



FROM THE PRESIDENT, MARGARETHA HAGLUND

Greetings from an autumn dressed Sweden where the fall has now taken a steady grip over the weather mixing the usual ingredients: rain, mist and chilly temperatures! Buuurrrr! For those who attended the 12th WCTOH in Helsinki, Stockholm's weather is now truly THE contrast—Helsinki was so hot that it as though we were constantly sauna bathing without having the possibility to shower afterwards. But why should I complain about the weather when there is more progress to report from home; the smoking prevalence figures in Sweden have decreased further where 19% of women and 16% of men are daily smokers.

The road to this success has been long—as I am sure all of you know. For those of you who believe that the reason for this success is Swedish snus (the moist type of snuff) I think I have to disappoint you. The prevalence of smoking has gone down during the last three decades by 30% among women and 50% among men. The vast majority of the people who quit smoking have not replaced the smoking habit with snus although among men, snus is very common. Swedish Match, the main producer of Swedish snus is now spreading its products to the European Union, the United States, South Africa, India and China through intensive marketing and lobbying activities. Unfortunately, the company is supported by some members of the tobacco control movement whom evidently believe that yet another tobacco product is the best way to save smokers around the world from smoking related diseases.

Why trust the tobacco industry when they say “you don't have to quit smoking, just use our less harmful products instead”? The parallel of Swedish snus to the introduction of “light cigarettes” is obvious. The reason for the tobacco industry to promote snus as a “harm reduction” concept is evident; to keep as many nicotine addicts as possible addicted, and to capture new users emphasizing a more favorable health profile compared to smoking. Dear members, as always, there is no easy solution to this complex problem that will need both continuity and persistence to be solved. What smokers around the globe need is professional cessation support as part of a comprehensive tobacco control approach. Such a strategy does not include fewer restrictions on snus (which is now being discussed in Europe) but more restrictions on all tobacco products.

2003 MEMBERSHIP DIRECTORIES ARE READY...

...and are being shipped to members who requested one. Although we do our best with our members' current information, many of the directories we have mailed in past years were returned to us as undeliverable. This year, INWAT Membership Directories will be sent only to those members who request them.

If you have not requested your copy of the 2003 INWAT Membership Directory and want one, please contact Bonnie Kantor, by email at bonnie@inwat.org or by fax at 1-732-549-9056. If email and fax are unavailable, send a note to Pressing Issues, P.O. Box 224, Metuchen, NJ 08840 USA. Be sure to include your current mailing address when you request your copy. Thanks for your cooperation.

Special Issue Focus: South America



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Intern Notes



My name is Sara Sanchez and I am INWAT's first Intern! I am writing in *the Net* to tell you about my background, my INWAT projects and to welcome any comments that you may have about the Network.

Background

I have five years experience in the Health Sector; most of those years have been in tobacco control. In 1998-1999 I worked for the Pan American Health Organization (Regional Office of the Americas for the World Health Organization) as an Intern. During this time, I co-authored advocacy booklet with Nathalie Valdes on Adolescent Women and Tobacco in the Americas. I learned about INWAT at PAHO.

From 1999-2003, I worked at Public Health Departments in the Province of Ontario (Canada). Some of my projects included the Breathing Space Smoke-free Homes mass media campaign and tobacco-free youth initiatives. I have learned a lot during these short five years and hope to apply my tobacco expertise to more international women and tobacco projects.

Next: INWAT

Right now, I am in Sweden working with Margaretha Haglund on tobacco projects and interning for INWAT. Since my arrival in Stockholm, I have co-authored the feature article on South America's Smoking Situation and have helped to complete the new Global Directory.

During my time at INWAT, I aim to strengthen the links between members and to update the website to feature current projects that you, the members, are working on.

Write me an Email

I am open to any suggestions that you may have about INWAT. Please write me an email to let me know how to improve our network. sara@inwat.org



A Presidential Meeting

At the National Conference on Tobacco or Health in early December in Boston, former INWAT President Deborah McLellan (left) spent some time at our exhibit booth with current President, Margaretha Haglund. About 100 conference participants signed up as new INWAT members.

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INWAT Award Presented to Professor Ruth Roemer at the American Public Health Association Conference

Professor Ruth Roemer was presented the International Network of Women Against Tobacco's (INWAT) 2003 Lifetime Achievement Award at the American Public Health Association Conference in San Francisco in November, 2003. Mira Aghi, the South-East Asia Regional Representative for INWAT presented the award.

The Lifetime Achievement award is given to a woman whose achievements have contributed significantly to tobacco control and public health. INWAT is honored to recognize her many contributions.

The award was presented to Professor Roemer by Mira Aghi. Her presentation speech follows:

Today it is my great honor to represent the International Network of Women Against Tobacco (INWAT) to present our 2003 Lifetime Achievement Award to Professor Ruth Roemer.

As many of you know, INWAT is an international “network” of hundreds of women around the world, working to decrease tobacco use, especially among women.

As the name suggests, our Lifetime Achievement award is given to a woman who has contributed significantly to tobacco control and to public health over a lifetime.

In the short time we have today, it is not possible to describe all of Professor Roemer’s contributions, to tobacco control and to other public health fields. So I will simply mention a few of the contributions that are especially relevant to this audience:

Professor Roemer served as President of the American Public Health Association in 1987. During her Presidency, she led a national letter-writing campaign urging editors of women’s magazines to reject tobacco advertising and to publicize the health hazards of tobacco use. This campaign was one of the first organized efforts to address this important issue.

Professor Roemer was one of the first to recognize the importance of law and policy as instruments of tobacco control, and she authored the landmark WHO publication, “Legislative Action to Combat the World Tobacco Epidemic” published in 1982.

Professor Roemer has been on the faculty of the UCLA School of Public Health for many decades and still teaches there. Countless UCLA students and others in tobacco control and public health have benefited from her teaching, mentoring and friendship, including many in this room.

Especially relevant for this session, is Dr. Roemer’s role in recognizing the potential importance of a world treaty on tobacco. Last Spring, the World Health Assembly unanimously adopted the FCTC; although much work lies ahead, INWAT wants to acknowledge and thank Professor Roemer for her vision, which helped make the dream of an international treaty a reality.

Professor Roemer, INWAT is grateful for your vision, your leadership, and your dedication to tobacco control and public health. You continue to inspire us. On behalf of the hundreds of members of INWAT, I am honored to present you with our Lifetime Achievement award—a small token of our appreciation for your contribution to tobacco control and public health.



South America's Tobacco Situation

by Gabriela Regueira and Sara Sanchez

Women, Girls and Smoking

Tobacco consumption in South American countries, like the rest of the world, has fluctuated over time. Initially, the use of tobacco was almost exclusive to men; however, in the last decades of the 20th century, tobacco consumption among women has increased in a rapid and progressive way. The increase coincides with the incorporation of women in the labor force and the gain of economic independence.

In most South American countries, the number of women who smoke cigarettes is lower compared to men – However, this minority grows at a fast pace every day.

We actually find ourselves in a stage where tobacco use holds a great importance to women, especially adolescent women. Look for example at countries such as Argentina, Uruguay and Chile, the number of adolescent women who smoke is as much or higher compared to male smokers.¹ Even worse, many women start at young ages (13-15 years)² putting themselves at risk to the all the harmful effects of smoking.

According to the statistics in the Global Youth Tobacco Survey² (GYTS), it is in these countries with a high prevalence of young smokers where adolescents are influenced by direct advertising on billboards and in print media. Approximately 9 out of 10 young people in countries like Argentina, Chile and Uruguay are exposed to tobacco promotion on billboards and 8 out of 10 to advertisements in printed publications. It is also important to note that 22% of young people in Montevideo,

Uruguay have received offers of free cigarettes from tobacco industry representatives.

The results of the GYTS suggest a high degree of tolerance to adolescent tobacco use and to a systematic lack of compliance to laws prohibiting the sale of tobacco to minors. For example, in Montevideo almost 70% of youth less than 16 years of age purchased tobacco from stores. More than 60% of underage young people in South America are not turned away from a tobacco purchase when they attempt to buy cigarettes. In Buenos Aires, Argentina the underage purchase rate soars to 93%.²

Youth access to tobacco products is facilitated by the sale of single cigarettes and by the low prices of 'la cajetilla'—a box of 20 cigarettes—which typically costs between 40 cents US—\$1.90 US.¹

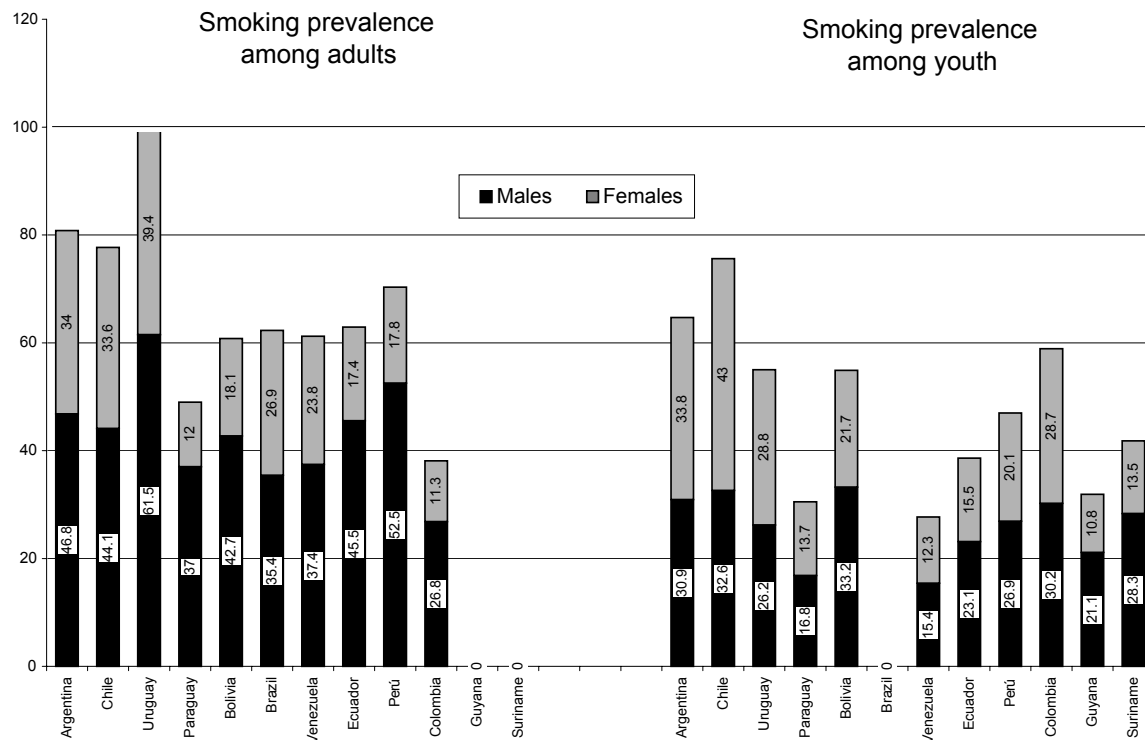
Smoking in the Home

Smoking in the home is common on this continent. The country with the highest rate of smoking in the home in South America is Argentina where 68% of households permit unrestricted smoking— even if children are present. The number 2 and 3 spots are Chile 57% and Bolivia 46%.³

Tobacco control specialists across the globe know that second-hand smoke is harmful²⁻³—especially for children. Because children breathe faster and have smaller lungs compared to adults, they consume much more second-hand smoke in a tobacco smoke filled room. Children raised in a home that



For more information, please refer to the source of these figures: Tobacco Control Country Profiles 2003, 2nd Edition on www.globalink.org and The Tobacco Atlas 2002, WHO



allows smoking are at a greater risk for pneumonia, bronchitis and asthma exacerbations.³⁻⁵

A first step to reduce the number households that permit smoking could be health promotion initiatives to raise awareness about the dangers of second-hand smoke. Ideally, simply knowing that second-hand smoke is dangerous could motivate smokers to smoke outside. A ripple effect may even occur where more people will smoke outside and accept this new behavior.

In reality, knowledge does not always lead to behavior change. In South America, support for smoke-free homes should be complemented by ensuring public places such as health care settings, restaurants and stores prohibit smoking. There is a mix of legislation from country to country where smoking public places is banned in some places and freely permitted in others.

Regardless of the protective legislation, indoor smoking still occurs. Anecdotal testimonies indicate that smoke-free laws are neither respected nor enforced. Ensuring that public places prohibit smoking will show individuals that having a smoke-free environment is a normal and healthy way to live.

Next Steps in Tobacco Control

There is a need for countries in South America to work toward:

- preventing the onset of tobacco use
- smoking cessation
- increasing tobacco taxes
- banning tobacco product promotion
- protecting everyone from second-hand smoke in public places—especially children and pregnant women

By signing the Framework Convention On Tobacco Control,

countries in South America are committed to reducing these alarming statistics and implementing effective smoke-free policies. The FCTC will help implement effective programs and policies to reduce tobacco use.

In South America, there is a lot to do in regard to political control of tobacco. Every time there are more people who unite to fight this battle and overcome this challenge. It is by uniting the efforts of all organizations and individuals aiming to eliminate smoking in this Region that a significant difference can be made in the health of the people in South America.

If you would like more information or would like to help eliminate smoking in South America, contact INWAT Officers **Gabriela Regueira** of la Asociación Argentina de Prevención y Educación del Cáncer or **Beatriz Champagne** of la Fundación InterAmericana del Corazón.

1. Tobacco Control Country Profiles Shafey, Omar, Dolwick Suzanne & Guindon, G. Emmanuel (2003)
2. The Global Youth Tobacco Survey Collaborative Group (2000) Available at URL: http://www.cdc.gov/Tobacco/global/gyts/GYTS_factsheets.htm
3. WHO The Tobacco Atlas, MacKay Judith & Erskin Michael (2002), pp 34-35 Available at URL: http://www.who.int/tobacco/statistics/tobacco_atlas/en/
4. Protection from Secondhand Smoke in Ontario (2001), Ontario Tobacco Research Unit. Available at URL: http://www.camh.net/otru/pdf/special_ets_eng.PDF
5. International Agency for Research on Cancer Monographs (Vol 83) Tobacco Smoke and Involuntary Smoking (June 2002)

In the South American region, Argentina, Venezuela, Brazil, Chile, Paraguay and Uruguay have signed the FCTC. None have ratified the treaty.

From Sweden to Finland and I am happy to report that in Helsinki INWAT was stronger than ever before. INWAT had many activities including five workshops, a press briefing, an information exhibit and a Members Meeting.

I think I dare to say that INWAT managed to promote itself quite well but, unfortunately not in terms of influencing the selection of women speakers and chairs during plenary and main sessions. Unfortunately, I have to report a setback from the 50% female participation reached in Beijing 1997, maintained at Chicago 2000 (thanks to the great efforts by Judith Mackay) to only approximately 35% in Helsinki 2003. The lowest prevalence of female speakers was during the main sessions – a mere 22%-33% per day according to my estimates. My recommendation for the next WCTOH is that organizers make it clear to those arranging sessions to ensure every session have equal representation of women and men from equal numbers of developed and developing countries. For the next conference, perhaps INWAT will have some influence by participating on the International Steering Committee to which to date we have not been invited.

The five INWAT workshops attracted approximately 50 delegates per session – far better than originally expected. More importantly, workshop participants expressed much appreciation for the excellent programs. A warm congratulations goes to the workshop facilitators; Trudy Prins, Amanda Amos, Martina Poetske-Langer, Patti White and Nicola Christofides. The workshop presentations will be available on www.inwat.org.

Our press briefing which focused on the rise of women smoking rates in developing countries attracted a lot of media interest. In fact, INWAT was featured on the back page of the Wednesday issue of the WCTOH Newsletter. We thank the Finnish organizers for this recognition. The press release can be viewed by visiting www.inwat.org. The main theme of the press briefing was the INWAT Africa project which has been reported earlier in the Net. It really was a pleasure for me to learn about the results of the research projects. My sincere thanks goes to the researchers, especially to Nicola Christofides who has held the entire project together. The next phase of the Africa project will be a big policy conference in South Africa in February 2004 under the hospice of the South Africa Government where the terms of policies, the results and conclusions of the eight projects will be discussed.

The INWAT Exhibit attracted a lot of visitors and 72 additional members joined our Network! Approximately 70 INWAT members attended the *Members Meeting* which always coincides with the World Conference. At this meeting, the newly elected Board Members and Regional Representatives were announced.

The Net's feature article is *South America's Tobacco Situation* which paints a picture of how vigorous tobacco industry marketing tactics have hooked millions of women in South America. This feature has been possible by the hard work of two members. First of all our new Secretary, Gabriela Regueira from Argentina and last but not least to Sara Sanchez—who I say is my gift from heaven. Sara who is from Canada is fluent in Spanish and is in Sweden to study Swedish. During her free time, she is a volunteer at the Institute of Public Health helping me to improve the work of INWAT. I must say that Sara is an extremely welcome resource for INWAT. In this Net you can read more about Sara. And please any ideas that you have to improve our network can be e-mailed at sara@inwat.org. Finally, I would also like to thank Beatriz Champagne who has offered to assist us in distributing the South American feature article throughout South America.

When I read the article, I was shocked to see the number of women who smoke in some South American countries – in particular Chile where 43% of young women smoke. There is an obvious tobacco industry presence on this continent partly due to flexible advertising legislation and cheap cigarettes.

On the positive side, South American countries are fighting to reduce the number of women who smoke cigarettes. In fact, six countries in South America –Argentina, Venezuela, Brazil, Chile, Paraguay and Uruguay- have signed the FCTC, none have ratified the treaty. As well, more people are joining together in South America to combat this issue.

All of the recent events have made me more enthusiastic and optimistic that INWAT members will continue to fight the tobacco battle. We must keep working together to ensure that women of the world are not targeted by tobacco companies into a life of nicotine addiction. Let's keep up the good spirit until the 13th WCTOH in Washington 2006. Only the future knows what will happen!

I wish you all a successful 2004.

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If you are interested in regional activities and would like to represent your region, send an email to Bonnie Kantor: bonnie@inwat.org

New INWAT Board in Place

INWAT elections are held in relation to the World Conference on Tobacco Control. As a result of the recent election, the Board has three new members: Lorraine Greaves, Trudy Prins and Gabriela Requeira. There are three new Regional Representatives, as well: Victoria Almquist who has replaced Michelle Bloch for North America, Beatriz Champagne who has taken on South America and Mira Aghi who will represent South East Asia. Each of them has written a short bio so you know a bit more about them.



My name is **Lorraine Greaves** and I have 15 years experience in women's and girls' tobacco control issues. I authored the book, *Smoke Screen: Women's Smoking and Social Control*, as well as reports for Health Canada and articles for journals on women's smoking. I am currently working to evolve better practices for smoking cessation in pregnancy and in policy issues for sub populations of smokers such as Aboriginal people, adolescents and low income women smokers. I am co leading a large study in Canada on appropriate social support interventions for low income women smokers and continue to be interested in gender sensitive tobacco policy and international issues in girls and women's tobacco control. I lead the British Columbia Centre of Excellence for Women's Health, a research centre in Vancouver, Canada, part of the national Centres of Excellence for Women's Health Program.

I am **Trudy Prins**, and I've been the executive director of the Dutch Tobacco Control organization since 1999. My organization employs 48 people who are active in research, mass-media campaigning, setting up teaching programmes, making protocols for doctors, nurses and obstetricians; we give info and advice on policy and legislation to the government, and we run a callcenter for info and advice, and we make quit courses and give coaching to quitters. I am also President of the European Network for Smoking Prevention, and Vice President of the European Federation of Patients' Organisations for Asthma, Allergies and Airways Diseases.



The gender aspect should become more prominent, not only in tobacco control programmes, but also in policy and in legislation. INWAT combines the expertise and the passion of its network members, and with them I would like to realize such prominence.

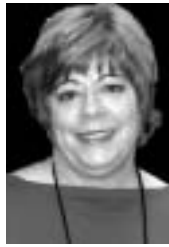


My name is **Gabriela Requeira**. I'm a psychologist and have been working in tobacco control for more than two years at the Argentinian Association of Education and Prevention of Cancer (Asociación Argentina de Prevención y Educación del Cáncer) in Bahía Blanca, Argentina.

Mainly, I coordinate School Tobacco Prevention Programs and facilitate Advocacy Workshops in Argentinian cities. The aim of this work is to build capacity and to encourage our legislators and to sign and ratify the Framework Convention on Tobacco Control.

I have also been helping to coordinate an International American Cancer Society event named the "Relay for Life." Coordinating this event has been a challenge as it is the first time that it will take place in South America. The last year, I worked with a research team on a project named "Evaluation of two strategies of Intervention in Health Professional in Tobacco Control."

About INWAT: I wish to meet more women from South America and from the rest of the world whom are fighting against tobacco. I believe that we must work together to obtain good results.



I am **Victoria Almquist** and I have been with the Campaign for Tobacco-Free Kids for four and a half years. I manage our Accountability Project, which tracks tobacco industry activities and develops responses, and I also head up our work on women, girls and smoking. I am pleased to work with INWAT and my goals are to involve more women's and girls' groups as advocates on the issue of women and tobacco.

I am **Beatriz Champagne**, Executive Director of the InterAmerican Heart Foundation. Our organization started in 1992. Tobacco control has been a top priority since its inception. We have a Director of Tobacco Control, Dr. Eduardo Bianco, of Montevideo, Uruguay, to manage this program. In the last 3 years or so, we focused principally on the FCTC, including organizing the network, supporting government delegates, providing a forum for NGOs working to promote the FCTC, providing info to the media, getting health professionals more involved. Currently we are promoting signature and ratification of FCTC in our region. We have a smoking cessation program "Guide your Patients to a Smoke Free Future" jointly with the Pan American Health Organization. We manage the CLACCTA listserv to communicate info to a wide network of people in Latin America and the Caribbean. In addition, the Foundation has piloted a program to promote smoking cessation training in schools of health sciences. Working with INWAT, I hope we can give more visibility to the issues of women and tobacco in our region.



I am **Dr Mira Aghi** and I am a UN consultant on HIV/AIDS, drug abuse and adolescent issues. I have been described as 'an active participant in the global war against tobacco use'. In 1989, I led the campaign against a tobacco company that wanted to promote a women's cigarette in India.

Today, I am a founding member of a group named the Advocacy Forum for Tobacco Control, a coalition of Indian NGOs, including Voluntary Health Association of India, Salaam Bombay, Cancer Patients Aid Association and Hriday-Shan. The Forum is primarily working towards informing and educating the public about the Tobacco Control Bill that includes a ban on advertisements and sale of cigarettes to minors.

In India, most urban women who smoke are working with multi-nationals, are journalists or students. In rural areas, the tobacco industry has several women and children smoking beedis (local cigarettes). Besides smoking, the rural women also chew tobacco. It is my goal as the INWAT Regional Representative for South-East Asia to advocate against tobacco advertising to women and make them aware that Tobacco Companies are not our friends.

Scenes from the World Conference on Tobacco or Health Helsinki, August 3-8, 2003



The INWAT exhibit with Mira Aghi, from India, (second from left) and Elisabeth Tamang, from Italy, (right) speaking with new members.



Regional representative from Australia, Jane Martin, presenting at a session.



INWAT member from Germany, Martina Poetske-Langer, presented the INWAT session about the tobacco industry's seduction of women.



The Africa research team with the project leader Nicola Christofides (second from left) and Margaretha Haglund (second from right).



Luther Terry Award winner and INWAT member from Malaysia, Mary Assunta, presenting at one of the INWAT sessions.

FIND INWAT ON THE WEB AT
WWW.INWAT.ORG

Look for big changes to our site coming in early 2004!