

Protect people from tobacco smoke

Commitment of Parties to the WHO Framework Convention on Tobacco Control (WHO FCTC)¹

• Establish effective legislative, executive, administrative and/or other measures providing for protection from exposure to tobacco smoke in indoor workplaces, public transport, indoor public places and, as appropriate, other public places.

Global evidence

Exposure to secondhand smoke (SHS) kills more than 600 000 people each year,² which is more than 10% of all tobacco-related deaths.

Global best practice: effective protection = zero exposure.

Any exposure to SHS is harmful. Only 100% smoke-free environments, which are created by total elimination of smoking and tobacco smoke are safe.³

Legislating for 100% smoke-free policies is feasible. Already, some countries in the Eastern Mediterranean Region are implementing global best practice.

- Lebanon passed a comprehensive law with 100% smoke-free indoor public places in 2012.²
- Islamic Republic of Iran, Lebanon, Libya, Pakistan, Saudi Arabia and occupied Palestinian territory are ranked among the highest achieving countries in the world for 100% smoke-free policies.²

Global impact

 It is shown⁴ that within three years of implementation of 100% smoke-free restaurants and public places, smoking prevalence goes down by 3% and in 100% smoke-free indoor workplaces, smoking prevalence goes down by 6%. This policy would result in 5 million fewer smokers, and 2.5 million deaths would be averted.

Regional status and data

Many people are at risk from SHS in the Region.

- Data published in 2012 shows SHS caused 64 100 deaths.⁵
- The Global Youth Tobacco Survey shows 1 in 3 children are exposed to SHS.

Smoke-free policies are saving lives.

- 22 617 smoking-related deaths were prevented in Libya because of its smoke-free law.⁴
- Smoke-free laws in Pakistan resulted in 900 550 fewer smokers and prevented 450 275 smokingrelated deaths.⁴

The introduction of 100% smoke-free laws is not enough – enforcement is also key to success.

• Air-monitoring studies conducted in 11 countries of the Region indicate that smoking persists in public areas covered by smoke-free laws. Fine particulate matter (PM2.5), a harmful air pollutant associated with tobacco smoke, was six times higher in such public places.⁵ Effective enforcement needs to be strengthened.



Regional Office for the Eastern Mediterranean

Actions needed

- Completely ban smoking in all indoor public places, workplaces and public transport with no exceptions (no designated smoking places).
- Consider the possibility of banning smoking in other public places, such as places where children have access, or with population crowds, such as mega-events or mass-gatherings, etc.
- Fully enforce existing smoke-free laws and policies.
- Regularly monitor and evaluate compliance with 100% smoke-free policies.
- Consistently raise awareness and inform the public of the dangers of exposure to SHS, on the need to comply with the smoke-free law, and on progress in effective protection provided by the law.

Facts and fallacies: the truth about smoke-free policies

Fallacy: Exposure to SHS is not a health hazard, but merely a nuisance.

Fact: The global evidence is indisputable: SHS is not only harmful to health; it kills. Nearly 600 000 people die each year from SHS exposure. Every major scientific body in the world, including WHO, the International Agency for Research on Cancer and the United States Department for Health and Human Services clearly state that SHS is a serious health threat and a significant cause of death and disease.^{6–8} The list of diseases and adverse health effects from SHS exposure is long and growing, and includes cancer, heart disease, stroke and sudden infant death syndrome.⁸ There are at least 69 established cancer-causing chemicals in tobacco smoke, and hundreds of recognized human toxins.⁷ No level of exposure is safe.

Fallacy: Smoke-free laws infringe on an individual's right to smoke.

Fact: All constitutions recognize the right to health. In contrast, there is no international human rights instrument or constitutional right to smoke.⁹ Nonsmokers, especially children, have the right to breathe clean and safe air. When smoking is allowed in public places, it threatens the health of non-smokers and infringes on their right to a safe and healthy environment. Smoke-free laws do not prohibit a smoker from smoking; they prevent smokers from smoking in public areas where both smokers and non-smokers are harmed by SHS.

Fallacy: Smoke-free laws harm business.

Fact: Smoke-free laws do not harm business, including the hospitality and tourism industries. Smoke-free laws may even have a positive impact. A systematic review of 97 studies on the economic impact of smokefree laws showed "...no impact or a positive impact of smoke-free restaurant and bar laws on sales and employment". This review also documented that all the studies reporting a negative effect were funded by the tobacco industry.¹⁰ Further, the WHO International Agency for Research on Cancer reviewed 165 studies and found that "smoke-free policies do not have an adverse economic impact on the business activity of restaurants, bars, or establishments catering to tourists, with many studies finding a small positive effect of these policies."11 The evidence shows that smoke-free laws are good for health and good for business.

Fallacy: Ventilation systems can reduce SHS exposure to safe levels.

Fact: Scientists and engineers alike agree: there is no safe level of SHS exposure. The American Society of Heating, Refrigerating, and Air Conditioning Engineers, the leading association of ventilation professionals, concluded, "the only means of effectively eliminating the health risk associated with indoor exposure is to ban smoking activity."¹² Ventilation systems and airpurifying technologies are not only expensive but also incapable of eliminating the exposure to SHS.

Fallacy: People do not support smoke-free laws.

Fact: Globally, data consistently show strong public support for smoke-free laws. A recent national survey in Turkey documented that over 91% of non-smokers and nearly 70% of smokers supported the new smoke-free law.¹³ Data in the Region likewise reveal high levels of support for smoke-free laws: in Alexandria, Egypt, 98% of survey respondents endorsed 100% smoke-free legislation in all public places and on public transport.¹⁴

Protect people from SHS by fully enforcing 100% smoke-free laws.

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