

Achieving a tobacco free generation - 'stopping them from starting'

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"If two of us smoke, one of us will die 10-20 years earlier than if he or she had not smoked. I strongly believe that, if tobacco were to be invented today, it would never be legalized," says Kristina Mauer-Stender, Programme Manager for Tobacco Control at WHO/Europe.
For a 15-year-old, however, the abstract risk of dying of cancer in 20 or 30 years is not a big threat when compared to immediate gratification. Kristina Mauer-Stender compares the situation to the thrill of being able to buy everything that one wants in a shop while postponing paying the bill for decades.
Adolescence includes defining ones identity. Young people can use smoking in developing a self-image: fulfilling the desire to be perceived in a certain way, to be a member of a group. Slogans used by the tobacco industry play on this by portraying smoking as a sign of a confident, successful man or woman.
Although numbers of adolescent smokers are falling in most of the WHO European Region, 18% still smoke on a weekly basis and the proportion of adolescent girls in eastern Europe who started to smoke rose from 18% to 20% in the last decade. As more women have become economically independent in eastern Europe, tobacco products are marketed to symbolize emancipation.
WHO strategy for child and adolescent health: protecting health and reducing risk
Achieving a tobacco-free new generation is a key area of the new WHO strategy for children and adolescent health in the European Region:
This European generation is the first that can realistically aspire to freedom from tobacco. The trends in smoking in the adult population of much of Europe are downwards, even in some countries that are net exporters of tobacco. The trends show a decrease among adolescents in western Europe, especially for girls, while those in eastern Europe show an increase. As countries work towards achieving the global goal of a 30% reduction in tobacco use by 2025, the WHO European Region can look beyond and aspire that all children born in or after 2000 will grow into non-smoking adults and reach middle age on a continent where tobacco is a rarity and where children grow up free of direct or indirect exposure to tobacco smoke.
Implementing the WHO Framework Convention on Tobacco Control can help countries prevent adolescents from starting to smoke. Evidence shows that raising tobacco taxes is the most effective way to lower consumption, and is even more effective among adolescents, a very price-sensitive group. Banning advertisements and requiring plain packaging, with horrifying pictures, tend to make tobacco packages less appealing to adolescents. Finland gives an inspiring example of ways to stop young people from starting to smoke.
Finland - legislating to end tobacco use
Finland was the first country to move from talking about tobacco control to using legislation to try to put an end to tobacco use. Its vision is for children and adolescents to grow up in a society where smoking is not part of the norm. The current goal is for 2% or less of the adult population to be smokers by 2040.
Finland pursues this goal through regulatory measures that:
- require standardized, unbranded packaging;
- raise taxes on tobacco;
- restrict smoking in residences;
- ban smoking in private cars where minors are present and in playgrounds, amusement parks and beaches;
- encourage municipalities and workplaces to declare themselves smoke free;
- support smoking cessation;
- prevent new tobacco products from entering the market; and
- regulate e-cigarettes containing nicotine, and ban the use of e-cigarettes where smoking is prohibited.
"I would argue that smoking is not freedom; it is an addiction. Countries have a responsibility to protect and help their citizens to avoid the dangers of smoking. Adolescents should receive special attention, as they biologically have a lower threshold for nicotine addiction," says Kristina Mauer-Stender.
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Die WHO wurde 1948 mit dem Ziel gegründet, für alle Völker das höchstmögliche Gesundheitsniveau zu erreichen. Mit ihren 194 Mitgliedstaaten ist die WHO federführend in globalen Gesundheitsfragen und in der Gestaltung der Forschungsagenda für Gesundheit, im Aufstellen von Normen und Standards und in der Formulierung evidenzbasierter Grundsatzoptionen. Die WHO bietet ihren Mitgliedstaaten fachliche Unterstützung, sie überwacht und bewertet gesundheitliche Entwicklungen, sie unterstützt medizinische Forschung und leistet Soforthilfe bei Katastrophen. Die WHO setzt sich weltweit für bessere Ernährung und für eine Verbesserung der Wohn- und Arbeitsbedingungen sowie der sanitären Verhältnisse ein. Ihr Hauptbüro ist in der Schweiz in Genf angesiedelt. Sechs Regionalbüros sind über die ganze Welt verteilt. Die WHO arbeitet in einem zunehmend komplexen und sich rapide verändernden Umfeld. Gesundheitspolitik ist heute weniger deutlich von anderen Bereichen zu trennen und sie erreicht inzwischen auch die Sektoren, die Auswirkungen auf gesundheitliche Chancen und Ergebnisse haben können. Die Agenda der WHO angesichts solcher Herausforderungen enthält sechs Punkte:
zwei gesundheitliche Ziele: Förderung der Entwicklung und Förderung der Gesundheitssicherheit;
zwei strategische Bedürfnisse: Stärkung der Gesundheitssysteme und Nutzbarmachung von Forschungsergebnissen, -daten und -erkenntnissen);
zwei operative Ansätze: Ausweitung der Partnerschaften und Verbesserung der Leistung.