

Editorial

Tobacco Control in Low- and Middle-Income Countries: Changing the Present to Help the Future

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While the global smoking rate has dropped in the past 30 years (from 41.2% of men in 1980 to 31.1% in 2012 and from 10.6% of women in 1980 to 6.2% in 2012), the number of tobacco smokers has increased due to population growth (Ng et al., 2014). This tobacco use and second-hand smoke exposure continue to harm people worldwide. Those harmed are often vulnerable: children, those living in low- and middle-income countries (LMICs), those with existing diseases, etc. As noted by the World Health Organization (WHO), nearly 80% of those who smoke live in a LMIC (World Health Organization, 2017). Furthermore, it is often those who are more socio-economically disadvantaged or less educated in LMICs that are exposed to second-hand smoke at home and work (Nazar, Lee, Arora, & Millett, 2015).

While a recent meta-analysis of tobacco control interventions for LMICs revealed that medications may be effective at increasing cessation and educating pregnant women on smoking harms can be effective in improving quit rates (Munabi-Babigumira, Fretheim, & Øverland, 2012), it can be difficult to translate tobacco control into routine care. Planning, development and implementation of tobacco control activities in LMIC are difficult; a study of adding tobacco assistance to TB programs in Pakistan and Nepal revealed that adding tobacco control to care was challenging (Dogar, Elsey, Khanal, & Siddiqi, 2016). Many smokers in LMICs have little access to education, prevention or assistance. As smoking rates have been decreasing in high-income countries (HICs), many LMICs are targeted by the tobacco industry through marketing and political lobbying; this is especially true in sub-

Saharan Africa (Gilmore, Fooks, Drope, Bialous, & Jackson, 2015).

Tobacco control experts have long been concerned about the increase in tobacco cultivation, use and the influence of the tobacco industry in sub-Saharan Africa (Taha & Ball, 1980). Of the 48 nations in sub-Saharan Africa, only one (Seychelles) is rated as a HIC (World Bank, 2017). While many effective tobacco control efforts have been taken (World Health Organization, 2015), research on the Framework Convention on Tobacco Control in Africa showed that most African nations lagged behind on regulating tobacco product packaging, on enforcing smoke-free spaces and on tobacco sponsorship (Tumwine, 2011). More must be done to protect the over 1 billion people who live in LMICs in sub-Saharan Africa from the harms of tobacco.

While research on tobacco control has been conducted in the region, far more research is needed; this is difficult in low resourced, understaffed healthcare settings and universities. Though researchers in many LMICs have free or low-cost access to academic journals (World Health Organization, 2014), other resources, such as funding for tobacco control research and interaction with other tobacco control researchers, may be quite scarce. In an effort to connect tobacco control researchers and other experts from HICs with those from LMICs, the World Conference on Tobacco or Health (WCTOH) will be held in Cape Town, South Africa for the first time in the 50-year history of this conference (World Conference on Tobacco or Health, 2018). The conference theme, *Uniting the World for a Tobacco-Free Generation*, focuses on global and

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generational issues related to tobacco control. The WC-TOH serves as a forum for networking between researchers, policymakers, health educators, advocates and healthcare providers. The WCTOH provides a unique opportunity to support the tobacco control, healthcare and research infrastructures of LMICs in sub-Saharan Africa; reduced conference fees are available for local delegates, students and nurses. The conference is an important step towards advancing and supporting tobacco control research, advocacy and policy in LMICs and will bring needed attention to tobacco harms in sub-Saharan Africa as well as in LMICs globally.

Acknowledgements

None.

Financial Support

This research received no specific grant from any funding agency, commercial or not-for-profit sectors.

Conflict of Interest

The authors have no conflicts of interest to report.

Ethical Standards

This research does not involve any human or animal experimentation. The research complies with the ethical standards of the relevant national and institutional guides.

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