing tobacco consumption by various segments of the population, in particular young persons.

What is the situation in Sweden?

The government is currently devising the relevant tax rates.

Tobaksfakta believes that the tax increases on cigarettes and snus implemented in recent years comprise a very useful component of the recommended comprehensive strategy and conform to the convention requirement that all tobacco products are to be subject to such increases. When tobacco taxes are increased, it is important to emphasize the consumption-reducing purpose rather than to justify the increases by reference to increased national revenue.

As do the World Bank and WHO, **Tobaksfakta** calls for annual tax increases that should be at least five per cent above the inflation rate. Allocating a portion of the resulting tax revenue to tobacco control activities, including research, is another important measure recommended by the WHO; one that in our view should be implemented



in Sweden. In fact, nine European countries, including Finland and Iceland, have implemented this measure.

In Sweden, earmarked tax revenue is allocated to other areas such as the environment and transportation. We therefore find it difficult to understand why the same measure cannot be implemented in the area of tobacco control policy in accordance to the principle of “the polluter pays”.

Earmarking revenue from tobacco taxes would also convey a powerful message about the seriousness of the tobacco problem. There is strong public support for such a policy: Surveys conducted for Tobaksfakta in 2010 and 2011 have found that 79 per cent of MPs and 83 per cent of the general public approve the idea of earmarked tobacco tax revenue (www.tobaksfakta.se).

Finally, such an arrangement would contribute to a sustained source of funding for tobacco control efforts.

Article 8 **Protection from exposure** **to tobacco smoke**

Exposure to tobacco smoke causes death, disease and disability. Legislation and other effective measures that protect against such exposure shall be implemented.

In addition to Article 8, guidelines for the efforts of participating countries in this regard have been in place since 2007. The guidelines state, for example, that countries shall strive for the complete elimination of tobacco smoke in all types of public facilities and spaces.

What is the situation in Sweden?

The government's position is that all workplaces and public facilities are completely protected against passive smoking.

Tobaksfakta believes that conditions are gradually improving, but that there is still a significant difference between the regulations and daily compliance. The Institute of Public Health's latest survey (2010) found that every tenth resident of Sweden had been exposed to tobacco smoke at work, and nearly as many in the home. (www.fhi.se).

"It is estimated that five per cent of all children are still being exposed to environmental tobacco smoke in the home; in some areas the rate is as high as 30 per cent."

In addition, it is estimated that five per cent of all children are still being exposed to tobacco smoke in the home; in some areas the rate is as high as 30 per cent. Smoking rooms allowed by the Swedish legislation do not guarantee a smoke-free environment for employees. **Tobaksfakta** therefore welcomes the government's initiative in commissioning the Swedish Institute of Public Health to study the potential for other settings to become smoke-free.

We should also consider eliminating the possibility of allowing smoking rooms in dining facilities. Another important step is to create public opinion for a general introduction of smoke-free work hours — a vital measure for tobacco control which offers employers their greatest opportunity for supporting employees' health. Increased awareness among workers would also have positive effects in their homes.

Accordingly, we feel that it is high time to commission the Institute of Public Health to study how it would be possible to eliminate the remaining vestiges of environmental tobacco smoke in Sweden. One question of particular importance is how to resolve the problems that arise when legal rights conflict with each other — for example, when home care personnel are involuntarily exposed while working in the homes of clients who smoke.

Articles 9 & 10

Regulation of the contents of tobacco products

Regulation of tobacco product disclosures

These articles concern testing, measuring and regulating the contents and emissions of tobacco products, and adopting and implementing effective measures for public disclosure of information about the toxic constituents of tobacco products and the emissions that they may produce.

A working group is developing guidelines for a common testing system and standards for permissible ingredients of tobacco products. The Conference of the Parties in 2010 (COP 4), approved guidelines for prohibiting or limiting taste-enhancing additives. Such additives are used by the tobacco industry to make cigarettes and snus more attractive to children, teenagers and other vulnerable groups. The meeting also approved guidelines for improvements in the tobacco industry's declarations of its products' ingredients.

What is the situation in Sweden?

The government claims that it follows current regulations.

Tobaksfakta believes that consumer information is still inadequate, and that there must be an increase in the general public's understanding that all tobacco products are harmful to health, including snus. We also expect Sweden to actively support the ongoing revision of the EU's Tobacco Products Directive in order, among other things, to prohibit taste-enhancing additives such as fruit and sweets in tobacco products. Additionally, Sweden should cease to do the bidding of the tobacco industry and ensure that snus undergoes the same product controls that apply to all tobacco products. In short, Swedish snus is harmful to health and must be regulated in the same way as other tobacco products.

Article 11 Packaging and labelling of tobacco products

Within three years after ratification, in Sweden's case by 5 October 2008, measures such as warning texts which cover at least 50 per cent of the visible surfaces of tobacco product packaging should be implemented. The warning texts may even be in the form of or include pictures.

What is the situation in Sweden?

The government notes that warning texts on products sold in Sweden cover only 30 per cent of packets' front sides and that no pictures are included, but that the Institute of Public Health is currently studying the possibility of adding warning images.

Tobaksfakta believes that arguments for and international experience of pictorial warnings warrant the addition of such images to the packaging of all tobacco products, including snus. Today, there are good examples such as Uruguay, where warning images cover up to 80 per cent of both the front and back sides of tobacco packages. Also, Canada will soon introduce new pictures that cover up to 75 per cent of both the front and back sides. Australia's recent proposal calls for 75 per cent of the front side and 90 per cent of the back side to consist of pictorial warnings.

During the ongoing discussions concerning revision of the EU Tobacco Products Directive, Sweden should actively support the adoption of an obligatory requirement for up to 80 per cent of both the front and back sides to be covered by warning images. Experience with the existing EU regulation allowing voluntary compliance clearly indicates that binding legislation is necessary. To date, only eight of the 27 EU member-states have introduced or passed a decision to introduce pictorial warnings.

It is also important to analyse pictorial warnings from a gender perspective in accordance with Article 4.2.d of the FCTC which requires that measures be taken to consider gender differences in the development of all tobacco policies. A recent report by WHO-EURO (2010) clearly indicates that current EU pictorial warnings, unlike those recently approved in Canada, are by no means adequate to communicate adverse health effects that are specific to women.

Article 12 Education, communication, training and public awareness

By using all available communication tools, every country shall promote and strengthen public awareness of tobacco control issues including information on the tobacco industry and the prevention measures available to society. Effective programmes of tobacco control awareness should be included for personnel in health care, social services, schools, media, etc.

The parties to the convention have approved guidelines for the effective implementation of education and public information programmes. Sweden was among the parties chiefly responsible for developing the guidelines approved in 2010.

What is the situation in Sweden?

The government believes that there exists a broad range of information and education programmes, but that neither the implementers nor the target groups cover all the areas prescribed by the convention. It notes, for example, that there is still no tobacco control education programme for decision-makers at all levels.

Tobaksfakta believes that the efforts made in recent years via the special tobacco programme conducted by the Swedish National Institute of Public Health has contributed to increasing the range and variety of educational and public information materials. But much remains to be done before all important target groups have sufficiently benefited from such efforts.

The resources provided and the priority assigned to tobacco control by many key authorities is still clearly inadequate. Also lacking is an overarching plan for the development of information, education and opinion formation in accordance with the approved guidelines. Basic education for key occupations within health care and education must be substantially improved. Sufficiently extensive media campaigns need to be conducted on a regular basis in order to support tobacco control measures such as cessation programmes and to adopt new legislation.

Another problem is that Sweden has not fulfilled its commitment to ensure that information on tobacco industry tactics is available to all citizens. We also note with growing concern the risk that specific information on tobacco



can “disappear” in the ANDT concept, which presumes that all narcotic substances shall be dealt with in the same way, despite the very obvious differences between them. Long-term financing of www.tobaksfakta.se must also be assured.

Inasmuch as Sweden is one of the parties responsible for the recently approved guidelines of Article 12, we had hoped to see stronger leadership from the government in the development of information, education and opinion formation on tobacco in this country. Guidelines are all well and good, but it is action that counts! The world needs good examples.

Article 13 **Tobacco advertising, promotion and sponsorship**

The Parties to the convention recognize that a comprehensive ban on advertising, promotion and sponsorship would reduce the consumption of tobacco products.

Guidelines to assist in the implementation of this article were approved in 2008. They recommend that the parties place a total ban on advertising, sponsoring and other forms of marketing. They also recommend plain packaging, the introduction of promotion bans at points-of-purchase, and prohibitions against so-called Corporate Social Responsibility (CSR) initiatives. CSR refers to projects in which tobacco companies invest in order to portray themselves as socially responsible. The purpose, of course, is to improve their tarnished reputations.

What is the situation in Sweden?

The government states that Sweden has met all the requirements to which it is subject due to its ratification of the convention in 2005. However, the prohibition against marketing tobacco products on the Internet applies only within Sweden. Also, tobacco companies are still permitted to invest in CSR projects.

Tobaksfakta believes that children and young people are still exposed to a great deal of tobacco advertising and products, especially where such products are sold. Sweden must therefore comply with approved recommendations as soon as possible and, as for example Iceland, Finland, Norway and the United Kingdom already have done, legislate bans on promotion at points-of-purchase for tobacco products in order to protect children and young people.

Sweden should also require plain packaging. In 2012, Australia will become the first country to introduce such a requirement. Plain packaging is highly significant, because today packaging is the tobacco industry's most important marketing medium. For a country which claims that it wants to protect children and young people against tobacco, putting an end to tobacco industry marketing should be self-evident.

“For a country which claims that it wants to protect children and young people against tobacco, putting an end to tobacco industry marketing should be self-evident.”

The effectiveness of these measures is adequately supported by academic research. Compliance with the FCTC's requirement of a total ban on advertising, promotion and sponsorship of tobacco products is a basic pillar of a credible tobacco policy in Sweden, as elsewhere. CSR projects should also be forbidden. Questions relating to point-of-purchase sales and plain packaging are currently under discussion in the EU, and we find it extremely regrettable that the Swedish government has thus far opposed such proposals, thereby acting against the interests of public health and in support of the tobacco industry's continued ambitions to recruit new consumers among children and young people.

Article 14

Demand reduction measures concerning tobacco dependence and cessation

Every country shall develop and disseminate accessible evidence-based programmes for promoting tobacco cessation and adequate treatment of tobacco dependency.

Guidelines to help participating countries implement this article were approved in 2010.

What is the situation in Sweden?

The government states that guidelines for tobacco cessation are in place, that around 70 per cent of healthcare centres offer support for cessation, that the quitline is financially supported by the government, but that available medicines are not covered by the national health insurance system.

Tobaksfakta believes that progress has been made, but there is still little support for cessation activities due to the low and short-sighted priorities of county councils, which are responsible for health care services in Sweden.

It is hoped that the national guidelines for evidence-based preventive methods, which have been published by the Swedish National Board of Health and Welfare, will improve the quality and availability of cessation programmes. It is also important for those providing various forms of healthcare education to be trained in methods for stimulating and supporting individual efforts at behavioural change.

Further, it is essential to stimulate demand for cessation support, for example through various opinion formation initiatives. That is because it is not enough merely to increase the availability of cessation support. One important contribution to increasing demand would be for the government to pursue a more proactive policy to make tobacco control a greater public concern.

Article 15

Illicit trade in tobacco products

The Parties to the convention recognize that the elimination all forms of illicit trade in tobacco products — including smuggling, illicit manufacturing, and counterfeiting — are essential components of tobacco control.

Illicit trade in tobacco products can only be combated with active international co-operation. A binding protocol for that purpose is currently being developed. The aim is to have a draft protocol ready for decision by the Parties to the Convention in 2012, COP5.

What is the situation in Sweden?

The government believes that it is following the regulations which currently apply.

Tobaksfakta believes that, even though smuggling is more common in other countries, it is important that Sweden actively participate in efforts to stop the organized smuggling that is often conducted by the tobacco industry itself. That type of crime cannot be halted with a lax pricing policy, such as the tax reductions that the Swedish government applied in the late 1990s.

Only international co-operation can stop tobacco smuggling. At the same time, the problem must not be magnified into a reason for doubt or hesitation regarding the need for political decisions to reduce the tobacco industry's expansion possibilities. That argument is consistently raised by the tobacco industry whenever various restrictions on its marketing methods appear on the political agenda. Unfortunately, such scare tactics have always been much too successful in Sweden. One example is the dire warning that widespread smuggling would result if promotion bans at point-of-purchase were required, something for which no support has been found in the research conducted in countries that have introduced promotion bans at points-of-purchase.

Article 16 Sales to and by minors

Participating countries shall prohibit sales of tobacco products to minors; prohibition against free samples; prohibition against small packets; consequences for violations; preventing sales of tobacco products by minors, i.e. under age 18.

What is the situation in Sweden?

The government believes that Sweden fulfils the above noted requirements, except for the last one: preventing sales of tobacco products by persons under age 18.

Tobaksfakta believes that setting an age limit is an important measure in a country's tobacco control policy. However, it should never lead to the current situation in Sweden, where the age limit tends to be the most important element of a "restrictive" tobacco policy. All available research indicates that marketing, pictorial health warnings, an active pricing policy, public information and opinion formation are much more important for influencing tobacco use by children and young people.

The new, more restrictive Swedish legislation adopted in 2010 is a step toward better compliance with the age limit. Our demand for licensing of tobacco retailers remains, however. The risk of losing one's sales licence is an important restraining factor; that has been demonstrated in countries, such as Finland, that have already adopted such legislation.

While it is true that free tobacco samples are forbidden in Sweden there exist loopholes in the legislation which allow free products to be distributed to anyone purchasing tobacco products. The legislation does not seem to have prevented the tobacco industry from stretching the boundaries. We have recently noted that one tobacco company has conducted an aggressive sales campaign at points-of-purchase.

Article 20 Research, surveillance and exchange of information

Participating Parties undertake to develop and promote national research and to coordinate research programmes at the regional and international levels in the field of tobacco control. Parties should integrate tobacco surveillance programmes into national, regional and global health surveillance programmes; encourage research that addresses the determinants and consequences of tobacco consumption and exposure to tobacco smoke.

What is the situation in Sweden?

The government believes that the Swedish system, with special registers for tobacco use and for various illnesses and causes of death, is highly developed and continually updated.

Tobaksfakta believes, however, that there is great room for improvement. There is, for example, a need for continual epidemiological monitoring at the national, regional and local levels to evaluate, identify patterns and manage needs. There is also a need for sustained investment in research on the long-term effects of snus use during pregnancy, which is an important responsibility in Sweden.

Additionally, there is a need in Sweden for research on behaviour modification measures, an important component of the comprehensive tobacco control programmes of both Norway and Ireland. There is little such research

in Sweden today, with the exception of cessation issues. Universities, professional societies, patient organizations, and the Swedish Association of Local Authorities and Regions should all be able to participate in the development of such research.

Article 26 Financial resources

Parties recognize the important role that financial resources play in achieving the objective of this Convention.

Adequate financial resources are essential to fulfilling the goals of the FCTC. Each Party shall provide financial support in respect of its national activities intended to achieve the objective of the Convention in accordance with its national plans, priorities and programmes.

What is the situation in Sweden?

The government notes that, since the previous report, it has not been very active in providing financial support to other countries, except for the funds allocated to the WHO. The government also notes that its contribution to the World Health Organization is intended as indirect support to WHO's tobacco-related activities.

Tobaksfakta believes it is regrettable that Sweden no longer actively supports the global effort against tobacco use. Previously, Sweden provided financial support to the Framework Convention Alliance (FCA), which plays an im-

portant role in supporting the ratification and implementation of the FCTC. Continuity in the funding of tobacco prevention efforts is decisive for the ability to combat tobacco use.

In Sweden there is still a lack of continuity in the funding of tobacco control efforts within the country. We call for continuous and adequate funding of tobacco control, instead of the temporary and short-sighted task-funding that has thus far applied. The costs of tobacco use to Swedish society are estimated to be at least three times greater than revenue from tobacco taxes. Further, it is well documented that investments in tobacco control measures are very cost efficient.

Earmarked tobacco tax revenue, as discussed under Article 6, is a recommended method for providing adequate and continuous funding. The financial resources available in the years ahead will be especially important for reaching those who currently use tobacco, including the largest risk groups, i.e. those with limited education and certain immigrant groups.

Tobaksfakta also notes that it is not sufficient for Sweden to allocate funding only for WHO's tobacco programme. Funds for tobacco control efforts should also be included in direct support to countries with economies in transition. For that to happen, it is essential that Sweden take a proactive rather than a passive approach to address the tobacco problem; otherwise, experience indicates that little will be accomplished.

Our conclusions

As indicated by this report, Sweden's tobacco control legislation is far from the leading edge of international developments, as was the case in previous years. Instead, Sweden is falling behind its Nordic neighbours and the rest of Europe.

Awareness of WHO's Framework Convention on Tobacco Control is completely inadequate, and must increase among political leaders, other decision-makers and the general public. Sweden must actively develop its tobacco control policy in step with international efforts related to the FCTC.

To date, Sweden has ignored the new recommendations in the guidelines adopted by the parties. Nowadays, it even lacks a stable official apparatus for the work of tobacco prevention, which would include a national action plan, leadership, competence and allocation of continuous funding.

The recently adopted ANDT strategy, which embraces tobacco issues, for the most part lacks effective methods for tobacco prevention. There is a great risk that tobacco, as with the old ANT strategy for the schools in the 1990s, will be woefully neglected in terms of effort and resource allocation.

It is disturbing that the Swedish government opposes measures that are intended to shield tobacco control policy from the influence of the tobacco industry. On the contrary, the government has supported the tobacco industry by promoting exports of snus and ignoring measures required by the convention. There is also a lack of transparency in the government's actions in this area.

A decrease in the number of new tobacco consumers among children and young people in Sweden can only be achieved with political leadership, opinion formation and reduced exposure to tobacco among minors. Especially important measures are to require bans on taste-enhancing additives and promotion at points-of-purchase, plain packaging, continued expansion of smoke-free environments, and pictorial warnings covering up to 80 per cent of packets' front and back sides. All of this must be combined with tobacco tax increases at least five per cent greater than the inflation rate.

Also, the need and opportunities for smokers and snus users to cease their use of tobacco must be stimulated by means of continual opinion formation, adequate tax rises, smoke-free environments including smoke-free work hours, and cessation support that is both professional and readily available.

In order to ensure the continuation of active and widespread opinion formation, it is important that civil society be supported by long-term funding.

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WHO Tobacco Convention

Tobaksfakta Think Tank report on Sweden's Implementation of the WHO Framework Convention for Tobacco Control
Editors: Göran Boëthius, Margaretha Haglund and Ewy Thörnqvist *For additional information (Swedish only): www.tobaksfakta.se*