JAMAICA HOSTS WORKSHOP ON SMOKING CONTROL

A subregional smoking control workshop was held in Kingston, Jamaica, on 8-11 December 1987 for countries of the Caribbean area. Organized by PAHO/WHO with the cooperation of the Medical Association of Jamaica, the meeting drew representatives of the governments of the Bahamas, Barbados, Grenada, Guyana, Jamaica, Saint Lucia, and Trinidad and Tobago, as well as participants from PAHO/WHO and the American Medical Association. The objectives of the workshop included analysis of current tobacco use patterns in each country, discussion of the basis for multisectoral planning, programming, and execution of smoking control programs, and promotion of a commitment to antismoking efforts on the part of national political authorities. The workshop also sought to promote national and subregional coordination of these various activities.

During the opening session, Dr. Orrin Barrow, President of the Medical Association of Jamaica, remarked that this meeting provided encouragement to the recently begun antismoking education programs in his country, and pointed out that the initiation of smoking control campaigns is very difficult in many Third World countries due to lack of government support.

Dr. George Alleyne, Area Director for Health Programs Development in PAHO, spoke on behalf of PAHO’s Director, Dr. Carlyle Guerra de Macedo. Dr. Alleyne expressed PAHO’s interest in sponsoring subregional discussions such as this workshop, the third on the subject of smoking control. (For accounts of the previous workshops for the Southern Cone countries and the Andean countries, see PAHO Bulletin 20(2):219–221, 1986, and 21(1):76–79, 1987, respectively.) He stressed that the role of international organizations was that of catalyst for activities that are ultimately carried forward by national governments and organizations.

The Minister of Health of Jamaica, Dr. Kenneth Baugh, praised the Medical Association of Jamaica’s antismoking initiatives and expressed his personal strong support for smoking control measures and his government’s recognition of the need for such measures. He pointed out that governments are often in a difficult position on this issue because they must take into account not only the health of the population but also economic considerations, which have been an obstacle to smoking control programs in many countries.

Five papers on specific topics were presented and discussed. The subjects were tobacco control legislation, economic and political aspects of tobacco smoking, cigarette sales promotion and publicity for and against smoking, education and smoking control, and
the role of nongovernmental organizations in supporting smoking control programs. In addition, an overview of the principal health problems associated with or aggravated by tobacco smoking was presented, along with outlines of WHO's comprehensive tobacco control program and PAHO's smoking control activities.

Delegations from six of the participating countries reported on the smoking problems there, including, to the extent that the available information allowed, the prevalence of the problem, mortality and morbidity from tobacco smoking, and any existing antismoking activities, both legislative and educational, in their respective countries. The reports pointed to the need to gather more information on tobacco smoking and its consequent health problems in all of the countries of the subregion in order to provide a basis for constructing action plans adequate for fighting the smoking epidemic.

Regarding such action plans, the delegates developed joint guidelines to form the basis for country plans. The guidelines affirmed that the general objective of smoking control programs is to reduce the incidence of tobacco-related disease through research, education, legislation, and cessation programs. Specific strategies were recommended for carrying out these activities, and the resources required and their availability were examined.

To obtain data about the use of tobacco and its effects on health, the guidelines recommended surveys on the smoking habits of the population, retrospective and prospective health studies, attitudinal research, and scientific studies on tar and nicotine levels of locally produced cigarettes. Assistance from governments and external agencies was deemed necessary to carry out these activities.

Programs to educate the general public about the dangers associated with the use of tobacco were recommended for schools, the workplace, and the community at large. Both school-based programs and those aimed at adults could involve a variety of approaches, including role-playing, group discussions, audio-visual presentations, and lectures. The antismoking message could also be publicized by the mass media. In addition to teachers and health educators, outstanding local personalities and community leaders could aid in this effort.

The guidelines recommended seeking the enactment of legislation along a number of lines: banning the advertising of tobacco products; reducing the accessibility of tobacco to minors; requiring appropriately strong warning labels, on a rotating basis, on all tobacco products; reducing the levels of nicotine and tar in locally produced cigarettes to international standards; and requiring that the levels of tar and nicotine be printed on the labels of tobacco products. Strategies for working towards the enactment of such legislation included establishing a national committee and lobbying policy makers. The positive impact of involvement by the media and interested groups, such as churches and service clubs, was noted, as was the value of collaboration with national bureaus of standards.

Regarding the development of smoking cessation programs, it was noted that a number of techniques are avail-
able and that trained counselors, including former smokers, would be required. It was felt that technical expertise from external sources would be helpful in setting up the programs.

While the proposed guidelines for action plans were not meant to be definitive, it was hoped that they and the workshop as a whole would provide a point of departure for the delegates to encourage their governments and nongovernmental organizations in their countries to give serious thought to the severe and increasing impact of tobacco on health and to take steps to reduce tobacco smoking.


PAHO SPONSORS

INTERNATIONAL CONFERENCE ON FOOD AND NUTRITION SURVEILLANCE IN THE AMERICAS

The Food and Nutrition Program of PAHO has organized a conference on food and nutrition surveillance systems in the Region, to be held in Mexico City from 5 to 9 September 1988. Participants at the conference will review the current status of these systems in the Region, examine the needs of users of the information they provide, and explore how greater awareness and support can be generated among users.

The need for international food and nutrition surveillance was first affirmed at the World Food Conference held in Rome in 1974. One of the resolutions approved on that occasion recommended the establishment by WHO, FAO, and UNICEF of a global surveillance system to monitor food and nutrition conditions among disadvantaged population groups, with the goal of providing rapid and ongoing evaluation of all factors that influence food consumption patterns and nutritional status in these groups. With the support of those international organizations and other bilateral agencies, food and nutrition surveillance has made steady progress in Latin America and the Caribbean since 1977, and systems are now operating in about 25 countries. However, while many systems have developed successfully from a technical viewpoint, not all have been able to ensure that the information they gather is regularly used in decision-making.

The PAHO Food and Nutrition Program is strongly committed to cooperate with the Member Governments in advancing the effective use of food and nutrition data by national and sectoral planners and program managers. The upcoming conference is a manifestation of this commitment.