For immediate release

The International Union Against Tuberculosis and Lung Disease (The Union) congratulates India’s Ministry of Health and Family Welfare for adopting measure to prevent tobacco industry interference in health policy

Tuesday 21 July 2020 (New Delhi, India): The Ministry of Health and Family Welfare in India has adopted a Code of Conduct restricting officials and staff from collaborating with the tobacco industry. The measure, effective from 6 July 2020, is in line with Article 5.3 of the World Health Organization’s Framework Convention on Tobacco Control (WHO FCTC), which calls for the protection of public health policies from the commercial interests of the tobacco industry. The guideline also restricts any interaction with the industry unless it is strictly necessary to effectively regulate or control the industry and its products.

“The Union welcomes this decision, and commends all the tobacco control measures that India has already taken to progress tobacco control,” said Dr Rana J Singh, Deputy Regional Director of the South-East Asia region at The Union. “Eliminating tobacco industry interference in health policy is potentially the single most effective measure that governments can adopt to protect tobacco control activities, thereby addressing the death and disease caused by the tobacco epidemic.”

Although significant tobacco control progress has been made in recent years, India still has the second highest number of tobacco users in the world, with around 29 percent of all adults – 267 million people – using tobacco in some form. Tobacco kills more than 1.3 million people in India annually. Furthermore, a study commissioned by the WHO and conducted by the Public Health Foundation of India found that the total economic costs attributable to tobacco use in 2011 amounted to a staggering Rs 104,500 crores (US$ 22.4 billion), or roughly 1.16 percent of the country’s gross domestic product.

Despite the adoption of comprehensive tobacco control legislation in 2003, and the launch of the National Tobacco Control Programme (NTCP) in 2007, the tobacco industry has actively opposed and undermined government action, as well as efforts by civil society and academic institutions to present evidence contributing to the formulation of evidence-led policies to protect people from the harms of tobacco use.

Global evidence suggests that the tobacco industry is one of the most important barriers to advancing tobacco control and public health. In India, the industry has overtly challenged key policy advancements, such as graphic health warnings on tobacco packages and tobacco advertisement, promotion and sponsorship (TAPS) bans. Evidence also suggests that the industry has attempted to subvert the enforcement of smokefree laws and regulations intended to deter young people from smoking, such as restrictions on tobacco advertisements in film.

The Union has worked closely with the Government of India, state governments, civil society and academic institutions since 2007 to strengthen tobacco control policies and programmes to curb the tobacco epidemic in the country.
Since 2013, The Union and its partners have collaborated with health ministries at the national and state levels to support the formulation of policy guidelines to protect tobacco control initiatives from tobacco industry interference. So far, 12 Indian states (Bihar, Himachal Pradesh, Jharkhand, Jammu & Kashmir, Karnataka, Kerala, Mizoram, Punjab, Maharashtra, Meghalaya, Tamil Nadu, Uttar Pradesh) and 14 districts of West Bengal have adopted similar guidelines.

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The Union was founded in 1920 and is the world’s first global health organisation. We are a global leader in ending TB, we fight the tobacco industry, and we solve key problems in treating major diseases. We use science to design the best treatments and policies for the most pressing public health challenges affecting people living in poverty around the world. The Union’s members, staff and consultants operate in more than 140 countries and embody our core values of accountability, independence, quality and solidarity.