

Progress, Challenges and To-Dos for a Tobacco-Free Bangladesh: An Analysis based on GATS 2017 Findings

Tobacco use in Bangladesh is in decline. In the last 8 years, the use of tobacco has seen an 18.5 percent relative decline. In 2009, the prevalence of tobacco use among 15 y/o and above stood at 43.3 percent which gradually decreased to 35.3 percent in 2017. The progress, overall, is satisfactory but not sufficient to make Bangladesh tobacco-free by 2040. The prevalence of tobacco use in the neighboring country, India has gradually decreased to 28.6 percent.¹ The percentage of smokers has decreased to an all-time low 14 percent in the US as reported in 2018.² In France, more than 1 million people quit smoking last year.³ So, given the progress made by some developed countries, or at least the neighboring country, the progress made by Bangladesh gets faded and eclipsed to a considerable extent. It should be noted that the use of tobacco causes around 161,000 deaths in Bangladesh a year.⁴ It has been ranked as the fourth major contributing factors behind premature deaths in the country.⁵ The financial loss incurred per year due to tobacco use exceeds BDT 158.6 billion.⁶ Child health is also under threat because of tobacco use. A recent study conducted among school children of Dhaka has found out that 95 percent of school-going children have higher nicotine in their body which is undoubtedly a result of passive smoking.⁷ Another study has revealed the excruciating fact that child laborers constitute 50-70 percent of bidi factories' workforces.⁸

The government of Bangladesh signed the Framework Convention on Tobacco Control (FCTC) in 2003 and subsequently formulated the *Smoking and Tobacco Products (Usage) Control Act* in 2005 in order to initiate the implementation of the treaty and also amended the *Act* in 2013 to make it more effective and time-fitting. The Rules of this law were later adopted in 2015. The implementation of the FCTC was also incorporated amid the 7th Five-Year-Plan with a view to mainstreaming tobacco control issue in the development process and the realization of Sustainable Development Goals (SDGs). In addition, the government has set year-wise targets to reduce tobacco use in its SDG Monitoring and Evaluation Framework for measuring the progress of the SDGs. In January 2016, at the South Asian Speakers' Summit on Achieving Sustainable Development Goals (SDGs), the Prime Minister announced the long-term goal for a tobacco-free Bangladesh by 2040. To realize this goal, the PM also provided directives to implement a national tobacco control program using Health Development Surcharge (HDS) funds across the country. The HDS Management Policy 2017 has already been approved and the finalization of the country's tobacco control program is also under process.

Prevalence of Tobacco Use, GATS 2017 and 2009

Tobacco Use	Year 2017		Year 2009		Relative decline
Tobacco User	35.3%		43.3%		18.5%
	3 Crore 78 lakh		4 Crore 13 lakh		
	Male 46%	Female 25.2%	Male 58%	Female 28.7%	
Smoker	18%		23%		21.7%
	1 Crore 92 lakh		2 Crore 19 lakh		
	Male 36.2%	Female 0.8%	Male 44.7%	Female 1.5%	
Cigarette Smoker	14%		14.2%		1.4%
	1 Crore 50 lakh		1 Crore 35 lakh		
	Male 28.7%	Female 0.2%	Male 28.3%	Female 0.2%	
Bidi Smoker	5%		11.2%		55.3%
	53 lakh		1 Crore 6 lakh		
	Male 9.7%	Female 0.6%	Male 21.4%	Female 1.1%	
Smokeless Tobacco User	20.6%		27.2%		24.3%
	2 Crore 20 lakh		2 Crore 59 lakh		
	Male 16.2%	Female 24.8%	Male 26.4%	Female 27.9%	

Tobacco Use

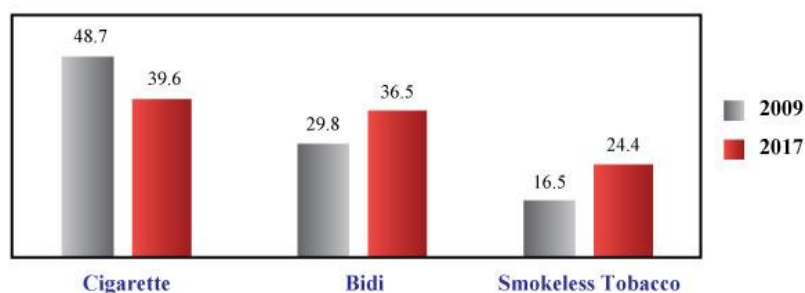
As per GATS 2017 report, currently 35.3 percent (37.8 million) of adults in Bangladesh use tobacco. Among women, the rate is 25.2%, and among men, it is 46%. It should be noted that in Bangladesh, the use of tobacco can be categorized into two types: **smoked** (cigarettes and bidis) and **smokeless** (jarda, gul etc). Among Bangladeshi adults, the percentage of smokeless tobacco users is 20.6% (female consumer 24.8%, male 16.2%), and the percentage of smokers is 18% (male consumer 36.2%, female 0.8%). The percentage of tobacco use reduction differs between genders. GATS 2017 data suggests that while the overall prevalence of tobacco use has decreased by 18.5% within the period between 2009 and 2017, for women the reduction has been only 12.2%, which is very frustrating. In the same period, the usage of tobacco fell by 21% among men. Compared to 2009, consumption of smokeless tobacco was 39% less in 2017 among the men, but among women, it decreased by only 11%. Another frustrating fact is that, between 2009 and 2017, the percentage of cigarette smokers remained almost same (14.2% in 2009 and 14 percent in 2017). The total number of smokers has gone up from 13.5 million to 15 million. This increase is indeed very alarming. A new aspect revealed by GATS 2017 is that currently the lowest income people have a much higher rate (48%) to use tobacco than the highest earning class (24%). Particularly the staggeringly high rate of smokeless tobacco use among women (24.8%) is quite worrying. Similarly, the rural population has more tobacco users (37.1%) than the urban dwellers (29.9%). Among the eight divisions, five divisions have a rate of tobacco users well above the national average (35.3%), with Khulna at 36.4%, Rangpur at 38.7%, Barisal at 40.1%, Sylhet at 47.4% and Mymensingh at 48.2%.

Secondhand Smoke

Despite a ban on smoking in indoor workplaces by the tobacco control law (*Smoking and Tobacco Products (Usage) Control Act 2005 (Act No. XI of 2005)*), 8.1 million people become victim of passive smoking at work on a regular basis, which is quite frustrating. However, there has been an overall relative decrease of 32% in this figure between 2009 and 2017. The rate of exposure to passive smoking at home has decreased from 2009 (50.9%) to 2017 (39%), which is undoubtedly a positive change. Still about 48 million (39%) Bangladeshis are exposed to passive smoking at home, with the majority being women. As close to 37% women are victims of passive smoking at home, even though only 0.8% of women are smokers. In government office buildings, the rate of exposure to passive smoking has decreased by 50%. The scenario of passive smoking in mass transports is still quite appalling. Almost 25 million adults are exposed to passive smoking while using some public transport. Nonetheless, due to various anti-tobacco campaigns, exposure to secondhand smoking in public transports has decreased to some extent within 2009 (56.3%) and 2017 (44%). And yet, the 100% smoke-free public places are not completely free of smoking, as 12.7%, 8.2% and 50% of the people are exposed to passive smoking in health care facilities, schools and restaurants respectively.

Tobacco Industry Advertising

As per the tobacco control law (*Smoking and Tobacco Products (Usage) Control Act 2005*) banned advertisements of tobacco products in mass media. the tobacco companies have started to promote their products at the points of sale. The amendment put forward in 2013 has also banned **Noticed any pro-tobacco advertisements, sponsorships, or promotions in any media/location in the past 30 days⁹**



advertisements and promotions of tobacco products at points of sale. Since then, tobacco companies are developing newer tactics to promote their products so as to retain their share of market and to

create more customers. According to GATS 2017, almost 54% of the population have seen advertisements of cigarettes or *bidis*, while nearly 21% have seen some advertisement of *jarda* or *gul* (chewable tobacco). In the last 30 days predating the survey, 40%, 37% and 25% of the people have seen tobacco companies' advertisements, promotion or sponsorship of cigarettes, *bidis* and smokeless tobacco products respectively. The invasive promotion of tobacco companies is ever increasing. The rate of people who saw advertisements of *bidis* rose by 22.5% between 2009 and 2017. In case of smokeless tobacco products, the rate of increase is 47.9%, which is highly alarming. We should keep in mind that these cheap tobacco products are mostly consumed by the low income people and the women who are most susceptible to influence of advertisement.

Counter Advertising

According to GATS 2017, anti-tobacco information or campaign in any form has reached 55.9% of the adult population in the 30 days predating the survey. But the dismaying news is that almost an equal amount of the people (53.4%) have seen some forms advertisements of cigarettes or *bidis*. This shows us that the anti-tobacco campaign has, so far, been unable to outrun the tobacco industry's relentless promotion of their products and this is quite upsetting. In the preceding 30 days, only 31.5% of the population have been reached with information against the usage of smokeless tobacco.

Graphic Health Warning on Tobacco Packaging

The number of tobacco users noticing health-related warning messages on packets or containers of tobacco products has increased substantially compared to the past. Simultaneously, the desire among tobacco users to quit after seeing these messages has increased as well. Nevertheless, almost half of the consumers of smokeless tobacco have stated that they did not see any GHWs or other health warning messages on their packets or containers, which is disconcerting. We should be concerned about this because smokeless tobacco users outnumber the smokers in Bangladesh by large margin and it is the working class with low income and no education who are the consumers of smokeless tobacco. As stated in GATS 2017, 96.6% of cigarette smokers, 83.8% of *bidi* smokers and 53.9% of smokeless tobacco users had seen the said warnings on packets or containers. Moreover, 79%, 70% and 41% of consumers of cigarette, *bidi* and smokeless tobacco products respectively have at least thought about quitting after seeing these warnings, which is an encouraging phenomenon.

Tobacco Economics

According to GATS 2017, the average monthly expenditure for *bidi* has increased by 50% in the preceding eight years for each individual smoker. Currently, a cigarette smoker spends on average BDT 1077.7 per month for cigarettes. On the contrary, the average monthly expenditure for education and health of a household is only BDT 835.7 (Household Income and Expenditure Survey 2016). If the money spent on tobacco could be channeled into spending for education, health or the fight against human poverty, the economic condition of families could be radically improved and it could help in attaining the SDGs (Sustainable Development Goals) Goal-1. Henceforth, tobacco is a strong impediment in reducing poverty and achieving SDG Goal-1. The yearly revenue collected from the tobacco sector is outweighed by the resulting socio-economic, health and environmental damages. Research shows that tobacco is one of major barriers in reaching the targets prescribed in SDGs.¹⁰

What is GATS

The *Global Adult Tobacco Survey* (GATS) is the global standard for systematically monitoring adult tobacco use (smoked or smokeless tobacco) and tracking key tobacco control indicators. GATS is a nationally representative household survey of persons 15 years of age and older, and designed to produce estimates overall and by gender and residence. GATS findings enhance countries' capacity to design, implement and evaluate tobacco control programs. It will also assist countries to fulfill their obligations under the World Health Organization (WHO) Framework Convention on Tobacco Control (FCTC).

It was implemented by the Bangladesh Bureau of Statistics under the coordination of the National Tobacco Control Cell of the Ministry of Health and Family Welfare. In Bangladesh, GATS was first conducted in 2009 and repeated after eight years in 2017. In 2017, a total of 14,880 households were sampled. One individual was randomly chosen from each selected household to participate in the survey. WHO and Centers for Disease Control and Prevention (CDC) provided technical support to Bangladesh to conduct GATS. Fund was provided by the Bloomberg Initiative through CDC Foundation and WHO.

Cessation

The number of smokers receiving advice from a health-care provider to quit tobacco use has rounded up to 65.8% in 2017, which was 52.9% in 2009. Likewise, the amount of smokeless tobacco users receiving similar suggestion has increased from 47.9% to 57.2% in the same period. Notwithstanding, the actual ratio of smokers and smokeless tobacco users who have tried quit is 44.9% and 31.4% respectively. The affordable price of tobacco products and the lack of warning messages with pictures or depictions are posing as obstacles in these cases.

Electronic Cigarette

While just as harmful as conventional cigarettes, the tobacco companies have been trying to present and prove e-cigarettes as “safer alternatives” to the policy-makers. The amount of e-cigarette users according to GATS 2017 is 0.2%, which is very low compared to the users of traditional tobacco products. But the number of people who has heard about e-cigarettes is 6.4%. Generally, GATS is executed on people of 15 years of age and above. Therefore, the degree of its spread among school-going children had not come up in the studies. While it is true that e-cigarettes have not taken over the market yet, its usage is undeniably on the rise. E-cigarette materials are being sold and exchanged over the internet and social media. Recently the multinational tobacco company Japan Tobacco Inc. (JTI) has launched its operations in Bangladesh, and they sell e-cigarettes, vaporizers and likewise products in addition to conventional cigarettes around the world. More problematically, till now, no legal requirements, restrictions or means of observation has been introduced about the usage of e-cigarettes.

Discussion and Measures

The prevalence of tobacco use in Bangladesh has reached an alarming stage. The lack of effective price and tax measures has rendered tobacco very cheap here in Bangladesh, and as a result the consumption has not decreased as expected. Likewise, the revenue from tobacco sector is not increasing significantly. The revenue collected from smokeless tobacco products is particularly low, constituting a total of 0.2% of the total tobacco revenue in 2016-2017 fiscal year. And yet, more than 50% of the tobacco users are users of smokeless tobacco, with the majority of them being the poor and the women. This means that tobacco taxation, the most effective tool for tobacco control is not safeguarding the majority of tobacco users in Bangladesh, especially the ones who are most at risk (the women and the poor). The government, so far, has failed to accumulate a large share of its due revenues as well.

Graphic health warning on the upper 50 percent of tobacco packs has not made possible yet. A myriad of shapes and sizes are available for containers of smokeless tobaccos and packets of *bidis*, has made it almost impossible to depict GHWs effectively as per the law. To reach the purchase ability of the poor, tobacco companies market these products in cheap and in smaller-sized packets and boxes.¹¹ Because of this, most of the warning messages on these products are not legible, and at times they are not even printed on the packs. Hence, this tool is not contributing effectively in reducing tobacco use. Meanwhile, more than 60% of tobacco users (most of whom are poor, illiterate and/or women) regularly consume these *bidis* and smokeless tobacco items.

Still now a large number of people are exposed to secondhand smoking. When tobacco control law allows “Designated Smoking Zone”, the anti-tobacco stance weakens from a legal viewpoint. Moreover, the failure to completely execute the existing law is barring us from attaining our objectives. Among such debacles are: not blocking the promotion and advertisements of tobacco products at points of sale; the continuous presence of smoking in public places and public transports; the easy availability of tobacco products and the absence of an effective and well-structured tobacco taxation policy; legal loopholes, such as the display of tobacco products at points of sale, the CSR activities of tobacco companies, unlicensed and retail tobacco trade, the presence of tobacco points of sale around educational institutions and so on; the interference of tobacco companies, especially the multinational ones; and the partnership of the government in the tobacco business. These deficiencies

have made it hard for us to fend off the tobacco companies and have led to a failure to reach the expected goals of tobacco control.

Effective implementation of law	<ul style="list-style-type: none"> ● To ensure the effective implementation of tobacco control law, we must: <ul style="list-style-type: none"> ○ Strengthen effective implementation of tobacco control law through implementing a national tobacco control policy/program using Health Development Surcharge Funds. ○ Include tobacco control program in the priority lists of Sustainable Development Goals and 7th Five Year Plan.
Effective Price and Tax measures	<ul style="list-style-type: none"> ● To guarantee the execution of effective price and tax measures so as to reduce tobacco consumption, we must: <ul style="list-style-type: none"> ○ Impose taxes on all tobacco products effectively so that the prices of tobacco products go well beyond the purchasing capacity of the people, especially of the young and the poor, ○ Formulate and implement a simple but effective tobacco price and tax policy. The production and the sales of all tobacco products, especially smokeless tobacco products and <i>bidis</i>, must be brought into the tax-net.
Combating tobacco industry interference	<ul style="list-style-type: none"> ● To ensure tackling tobacco company interference, we should: <ul style="list-style-type: none"> ○ Finalize and implement the policy drafted on the basis of FCTC article 5.3 as soon as possible, ○ Amend laws as deemed necessary to revoke the partnership of governments in the tobacco company, ○ Ban any investment in tobacco business in the country's foreign investment policies.
Law Amendment	<ul style="list-style-type: none"> ● To make the tobacco control law more consistent with FCTC, we should: <ul style="list-style-type: none"> ○ Ban any "Designated Smoking Zone", and expand the definition of smoke-free public places, ○ Increase the size of Graphic Health Warnings from 50% to 90%, ○ Ban display of tobacco products at points of sale, ○ Introduce a single packet/container design/size for all tobacco products, ○ Ban the sales of tobacco products in the vicinity of educational institutions, ○ Ban single stick/unpacked sales and unlicensed sales of tobacco products, ○ Ban all CSR activities (Corporate Social Responsibility), donations and other assorted activities of tobacco companies, ○ Impose ban on sale, import and the export of emerging products such as e-cigarettes, heated tobacco products etc.

¹ Global Adult Tobacco Survey (GATS). India 2016-17. Available at https://www.who.int/tobacco/surveillance/survey/gats/GATS_India_2016-17_FactSheet.pdf

² <https://www.cdc.gov/media/releases/2018/p1108-cigarette-smoking-adults.html>

³ <http://www.santepubliquefrance.fr/Actualites/Tabagisme-en-France-1-million-de-fumeurs-quotidiens-en-moins>

⁴ <https://tobaccoatlas.org/country/bangladesh/>

⁵ Global Burden of Disease Study. Country profile Bangladesh 2017. Available at <http://www.healthdata.org/bangladesh>

⁶ Goodchild M, et al. *Tob Control* 2017;0:1-7. doi:10.1136/tobaccocontrol-2016-053305. Available at <http://tobaccocontrol.bmj.com/content/27/1/58>

⁷ *Secondhand Smoke Exposure in Primary School Children: A Survey in Dhaka, Bangladesh 2017*. *Nicotine & Tobacco Research*. Available at

<https://academic.oup.com/ntr/advance-article/doi/10.1093/ntr/ntx248/4677311?guestAccessKey=84169f0f-7822-4584-8e94-258a311bd235>

⁸ *Short-term (private) gains at the cost of long-term (public) benefits: child labour in bidi factories of Bangladesh*. *International Journal of Behavioural and Healthcare Research*. Available at <http://www.inderscience.com/info/ingeneral/forthcoming.php?jcode=ijbhr>

⁹ www.searo.who.int/bangladesh/gatsbangladesh2017comparison14aug2018.pdf

¹⁰ *Tobacco or Sustainable Development: Tobacco Industry Interference and Strategy in Bangladesh*. *PROGGA*, June 2016. <http://progga.org/wp-content/uploads/2011/01/Tobacco-or-Sustainable-Development.pdf>

¹¹ *Rahman SM, Alam MS, Zubair A, et al Graphic health warnings on tobacco packets and containers: compliance status in Bangladesh Tobacco Control Published Online First: 12 June 2018*. doi: 10.1136/tobaccocontrol-2018-054249

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