Tobacco In The Third World

Paul Mehdi Fischer, M.D.
Augusta, Georgia

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Abstract

There has been a recent increase in the smoking of cigarettes by people in the developing countries of the world. This increase has been largely due to the marketing efforts of a few large international tobacco companies. The effects on the health of the people of the third world has begun to be documentable. This paper discusses this problem and suggests implications for Muslim physicians.

Key Words: *Tobacco, third world, international health.*

The developing countries of the world are dying for a cigarette. In 1984 Ethiopia imported 200 million expensive British cigarettes.[1] At this same time a large portion of Ethiopia's population was starving to death. In one recent article, it was calculated that a father in Bangladesh who smoked as few as five cigarettes a day decreased his family's income by an amount equivalent to one-fourth of the cost of the dietary needs of a child.[2] This results in 18,000 unnecessary childhood deaths per year in Bangladesh alone. Developing countries currently consume about one-third of the cigarettes sold in the world.[3]

The health consequences of smoking have been well documented and regularly summarized in the U.S. Surgeon General's reports. It is currently estimated that cigarettes are responsible for 350,000 premature deaths in the United States per year. These unnecessary deaths are principally from cardiovascular disease, chronic lung disease and a wide variety of cancers which have been shown to be related to smoking. In addition to its effect on mortality, cigarette smoking has been associated with a variety of other non life threatening diseases. These include ulcer disease, respiratory infections, low infant birth weight and premature births.

It would be misleading to claim that tobacco use is new to third world countries. The pipe and oral use of tobacco are common customs throughout the world. There are few good epidemiologic studies to indicate the amount of disease related to these two habits. However, in Pakistan, 40% of all new cancers are head and neck cancers and these have been related epidemiologically to the use of chewing tobacco.[4,5] The present concern over the rise in cigarette use in third world countries is due to the fact that cigarettes are a more lethal form of tobacco use. This increased lethality is due to both the convenience of cigarettes (permitting tobacco use at any time and while performing most activities) as well as the fact that cigarette smoking leads to a larger carcinogen load to more body areas (i.e., the lower respiratory tract). It is estimated that one out of three cigarette smokers will die a premature death because of this habit. This health risk is much higher than the use of either pipe or chewing tobacco.

Blaming the cigarette smoker for his/her habit is a naive and fruitless approach. The cigarette epidemic has been primarily caused by a few large international tobacco companies and the governments which have gone to great lengths to protect the profits of these companies. This partnership of industry and governments has been well documented in the United States.[6] As Presidential candidate Ronald Reagan said, "I also want to assure you that my administration will end what is becoming an increasingly antagonistic relationship between the federal government and the tobacco industry... I can guarantee that my own cabinet members will be far too busy with substantive matters to waste their time proselytizing against the dangers of cigarette smoking."[6]

The tobacco industry in this country claims that it has been unfairly singled out by the government for marketing restrictions. In fact, support of the industry has led to a series of seemingly incongruous federal policies. On the one hand, millions of dollars are spent to remove asbestos from schools because of its remote carcinogenic potential and yet the marketing of cigarettes to children is permitted. This marketing has included advertising in magazines commonly read by adolescents and the sponsorship of both music and sports events followed principally by youth. The results of this advertising are

From the Department of Family Medicine, Medical College of Georgia.

Reprint requests: Paul M. Fischer, M.D. Department of Family Medicine, Medical College of Georgia, Augusta, GA 30912

dramatic. There are 4,000 new American teenage smokers each day. In the past ten years, the percentage of 12 to 14-year old smokers has increased 8,000 percent.

Cigarette consumption by adults in the West has leveled off. This has been in response to the activities of the non-smokers' rights movement and to public recognition of the serious health consequences of smoking. In response to this reduced growth rate, the international tobacco companies have looked to third world markets. As Joseph Cullman, Chairman of Phillip-Morris, said in 1983, "We recognized early that ours is a global business and built markets around the world. Our future is particularly bright in developing areas, where income and population are growing."[6]

This shift to developing countries has been particularly evident in Muslim countries:

1. In 1984, Saudi Arabia was the world's third leading importer of U.S. made cigarettes.
2. Turkey is the number one importer of unmanufactured tobacco in the world.
3. Cigarette production in Egypt increased by 19% from 1982 to 1983.[1]
4. Tobacco consumption in Ethiopia in the past ten years increased by 49%.[7] This was the same period of time when this country suffered widespread death from starvation.
5. In 1982 the head of the Malaysian Parliament retired and went to work as chairman of Rothman's, Malaysia's largest cigarette manufacturer.[6]
6. India is the world's third largest tobacco producer. The industry employs 2 million people in the state of Andhra Pradesh alone.

These trends are in large part due to the financial incentives given to farmers who raise tobacco. In many countries, the tobacco industry provides the small farmer with technical expertise, supplies, seeds, and fertilizers as well as with a guarantee of purchase of the tobacco which is produced. The economic returns to the farmer per acre are ten times greater than any other agricultural product.

There are also considerable economic incentives to governments. The tobacco industry has used tobacco taxation in third world countries as a way to assure governmental support. In Malaysia, 47 percent of all collected taxes in 1983 were from tobacco. It is easy, therefore, to see why this industry would receive governmental protection and support.

Developing countries cannot afford tobacco. Raising tobacco requires five times more labor per acre than even a labor intensive crop such as rice. It is therefore hard to justify its growth in a sparcely populated country. In contrast, for an overly populated country such as India, the tobacco crop uses up fertile land that could be used to raise food. In arid countries it uses up wood which is a scarce fuel source. This is because the tobacco must be cured with heat. It has been estimated that the world wide curing of tobacco leads to 7 million acres of deforested land each year. One, third world tree is consumed for every 300 cigarettes produced.[6]

The World Bank and the United Nations Food and Agricultural Organization have supported the raising of tobacco. The excuse given has been that it is an effective cash crop with a stable world market. The World Bank has given Pakistan 60 million dollars in loans to raise tobacco. The United States Food for Peace Program is another example. Under this program 2 billion dollars have been given as low interest guaranteed loans to developing countries for the purchase of U.S. tobacco. Clearly the objective of this program was not to feed the world's hungry but rather to develop new markets for United States agricultural crops.

An additional health risk to developing countries is that of the pesticides that are needed to raise tobacco. Tobacco must be sprayed with insecticides, up to 20 times each season which is greater than any other commonly grown agricultural product. Many of the pesticides sold to developing countries have been banned in this country because of health concerns. In countries such as Pakistan, these insecticides are advertised on television where farmers are shown smiling and singing as they dust their crops by hand.

The tobacco industry has used the same marketing tactics in developing countries as have been used in the past in the West. In addition, they are marketing in ways which have been outlawed in the United States. Advertising is rampant on television, radio, billboards and magazines. The sponsorship of popular sports such as cricket is common. Cigarettes are handed out in samples on street corners to children. In most developing countries there is little or no government regulation of these types of marketing practices.

The success of these marketing efforts is obvious. In Pakistan, cigarette consumption is increasing at a rate of 8 percent per year and tobacco is now the country's most important cash crop.[8] Lung cancer is now Pakistan's number one cause for male cancer deaths according to Dr. Abdul Chadri, Deputy Director General of Public Health.[6] In a recent epidemiologic study, it was found that the incidence of lung cancer in Pakistan had increased from 4% to 20% of all new cancers during the past 20 years.[9]

Muslim physicians should have a special responsibility to be actively involved in efforts to reduce the tobacco epidemic. Yet in most Muslim countries there has been little outcry from the medical community. No mention is made during the time of the prophet Mohammad (PBUH) of the use of tobacco. This habit entered Muslim cultures after the fall of the Islamic system and was due to the spread of the Western colonial powers. There is nothing in the Ho-

ly Qur'an which specifically prohibits tobacco use. Some people have therefore claimed that smoking is permissible. This argument is indefensible in light of the health consequences of tobacco. On the contrary, a good argument could be made for the point of view that tobacco use is indeed "haram". Muslims believe that health is an "amanat" (trust) from Allah. It should therefore be hard to justify picking up a pack of cigarettes on which it is clearly printed "Smoking is dangerous to your health". The analogy to the use of alcohol is a good one. The Holy Qur'an refers to some advantages in the use of alcohol but states that "Its harm is greater than its advantage".[10]

The people in the United States have been part of a long experiment which has convincingly shown that tobacco is one of the most addictive substances, that its health consequences are enormous, and that marketing can effectively create lifetime users of this drug. The countries of the third world have an opportunity to avoid repeating this tragic experiment. If they are unsuccessful, the tragedy of the American experiment will seem small in comparison to the suffering in the third world.

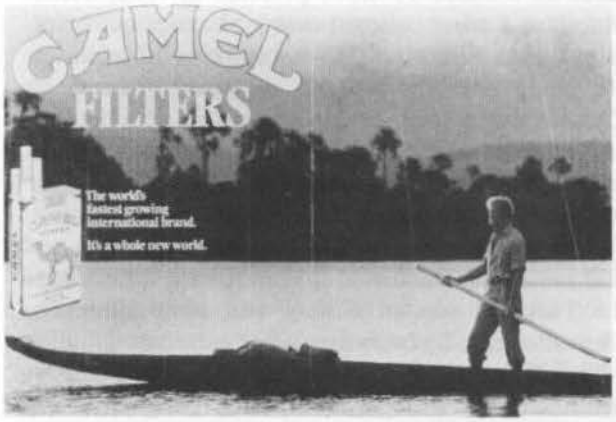

Figure 1. A "Camel" cigarette advertisement from a 1985 issue of the Pakistan International Airlines "In-Flight Magazine.

Figure 2. The traditional method for tobacco use in Pakistan: The Houka.

Figure 3. A road sign outside of Lahore, Pakistan. Princeton is the "Marlboro" of Pakistan.

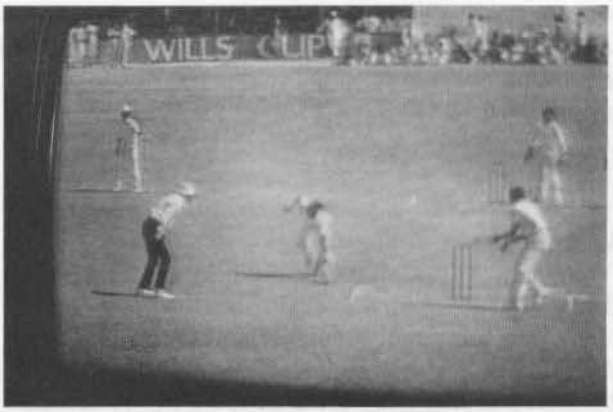

Figure 4. A photograph of a television program from Pakistan. Note the cigarette sponsorship of this popular cricket match (Wills Cup).

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