

Regional Summary for the European Region

World Health Organization, Tobacco Free Initiative, Regional Office for Europe (EURO)

The tobacco epidemic is one of the greatest public health challenges facing World Health Organization (WHO)'s European Region. While it has fallen considerably over the past 30 years and has currently stabilized, smoking prevalence in the Region still remains at a level that is devastating for public health and future generations. The negative trends in smoking prevalence among young people, women and lower socio-economic groups, as well as the gap in tobacco control policies between Member States, are of a particular concern.

According to the data available, at the beginning of 2002 approximately 30% of the adult population in the Region are regular smokers. The overall trend is relatively stable, with a slight decline since the mid-1990s. Nearly 38% of men in the Region are smokers, with an increasing gap between east and west, and a still significant gap between groups of countries with prevalence rates of more than 50% (at least 11 countries) and less than 30% (four countries). Nearly 23% of women are smokers, with a slightly narrowing gap between east and west. Smoking prevalence among young people is around 27-30% Region-wide, with a slight trend upward. No Member States showed a decrease in smoking prevalence among young people during the late 1990s. Among lower socioeconomic groups the trend is also not encouraging, and there is no indication that the socioeconomic gradient in tobacco use is being reduced. The standardized death rate for lung cancer has stabilized or is slightly decreasing in the central and western parts of the Region. The death rate among women is still increasing as they were, in general, exposed to tobacco later than men.

Since 1997, approximately three quarters of European Member States have strengthened their policies on tobacco taxation; two thirds of countries have reinforced measures to combat smuggling; one-third have introduced age restrictions on tobacco sales; and at least eight countries have introduced a complete ban or strict restrictions on direct advertising and have significantly improved regulations on smoking in public places. Since 1997, nearly one-third of Member States have established intersectoral coordinating committees, and half of those have adopted national action plans on tobacco control. In the majority of countries, the range of pharmacological products for smoking cessation has increased and most popular products have become available in pharmacies without prescription.

At the end of 2001, the degree of implementation of the main elements and targets of comprehensive tobacco control policy in the Region is as follows. Approximately 80% of Member States have bans or restrictions on smoking in public places and workplaces (with still significant differences in the degree of implementation) and make available common nicotine replacement therapy (NRT) products without prescription in pharmacies (although their accessibility is in general low). Three-quarters of Member States have established intersectoral coordinating committees. However, only nearly half the Member States have national action plans and partial restrictions or bans on both direct and indirect forms of advertising of tobacco products; only one-third of countries have sustainable and gender-based public information campaigns; nearly one-quarter have earmarked tobacco taxes and restricted access to tobacco products for people under 18 (also eliminating all major impersonal modes of sale); and almost no countries reimburse the cost of treatment of tobacco dependence, publish comprehensive national reports on tobacco control, or have introduced health warnings and requirements for tar and nicotine at the levels recommended by the Third Action Plan for a Tobacco-free Europe.

This review of implementation of tobacco policies has also revealed obstacles and challenges throughout the Region. While most Member States have a policy on taxation of tobacco products, in general it is not explicitly referred to public health concerns, and therefore the increase in the real price of tobacco, where it exists, is not as consistent as it should be. Despite the improvement of measures and instruments to combat smuggling reported by the majority of Member States, the smuggling of tobacco products still has major negative economic and public health impacts throughout the Region. Introducing new laws and regulations has not always brought tangible results, and several countries, mainly in the eastern part of the Region, are still in the process of launching their implementation. Furthermore, the lack of a strategy and comprehensive approach is still characteristic of at least one third of country tobacco control policies and activities. In other countries, insufficient coordination mechanisms, and inadequate funding and monitoring, reduce the effectiveness of national actions. Finally, the lack of public support and public information is still an important

constraint on the effectiveness of many national and local programmes.

Despite new bans and restrictions on advertising, the tobacco industry has continued to develop unscrupulous marketing, promoting “youth anti-smoking education programmes” and indirect forms of advertising targeted mainly at young people. It has been trying to influence national and European Union policies, in some cases successfully, in order to delay, weaken or even annul legislation under development or already adopted.

The main change in the policy area has been in the eastern part of the Region. Most countries of central and eastern Europe introduced or strengthened legislation on tobacco control, and many of them have been achieving success in implementing their new policies, notably in the areas of taxation, advertising and protection of the rights of nonsmokers. Recently many countries in the Commonwealth of Independent States have also begun to introduce new or stronger laws and have reinforced their positions and coordination with regard to international measures against tobacco, and especially the Framework Convention. In the western part of Europe, where the major elements of tobacco control were introduced before the late 1990s, the main changes have been in the implementation of existing laws and regulations and the adoption of the recent European Union (EU) directive on product regulation which, owing to its scope, may have a positive impact throughout the Region. Some western countries have recently introduced stronger legislation,

specifically on advertising, age restrictions, and smoke-free environments.

The WHO European Ministerial Conference, a milestone in the European tobacco control, was held in Warsaw, Poland, 18-19 February 2002. It highlighted the increased political will and commitment of Member States to tackle the tobacco epidemic in the Region and globally. The Warsaw Declaration called for the development of a European Strategy for Tobacco Control, a strong support for a comprehensive Framework Convention on Tobacco Control, and for strengthened partnerships for coordinated policies in the Region.

To strengthen action and sustain progress, Member States adopted the European Strategy for Tobacco Control (ESTC) at the WHO Regional Committee in September 2002. The ESTC sets out strategic directions for action in the Region, to be carried out through national policies, legislation and international cooperation. Its principal target is to obtain a realistic and substantial increase in the rates of not taking up and quitting smoking, in order to at least double the average annual reduction of smoking prevalence in the Region, which currently stands at nearly 1%, and to ensure citizens' right to a smoke-free environment. The Strategy will contribute to building and reinforcing the social environment for a tobacco-free Europe. The ESTC reflects the increased political commitment to, and public health expectations for, tobacco control in WHO's European Region and provides an evidence-based framework and guidance for effective national action and international collaboration.