

# Women's Rights and Tobacco Control

The right to a tobacco-free world



**Unfairtobacco**

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## Imprint

Women's Rights and Tobacco Control:  
The right to a tobacco-free world.

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# Sustainable development, women's rights and tobacco control

**Sonja von Eichborn**

*Unfairtobacco*

For almost two years, the coronavirus pandemic has affected everyday life and politics as a global health and economic crisis, overshadowing the 2030 Agenda for Sustainable Development from 2015. In this agenda, the members of the United Nations pledged, among other things, to fight poverty and hunger worldwide, protect the climate and improve the health of all. They have committed to 17 Sustainable Development Goals (SDGs).<sup>1</sup> The WHO Framework Convention on Tobacco Control (FCTC)<sup>2</sup> is mentioned in SDG 3.a as the most important instrument for achieving the goal “Health for All at All Ages” (SDG 3). This international health treaty with 182 parties is based on human rights and explicitly refers to the UN Convention on the Elimination of all Forms of Discrimination against Women (CEDAW).<sup>3</sup>

Germany has ratified all three international instruments. The obligations arising therefrom are contrasted by the fact that Germany is a major player in the global trade of tobacco leaf and cigarettes. In 2018, Germany exported almost 111 billion cigarettes and imported more than 160,000 tonnes of tobacco leaf.<sup>4</sup>

## How tobacco impedes sustainable development

More than 17 million people work in tobacco cultivation worldwide, mainly in low – and middle-income countries with low labour standards, where more than 90% of the global tobacco harvest is produced. Smallholder farmers find it difficult to earn a living from growing tobacco (irreconcilable with SDGs 1, 2).<sup>5</sup> This is the reason why all family members, including women and children, often have to contribute to their livelihood by working in the fields (irreconcilable with SDGs 5.2, 8.7). For women, this results in a multiple burden, with the time-consuming tobacco cultivation being added to household management, food production and parenting (irreconcilable with SDG 5.4). Despite their strong involvement in tobacco production, women often do

not have control over finances and decision-making (irreconcilable with SDG 5.5).<sup>6</sup> The global corona crisis and its economic impact are increasing gender inequalities worldwide, including in the tobacco industry.

*“We grow tobacco. But to be honest, we just do it because we are poor and have no other choice.”*

*Tobacco farmer from Zambia<sup>7</sup>*

Hazardous chemicals are intensively used in the fields and, due to the lack of protective clothing, occupational accidents such as poisonings are widespread (irreconcilable with SDGs 3.9, 8). In addition, nicotine is absorbed through the skin when the workers get into contact with the tobacco leaves. This can cause acute nicotine poisoning, the so-called “green tobacco sickness” (irreconcilable with SDG 8.8). It is therefore worrying that women often have to continue working during pregnancies.<sup>8</sup> Moreover, tobacco cultivation damages the environment: Tobacco significantly depletes the soil of nutrients. Therefore, forests are cleared to develop new fertile fields, as well as to obtain firewood, which is needed for curing the tobacco leaves. For firewood alone around 8 million tonnes of wood are consumed every year (irreconcilable with SDGs 12.2, 13, 15.2).<sup>9</sup> Furthermore, the chemicals used in tobacco growing find their way into water bodies and harm biodiversity (irreconcilable with SDGs 6.3, 6.6).<sup>10</sup>

Worldwide one billion people use tobacco, and more than eight million people die from it every year, approximately 1.2 million of them due to exposure to secondhand smoke. More women than men die as a result of passive smoking.<sup>11</sup> Even novel tobacco and nicotine products such as e-cigarettes or heated tobacco products cause addiction and damage to health, although the long-term effects of their use have not yet been sufficiently researched.<sup>12</sup> Tobacco is the leading



preventable cause of premature death from non-communicable diseases (irreconcilable with SDG 3.4) and the female body is more sensitive to its adverse effects. In addition, tobacco use is an important risk factor in the global coronavirus pandemic, as the sequelae of smoking favour a severe course of a COVID-19 disease.<sup>13</sup> The prevalence of smoking is highest worldwide in populations with low socio-economic status, in low – and middle-income countries as well as in high-income countries (irreconcilable with SDGs 1.2, 10.2).<sup>14</sup> After smoking, tobacco waste and especially cigarette butts again harm the environment because the toxicants contained in them leak out into soil and water (irreconcilable with SDGs 6.3, 6.6, 11.6, 14.1).<sup>15</sup>

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## Relevant Sustainable Development Goals (SDGs)

SDG 1	No Poverty
SDG 2	Zero Hunger
SDG 3	Good Health and Well-Being
SDG 3.a	WHO Framework Convention on Tobacco Control
SDG 4	Quality Education
SDG 5	Gender Equality
SDG 8	Decent Work
SDG 10	Reduced Inequalities
SDG 12	Responsible Consumption and Production
SDG 16	Peace, Justice, Strong Institutions
SDG 17	Partnerships for the Goals

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## How tobacco violates women's rights

Women and girls are particularly vulnerable to the effects of tobacco production and consumption. Women's health is especially important in the reproductive phase of life, in order to give (unborn) children a healthy start in life. The working and living conditions for women and girls in tobacco cultivation very specifically violate women's rights to equality (CEDAW Art. 2), occupational safety (CEDAW Art. 11), health and preventive care (CEDAW Art. 12) and the right for women to better their lives in rural areas (CEDAW Art. 14).



*A young woman promotes a heated tobacco product on Berlin's Neukölln district.*

Both the marketing of addictive and harmful tobacco products, which is specifically targeted at women and girls, as well as inadequate prevention and cessation services, violate women's rights to information and specific health education (CEDAW Art. 10) while exposure to secondhand smoke primarily violates the right to health and preventive care (CEDAW Art. 12).

These rights result in the conclusion: Women and girls have a right to a tobacco-free world. That means a world where tobacco use has been reduced to a negligible level and where the tobacco industry is highly regulated. Women and girls have the right to be protected from the tobacco industry. This means specifically: They should not be exploited in tobacco cultivation. They should live in a smoke-free environment which

protects them from secondhand smoke as well as from starting to smoke themselves. They should have access to adequate smoking cessation support if they have become addicted to tobacco.

*“When I come back from school, I see at the corner of my place, I sometimes see men smoking all the time and this smell bothers me.”*

*Girl from Germany,  
5<sup>th</sup> grade, in a school workshop<sup>16</sup>*

The state has an obligation to respect, protect and fulfil women’s rights. The regulation of the tobacco industry is not a voluntary matter of companies, but a duty of the government.

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## Relevant Articles of the UN Women’s Rights Convention (CEDAW)

Art. 2	Equality
Art. 10	Education and information
Art. 11	Safe employment
Art. 12	Health and preventive care
Art. 14	Support for rural women

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## How a tobacco-free world can be created

The framework and guidelines for action towards a tobacco-free world are to be found in the WHO Framework Convention on Tobacco Control, the 2030 Agenda for Sustainable Development and the UN Women’s Rights Convention, which are complementary and mutually reinforcing. The monitoring of implementation progress is embedded within the framework of these international instruments. The FCTC Secretariat

of the WHO regularly evaluates the mandatory reports of States Parties. The current report of June 2021 shows that only 51% of all State Parties have implemented a comprehensive ban on tobacco advertising (FCTC Art. 13). Although Germany adopted a tobacco advertising ban in 2020, it still has major shortfalls and is therefore not comprehensive. Support for alternative livelihoods for tobacco farmers (FCTC Art. 17) is still the least implemented article.<sup>17</sup>

The monitoring of the sustainability agenda is voluntary for the states. Since 2016, Germany has been reporting on progress with different priorities. The measures for implementing the FCTC (SDG 3.a) are assessed by the government as sufficient solely on the basis of smoking prevalence. Efforts to shape sustainable supply chains of German companies (SDGs 8, 12) are focused on individual sectors, e.g. textiles and cocoa. The German law on corporate due diligence is, however, a first step forward compared to the previously favoured voluntary nature of this due diligence.<sup>18</sup>

The UN Women’s Rights Convention requires all State Parties to fulfil their reporting obligations. Based on the final remarks of the last report and the contributions of civil society, the CEDAW Committee addressed its key questions to the German Government in March 2020. In May 2021, the government submitted its regular report, which also mentions figures on smoking prevalence among women and girls. Apart from this, the report only lists a few individual smoking prevention measures aimed at women. The issues of exposure to secondhand smoke, cigarette advertising and, in general, structural prevention are not addressed. At the same time, the report draws attention to the newly adopted law on corporate due diligence in supply chains, which however has significant shortfalls.<sup>19</sup> Referring to this report, civil society may contribute additional submissions to the CEDAW Committee. The Committee’s assessment of the reports is expected to take place in autumn 2022.

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## Relevant Articles of the WHO Framework Convention on Tobacco Control (WHO FCTC)

Art. 4.2d	Gender-specific tobacco control
Art. 5.3	Protection of public health policies from vested interests of the tobacco industry
Art. 6	Increase of prices and taxes
Art. 8	Protection from exposure to tobacco smoke
Art. 11	Regulation of packaging and labelling
Art. 12	Education on the dangers of tobacco
Art. 13	Ban of tobacco advertisement, promotion and sponsoring
Art. 14	Cessation support
Art. 16	Prohibition of sale of tobacco to and by minors
Art. 17	Alternative livelihoods for tobacco farmers
Art. 18	Protection of the environment and occupational safety in tobacco cultivation

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Dannenmaier analyses whether and how the new German Supply Chain Act holds cigarette companies accountable for violating women's rights. A final chapter links the authors' findings with recommendations for action for politicians, businesses and civil society.

This brochure is about women's rights and about women and girls. They therefore have their own say on the centre page of the brochure. These views were collected by Farida Akhter, Brenda Chitindi and Sabina Ulbricht.

## What this brochure offers

This brochure aims to highlight the links between SDGs, women's rights and tobacco control in different policy areas. In this context, experts from a variety of fields deal with issues ranging from tobacco cultivation to tobacco consumption.

Dr. Katrin Schaller sets out the health consequences of tobacco consumption and exposure to secondhand smoke for women and girls. Prof. Dr. Sabina Ulbricht examines whether and how socio-economic inequalities affect the smoking behaviour of women and girls. Caroline Renzulli, Mary Clare Rosemeyer, Debra Rosen and Mark Hurley have studied social media worldwide and analyse how tobacco companies specifically target young women with their advertising of novel tobacco and nicotine products. Farida Akhter from our partner organization UBINIG examines the beginning of the supply chains of the tobacco industry and describes the conditions under which women and girls work in the tobacco sector in Bangladesh. An interview with Brenda Chitindi from our partner organization TOFAZA presents us with the consequences of tobacco growing for women in Zambia. In addition, Viola

## Endnoten

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# Impact of smoking and secondhand smoke on women and girls

**Dr. Katrin Schaller**

German Cancer Research Center

## Prevalence of smoking among women

In most countries worldwide, significantly more men than women smoke, but in high-income countries, the numbers are often similar for women and men.<sup>1</sup>

In 2018, a total of 5.5% of women over the age of 15 used combustible tobacco products globally, with the majority smoking cigarettes (4.8%). In Europe, at 17.5% and in America at 10.2%, a particularly high number of women smoked cigarettes.<sup>2</sup> The number of women

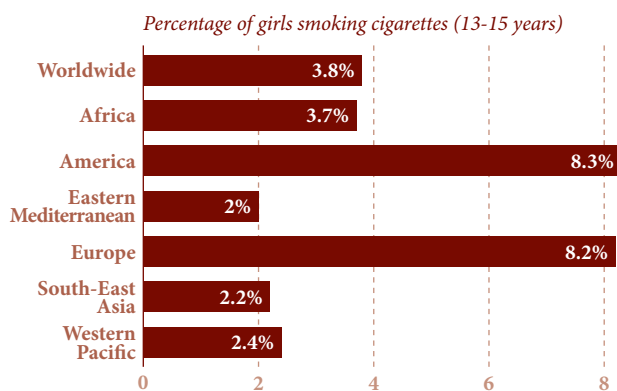
smoking has decreased significantly more in South-East Asia and the Americas since 2000 compared to the other regions. In Southeast Asia, however, a large percentage of women (11.5%) use smokeless tobacco, while in other regions this percentage is below 2%.<sup>3</sup>

Of the 13- to 15-year-old girls worldwide, 3.8% smoked cigarettes in 2018, equivalent to seven million young women. At just over 8%, their share is particularly high in Europe and the Americas. It is also worrying that in Africa and Asia proportionally more girls than women smoke.<sup>4</sup>

In 2017, 19% of women and 27% of men smoked in Germany. The proportion of female smokers among socio-economically disadvantaged women is significantly higher than among socio-economically better off women. This also applies to girls aged 11 to 17.<sup>5</sup>

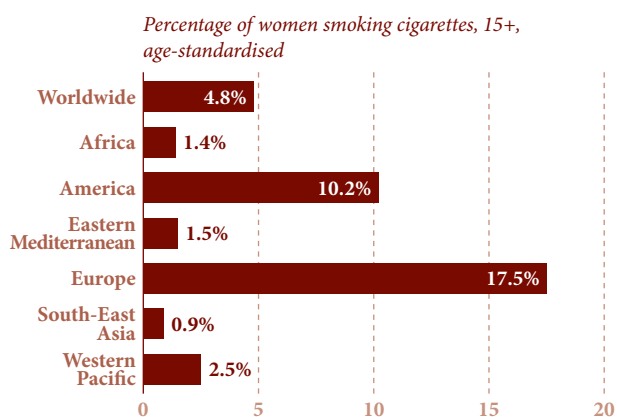
### Women and girls smoking cigarettes in % by WHO regions (2018)

Data source: WHO 2019. P. 24, 31.



*“My gynaecologist asked me if I smoke, that’s all. I expected her to explain what it does to the baby. That’s what doctors are there for, right?”*

Pregnant woman, 18 years (6<sup>th</sup> month of pregnancy, 2<sup>nd</sup> child), when asked what her gynaecologist said about smoking<sup>6</sup>



## Prevalence of exposure to secondhand smoke among women

About one third of women worldwide were exposed to secondhand smoke in 2016; the exposure to tobacco smoke is especially high in Asia.<sup>7</sup> In Germany, just over 8% of women are regularly exposed to tobacco smoke. At close to 20%, the exposure is highest among young women aged 18 to 29 and steadily decreases with increasing age. Women most frequently inhale secondhand smoke at their own home or at friends’ houses.<sup>8</sup>

In recent years, secondhand smoke exposure has decreased worldwide as a result of laws protecting non-smokers. In 2020, 67 countries offered the best protection from secondhand smoke in accordance with the WHO standards – Germany is not among them.<sup>9</sup>

## Health implications

Smoking harms almost every organ in the body and is the single most important preventable risk factor for non-communicable diseases such as cancer, cardiovascular diseases, and respiratory diseases. Worldwide, two million women died in 2016 as a result of smoking; in Germany, more than 43,000 women died in 2018 due to smoking.<sup>10</sup>

Women are more sensitive to harmful smoking-related substances than men due to other enzyme activities and therefore suffer more from the health consequences of smoking. For example, their risk of coronary heart disease is 25% higher than that of men.<sup>11</sup> Chronic obstructive pulmonary disease (COPD) occurs earlier in women and is more severe than in men, even

with lower overall tobacco use. Lung function declines faster in women with COPD but recovers better after stopping smoking. Smoking may also increase the risk of lung cancer in women to a greater extent than in men.<sup>12</sup>









Women who smoke and take combined oral contraception (birth control pills with oestrogen and progesterone) have a significantly increased risk of heart attack and stroke as well as a higher risk of dying from cardiovascular disease compared to non-smokers. This does not apply to contraceptives containing only progesterone.<sup>13</sup>

Smoking also reduces fertility and the success of artificial insemination. If a woman smokes during pregnancy, it has a negative impact on the course of the pregnancy and harms the development of the child – with long-term consequences.<sup>14</sup>

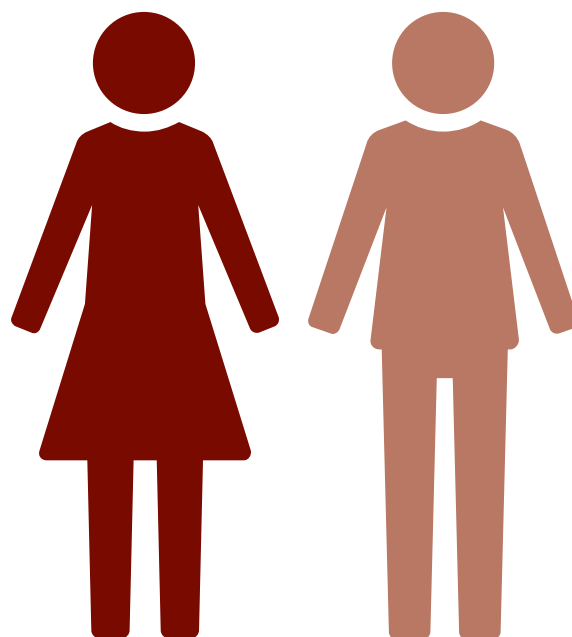
All tobacco products are harmful to health, even smokeless ones. Although novel tobacco and nicotine products such as heated tobacco products and e-cigarettes burden the body with fewer harmful substances than combustible tobacco products, they are by no means harmless. The long-term effects on health are currently still unclear.<sup>15</sup>

### Health implications of smoking specific to women

Sources: See endnotes 10-13, 19.

- Coronary heart disease: risk of disease  >  25%
- COPD:  earlier onset, severe course, faster decline of lung function than 
- Lung cancer\*: risk of disease  > 
- Combined oral contraception: increased risk of heart attack, stroke, death from cardiovascular disease
- Fertility: reduced, lower success of artificial insemination
- Addiction: smoking cessation success  < 

\*causal relation probable

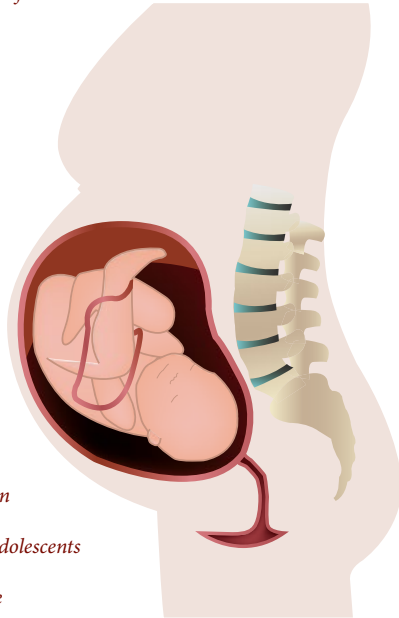


## Impact on pregnancy and child

Source: DKFZ 2020a. P. 24f.

- Ectopic pregnancy
- Placenta praevia
- Premature placental disruption
- Premature rupture of membranes
- Premature birth
- Miscarriage\*
- Reduced birth weight
- Sudden infant death syndrome
- Reduced lung function
- Respiratory ailments
- Asthma
- Facial clefts
- Behavioural disorders in children\*
- Nicotine addiction in adolescents

\*causal relation probable



of nicotine, but mainly for relaxation, mood and weight control. Around one third of women who smoke in Germany are addicted.<sup>19</sup>

Although women are more likely to seek help to quit smoking than men, they are less likely to succeed and less likely to stay smoke-free in the long term than men; the menstrual cycle also seems to play a role. In Germany, almost twice as many women with high social status succeed in quitting smoking as those with low social status. Women in particular benefit from intensive psychosocial counselling and support programmes that focus on aspects such as weight control and mood changes when quitting tobacco.<sup>20</sup>

Secondhand smoke also causes several diseases, some of them severe, especially when the exposure is high and occurs over a long period of time. These include, in particular, lung cancer, stroke, coronary heart disease and possibly COPD.<sup>16</sup> In women, exposure to secondhand smoke may also increase the risk of breast cancer. Secondhand smoke during pregnancy potentially increases the risk of premature birth and stillbirth as well as death of the newborn.<sup>17</sup>

Worldwide, many more women than men die due to the exposure to secondhand smoke (573,000 women, 311,000 men in 2016).<sup>18</sup>

## Addiction and smoking cessation

Nicotine acts primarily in the brain and has a high addiction potential. Women metabolise nicotine more quickly than men, especially during pregnancy and when taking contraceptives containing oestrogen. Unlike men, women smoke not so much for the effect

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## Endnoten

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# Effects of social inequality on tobacco use in girls and women

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A fair distribution of the opportunity of being healthy and staying healthy, regardless of age, gender, education, income, marital status and migration status, represents a high value. The following article focuses on answering the question: What is the status of equal health opportunities for women and girls worldwide and in Germany in relation to tobacco consumption?

## Tobacco use and social inequality

In 2020, the number of girls and women aged 15 and older consuming tobacco was 235 million worldwide. Most of them, 76%, live in highly industrialised countries.<sup>1</sup>

According to the World Health Organization (WHO), the global reduction in tobacco use is one of the most effective measures to reduce premature mortality among the population caused by chronic cardiovascular and respiratory diseases, as well as cancer. Every year, 15 million people worldwide die before reaching their average life expectancy, 8 million of them as a result of tobacco consumption.<sup>2</sup> That is why the

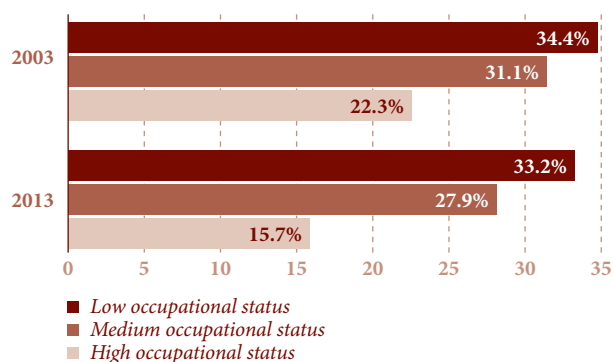
WHO called for an action plan to achieve a relative reduction in tobacco prevalence of 30% worldwide by 2030.<sup>3</sup> However, the decline in tobacco consumption in the last decade can be largely attributed to behavioural changes in socially and economically better-off population groups.<sup>4</sup>

In Germany also, the decision for a tobacco-free life is taken especially by those women and girls with a higher school education and with a higher professional status and/or income. Thus, in Germany, the proportion of women consuming tobacco in the group with a high occupational status fell from 22.3% to 15.7% between 2003 and 2013. Among women with a lower occupational status and a significantly higher starting level of 34.4% in 2003, the drop was much lower, at just 1.2%.<sup>5</sup> And at 46%, the proportion of female tobacco users is particularly high among single parents. Their rate to be at risk of poverty and thus the risk of social disadvantages is especially high.<sup>6</sup>

As yet, population groups with lower socio-economic status are still not sufficiently reached with preventive measures. Additionally, these measures also show a weaker effectiveness among these groups. These are key aspects that hamper the improvement of health-related equal opportunities.<sup>7</sup>

## Proportions of female smokers by occupational status compared over time

Source: DKFZ 2020.



## Exposure to secondhand smoke and social inequalities

While one-fifth of all boys and men aged 15 and over are exposed to secondhand smoke worldwide, this is much more common among girls and women, accounting for 33%. The proportion of mortality attributable to exposure to secondhand smoke is significantly higher in women (47%), but also among children (28%), than among men (26%).<sup>8</sup>

In 2016, 573,000 female deaths worldwide were attributable to the exposure to secondhand smoke, compared to 311,000 male deaths. There is evidence that secondhand smoke harms the female body more than the male's<sup>9</sup> and it affects women regardless of their own smoking status. As a result, a significant proportion of

non-smoking women worldwide are exposed to second-hand smoke, more often in population groups with a low socio-economic status than in groups with a higher social status.<sup>10</sup> This is also shown by data from Germany: Women of all ages with lower levels of education are more likely to be exposed to secondhand smoke than women with a higher level of education. This happens mainly in the home or social environment.<sup>11</sup> Accordingly, the health-related consequential damages are more pronounced among women with lower education, which reinforces the problem of health inequality.

Even though smoke-free public places are increasingly becoming the social norm in many countries, the home environment remains the most likely place for women and children to be exposed to second-hand smoke and its associated health risks. This is evident, for example, in Turkey. Tobacco use in living rooms at home and thus also tobacco smoke exposure for non-smoking family members and guests has so far decreased significantly less than tobacco smoke

exposure in public spaces, the reduction of which has been achieved by appropriate legislation.<sup>12</sup>

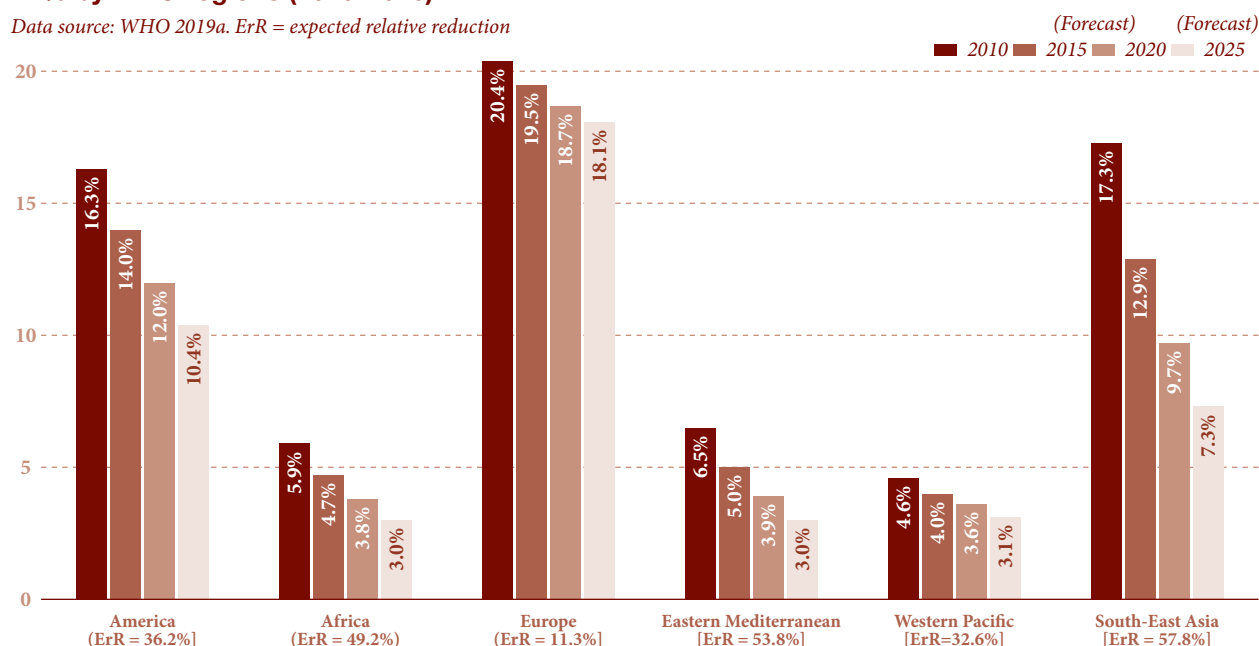
## Barriers to health-related equal opportunities in Europe

The WHO target of a relative reduction in tobacco use of 30% seems to be achievable for girls and women in Africa, the Americas, the Eastern Mediterranean, South-East Asia and the Western Pacific region, as shown by current findings. However, according to the forecast, with only 11.3% the decrease in tobacco use among girls and women in Europe remains well below this target.<sup>13</sup>

Possible reasons for these developments in Europe respectively in Germany can be found in the still inconsistent tobacco control policies, which pay too little attention to important aspects such as the accumulation of health risks. Thus, the socio-economic differences in smoking in adolescents and adults are

### Global trend in prevalence of tobacco use among girls and women aged 15 years and older in % by WHO regions (2010-2025)

Data source: WHO 2019a. ErR = expected relative reduction



continuously manifested. Contributing to this is the fact that evidence-based cessation services are used only by 11.4% of smokers with lower education level<sup>14</sup> and that measures such as higher tobacco taxes are implemented insufficiently.

## **Accumulation of health risks**

Health opportunities are unequally distributed not only between women and men, but also within the group of women: The risk of developing cardiovascular disease and diabetes and the likelihood of obesity and tobacco use is more pronounced among women with the fewest years of education compared to those with the most years of education than among men with the corresponding level of education.<sup>15</sup> There is little knowledge about how the interaction of tobacco use and other modifiable risk factors, such as obesity, affects the development and maintaining of an addictive behaviour as well as the development and course of diseases. It has been proven that the female organism is more sensitive to tobacco consumption than the male organism. This is reflected in the fact that women are more likely to suffer a stroke or develop cardiovascular disease at the same dose of tobacco use.<sup>16</sup> These aspects have so far been largely ignored in prevention programmes. In addition, mental illnesses are widespread in many European countries, including Germany. While one in three people with mental illness smokes, the proportion of people without mental illness is only 15%.<sup>17</sup> Moreover, women who have experienced violence in their lives, especially during pregnancy, are more likely to be tobacco users than those without this experience.<sup>18</sup>

## **Socio-economic differences among adolescents**

The prevalence of tobacco use (cigarettes and other tobacco products) among female adolescents aged 13-15 years is highest in Europe at 11.5% and the Americas at 11.7%, and lowest in the Western Pacific at 3.5%.<sup>19</sup> In

Germany, the proportion of adolescents who smoke tobacco products has been declining in all educational groups since 2003, although the relative differences between educational groups have increased.<sup>20</sup> Female adolescents from households with a higher social status have lower smoking rates compared to peers from households with a lower social status (3.7% vs 6.7%).<sup>21</sup>

## **Insufficient cessation success**

Although ever fewer women have been smoking in Germany since 2003, the proportion of female smokers between the ages of 20 and 64 was at least 20% in 2017. The most significant decrease in tobacco consumption of 15.4% between 2005 and 2017 was among women aged up to 25 years. In contrast, the smoking rates in women aged 25–54 decreased by less than 10% and has even increased in women aged 55 and older.<sup>22</sup>

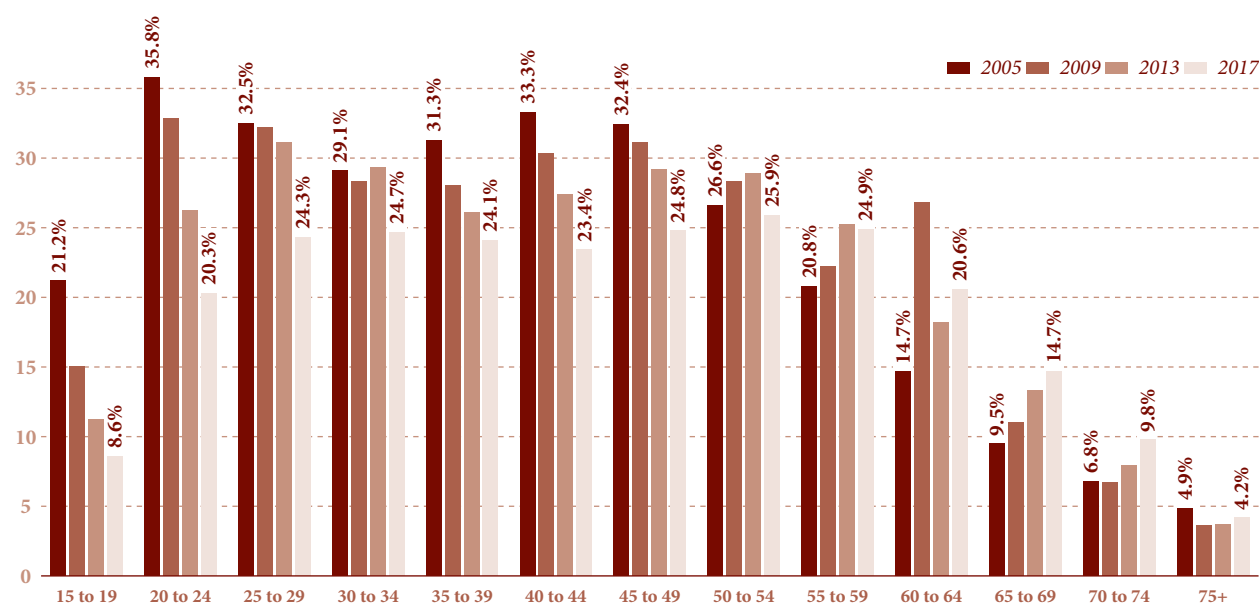
Although smoking during pregnancy is particularly risky for the unborn child and the expectant mother, 11% of pregnant women in Germany smoke. At 22.5%, mothers younger than 25 years of age at the birth of the child showed a threefold prevalence rate compared to mothers older than 35 years at the birth of the child. Also, at a rate of 24.0%, the proportion of pregnant women smoking was particularly high among women with lower education.<sup>23</sup>

## **Insufficient tobacco taxes**

Individual interventions alone are unlikely to lead to measurable reductions in health inequalities caused by tobacco use among women and girls. As well, media campaigns are considered to be of limited effect in this regard. However, the highest possible level of taxation for all licensed tobacco products (cigarettes, cigars, cigarillos, e-cigarettes, heated tobacco products) is proven to be the most successful measure to date to make a significant contribution to reducing tobacco consumption and thus reducing health inequalities. This measure is still insufficiently implemented in Germany.<sup>24</sup>

## Development of tobacco consumption among women in % (2005-2017) by age group (Germany)

Data source: Federal Health Reporting 2021.



### Recommendations for actions for more equal opportunities towards a tobacco-free life

Tobacco use is considered a response of people to economic and social inequality and marginalization and it is associated with feelings of relaxation, pleasure and comfort in everyday life. So far, this seems to have been taken into account too little in the development of measures to reduce tobacco consumption. Rather, the economic and social dimension of tobacco consumption is often disguised by the view that tobacco use is an individual behaviour and can either be stopped on one's own or be achieved in the short term with professional support.<sup>25</sup>

*“Most of the time I sit down on the couch and pick up my mobile phone, then just go to whatever sites [on the Internet], [...] first calm down and maybe smoke a cigarette afterwards – probably (laughs). And then I relax.”*

*Pregnant woman, 18 years (2<sup>nd</sup> child), when asked how she can relax<sup>26</sup>*

In order to increase equal opportunities for a tobacco-free life worldwide and in Germany, behavioural and structural preventive measures should be combined in the sense of a more comprehensive tobacco control policy. Some approaches for this are:



- Health-related prevention for girls and women should be more focused on the fact that tobacco use is often only one of several factors with potentially negative health consequences. The accumulation of modifiable risk factors in addition to tobacco consumption in a person and/or the diagnosis of a mental illness and their mutual influence must be further researched in order to improve the effectiveness of prevention approaches.
- Girls and women with lower education or a lower social status should be addressed and reached with prevention services to at least the same extent as those who have a higher education respectively a higher social status.
- Socio-economically determined differences that influence the effectiveness of existing cessation services should be reduced. To this end, participatory approaches to modifying and redesigning services are necessary in order to integrate the specific needs of girls and women with a lower social status more strongly within motivational and cessation approaches.
- The most effective measure to date for achieving health-related equal opportunities with regard to tobacco consumption, namely a higher taxation of tobacco and nicotine products, should be implemented more consistently. Because higher costs for smoking can, on the one hand, prevent smoking initiation and, on the other hand, accelerate the process of quitting tobacco use.

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# How Big Tobacco Uses Social Media to Target Women

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For decades, tobacco companies have created marketing campaigns centered around women, as both the bait – by exploiting their bodies in visual advertisements – and the sales target – through messages and themes of female empowerment.<sup>1</sup>

From appropriating women's social movements to packaging cigarettes with overtly “feminine” colors and product descriptors like “slim” and “light” and “low-tar”, tobacco companies have a well-documented history of specifically targeting women as new customers.<sup>2</sup>

More recently, the rise of social media has been a game-changer for Big Tobacco advertising. The World Health Organization Framework Convention on Tobacco Control (WHO FCTC) requires signatory countries to implement proven measures to drive down rates of tobacco consumption – including restrictions on tobacco advertising. As governments around the world have fulfilled these obligations and increasingly banned traditional forms of tobacco advertising, tobacco giants like Philip Morris International and British American Tobacco have turned to social media channels to spend their ad dollars.<sup>3</sup>

A key feature of Big Tobacco's social media advertising strategy has been to glamorize the use of e-cigarettes and heated cigarettes. With its expansive reach, social media now allows tobacco companies to (1) reach women in more direct and relatable ways never before possible and (2) to capitalize on the

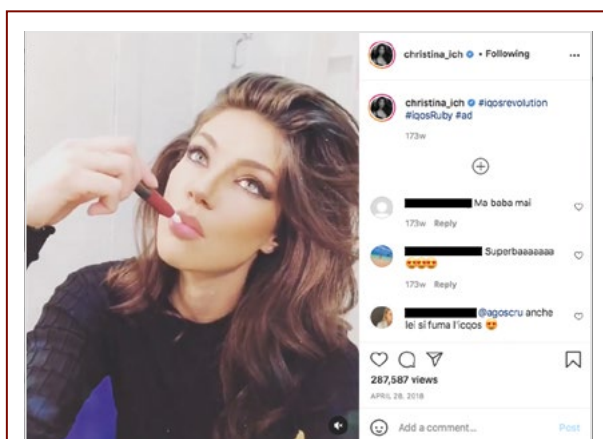
female-driven influencer marketing trend<sup>4</sup> to reach young people.

A 2020 Stanford study uncovered recent evidence that Philip Morris International was explicitly targeting women to sell its heated cigarette IQOS in multiple countries.<sup>5</sup> For example, the study noted that in Japan “the goal was to: ‘target women indirectly through careful aesthetic consideration’ using ‘feminine hues’ (pink) and ‘traditional national symbols’ (cherry blossoms).”

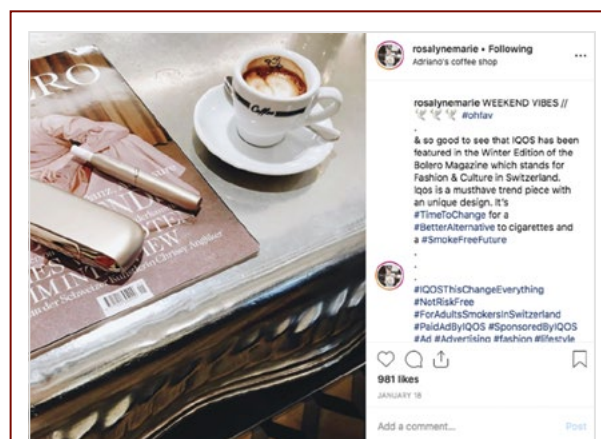
IQOS is currently available in 67 countries, dominating the global market for heated tobacco products.<sup>6</sup> While it is primarily marketed in high-income countries, IQOS has continued expanding into “key markets” particularly throughout Southeast Asia – in Vietnam, Indonesia, and the Philippines. While evidence suggests that IQOS has been available in the Philippines since 2018, PMI officially launched IQOS consumables there in April 2020.<sup>7</sup>

In Romania, Philip Morris International launched IQOS in 2014 and sponsored posts by Instagram influencer Christina Ich since 2018. Ich is a well-known Instagrammer who identifies herself as an “award-winning social media influencer” with more than 800,000 followers. According to Klear, a social listening analysis tool, approximately 81% of Ich's followers are women





*Romanian influencer Christina Ich (@christina\_ich), 836,000 followers: promotion of IQOS on Instagram.*



*Influencer content on Instagram in Switzerland: IQOS as a “must have trend piece”.*

and 38% are under the age of 24. As of August 2021, Ich had posted 17 photos on Instagram promoting IQOS, reaching an estimated 2.8 million people. She has also worked with Philip Morris on video content to promote IQOS.<sup>8</sup>

Ich is part of a global network of “IQOS ambassadors” who promoted IQOS products on social media sites like Instagram, Facebook, Twitter and TikTok in dozens of countries including Romania, Italy, Japan, Switzerland, Germany and Mexico. According to Klear, just six influencers posted IQOS promotional content using the hashtag #IQOSAMBASSADOR from late 2018 through May 2019 to an audience of more than 25 million people – 73% of whom were women and 41% under the age of 24.

As part of this campaign, Philip Morris International has sought to portray IQOS as a must-have fashion accessory for young women in Switzerland. Philip Morris paid well-established, local female lifestyle influencers to post about IQOS in a way that seamlessly blended into their profiles’ aesthetic. This type of advertising is unique to social media because when sprinkled throughout an influencer’s profile it blurs the lines between organic post and advertisement.

In May 2019, Philip Morris International allegedly suspended the company’s use of influencer marketing for IQOS following an investigation by Reuters which found the company had paid influencers to promote IQOS online including an influencer who was 21 at the time.<sup>9</sup>

Yet in addition to the use of influencers, tobacco companies target women through direct brand communications on social media. A glaring loophole in advertising policies on social media platforms like Facebook and Instagram allows tobacco giants to run accounts to directly promote e-cigarettes and heated cigarettes to an unlimited online audience. Under current policies, Facebook and Instagram consider direct marketing through branded pages by tobacco companies to be “organic content” and therefore do not prohibit this form of blatant advertising.<sup>10</sup>

For example, British American Tobacco launched its Glo device and Neostick heated cigarettes in 2016. It is available in at least 21 countries, including Greece, Romania, Italy, Germany, Poland, Spain, Czech Republic, and Ukraine.<sup>11</sup> BAT runs branded accounts to promote Glo on major social media networks such as Instagram, Facebook, and Vimeo. According to Klear, BAT has at least 16 Glo Instagram accounts with an audience of



## British American Tobacco's Use of Young Women to Promote Vype in Latin America

Throughout Latin America, British American Tobacco has exploited young female social media influencers to promote its e-cigarette Vype in countries like Mexico, Guatemala and Colombia.

Though British American Tobacco claims to have strict marketing standards that prohibit the use of models who are or appear to be under the age of 25, the company paid

several influencers under age 25 to promote Vype online, including in Latin America.

Using hashtags like #teretoaprobarlo ("I dare you to try it"), #govype and #vypefriends young influencers promoted Vype to millions of users on Instagram. According to Klear, posts containing #govype were posted by 37 influencers, mostly in Latin America, to an audience of more than 131 million people. More than 50% of the audience were women.



Colombian actress Johanna Fadul (@johannafadul), 6 million followers: promotion of Vype on Instagram.



Miss Planet International Mexico 2021 Liz Alexa (@lizalexamtz), 1.4 million followers: promotion of Vype on Instagram.

14.4 million people, 61% of whom are women and 65% of whom are under the age of 24. To promote Glo, the company uses hashtags like #haveitall, #discoverglo #beeverything, #technology and #myglo – many of which are inspirational in nature and unrelated to Glo tobacco products, thus greatly expanding the audience of social media content. In addition, BAT hired in 2018 a marketing agency to create “an army of Glo ambassadors” for its launch in Czech Republic to build a customer base of “movers and shakers who never stay in one place”.<sup>12</sup>

Smoking rates among women have been – and still are – significantly lower than male smoking rates in almost every country in the world,<sup>13</sup> making women

an important target market for the tobacco industry. This wave of social media marketing of e-cigarettes and heated cigarettes curated specifically for young women completely debunks the tobacco industry’s claim that these products are only intended to help smokers quit and are not targeted at never-smokers. While hashtags like #notriskfree and #ForAdultSmokersinSwitzerland only appear on some sponsored posts now, this is only recently the case. They are not applied consistently across the companies’ global influencer networks and – most notably – such hashtags are a completely inadequate warning about the addictive nature of nicotine and tobacco products.



appealed to them for nearly two years to act. Instead, the policy change came following a high-profile decision from the Advertising Standards Authority in the United Kingdom, which ruled that influencer content promoting e-cigarettes violated the country's tobacco advertising laws.<sup>14</sup>

To effectively address social media advertising of tobacco products, there is an urgent need for governments to both strengthen their capacity to monitor the online marketing of tobacco companies and effectively regulate this growing form of advertising and the mediums that perpetuate it. While Facebook, Instagram, Twitter, TikTok, Snapchat and others can be good partners, social media companies must not be entrusted with creating and enforcing tobacco control laws – that is the responsibility of governments, because these products infringe on the women's right to health.

## Conclusions and Recommendations

The use of social media marketing by tobacco companies has grown exponentially in recent years. While tobacco companies claim that e-cigarettes and heated tobacco products are aimed at current smokers, the disproportionate targeting of women and especially young women, who smoke at much lower rates than men, is in stark contrast to this claim.

Tobacco companies will continue to use social media to advertise their products to young women, girls, and non-smokers because platforms like Instagram, Facebook and Twitter represent a widely underregulated gateway to young and impressionable people all over the world.

While social media companies have failed to stop tobacco companies from using their platforms to target young people, the recent progress they have made has been in response to government action. In 2020, Facebook and Instagram updated their branded content policy to prohibit influencer marketing of tobacco products and e-cigarettes not because of hundreds of media exposes on the problem – including those by high profile outlets including Reuters and the New York Times – nor because hundreds of public health organizations

*„I know it's unhealthy, but I do it anyway because I want to stay thin.“*

*Girl from Germany, 10<sup>th</sup> grade (grammar school), in a smoking prevention course<sup>15</sup>*

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# women's views

## Research project involving pregnant women “Familie am Start – FIT”

As part of the research project “Familie am Start – FIT” at Greifswald University Medical Centre, interviews were conducted with pregnant women who smoked at the time they were approached or who had given up smoking during pregnancy. They were approached in three maternity counselling centres in the German state of Mecklenburg-Vorpommern to participate in this project (06/2019 to 10/2021, funded by the Federal Centre for Health Education).

Further information: [www2.medizin.uni-greifswald.de/prevention/](http://www2.medizin.uni-greifswald.de/prevention/)



“There are many reasons to stop, health, my child at home, money, pregnancy. I really feel that I want to smoke a cigarette and that is very stressful. [...] I want to stop. [...] So when I sit like this, relax and smoke, the little one kicks differently than usual in a resting phase ... For God’s sake, what am I doing ...”

Pregnant woman, 38 years (5<sup>th</sup> month of pregnancy, 3<sup>rd</sup> child, one stillbirth), on the reasons to stop smoking

“I don’t know if I would miss anything, maybe calming down ... for example, when my little girl stands up in her bed early in the morning and roars at me, just like that, for no reason. Then I take her out of her bed [...] and put her in her play corner. Then I go out for a smoke ... just to calm down.”

Pregnant woman, 21 years (9<sup>th</sup> month of pregnancy, 2<sup>nd</sup> child), when asked what she would miss if she stopped smoking

“Well, I would trust doctors more than friends and family. The midwife ... I trust her and the Internet. I enter my question, but I always look on several sites.”

Pregnant woman, 21 years (9<sup>th</sup> month of pregnancy, 2<sup>nd</sup> child) when asked who she would turn to about smoking





## Women growing tobacco in Zambia

The video “Impact of Tobacco Production on Women’s Rights”, published in December 2020 by TOFAZA (Tobacco-Free Association of Zambia) and Unfairtobacco, shows several women from Zambia. They talk about the heavy workload and poverty and explain which alternatives they would prefer instead of tobacco cultivation.

Video: [www.youtube.com/watch?v=aQGN08GnavU](https://www.youtube.com/watch?v=aQGN08GnavU)

## Women growing tobacco in Bangladesh

In 2020, UBINIG (Policy Research for Development Alternatives) and Unfairtobacco jointly produced the video “Tobacco Farming – Disempowering Women”. In the film, women talk about the harsh conditions under which they have to work, about the effects this has on their health and about their powerlessness in deciding whether or not to grow tobacco.

Video: [www.youtube.com/watch?v=XLm4NcCde10](https://www.youtube.com/watch?v=XLm4NcCde10)



**“I am 18 years old, I am pregnant for 4 months. I understand that in pregnancy I must not work with tobacco. ... When I go to see the doctor, he also suggests not to work with tobacco leaves. Yet I have to work, because it is a family occupation.”**

Pregnant tobacco farmer in Bangladesh

**“During tobacco work, we cannot sleep. Get vertigo (dizziness) due to sitting in front of the kiln, we have to watch carefully the flow of fuel in the kiln.”**

Woman tobacco farmer in Bangladesh about curing tobacco

**“Most of the women suffer from respiratory problems, weakness, vertigo. Many older women died of respiratory problems in these tobacco villages.”**

Female doctor in Bangladesh,  
College of Health Care Professions (CHCP)



**“We do not protect ourselves adequately, because we lack protective materials.”**

Woman tobacco farmer in Zambia about health risks when handling pesticides

**“We have school going children, but we cannot manage to pay for their school fees from the sale of tobacco. Tobacco profit is very low, while tobacco labour is very high.”**

Woman tobacco farmer in Zambia about insufficient income

**“I work in tobacco because I do not have anything better to work. If I could be assisted with a loan to start keeping chicken or pigs or goats or grow soya beans or sun flower, I can appreciate because it can be of great help to me.”**

Woman tobacco farmer in Zambia about lack of support for alternative livelihoods



# Women's rights and tobacco farming: The Bangladesh case

**Farida Akhter**

*UBINIG, Bangladesh*

The majority of rural women in small-scale households in Bangladesh are engaged in agriculture. Women's contributions are visible in all stages of food production and according to the 2005/6 labour force survey, 68% of rural women are engaged in agricultural work.<sup>1</sup> This sector includes tobacco leaf cultivation: flue cured Virginia (*Nicotiana tabacum*), Motihari (*Nicotiana Rustica*) and two other varieties for both smoked tobacco products (cigarettes, bidi) and smokeless tobacco (zarda and sadapata). International companies like British American Tobacco, Japan Tobacco International and other national companies buy this tobacco. The cultivation has been continuously shifted from one area to the next after tobacco production depleted the soil. As well, tobacco farming has replaced food production, thereby changing the ways of women's engagement in agriculture.

## Hard work, long hours, unpaid work

Tobacco growing is highly labour intensive from planting to harvesting, curing of the leaves and marketing and it takes about eight months from October to May. It requires 415 person-days compared to 231 person-days in food crop production. The labour cost, if hired, is on average 21% higher than for food crop production. Therefore, the tobacco farmers use unpaid family labour, mostly women, as much as possible.<sup>2</sup>

The farmers go through a vigorous process of intensive physical labour, come into contact with nicotine and are exposed to agrochemicals. They are not provided with any protective gloves, masks, gumboots or dust-coats during their works as could be seen in the developed countries.

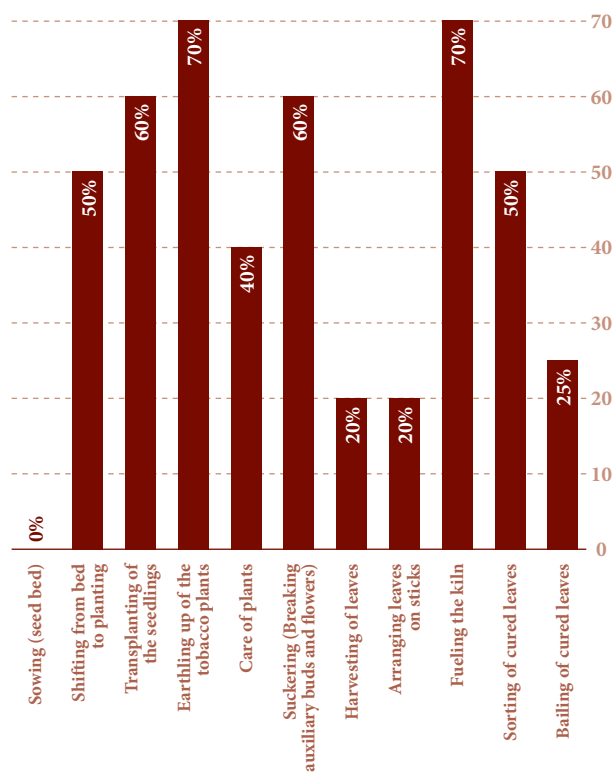
Women, as hired or as family labour, are engaged in different stages of tobacco growing and it varies by socio-cultural differences in different areas. In general women's work varies between 20% to 70% of the total work in one stage. The work in which women are

involved the most (70%) is fueling the kiln where tobacco is cured. Adult males are less involved in such work.<sup>3</sup>

In various stages of the tobacco farming cycle, pesticides are applied: before sowing seeds in the seed-bed, before and after transplanting seedlings in the field, at the growing stage of plants and during de-heading after flowering. Pesticides are applied at least 16 times, using as many as 47 different brands sold in the open market. These include destructive pesticides like Ripcord, Furadon or Sumithion and fungicides like Bavistin, Thiovit or Ridomil some of which are already banned in the European Union due to their immanent health hazards.<sup>4</sup> Women are engaged in hand-mixing of the pesticides in pots before spraying by male labourers.

## Women's involvement in different steps in tobacco cultivation in Bandarban in % of total work

*Source: UBINIG field data 2015.*





The harvesting of the leaves in Bandarban district is primarily men's work but hired women labourers also harvest. Women have to work from early morning till afternoon and remain long hours under the sun. They are not able to drink water during this time due to the non-availability of drinking water.

In the post-harvest and pre-curing working stage, women perform tasks such as arranging the leaves on sticks to be stacked in the barns and fueling the kiln. Flue cured Virginia tobacco needs to be cured in airtight barns at a constant heat level for 72 to 96 hours in order to dry properly and maintain the quality grade of the leaves. At this time, women are responsible to maintain the fire without interruption. After curing, the leaves are brought out of the barns and are sorted for grading. Women spend sleepless nights at stretch to make sure that the leaf curing is perfect for grades to be good so that they can earn better income.<sup>5</sup>

To reduce the cost of this labour intensive production, the unpaid work of female family members and children is needed. In UBINIG's research on tobacco cultivation from 2009 to 2012, unpaid family labour accounted for one-third of the human labour used. Women and children are also hired as labourers at a discriminatory wage rate with harder works and longer working hours, from dawn to dusk about 10 to 12 hours. For example, in 2020, women in Kushtia received two-third of a men's wage for curing works: 500 Bangladeshi Taka (6 USD) for men and 300 BDT (4 USD) for women per day.<sup>6</sup>

## Threatened Health

The working conditions in tobacco farming involving hard physical work, exposure to agrochemicals and nicotine pose a threat to the health of farmers, particularly to women's health (CEDAW Art. 11). At the time of plant caring, women spend long hours in bending posture. This causes backache including low back pain, pain in the joints of the knee and in the legs amongst others.

Working in the field for long hours and without any toilet facilities women suffer from difficulties in



*While caring for tobacco plants, women farmers are in contact with nicotine for extended hours.*

urinating. After long hours working under the sun with (little or) no drinking water, they report fever and sore eyes. Further health problems include breathing difficulties, respiratory diseases, cancer and skin problems due to the exposure to agrochemicals. And in general, tobacco farming women complain about weakness and paleness due to malnutrition and lack of drinking water.<sup>7</sup>

When curing the leaves and while sorting, women inhale large quantities of smoke and are exposed to tobacco dust and nicotine fume. They suffer from chest pains, strain and fatigue due to bad air quality, stress, lack of sleep and inappropriate nutrition.<sup>8</sup>

The yield of tobacco is the leaf that contains nicotine, the addictive substance in tobacco products. Nicotine is water-soluble and can enter the skin. In the tobacco fields, after rains or with heavy dew, the nicotine migrates into the water on the leaf. That water gets onto anybody's clothing which then essentially becomes a giant nicotine patch.

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## Reproductive health jeopardized

Due to poverty and labour requirements even pregnant and lactating women are engaged in many tasks in the cultivation of flue cured Virginia tobacco. This infringes on their right to health and preventive care (CEDAW Art. 12).

### **Rahima (38), Bandarban**

Rahima's family was engaged in tobacco cultivation, so she had to be involved from the nursery to mulching, weeding, plant caring, harvesting of leaves, suckering, sticking and curing works. When Rahima was pregnant for 4 months, she started suffering from complications like unusual white discharge. Her body became swollen. At the pregnancy of 7 months, she had labour pain. Due to the inhalation of the gas from cured tobacco leaves, she delivered a pre-mature baby who had pneumonia at birth. So she had to stay in hospital for 15 days and spend 13,000 BDT (150 USD). She continued to suffer from unusual white discharge.

### **Kumkum (20), Kushtia**

Kumkum was engaged in tobacco works after the harvest. She worked hard in sticking, curing, sorting and baling of tobacco leaves. When she was 7 months pregnant, she had bleeding and was taken to the district hospital in Kushtia. Sadly, she delivered a stillborn baby.<sup>9</sup>



*A woman farmer arranges green tobacco leaves on sticks for curing.*

Women get also directly exposed to nicotine when they touch, hold or harvest the leaves and arrange them on sticks before curing. One of the effects is the stickiness and black discolouration of palms found among men and women involved in suckering, harvesting and sticking of the green leaves. Usually, the substance cannot be removed by washing and stays for at least two to three days. Even if the black stickiness is gone, the bitter taste of the leaves remains on the hands. Farmers used sand, ashes, high corrosive washing soap and torn fishing nets to get the sticky black from the hands causing injuries. For women, it is harder because they have to cook food every day even with such sticky hands, but can not use their hands properly in cooking.<sup>10</sup> This exposure to nicotine may lead to a poisoning known as Green Tobacco Sickness, a globally researched health problem associated with the absorption of nicotine through the skin from contact with tobacco leaves.<sup>11</sup> Farmers suffering from this poisoning reported weakness,

nausea, vomiting, dizziness, headache, abdominal pain, sweatiness, chills and increased salivation.<sup>12</sup>

On top of these numerous occupational risks, women in tobacco farming households also reported mental stress, sleeplessness and sadness. They often were stressed with the sorrow whether the investment of money and labour in tobacco cultivation would bring a fair return.<sup>13</sup> And despite the reporting and detailed descriptions we got, most health problems of women, including mental health, remained undiagnosed and untreated, because the rural health facilities do not have adequate facilities and the health personnel for treatment. Also women's health problems are often ignored by male family members and there is reluctance in spending money for healthcare.

## Inequality in decision making

Tobacco farming poses a threat to achieving gender equality (CEDAW Art. 2). Tobacco companies contract male farmers through company cards. The lump-sum payment, the attractive offer of price and the assurance of purchase by the company makes the male members decide to grow tobacco instead of food crops – often against the will of the women. Rahima from Kushtia district states: “Men in our families get allured by cash income earned from tobacco. They see the large amount of cash that they receive after selling the leaves. But soon this money is spent for the treatment of diseases that the family members suffer, paying for the debts, managing food costs as every food item has to be bought. At one point, we do not have money anymore. The husbands sell the jewellery of their wives to meet the cost. If this goes on, I am afraid, they will sell their wives!”<sup>14</sup>

Women are not involved in taking the decision whether to grow tobacco, whereas they are engaged to help the family to reduce production costs and earn better income. However, women’s other productive activities such as poultry raising are affected. Thus, women lack income of their own, while men receive the big amount of cash from the tobacco sales. At the same time, women lack decision making power concerning the income earned from tobacco sales. Child marriage of daughters increases, once the fathers have the cash in hand to secure the dowry. Some of the men even tend to marry again, after they received the pile of money from tobacco.<sup>15</sup>

Women and children are severely affected by the lack of nutritious food in the family, lack of fruit trees in their homestead and lack of livestock animals and poultry. The excessive use of pesticides in tobacco fields prevents poultry keeping and also the collection of fodder for cows. The monoculture and toxic tobacco fields leave no spaces for the growth of edible plants as sources of food, leaving the poorer families solely dependent on cash to buy food.

Mabia from Kushtia district does not want to continue tobacco cultivation, but her husband is persuaded by the company and listens to them. “We feel

dis-empowered by tobacco, as it intervenes into our decision making about food production. We work hard, but we do not have any voice in it. We do not have any control over the income earned from tobacco.”<sup>16</sup>

*“I do not get paid for the work I do for tobacco, because I am the wife, it is my husband’s work.”*

*Woman tobacco farmer, Bangladesh<sup>17</sup>*

## Solution: Get out of tobacco and cultivate food crops

Tobacco is a monocrop that occupies the land for more than seven months but affects the cultivation of multiple food crops throughout the year. Women as providers of food for the family find it difficult to get food for children. The small farmers do not have extra land to cultivate food crops. More than half of the growers are landless tenant farmers and roughly two-thirds of all tobacco growers are under a contract arrangement with the companies.<sup>18</sup> Farmers have to buy rice, vegetables and other food from the market. Women farmers incurring losses in tobacco production and suffering health hazards want to shift to food production.

The economic viability of tobacco compared to mixed food crop combinations shows that on average the costs per hectare for tobacco are 119% higher with lower net profit.<sup>19</sup> Even though it brings cash, tobacco does not provide food security to the farming families as they become market dependent.

Women feel empowered in food production as they can decide for themselves the kind of crops to be grown, get the seeds and grow food themselves. These works involve much less physical labour and less exposure to agrochemicals. The food crops that can be grown are a mixed combination to earn cash, ensure food, increase soil fertility and marketability.





*Women from tobacco-growing families jointly discuss alternative livelihoods to tobacco.*

As a signatory to the WHO Framework Convention on Tobacco Control (FCTC), Bangladesh is committed to take up steps for controlling tobacco (reduction of demand and control of supply). In 2017, the Ministry of Health and Family Welfare has drafted the Tobacco Cultivation Control Policy to support the farmers in the cultivation of alternative crops and save the environment from harm due to tobacco cultivation (FCTC Art. 17, 18). Earlier, in 2010, the Appellate Division of the Supreme Court issued a judgement, which generated awareness in the government:

“The government shall take steps phase by phase to stop production of tobacco leaves in tobacco-growing Districts of Bangladesh, giving subsidy to the farmers, if possible and necessary to produce other agricultural products instead of tobacco and rehabilitation of the tobacco workers engaged in tobacco production, if possible with alternative beneficial jobs.”<sup>20</sup>

Although still waiting for final approval by the parliament, the Tobacco Cultivation Control Policy acknowledges that tobacco farmers must be provided with all sorts of support to produce alternative crops. The main support should be agricultural inputs, loans and facilities to market the crops thus making the alternative crops profitable for the farmers.<sup>21</sup>

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# Women in tobacco cultivation in Zambia



**Interview with Brenda Chitindi**  
*Tobacco-Free Association of Zambia*

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Brenda Chitindi is working in tobacco control since 2008 and is the Executive Director of TOFAZA. Apart from pushing for a comprehensive tobacco control law and watching the tobacco industry's interference in policy making, she is continuously reaching out to tobacco farming families.

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Tobacco production is said to be an important contributor to Zambia's economy in terms of labour and revenue generation. According to the Tobacco Board of Zambia, tobacco production has increased by about 50% from 30 million kg in the 2019/2020 agricultural season to 45 million kg in 2020/2021. Over 90% of Zambia's tobacco is exported, thus contributing heavily to forex earnings of the country.<sup>1</sup>

Zambia ratified the World Health Organization's Framework Convention on Tobacco Control (FCTC) in 2008 and is obliged to take steps to reduce tobacco production by supporting viable alternatives to tobacco growing (FCTC Art. 17). But the country's weak economy and its strong tobacco interest make it difficult to achieve this goal. Most tobacco farmers are growing tobacco, because they believe it is the only economically viable crop. Additionally, a rather well-structured market for tobacco leaf continues to be an important reason for farmers to grow tobacco.<sup>2</sup>

The absence of a whole-of-government approach towards tobacco control has created an institutional context of dueling objectives, with some government ministries working for contradicting purposes. Without

ultimate coordination of authorities, the tobacco sector remains being run according to the desire and demands of multinational tobacco companies without regulation towards the implementation of the entire FCTC.<sup>3</sup>

Unfairtobacco spoke to Brenda Chitindi from Tobacco-Free Association Zambia (TOFAZA) about women in tobacco farming.

*As a tobacco control expert working to reduce and prevent tobacco use you are also monitoring the tobacco-growing areas of Zambia. Please share with us your observations and how women are involved in tobacco cultivation.*

In most cases, the Zambian society has overlooked the fact that prior to consumers, tobacco workers become the earliest victims of the hazardous industry. And the majority of them are women who are facing many difficulties. Tobacco is mostly grown by small scale farmers and vulnerable citizens, mainly in four Provinces, this is Eastern, Western, Southern and Central Province. Tobacco companies enter into contracts with tobacco farmers and distribute inputs on credit at exorbitant prices. Then credit is recovered during harvest period when the companies collect the tobacco leaf and offset the credits.

Tobacco growing requires especially high levels of pesticides and fertilizers subjecting the farmers to substantial health risks. Women apply pesticides and growth inhibitors which often are toxic chemicals. They use handheld or backpack sprayers and lack the necessary protective equipment.

During the harvest, women farmers and their children, often girls, handle tobacco leaves even with their bare hands without gloves. Their hands get stained with the nicotine from the plant and by touching the leaves, they are prone to Green Tobacco Sickness. This poisoning is caused by nicotine dermal absorption and is exclusively related to tobacco growing. Women get affected and they suffer severely from the consequences of the exposure. It is difficult for women to escape this situation as the family is indebted to tobacco companies and merely survives in the marginalized section of society.



After curing the harvest, the tobacco leaf is graded in closed spaces. Women and children grading the brown tobacco leaves breathe the contaminated air containing nicotine fumes and tobacco dust. Again, they lack protective equipment such as gloves or masks.

The harmful health impacts of tobacco farming are more serious on women, many face respiratory issues, nausea, skin irritation, injuries and falls due to the hard labour. Moreover, pregnant mothers experience miscarriages because they continue working in tobacco farms while they are pregnant. And if breastfeeding mothers work in tobacco farms their babies are also affected.

***Women carry out numerous hazardous tasks in tobacco growing even during pregnancy, but what about men. Could you tell us something about the relation between men and women working in Zambia's tobacco sector?***

Women tobacco farmers put in more labor than men, while also maintaining the household and serving as main children care providers. Women in small scale tobacco farming are usually obliged by their husbands to work with them in the production of tobacco. But the husbands are not mandated to help out their wives on their fields growing food crops for household consumption. Women in tobacco farming families usually have limited access to her own labour and to the labour of



*Women and their children are sorting cured tobacco leaves.*

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## Supply Chain Act: More accountability for the tobacco industry?

Viola Dannenmaier, Unfairtobacco

In June 2021, the German Federal Parliament passed the Act on Corporate Due Diligence in Supply Chains which will enter into force in 2023.<sup>4</sup> This will be the first time in Germany that companies will be legally obliged to respect the rights of people in their supply chains. In principle, this is a very important signal and a vital step for human rights and environmental protection worldwide. However, business interests have prevailed at crucial passages, so that the Act has serious shortcomings.<sup>5</sup>

### Does the Supply Chain Act hold tobacco companies accountable for violating women's rights?

From 2024, the Act will only apply to three German subsidiaries of the large tobacco multinationals: Japan Tobacco International, Philip Morris and Imperial Brands (Reemtsma Cigarettenfabriken). The law will not apply to all other companies in the tobacco industry in Germany with fewer than 1,000 employees. They can continue to import tobacco leaf from countries such as Malawi, Bangladesh or Zambia where child labour and women's rights violations are widespread in tobacco fields without having to comply with due diligence requirements.<sup>6</sup>

The law also refers to a graduated due diligence: The companies would solely be obliged to exercise due diligence for their immediate suppliers. These are mostly companies in Germany, such as tobacco leaf merchants. Violations of women's rights in tobacco production in the Global South are therefore not taken into account. Due diligence must only be performed for indirect suppliers if a company obtains verified knowledge of existing human rights violations. This approach falls far short

of the UN Guiding Principles on Business and Human Rights and of their core precautionary principle.

Furthermore, the Supply Chain Act does not contain any civil liability provisions. Women tobacco farmers whose rights are violated by the activities of tobacco companies cannot sue them for compensation by themselves. They can only authorize German trade unions or NGOs to file civil lawsuit in Germany. Up until now, however, the affected parties have virtually no chance in such lawsuits and so the preventive effect on companies is lacking.<sup>7</sup>

With regard to the tobacco industry and women's rights, all aspects considered, the current law is hardly effective. The German Supply Chain Act is an important first step towards binding corporate responsibility. However, the new Federal Government must correct existing shortcomings. There is already strong support among the population and in the EU Parliament for a much more ambitious European law of this kind.<sup>8</sup> In December 2021, the European Commission postponed its long-announced draft law, now due in February 2022. It is obvious that the business lobby is vehemently fighting this law and is working to weaken it.<sup>9</sup>

With an effective supply chain act, the European Union could send a strong global signal and thus also ensure that the shortcomings in the German law must be remedied. Only if the law is significantly tightened can tobacco companies be held accountable for violating women's rights. That is why we are advocating for a strong supply chain law that applies across Europe.

**Further information on the German Supply Chain Act:**  
[www.lieferkettengesetz.de](http://www.lieferkettengesetz.de)

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other members of the family. In effect, the wife contributes her unpaid labour to the production of the cash crop, from which she may never receive her share of the value. This limits the amount of her own labour power which she could use for her own productive enterprise. This normally leads to family disputes which in most cases results to domestic violence.

In many cases, it is usually rare for a woman to get access to labour from outside the family, e.g. by hiring wage labour. Such labour can only be hired for tobacco when it is a medium to large scale production, but such an activity goes in the hands of men. Usually,

rural women can only gain some access to their own labour by working very long hours, since most of their work is unpaid labour for the household.

Zambian rural women contribute almost 75% of tobacco farm labour, in addition to collecting water and fuelwood. Apart from producing tobacco, women are also responsible for producing all types of food for their households and also provide most of the labour for their husband's tobacco fields. If husband and wife grow tobacco on separate fields, a woman has to obey her marriage vows and extend her help to the husband in his tobacco field for fear of divorce.



Women headed households are considered not living as a full family unit. They are always short of land, used as labour for traditional male tasks and overburdened with domestic labour. Women heading their own household live on much smaller farms, on land mostly allocated by a father, uncle or brother, because the traditional leadership normally allocates land to men. And since tobacco growing is labour intensive women engage their children, starting at the age of five, to help them in the field. Most children do miss school as they cannot cope up with their fatigue after the work in the tobacco field. They suffer from headaches, colds, nausea, coughs, and chest discomforts. In most areas health facilities are at a distance and medication not readily available.

Therefore, women tobacco farmers are often trapped in arrangements that lead to a vicious cycle of debt, unable to get a fair price for their product.

***All these observations suggest that the conditions in tobacco cultivation violate women's rights. What is the Zambian government doing to protect women's rights?***

The Government of Zambia has ratified numerous treaties recognizing women's rights, most notably the Convention on Elimination of All Forms of Discrimination Against Women (CEDAW) and the Southern African Development Community's Protocol on Gender and Development. I want to emphasize that Article 3 of CEDAW obliges the parties to ensure the full development and advancement of women and guarantee all women human rights, fundamental freedoms, and equality with men in all areas, that is political, social, economic and cultural domains.

About 20 years ago, the Zambian government adopted a National Gender Machinery with the five priority areas agriculture and land, education, governance,



*While sorting cured tobacco leaves, farmers are exposed to tobacco dust and nicotine fumes. The masks provided to prevent corona infections still make difficult to breathe.*

health and social protection. But still women workers in tobacco farms continue to play a crucial role and to work long hours under very hazardous conditions.

As well, the Zambian government has implemented necessary and ambitious policies regarding women's rights especially in rural areas where access to information is limited. But still the dual legal system in the country (statutory and customary law) and the gap between de jure and de facto implementation, for example of land rights or in family relations, remain important obstacles.

However, Zambia's obligatory report to the CEDAW Committee at the UN is long overdue and this shows that the government has different priorities.

***Well, the Zambian government has certainly a current focus on the corona pandemic and the economic crisis unfolding from it. Do you have an insight into the impact of the pandemic on the tobacco sector?***

You know, COVID-19 continues to spread in Zambia and the tobacco industry has almost certainly made the pandemic worse. The World Health Organization has warned that smoking facilitates the spread of COVID-19 and evidence has emerged that it will lead to more severe progression of the disease. Zambia should not let tobacco companies buy their way into the nation's health policy with gestures that mask the tobacco epidemic they have caused long before the COVID-19.

During this COVID-19 pandemic, we also have visited some tobacco farms when it was harvest time and conducted some interviews. Tobacco farms remained fully operational throughout the pandemic, and while the government mandates mask-wearing and disinfection both outside and inside, most women tobacco farmers, workers and children are not able to adhere to these instructions. Women and children working in tobacco farms have not been provided with adequate personal protective equipment to safeguard them from COVID-19 by the contracting companies.

During our visits, we found that women and children wore masks incorrectly and others didn't wear the masks at all. When we asked them about it, the women

told us that they fail to breathe properly because the masks block most of the air. This makes it harder to breathe while the tobacco dust and the strong smell of the nicotine make it already hard to breathe.

So, tobacco farmers and workers have been exposed to much greater risks during this time.

***Apart from observing the situation in tobacco-growing areas, you're also advocating for more tobacco control and prevention. Could you give us some examples of your work at TOFAZA?***

Since in Zambia the tobacco industry is very interested in influencing politics, we are currently conducting high-level engagement meetings with the Permanent Secretaries of all the Government Ministries in Zambia. We expose the tactics such as donations and corporate social responsibility actions with which tobacco companies intend to interfere with health policy making to derail tobacco control measures.

On the issue of tobacco cultivation, we informed different ministries about the living and working conditions on the tobacco farms. The first outcomes are promising. The Ministry of Gender has taken a keen interest in the unfavourable conditions for women in tobacco farms and requested for more collaboration to look into the plight of women. The Ministry of Health has set up community awareness programs on the health hazards of tobacco production, currently implemented for example in Eastern and Western Provinces. The Ministry of Agriculture, the Ministry of Health and the Tobacco-Free Association of Zambia are presently conducting pilot projects on alternative livelihoods to tobacco, with support from the Center for Tobacco Control in Africa. These pilot projects are carried out in the Eastern, Western and Central provinces of Zambia. We're very much looking forward to the first results in the 2021/22 farming season.

And I'm very proud to say, that our work in tobacco control has attracted the attention of more women especially young women and girls. They are now taking up the torch of tobacco control and stand up to the aggressive tobacco industry interference in Zambia.



*Young participants of the NCD Action Week demand more tobacco control.*

***TOFAZA stands up for women's rights in tobacco farming. Please share with us some concluding remarks: What kind of support would women in Zambia's tobacco-growing areas need to improve their situation?***

Women in tobacco cultivation are living in a vicious cycle of poverty. So, the Government should put every effort to break the vicious cycle of poverty that locks the women tobacco growers and workers in this hazardous industry. Women need to be more supported to improve their livelihoods and to engage in other crops as an alternative livelihood, as many do not want to continue tobacco farming.

To improve their living and working conditions, women need education opportunities: knowledge about the health risks of tobacco farming and protective measures as well as training on communication and assertive

skills. Additionally, they need better access to water and energy resources.

But in the long run, Zambia needs to promote economically viable alternatives for women tobacco growers and workers with the objective to protect their health and wellbeing. Women need the government's support to gain adequate knowledge about alternative crops and to gain access to markets for these crops. Additionally, women need access to loans and organisational support to form cooperatives in order to be successful in those alternative endeavors.

***We wish you all the best and success for TOFAZA's work. Thank you so much for your time, Brenda.***



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# Effective measures for a tobacco-free world

**Sonja von Eichborn**  
*Unfairtobacco*

Scientific evidence on the serious health effects of tobacco consumption on women and girls clearly shows that tobacco use and exposure to secondhand smoke particularly endanger the right to health and preventive care. Within societies the threat posed by tobacco is unequally distributed. Women and girls from socially disadvantaged families are more affected by the exposure to secondhand smoke and are more likely to have worse chances of quitting smoking. Tobacco companies contribute significantly to this development through their marketing by targeting their messages specifically at women as future customers. They increasingly use the potentials of social media, be it through postings on their own accounts or through paid posts by influencers.

Looking at social inequalities between states, it becomes clear that tobacco cultivation has a negative impact on women and girls, especially in low- and middle-income countries. There, on the one hand, severe environmental damage is caused and, on the other hand, the core women's rights to occupational safety, health and preventive care as well as the right to support for rural women are violated. The reasons for this are the poverty-stricken living conditions and the strong economic dependence on transnational tobacco companies. To date, these corporations still don't take sufficient responsibility for the violation of women's rights in their supply chains.

The chapters collected in this brochure show that tobacco control and its manifold measures contribute to the implementation of the Sustainable Development Goals and the enforcement of women's rights. This is also confirmed by the preambles of the WHO Framework Convention on Tobacco Control (FCTC) and the 2030 Agenda for Sustainable Development. These international instruments are complementary and mutually reinforcing. The comprehensive view of them shows that women have a right to a tobacco-free world.

## Responsible stakeholders

The supreme guardians of women's rights are the signatory states of the UN Women's Rights Convention. They have committed themselves to respecting, protecting and fulfilling women's rights. They also have further obligations under the FCTC and the 2030 Agenda for Sustainable Development.

*“If I were the Queen of Germany, I would take the tobacco away from them and then throw it away (...)”*

*Girl from Germany, 5<sup>th</sup> grade, in a school workshop<sup>1</sup>*

Private-sector stakeholders are responsible for ensuring that neither their business practices nor their services or products violate human or women's rights. The UN Guiding Principles on Business and Human Rights (UNGPs) are one of the most important international standards in this respect. However, for many decades the implementation has mostly been voluntary. Thus, at the management levels of large corporations, compliance with human and women's rights has often been, and still is, traded off against the generation of profits. After conducting a human rights assessment of a multinational cigarette company, the Danish Institute for Human Rights concluded: “Tobacco is deeply harmful to human health, and there can be no doubt that the production and marketing of tobacco is irreconcilable with the human right to health. For the tobacco industry, the UNGPs therefore require the cessation of the production and marketing of tobacco.”<sup>2</sup>

The actions of companies and states are monitored and assessed by civil society organisations. Among other things, they draw attention to the dangers posed by tobacco and they also call for the enforcement of women's rights in areas such as equal rights and



opportunities, occupational safety, health and preventive care, empowerment in rural areas as well as poverty eradication.

## Reducing tobacco use effectively

In order to effectively reduce the consumption of tobacco products, States Parties to the FCTC must fully transpose the measures stipulated therein into national law and implement them (SDG 3.a). Even states that have not ratified the FCTC have joined the UN Women's Rights Convention, thus recognising the women's right to health, and committed themselves to protecting and fulfilling it. Therefore, they must also implement tobacco control measures within the scope of the FCTC.<sup>3</sup> It has become even more evident in the global coronavirus pandemic that tobacco control is essential in order to reduce health risks.

In order to protect and enforce the rights of women and girls against the tobacco industry, the following areas must be addressed as a priority: Tobacco taxes, advertising bans, introduction of standardized packaging, protection from secondhand smoke, education and cessation.<sup>4</sup>

In this context, government agencies must regularly review, adapt and advance the measures of their tobacco control policies. This concerns, i.e., the accumulation of health risks and the social realities that have been shown to have an impact on the effectiveness of the measures, but which have so far not been sufficiently considered in prevention and cessation approaches. Furthermore, novel tobacco and nicotine products must be adequately integrated into statutory regulations.<sup>5</sup>

Although many governments have already implemented numerous FCTC measures, many jurisdictions are still lagging behind in tobacco control. For example Germany: The tobacco tax increases adopted in 2021 are insufficient and achieve no steering effect and the protection of non-smokers is as yet incomplete. More than 15 years after the ratification of the FCTC, there is still no comprehensive tobacco control policy in Germany. Therefore, a strategy must finally be developed



*The online simulation game "Tobacco in Bralawia" links smoking prevention with learning in global contexts.*

for the successful implementation of the FCTC. To this end, more than 50 civil society organisations have submitted a strategy paper that aims to achieve a tobacco-free Germany in 2040.<sup>6</sup>

In this context, the commitment to tobacco control must not be limited to national frameworks, because the consequences of tobacco use are a global problem. Reduced tobacco use in high-income countries leads to a greater shift of sales markets to the Global South. That is why low- and middle-income countries, in particular, need technical and financial cooperation in the implementation of the WHO Framework Convention on Tobacco Control (FCTC Art. 22, 26.3). The FCTC Secretariat does this, for example, in the FCTC 2030

Programme, which currently supports 33 countries in introducing measures in areas such as tax policy and packaging regulations and in integrating the FCTC into their national legislation.<sup>7</sup> Bilateral development cooperation also offers opportunities to establish such collaborations.

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## Recommendations to governments

In order to achieve a tobacco-free world, governments need to develop comprehensive strategies on how to implement the FCTC in its entirety in their jurisdictions. The most important measures to reduce tobacco use are the following:

- Annual significant increase in taxes on tobacco and nicotine products (FCTC Art. 6)
  - Evidence-based, free-of-charge cessation services (FCTC Art. 14, 4.2d)
  - Comprehensive ban on tobacco and nicotine products advertisement, including social media (FCTC Art. 13)
  - Introduction of standardized packaging (FCTC Art. 11)
  - Comprehensive protection from secondhand smoke and e-cigarette aerosol in public places (FCTC Art. 8)
  - Reduction of the availability of tobacco and nicotine products
  - Regular campaigns to raise awareness of the risks of tobacco use (FCTC Art. 12)
- 

Doctors and midwives should be trained to educate parents-to-be about the effects of tobacco use and secondhand smoke on their unborn children. In this way, tobacco prevention and cessation can be integrated into existing preventive care schemes for pregnancy and childbirth.<sup>8</sup>

In the area of social media, providers must effectively enforce their existing advertising policies regarding tobacco products on their platforms and extend them to novel tobacco and nicotine products. If they fail to do so to a sufficient extent, it is the states' duty to legally regulate the online marketing of tobacco companies in such a way that the women's right to health is ensured.<sup>9</sup>

Any collaboration with tobacco and cigarette companies is out of the question for obvious reasons, because they strive for profits deriving from addictive, lethal products. Governments are bound by the strict

rules of the FCTC and should only interact with the tobacco industry to the extent strictly necessary in order to ensure effective regulation (FCTC Art. 5.3).<sup>10</sup>

Civil society organisations play an important role in monitoring the implementation of the FCTC. The mandatory state reports to the FCTC Secretariat at the WHO are not subject to any independent review. Reports and strategy papers from civil society are therefore of great importance in order to add another perspective to the governments' views.<sup>11</sup>

## Combating the exploitation of women effectively

The governments of tobacco-growing countries must take a variety of measures to improve the living and working conditions of women in tobacco farming, because the causes of poverty and economic dependence are manifold and the implementation of the FCTC is only just a beginning.<sup>12</sup>

In order to guarantee occupational safety, health and environmental protection in tobacco cultivation (FCTC Art. 18), state inspections on tobacco farms must be carried out focussing particularly on women and girls employed. In addition, it is essential for state authorities to offer training courses on the dangers of chemicals and nicotine for tobacco farmers.

*„The government must declare to stop tobacco. We must grow wheat, lentils. Please stop tobacco cultivation.“*

*Woman tobacco farmer in Bangladesh<sup>13</sup>*

In order to reduce the economic dependency of smallholder farmers on multinational tobacco leaf and cigarette companies and to strengthen their negotiating position, governments must ensure that contracts are





*In Brazil, women tobacco farmers have switched to growing organic vegetables, which they sell at local markets.*

transparent. Furthermore, it is necessary to conduct state-controlled quality inspections of tobacco leaf, independent of the tobacco industry, to prevent price manipulation by the purchasing companies.<sup>14</sup>

Moving forward towards a tobacco-free world in tobacco-growing countries, governments must support tobacco farmers through government programmes to develop alternative livelihoods (FCTC Art. 17), as has happened in countries such as Brazil, Kenya, Malaysia, Malawi, among others.<sup>15</sup> For women and girls, two things are important here: First of all, they must have access to high-quality education and specific vocational training in order to learn something other than tobacco growing, and secondly, they must be supported in establishing cooperatives, so that they can successfully produce and market alternative crops.<sup>16</sup>

Countries on whose territory (multinational) companies make profits from the exploitation of women

in tobacco cultivation must also intervene in a regulatory way. For decades they relied on persuading businesses to voluntarily respect human and women's rights in their supply chains, while companies mainly engaged in so called greenwashing with numerous corporate social responsibility programmes.<sup>17</sup> In the last two years, however, we have seen positive developments which are reflected, for example, in a national supply chain law in Germany and a similar proposal in the European Union for a mandatory human rights and environment due diligence.<sup>18</sup> At the United Nations level, however, the negotiations on a UN Binding Treaty on business and human rights continue to stall. The purpose of this Binding Treaty is to prevent human rights violations by companies and to enable those affected to gain access to legal protection. The negotiations are making only slow progress and are still being blocked, first and foremost, by industrialised countries.<sup>19</sup>

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## Recommendations to governments

If governments are serious about their commitment to transparency and respect for human and women's rights in supply chains, they need to do more to promote mandatory due diligence for (multinational) companies on three levels:

- National level: Introduction of strong national supply chain laws
- European level: Introduction of an ambitious European due diligence law
- Global level: Constructive negotiations on the UN Binding Treaty on business and human rights

Within the framework of development cooperation, high-income countries should advocate concrete measures for improving the living conditions of women and girls in tobacco-growing countries. Important measures include:

- Increased support for alternative livelihoods to tobacco cultivation (FCTC Art. 17)
  - Social security programmes for smallholder farmers
  - Promoting context-specific vocational training for young women
  - Strengthening civil society to assert their rights
- 

Companies in the tobacco sector that have contracted smallholder farming families must establish transparent contracts, conduct training on the chemicals used, provide protective clothing appropriate to the working environment and, above all, pay appropriate prices for tobacco leaf. If they do not do this sufficiently as a matter of course, state regulation is urgently needed.

As a large proportion of smallholder farms are contractually bound by tobacco companies and leaf merchants, the International Labour Organisation (ILO) needs to do more to ensure compliance with Convention 155 on Occupational Safety and Health in tobacco-growing countries, such as in Brazil, Malawi, Zambia or Zimbabwe, which have ratified this Convention. Now that the ILO has ended its financial cooperation with the tobacco industry, it will be in a better position to do so.<sup>20</sup>

Civil society stakeholders must continue in their watchdog function and point out women's rights violations in the tobacco industry to the public and to the

governments. In order to do this, they must strengthen their cooperation with partner organisations in tobacco-growing countries and support women in networking and asserting their rights.

## Strengthening women's rights effectively

In all measures taken to reduce tobacco consumption and to combat labour exploitation in the tobacco industry, it is important to keep a holistic view on women's rights. This also means that government measures must be focused more strongly on the needs of particularly affected or disadvantaged groups, such as women with low socio-economic status in Germany or women in rural areas in Bangladesh or Zambia.<sup>21</sup>

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## Recommendations to governments

In order to further strengthen women's rights, not only in terms of tobacco control, governments must firmly anchor gender justice, the protection of women's rights and a consistent gender equality policy in their governance. This is also a task for addressing the Covid-19 crisis, which has increased and made visible existing gender inequalities. Adjusted to their countries' respective needs, steps towards gender equality can include:

- Suspension or amendment of discriminatory laws
  - Introduction and/or enforcement of laws addressing violence against women and girls
  - Development of a gender equality strategy across departments
  - Gender-responsive budgeting
  - Legislative measures to ensure a gender equal political representation
- 

In order to implement women's rights in their entirety, the signatories to the UN Women's Rights Convention must change existing structures in such a way that women have equal access and full participation in all areas, e.g. in education, business or politics. The fight against hunger and poverty, for example, can only succeed in the long term if women have largely equal access to





*Since September 2019, civil society organizations and groups have been engaged in the Supply Chain Law Initiative for the corporate compliance with human rights.*

education, land and funding. In terms of supply chains in global trade, this also means that companies must be required by law to comply with their due diligence obligations with particular attention to gender issues.<sup>22</sup>

Last but not least, one of the roles of civil society in strengthening women's rights is to supplement the

mandatory state reports with its own reports. These alternative reports to the UN Women's Rights Convention provide an opportunity to call for protection from secondhand smoke and an effective reduction in tobacco use as well as the protection of women's rights in supply chains.<sup>23</sup>

## Endnoten

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# Unfairtobacco

## Who we are

Unfairtobacco is a project run by the Berlin Working Group on Environment and Development (Blue 21) e.V. and was founded in 2004.

We expose how the tobacco industry harms farmers, consumers and the environment. We also show how the impact of tobacco on sustainable development can be mitigated or even prevented.

We advocate for a global economy based on solidarity and ecology, for the improvement of working and living conditions of tobacco growing families, for the fight against environmental damage caused by tobacco and for phasing-out tobacco cultivation. We advocate for comprehensive non-smoker protection, effective implementation of the WHO Framework Convention on Tobacco Control, and a tobacco-free world by 2040.

We are part of the international tobacco control movement and are connected with partners all over the world.

[unfairtobacco.org/en](https://unfairtobacco.org/en)



Unfairtobacco on Instagram

## Our work in keywords

### Information

We offer information on our website, share our knowledge on social media, and produce expertise such as studies, factsheets, and other material.

### Education

We provide learning material, conduct school workshops and offer the exhibition *Big Tobacco: Profits & Lies* for rent. Our education work is in German.

### Public Awareness

We organise events and other activities to inform the public and to put pressure on political decision makers.

### Network Children's Rights and Tobacco Control

We have initiated the German Network on Children's Rights and Tobacco Control and cooperate with health, children's rights and development organisations as well as individual experts to advance the vision of a tobacco-free world in 2040.

### Contact us:

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### Independent work needs support!

### We thank you for every donation.

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