TOBACCO | DECENT WORK

How tobacco control contributes to achieving Sustainable Development Goal 8

BACKGROUND

In September 2015, the UN General Assembly formally adopted the Sustainable Development Goals (SDGs). The goals call for all countries to eliminate poverty and hunger worldwide, protect the climate, promote decent work and improve public health.

Goal three (health) includes the implementation of the WHO Framework Convention on Tobacco Control (FCTC). With good reason, considering the fact that seven million people die each year as a result of consuming addictive tobacco products. This is the leading preventable cause of death through non-communicable diseases (NCDs).

Tobacco control is also relevant for the achievement of other development goals. For example, the reduction of tobacco consumption and production con-

DECENT WORK AND ECONOMIC GROWTH

Goal 8: Promote sustained, inclusive and sustainable economic growth, full and productive employment and decent work for all

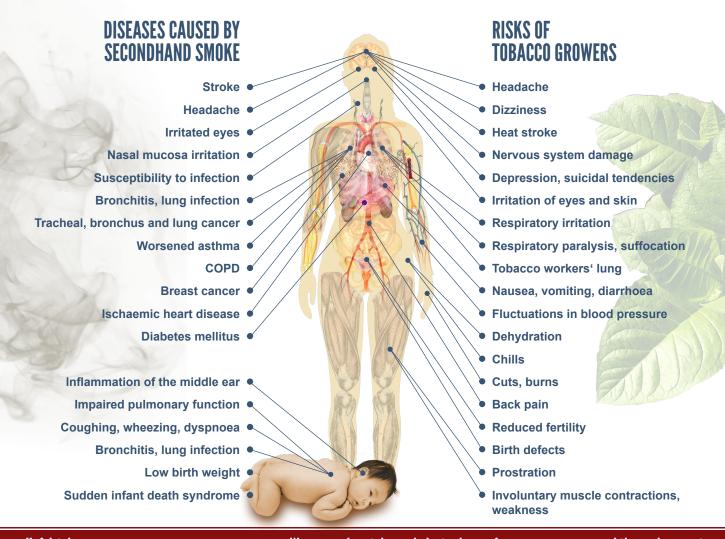
tributes to the eradication of poverty and hunger (SDGs 1 and 2)² and significantly influences the attainment of decent work (SDG 8).

OCCUPATIONAL HEALTH NEEDS SMOKE FREE ENVIRONMENTS

Secondhand smoke causes 886,000 deaths each year.³ Substances contained in secondhand smoke increase the risk of developing lung cancer or suffering a stroke and can cause chronic-obstructive pulmonary disease (COPD).⁴

Some of these risks are amplified if the concerned individual is at the same time exposed to other substances, such as asbestos.⁵

Globally, 433,000 people die each year because they were exposed to second-hand smoke at work. That is almost half of all deaths caused by secondhand smoke, and almost 20% of the 2.3 million deaths caused by occupational diseases and injuries.⁶ Secondhand smoke at work furthermore causes 14.4 million disability-adjusted life-years (DALYs).⁷ Many of the risks related to work can



be reduced, but not entirely eradicated because they are directly linked to materials required in production. This is different when it comes to secondhand smoke: Deaths and diseases would be entirely avoidable if all workplaces were smoke free. Additionally, this would significantly reduce the number of workplace fires. The National Health Service Scotland estimates that about 20% of fires at work in Scotland are started by cigarettes or discarded matches.8

sion and suicidal tendencies. In severe cases, contaminated individuals are at acute risk to suffocate. 13

In addition, the tobacco plant itself contains the water- and liposoluble neurotoxin nicotine, that can be absorbed through the skin, especially when the tobacco leaves are wet. This causes an acute nicotine poisoning, known as Green Tobacco Sickness (GTS). It leads to dizziness, nausea, vomiting, diarrhoea, headache and muscle weakness.

TOBACCO CONTROL IS PART OF THE DEVELOPMENT GOALS

With **SDG 3**, the United Nations want to "ensure healthy lives and promote well-being for all at all ages". This includes target 3.a, which aims to strengthen the implementation of the WHO Framework Convention on Tobacco Control (FCTC).

There is no safe level of exposure to tobacco smoke. Only a 100% smoke free environment is a sufficient protection.⁹ Comprehensive smoke free laws are in place in 55 countries, covering 1.5 billion people worldwide (about 20% of the world's population).¹⁰ The least protected remain workers in bars, restaurants and pubs – only 36% of countries have implemented legislation that prohibits smoking in these venues.¹¹

OCCUPATIONAL INJURIES IN TOBACCO GROWING

More than 17 million people around the world work in tobacco farming, primarily in low- and middle-income countries where labour standards are often low.¹²

Tobacco growing is shaped by intensive use of pesticides and other chemical inputs. Occupational injuries like poisonings are prevalent (SDGs 8.8, 3.9). Smallholder farmers often lack protective clothing, or the protection they have access to is not appropriate for the climatic conditions they work in. They often use hand-held sprayers, increasing their risk of exposure significantly. Poisonings with organophosphates and other agrochemicals cause nausea, headache, dizziness, neurological damage, depres-

Severe cases need emergency care in hospital to treat the resulting dehydration. 14 GTS is prevalent among tobacco workers: A study in Southern Brazil showed that 9.6% of men and 15.7% of women had experienced at least one episode in the past growing season. 15 According to a study in North Carolina, a tobacco worker had a 20% chance of having a GTS event during any given week in harvest season. 16

In this context, the widespread child labour in tobacco growing is particularly alarming. Children are working in the fields in virtually all top tobacco growing countries, including Brazil, Indonesia, Malawi, Argentina and the USA.¹⁷

Because of the hazardous work that puts children at risk of poisonings and other injuries, child labour in tobacco growing is a violation of ILO Convention No. 182 against the worst forms of child labour as well as Articles 28, 31 and 32 of the UN Convention on the Rights of the Child (SDGs 4, 8.7).18

Furthermore, tobacco estates in Malawi have been found to use forced labour. ¹⁹ The tobacco workers' union TOAWUM complains that tobacco companies deny them basic rights to freedom of association and collective bargaining, as enshrined in ILO Conventions No. 98 and 154 (SDG 8.8). ²⁰

WHAT NEEDS TO BE DONE

Sustainable Development Goal 8 hugely benefits from tobacco control. The implementation of Article 8 of the WHO FCTC (Protection from secondhand smoke) significantly contributes to decent working conditions (SDG 8.8), by substantially reducing occupational diseases and injuries.

There is an urgent need to promote occupational health and safety for tobacco farmers and workers and to reduce the specific risks associated with tobacco growing (GTS). More research into short-and longterm consequences of GTS and effective prevention measures is necessary. Additionally, medical personnel in tobacco growing regions should be trained to diagnose cases of GTS and how to treat them (SDG 8.8, FCTC Art. 18).²¹

Child labour in tobacco growing has to be eradicated (SDG 8.7). To achieve this, manipulations of leaf prices by corporations and the power imbalance between smallholder farmers and multinational tobacco companies have to be addressed. Thus it can be ensured that tobacco growers do not have to use the unpaid labour of their children to make ends meet. In the long run, governments should promote and support alternative livelihoods for tobacco smallholders (SDGs 8.2., 8.3, FCTC Art. 17) to achieve a sustainable work environment with less risks of occupational injuries and diseases (SDG 8.8), and to eradicate poverty in tobacco farming regions (SDG 1).

Tobacco industry interference prevents the International Labour Organization (ILO) from effectively fighting for smokefree workplaces and push for tobacco workers' rights. The ILO should stop its public-private partnerships with tobacco companies and their affiliated organizations by adopting the UN model policy against tobacco industry interference.²²

Sources

Bibliography available online:

→www.unfairtobacco.org/en/sdg-facts04 Further information on tobacco & the SDGs:

→www.unfairtobacco.org/en/sdgs

Unfairtobacco

c/o BLUE 21 | Gneisenaustr. 2a | 10961 Berlin | Germany Phone: +49 - (0)30 - 694 6101 | Email: info@unfairtobacco.org Website: www.unfairtobacco.org

Author: Laura Graen, www.lauragraen.de Layout: Michael Tümptner, www.neungradplus.de

Berlin, November 2017

Unfairtobacco exposes how tobacco industry harms farmers, consumers and the environment.

With financial support from ENGAGEMENT GLOBAL on behalf of Bundesministerium für wirtschaftliche Zusammenarbeit und Furbrickfung

With the kind support of





The contents of this publication are the sole responsibility of the Berlin Working Group on Environment and Development (BLUE 21 e.V.) and do not reflect the views of Engagement Global gGmbH, the Federal Ministry for Economic Cooperation and Development or the Berlin Senate Department for Economics, Energy and Businesses.

SOURCES

- 1 World Health Organization 2017: WHO report on the global tobacco epidemic, 2017: monitoring tobacco use and prevention policies. Geneva, Switzerland. Online: http://apps.who.int/iris/bitstream/10665/255874/1/9789241512824-eng.pdf?ua=1.
- 2 Laura Graen 2016: SDG-Factsheet No. 1: Tobacco | Poverty | Hunger: How Tobacco Control can contribute to achieving Development Goals 1 and 2. Berlin, Germany: Unfairtobacco / Berliner Landesarbeitsgemeinschaft Umwelt und Entwicklung (Blue 21). Online: https://www.unfairtobacco.org/en/sdg-facts01.
- **3** Emmanuela Gakidou et al 2017: Global, Regional, and National Comparative Risk Assessment of 84 Behavioural, Environmental and Occupational, and Metabolic Risks or Clusters of Risks, 1990–2016: A Systematic Analysis for the Global Burden of Disease Study 2016, The Lancet 390, No. 10100: 1345–1422, doi:10.1016/S0140-6736(17)32366-8.
- 4 Deutsches Krebsforschungszentrum 2015: Tabakatlas Deutschland 2015. Heidelberg, Germany: Pabst Science Publishers. Online: http://www.dkfz.de/de/tabakkontrolle/download/Publikationen/sonstVeroeffentlichungen/Tabakatlas-2015-final-web-sp-small.pdf. Glenn M. Landers et al 2017: County Smoke-Free Laws and Asthma Discharges: Evidence from 17 US States, Canadian Respiratory Journal, doi:10.1155/2017/6321258.
- Gakidou et al 2017: Global, Regional, and National Comparative Risk Assessment of 84 Behavioural, Environmental and Occupational, and Metabolic Risks or Clusters of Risks, 1990–2016.
- **5** Carin Håkansta 2004: Workplace Smoking. Working Paper: A Review of National and Local Practical and Regulatory Measures. International Labor Organization. Online: http://www.ilo.org/wcmsp5/groups/public/---ed_protect/---protrav/---safework/documents/publication/wcms_108424.pdf.
- **6** Gakidou et al 2017: Global, Regional, and National Comparative Risk Assessment of 84 Behavioural, Environmental and Occupational, and Metabolic Risks or Clusters of Risks, 1990–2016.
- **7** Gakidou et al 2017: Global, Regional, and National Comparative Risk Assessment of 84 Behavioural, Environmental and Occupational, and Metabolic Risks or Clusters of Risks, 1990–2016.
- International Labour Organization n.D.: Safety and Health at Work. Online: http://www.ilo.org/global/topics/safety-and-health-at-work/lang--en/index.htm.
- **8** NHS Health Scotland 2013: Smoking Policy. 17 April. Online: http://www.healthyworkinglives.com/advice/Legislation-and-policy/employee-issues/smoking.
- **9** WHO Framework Convention on Tobacco Control Secretariat 2007: Guidelines for implementation of Article 8: Protection from exposure to tobacco smoke. Online: http://www.who.int/fctc/treaty_instruments/adopted/Guidelines_Article_8_English.pdf?ua=1.
- 10 World Health Organization 2017: WHO report on the global tobacco epidemic, 2017: monitoring tobacco use and prevention policies.
- 11 World Health Organization 2017: WHO report on the global tobacco epidemic, 2017: monitoring tobacco use and prevention policies.
- **12** Laura Graen 2014: Doppelte Last: Tabak im Globalen Süden. Berlin, Germany: Unfairtobacco / Berliner Landesarbeitsgemeinschaft Umwelt und Entwicklung (Blue 21). Online: http://www.unfairtobacco.org/doppeltelast.
- 13 Deutsches Krebsforschungszentrum 2009: Rote Reihe Tabakprävention und Tabakkontrolle Band 11: Umweltrisiko Tabak von der Pflanze zur Kippe. Heidelberg, Germany. Online: http://www.dkfz.de/de/tabakkontrolle/download/Publikationen/RoteReihe/Umweltrisiko Tabak Band11.pdf.
- Natacha Lecours 2014: The harsh realities of tobacco farming: A review of socioeconomic, health and environmental impacts. In: Tobacco control and tobacco farming: separating myth from reality. Ed. by Wardie Leppan, Natacha Lecours and Daniel Buckles. London, UK; New York, NY, USA; Ottawa, Kanada: Anthem Press; International Development Research Centre. 99–137.
- Neice Muller Xavier Faria et al 2014: Occupational exposure to pesticides, nicotine and minor psychiatric disorders among tobacco farmers in southern Brazil. NeuroToxicology 45, Supplement C: 347–54, doi:10.1016/j.neuro.2014.05.002.
- 14 Deutsches Krebsforschungszentrum 2009: Rote Reihe Tabakprävention und Tabakkontrolle Band 11: Umweltrisiko Tabak von der Pflanze zur Kippe.
- Lecours 2014: The harsh realities of tobacco farming: A review of socioeconomic, health and environmental impacts.
- Anaclaudia G. Fassa et al 2014: Green tobacco sickness among tobacco farmers in southern Brazil. American Journal of Industrial Medicine 57, No. 6: 726–35, doi:10.1002/ajim.22307
- T. A. Arcury, S. A. Quandt and J. S. Preisser 2001: Predictors of Incidence and Prevalence of Green Tobacco Sickness among Latino Farmworkers in North Carolina, USA. Journal of Epidemiology & Community Health 55, No. 11: 818–24, doi:10.1136/jech.55.11.818. Robert H. McKnight and Henry A. Spiller 2005: Green Tobacco Sickness in Children and Adolescents. Public Health Reports 120, No. 6: 602–6
- 15 Fassa et al 2014: Green tobacco sickness among tobacco farmers in southern Brazil.
- **16** Arcury, Quandt and Preisser 2001: Predictors of Incidence and Prevalence of Green Tobacco Sickness among Latino Farmworkers in North Carolina. USA.
- 17 U.S. Department of Labor 2016: List of Goods Produced by Child Labor or Forced Labor Required by the Trafficking Victims Protection Reauthorization Act of 2005. Online: https://www.dol.gov/sites/default/files/documents/ilab/reports/child-labor/findings/TVPRA_Report2016.pdf.
- Margaret Wurth, Jane Buchanan and Jo Becker 2016: "The Harvest Is in My Blood": Hazardous Child Labor in Tobacco Farming in Indonesia. New York, USA: Human Rights Watch. Online: https://www.hrw.org/report/2016/05/24/harvest-my-blood/hazardous-child-labor-to-bacco-farming-indonesia.
- Margaret Wurth and Jane Buchanan 2014: Tobacco's Hidden Children: Hazardous Child Labor in US Tobacco Farming. New York, USA: Human Rights Watch.
- Plan Malawi 2009: Hard work, long hours, little pay. Research with children working on tobacco farms in Malawi. Lilongwe, Malawi: Plan Malawi. Online: https://www.essex.ac.uk/armedcon/story_id/Plantobacco2009.pdf.
- Lecours 2014: The harsh realities of tobacco farming: A review of socioeconomic, health and environmental impacts. Graen 2014: Doppelte Last: Tabak im Globalen Süden.
- **18** Laura Graen 2016: SDG-Factsheet No. 3: Tobacco | Education: How tobacco control contributes to achieving Sustainable Development Goal 4. Berlin, Germany: Unfairtobacco / Berliner Landesarbeitsgemeinschaft Umwelt und Entwicklung (Blue 21). Online: https://www.unfairtobacco.org/en/sdg-facts03.

SOURCES

19 U.S. Department of Labor 2016: List of Goods Produced by Child Labor or Forced Labor - Required by the Trafficking Victims Protection Reauthorization Act of 2005.

Laura Graen 2012: Opening Malawi's Tobacco Black Box. M.A. Thesis. Martin-Luther-Universität Halle-Wittenberg. Online: http://www.lauragraen.de/wp-content/uploads/graen_2012.pdf.

Laura Graen 2014: Tabakproduktion in Afrika: Knebelverträge im Trend. Berlin, Germany: Unfairtobacco / Berliner Landesarbeitsgemeinschaft Umwelt und Entwicklung (Blue 21). Online: http://www.unfairtobacco.org/afrikastudie.

Marty Otañez and Laura Graen 2014: 'Gentlemen, Why Not Suppress the Prices?': Global Leaf Demand and Rural Livelihoods in Malawi. In: Tobacco control and tobacco farming: separating myth from reality. Ed. by Wardie Leppan, Natacha Lecours and Daniel Buckles. London, UK; New York, NY, USA; Ottawa, Kanada: Anthem Press; International Development Research Centre.

20 TOAWUM 2017: Tobacco workers to ILO: Quit tobacco industry. 4 October. Online: https://www.unfairtobacco.org/en/tobacco-workers-to-ilo-quit-tobacco-industry.

21 Conference of the Parties to the WHO Framework Convention on Tobacco Control 2014: Policy options and recommendations on economically sustainable alternatives to tobacco growing (in relation to Articles 17 and 18 of the WHO FCTC. Online: http://www.who.int/fctc/guidelines/adopted/Policy_options_reccommendations_Articles17_18_COP6.pdf.

22 Unfairtobacco and Corporate Accountability International 2017: Press release: ILO asked to end conflict of interest. 16 October. Online: https://www.unfairtobacco.org/en/ilo-asked-to-end-conflict-of-interest.

TOAWUM 2017: Tobacco workers to ILO: Quit tobacco industry.

ILO 2015: ECLT Foundation and ILO Sign Agreement to Combat Child Labour in Tobacco, Press release. 26 May. Online: http://www.ilo.org/pardev/partnerships/public-private-partnerships/WCMS_371395/lang-en/index.htm.

UN Inter-Agency Task Force on NCDs 2017: Model policy for agencies of the United Nations system on preventing tobacco industry interference. Online: http://www.who.int/ncds/un-task-force/events/model-policy-agencies-united-nations1.pdf.

SOURCES OF INFOGRAPHIC

Secondhand Smoke

Deutsches Krebsforschungszentrum 2015: Tabakatlas Deutschland 2015.

Gakidou et al 2017: Global, Regional, and National Comparative Risk Assessment of 84 Behavioural, Environmental and Occupational, and Metabolic Risks or Clusters of Risks, 1990–2016.

Risks in Tobacco Growing

Deutsches Krebsforschungszentrum 2009: Rote Reihe Tabakprävention und Tabakkontrolle Band 11: Umweltrisiko Tabak - von der Pflanze zur Kippe.

Natacha Lecours 2014: The harsh realities of tobacco farming: A review of socioeconomic, health and environmental impacts. In: Tobacco control and tobacco farming: separating myth from reality.

Arcury, Quandt and Preisser 2001: Predictors of Incidence and Prevalence of Green Tobacco Sickness among Latino Farmworkers in North Carolina, USA.

Fassa et al 2014: Green tobacco sickness among tobacco farmers in southern Brazil.

Wurth, Buchanan and Becker 2016: "The Harvest Is in My Blood": Hazardous Child Labor in Tobacco Farming in Indonesia.

Wurth and Buchanan 2014: Tobacco's Hidden Children: Hazardous Child Labor in US Tobacco Farming.

Plan Malawi 2009: Hard work, long hours, little pay. Research with children working on tobacco farms in Malawi.

McKnight and Spiller 2005: Green Tobacco Sickness in Children and Adolescents.

Faria et al 2014: Occupational exposure to pesticides, nicotine and minor psychiatric disorders among tobacco farmers in southern Brazil. Roger Blade, Jazeela Fayyaz and Klaus-Dieter Lessnau 2014: Tobacco Worker's Lung. Online: http://emedicine.medscape.com/article/302379-overview.

Picture credits infographic

Smoke: Rajesh Misra, Rauchen 24, publicdomainpictures, creativecommons.org/publicdomain/zero/1.0/deed.en

Tobacco plant: User: Pentax K10d, Max Pixel, creativecommons.org/publicdomain/zero/1.0/deed.en

Human body: Mikael Häggström, Female Shadow Anatomy, Wikimedia, creativecommons.org/publicdomain/zero/1.0/deed.en

Baby: Tarotastic, Baby 2, Wikimedia, creativecommons.org/licenses/by/2.0/deed.en