

# RECOMMENDATIONS

## 1 Overview

This report, “Tobacco Free \* Japan: Recommendations for Tobacco Control Policy”, was written to provide a perspective on the state of the tobacco epidemic in Japan and to offer recommendations for controlling the epidemic. The report addresses the current and future burden of disease caused by smoking in Japan, efforts to control the epidemic to date, and a listing of steps that might be taken in the future to control the epidemic. The report places the tobacco epidemic in Japan within the broader context of experience in many other countries that have faced and responded to this same threat to public health. The report comes at a particularly critical time for Japan, in advance of its anticipated signing of the Framework Convention on Tobacco Control (FCTC) over the next months, a global treaty that commits participating countries to implement tobacco control programs. As Japan moves forward to act on the FCTC’s tobacco control and research provisions, the recommendations made in “Tobacco Free \* Japan” should prove useful as a starting point for innovative policy development.

This report was prepared by a team of authors from Japan and the United States with the intent of providing an evidence-based foundation for these policies. The report systematically brings together evidence relevant to tobacco control in Japan, covering the patterns of smoking in Japan, the health effects of smoking in Japan, policy measures taken in Japan to date, and the tobacco industry in Japan and the implications of its close relationship with the Japanese government. Lessons have been learned in other countries that can be useful to Japan; to identify these “lessons learned”, relevant international information is also reviewed with comparison to the current situation in Japan. The report concludes with a set of policy recommendations that are set in the context of the principles set forth in the FCTC, principles that Japan accepts in its ratification of this landmark treaty.

Japan is at a critical point in the country’s epidemic of tobacco use that began 50 years previously. A half of its men are smokers and the number of cigarettes that they smoke has increased sharply across the 1960s and 1970s, placing them at high risk for the many diseases caused by smoking. Fortunately, smoking is uncommon among Japanese women with only about 15% currently smoking. Unfortunately, smoking is increasing among young women, who have been targeted by the multinational tobacco corporations including our own as elsewhere. A dual strategy based in cessation for the addicted smokers, largely male, and in prevention for youths, both boys and girls, is urgently needed. This report’s recommendations offer a starting point for developing and implementing a stronger tobacco control effort in Japan.

The smoking of manufactured cigarettes has now been the dominant form of tobacco use for over a century and mortality statistics from many countries chart the resulting epidemics of heart disease, lung disease, and cancer. Lung cancer, for example, was a rare disease at the start of the twentieth century and is now the leading cause of cancer death in the United States. Epidemiological and other research has established smoking as a cause of an ever-lengthening list of diseases; its adverse effects begin before birth and extend across the full lifespan. The risks for most of these diseases increase with the number of cigarettes smoked and the length of smoking and decreases after quitting. The type of cigarette smoked, e.g., “light” vs “regular”, does not have a strong effect on the risk of smoking.

This report summarizes the major studies in Japan on active and passive smoking and health, comprising over several hundred papers coming from many individual epidemiological studies, including case-control, cohort, and some cross-sectional investigations. These studies, not surprisingly, show that smoking increases risk for many diseases in Japan as elsewhere in the world. There are a lesser number of studies from Japan on passive smoking, but these studies have been a critical component of the broader base of evidence on passive smoking and disease, particularly for lung cancer.

The evidence from studies in Japan is convincing in showing associations of active smoking with the many diseases already causally linked to smoking. The relative risks are quite comparable for some diseases, compared to those in other countries: coronary heart disease and some cancers. The various forms of chronic lung disease caused by smoking have received little investigation in Japan. Similarly, adverse reproductive effects of smoking in Japan have not been extensively investigated, perhaps reflecting the low prevalence of smoking among women. The observed risks for lung cancer are notably lower than risks in

studies carried out at the same time in the United States and Europe, even though comparable risks were found for laryngeal cancer, bladder cancer and stomach cancer. Research on mechanisms, while not a topic of this review, has not indicated a basis for considering that differing mechanisms of pathogenesis would come into play in Japanese compared with other smokers.

The studies reviewed in this report lead to a conclusion that active smoking causes the same diseases and other adverse health effects in Japan as elsewhere in the world. Because of the high rates of smoking among Japanese men, passive smoking is highly prevalent in Japan's homes and workplaces, as well as in other key places. Women and children, constituting a non-smoking majority of the country, are unable to avoid exposure and are at risk for the adverse consequences and diseases caused by passive smoking.

Over the half-century that has passed since the first definitive studies were published linking smoking to lung cancer and other diseases, substantial progress has been made in some countries in curbing the epidemic of tobacco use. There have been many "lessons learned" from these countries that offer strategies to be considered for use in Japan. Experience in many countries shows that strategies for preventing and controlling tobacco use need to be comprehensive, target youth smoking, promote cessation by addicted smokers, and reduce passive smoking. The array of strategies should include laws that restrict access of minors and control smoking in public places and workplaces, and limit advertising and promotion, and taxes on cigarettes should be set sufficiently high, as higher taxes reduce smoking by youths and promote cessation, without loss of revenue to governments for the short-term. Deceptive marketing of products with labels such as "light" should also be controlled. Each country needs to put surveillance in place for patterns of smoking and for the health consequences of smoking. Of course, an infrastructure is needed for these activities and every country should have a national focal point for tobacco control.

This report documents only limited efforts to date for controlling the epidemic of tobacco use in Japan. At the national level, there is presently no office charged specifically with tobacco control, the tax rate on cigarettes is low, minors have ready access to cigarettes, particularly through vending machines, and protection of nonsmokers from passive smoking is inadequate. Most importantly, cigarette smoking remains as an accepted activity that is interwoven into life in Japan, a situation parallel to that in the United States and many other countries decades ago.

The slow pace of tobacco control in Japan can be attributed to a substantial

extent to the inseparability of the tobacco industry and the government, which retains the major control over the Japanese tobacco industry. Government revenues from the Japanese tobacco industry are substantial and the industry’s scope and reach has been expanded through internationalization. Absent a strong anti-tobacco focal point, either within or outside of the government, the influence of the tobacco industry together with many powerful political allies is largely unopposed at present.

## 2 General Recommendations

This report offers a comprehensive series of recommendations for consideration and potentially for implementation. Of course, targets for tobacco control will change over time, and ongoing surveillance and redirection of efforts to address the most critical areas will be needed. Of the many areas to be addressed in the list that follows, we consider that priority should be given to several, based on both their urgency and the potential for immediate impact. Some are within the domain of the Ministry of Finance and others, the Ministry of Health, Labour and Welfare. (1) As an initial step, an office for tobacco control should be established within the national government, securing the initiative by the Ministry of Health, Labour and Welfare. (2) The level of taxation of tobacco should be increased and greater consideration given to taxation as one of the key approaches to tobacco control. (3) Secondhand smoke control should be strengthened using the Health Promotion Law. (4) The government should recognize the need for a radical reform of Tobacco Business Law for an effective implementation of FCTC, whose enforcement would be in a stark contradiction to the current provision of this Law. (5) Finally, given the large numbers of male smokers, at high risk for tobacco-caused disease and death, steps should be taken to promote cessation, which would have immediate health benefits.

The authors of this report consider that Japan is at a critical and pivotal moment in the course of its tobacco epidemic. The majority of its men are addicted smokers who will inevitably face premature onset of chronic, crippling, and fatal diseases, and its nonsmoking women are a target for aggressive marketing by the Japanese tobacco industry, majority controlled by the government, and other multinational corporations. The Framework Convention on Tobacco Control (FCTC), a needed platform for addressing a global epidemic, commits Japan to a series of measures related to tobacco control. Recognizing the significant health and economic burden imposed by tobacco on its citizens and acknowledging the policy requirements of the FCTC, the Japanese government should move to implement an effective national tobacco control policy, using the most appropriate tobacco control measures drawn from the scientific evidence reviewed by this

report.

Tobacco growing, production, and marketing are a substantial component of the Japanese economy and the government receives substantial tobacco tax revenues. The implementation of tobacco control should not be slowed by economic considerations and having a national tobacco control policy does not involve either banning tobacco products or eliminating the tobacco industry immediately. It does imply, however, a transformation of tobacco use from being viewed as socially accepted to being seen as dangerous and even fatal, for smokers and non-smokers. As tobacco is the only legally available consumer product that kills through normal use, tobacco should be regulated accordingly so as to reduce its risks and many negative health consequences to the fullest extent possible.

This report extensively documents the tight linkage of the tobacco industry to the government and the substantial revenues that come to the government from tobacco sales. This unique relationship in Japan has placed financial considerations above the public's health and engendered concern that tobacco control will have adverse economic consequences. For the short-term, experience in other countries suggests that governments do not lose revenue when tobacco taxes are raised, and cigarettes are priced too cheaply in Japan at present. Any costing of tobacco control needs to also take into consideration the expenditures for care of smoking-caused diseases, the loss of productivity from these diseases, and the shortening of the lives of smokers. Every country should be seeking to optimize the health of its citizens and not to harm them. The authors of this report view the health and lives of the Japanese as the most important resource of the country and we sincerely endorse tobacco control policies that acknowledge the need to protect and advance the public's health.

The authors of this report encourage the Japanese government and society and particularly its leaders to have a Tobacco Free Japan as a national goal. To that end, policy recommendations follow below.

### **3 Policy Recommendations**

#### **3.1 With regard to the FCTC**

The FCTC offers a critically needed set of provisions for implementing a national tobacco control program. Failure to sign, ratify, and abide by the FCTC would signal a globally unacceptable stance by Japan, particularly given the multinational nature of the Japanese tobacco industry. We call for:

- Ratification of the FCTC and implementation of effective tobacco control measures following its provisions.
- Prompt signing and ratification of the FCTC followed by immediate and thorough implementation of effective tobacco control measures following its provisions.
- In this regard, we further call for:
  - Strengthening of current national laws, which are inadequate for achieving the goals of the FCTC, protecting present and future generations from tobacco use, and from exposure to tobacco smoke.
  - Implementing of changes quickly following ratification of the FCTC.
  - Establishing an appropriate and coordinated administrative system to overcome the weaknesses of the present, fragmented situation around tobacco control within the government.
  - Acknowledging explicitly that active and passive smoking cause disease and premature mortality.
  - Ensuring the compliance of the tobacco industry in Japan with FCTC-based norms in the international context, with regard to, for example, advertising restrictions and measures to prevent cross-border smuggling of tobacco products.

### **3.2 With regard to infrastructure**

These countries that have been most successful in controlling tobacco use have established infrastructure that includes a national office, ongoing information gathering, and resources for program implementation and evaluation. We call for:

- The immediate establishment of a national center for tobacco control to serve as the focal point for information gathering, planning and policy development, and consultation.
- Provision of an adequate budget for tobacco control, moving from the present level of 1 yen per capita to 100 yen per capita. These funds should be drawn from the tax on tobacco, a model that has proved effective in other countries.
- Many sub-national governmental levels in Japan have taken positive steps toward effective tobacco control initiatives in recent years. Such activity should be recognized, encouraged, and more widely achieved throughout Japan. In

no case should national measures serve as a pre-emptive floor barring more comprehensive and aggressive efforts at the prefectural and local governmental levels.

- Professionals in tobacco control are needed for Japan. Steps should be taken to foster their development.
- Continued development of coordinated NGO networks concerned with tobacco control.

### 3.3 Pricing and Tax Policy

Appropriate pricing of cigarettes helps to keep youths from smoking and promotes cessation by some smokers. Comparison of cigarette prices in Japan to other developed countries indicates that Japan's prices are among the lowest. An increase in tax would benefit public health, provide a source for funding tobacco control, and not reduce government revenues for the short-term. We call for:

- An increase in the price of tobacco by progressively increasing taxation to reach the levels in those countries with successful tobacco control. Given the low prices of cigarettes in Japan today, the initial increase should be at least 100 yen per pack or more.
- Some of the resulting tax revenue should be directed towards tobacco control programs and research as well assisting tobacco farmers in moving towards other crops or sources of revenue.
- Measures should be taken for prevention of tax avoidance such as by cross-border smuggling.

### 3.4 Secondhand Smoke Exposure

Secondhand smoke exposure causes substantial morbidity and mortality. Nonsmoking Japanese are heavily exposed to secondhand smoke in public and private places. These exposures can be readily controlled. We call for:

- Strengthening and enforcement of the existing Health Promotion Law, which has provisions related to secondhand smoke. A goal should be smokefree public places and workplaces.
- Implementation and enforcement of Health Promotion Law and local clean air ordinances.

- Implementation and enforcement of clean indoor air standards under labor and occupational safety laws and regulations.
- Reviewing the smoking restriction standards of Ministry of Health, Labour and Welfare with consideration of exposures to include carcinogens.
- Health education and other campaigns to reduce secondhand smoke exposure in homes and private passenger cars.
- Health professional organizations should educate their members concerning the consequences of secondhand smoke exposure and target susceptible groups, e.g., children with asthma.

### **3.5 Ingredient Regulation and Disclosure**

During the processing of tobacco and the manufacturing of tobacco, a variety of chemicals and additives are used. Some of these may have negative health implications. We call for:

- Reviewing the existing testing method, that is currently based on the Tobacco Business Law.
- Disclosure of harmful ingredients/components
- Regulation of all harmful ingredients/components
- Disclosure of raw materials and additives
- Regulation of raw materials and additives

### **3.6 Packaging and Labeling**

Sales of cigarettes in quantities smaller than 20 per pack can facilitate access of minors. Package warning labels that provide unambiguous and graphic warnings have proved to be more effective than small labels which do not explicitly describe the risks of smoking.

Especially in Japan, the use of brand names including words such as “mild” or “light” is particularly prominent, likely misleading smokers with implied health messages.

- Cigarette packages should be manufactured and sold only with units of 20, as

- smaller packages facilitate access of minors.
- Package warning labels should cover more than 30% of the surface of packages, being gradually increased to 50% or more.
- The warning labels should have both clear text in an appropriate point-size and color and compelling graphic images, instead of the current text-only labels, with test marketing and scientific evaluation of the means used to discourage smoking as effectively as possible.
- The warning labels should be placed on the top of the surface of packages with prominent bold frames.
- The use of brand names that imply a lower level of risk should be prohibited.

### **3.7 Advertising and Promotion**

The tobacco industry spends large amounts of money on advertising and promotion with the explicit goal of expanding market share for particular companies and their brands, and the unstated goal of expanding the market for their products. These activities take diverse forms and have proved difficult to control in many countries. We call for:

- Limitation of advertising and promotion to point of sale, except those locations that are easily accessible by minors.
- Advertisement and promotion ban in any media accessible to minors, including television, printed publications and the Internet.
- Prohibition of indirect advertisement, titled events, promotional goods or services, and commercial goods or services with brand names or logos.
- Regulation of smoking scenes and bans of compensated product placement in TV dramas and movies accessible to minors.

### **3.8 Cessation**

For all smokers, regardless of age, cessation is of proven benefit for reducing risk for developing disease and avoiding premature mortality. In fact, prevention of smoking by youth will have little immediate impact on the burden of smoking-caused disease, while cessation by middle-aged and older smokers has immediate impact. Comprehensive tobacco control programs are directed at both

cessation and prevention. We call for:

- Programs to increase the identification of smoking as a health problem for smokers and awareness of the addicting nature of nicotine, and education of health professionals in facilitation of cessation.
- Campaigns to promote smoking cessation by Japan’s smokers, particularly men.
- Further development of facilities and services for cessation through governmental and workplace providers.
- Coverage of cessation services by medical insurance plans.
- Campaigns to encourage private employers to promote smoking cessation among their workforce, in light of both costs savings and workforce health benefits

### 3.9 Youth Access

The continued smoking by the youth of Japan is unfortunate and the report’s authors are particularly dismayed by the rise of smoking in young girls. Remarkably, smoking by teenagers and young adults remains acceptable. Even young smokers have evidence of damage from their smoking and earlier age of starting to smoke brings greater risks for many of the smoking ñ caused diseases. We call for:

- Enforcement of face-to-face retailing of cigarettes with strict age identification in concert with elimination of all tobacco product vending machines in the Japanese society.
- Strict enforcement of Tobacco Business Law and Act for Minors on Preventing Smoking regarding prohibiting sales to minors.
- Use of new, evidence-based prevention approaches coming from research in Japan.
- Encouragement of local governments to enact ordinances to prevent youth smoking.

### 3.10 Liability and Policy Development Processes

In some countries, litigation has been useful as tobacco control measure. In the United States, there has been extensive litigation leading to several victories,

the Master Settlement Agreement, and access to millions of tobacco industry documents. Each country has its own legal system and approaches from other countries may not be immediately transferable to Japan. We call for:

- Exploration of the potential for litigation to serve as a tobacco control approach for Japan focusing on both liability issues and industry document discovery.
- Implement steps to prevent document destruction, tampering, or hiding (such as to overseas offices) with criminal penalties imposed on violators. Ensure whistleblower protection laws are implemented in all workplace settings.
- Increased transparency in decision-making process on tobacco control policy in the government.
- No involvement of the tobacco industry or its affiliates in decision-making process except at occasions of public hearings and/or written official documents.
- Full disclosure of conflicts of interests at any level of tobacco control including policy development, researches and advocacy and so on.

### **3.11 Actions Needed Now**

This chapter offers a lengthy list of recommendations, some readily implemented and others requiring substantial resources and a longer timeframe. We urge that immediate priority be given to the following:

- Youth access to cigarettes and other tobacco products needs immediate and strict restriction. Without tight control and preferably elimination of vending machines, youths will continue to have ready access to cigarettes, regardless of regulation of in-store sales.
- A tobacco tax increase should be immediately implemented. Substantial evidence indicates that government revenues will not fall for the short-term and that smoking will be reduced proportionately to the tax increase. We urge that a portion of any tax increase be committed to supporting tobacco control.
- At present, Japan does not have a focal point within the government for tobacco control, a gap that needs to be addressed immediately. An adequately staffed and positioned office should be established within the government; the development of a national tobacco control plan should be a first charge.

## 4 Research Recommendations

### 4.1 Regarding Infrastructure

Research in support of tobacco control in Japan is hindered by lack of an overall plan, limited funding, and inadequate capacity. Consequently, the evidence base for tobacco control is inadequate. Thus, we call for:

- A national coordinating body for research on tobacco among governmental organizations to be established and provided with sufficient staffs and financial resources (or with an authority for resource appropriation).
- Basic surveillance for monitoring and evaluation of the consequences of tobacco control measures. Some key indicators include smoking prevalence and consumption, second hand smoke exposure, willingness to quit, and support for particular policies. The existing, ongoing surveys such as the National Health and Nutrition Survey, the National Health and Welfare Survey, or the National Survey on Smoking and Health should be utilized to generate data to meet such policy requirements.
- Education and training of researchers on tobacco.
- The government’s research budget for tobacco control to exceed the amount provided by the tobacco industry.
- Establishment of up-to-date information resources, such as a reference database.

### 4.2 Role of scientific researchers and their professional organization

Effective tobacco control requires the active engagement of professional scientific organizations, health professionals, scientific researchers, and other leaders. In the past, such engagement has been considered inappropriate for academia, but in the past few years more than a dozen health professional organizations have published a tobacco free declaration. Some are taking concerted actions. Thus, we call for:

- Individual scientific researchers and their organizations to take more initiative on tobacco control.
- Scientific organizations to make official commitments or declarations on tobacco control and to have all meetings smoke-free.

- Disclosure and discussion of conflicts of interests related to tobacco industry funding.
- Continuous and concerted efforts to share information and to enhance mutual understanding, with a goal of launching a multidisciplinary tobacco control assembly.

### 4.3 Research Agenda

As discussed in this report, studies on tobacco in Japan are limited and narrowly shaped, compared to the full-range of research areas relevant to tobacco control. Some, as genetic susceptibility and addiction, have been emphasized in tobacco industry research. Progress on tobacco control in Japan might be accelerated by comparative research that would facilitate the use of approaches already tested in other countries. Such research should address not only the health risks of smoking but tobacco control approaches. Thus, we urge:

- Epidemiological studies on tobacco and health in Japan, which are needed to document that actual risks to the population.
- Intervention studies to complement the observational epidemiological studies, as few having been carried out to date.
- Evaluation of existing intervention programs for their effectiveness and efficacy in reducing tobacco use.
- Wide implementation of intervention programs with proved effectiveness and efficacy.
- Government support of work on addiction.
- Further work on Japanese tobacco products and the characteristics of their smoke.
- Research involving other disciplines, including economics, risk communication, public policy and social marketing.
- Continuous efforts to translate scientific language into more general language for decision makers and the public to fully understand the scientific evidence.
- Simulation studies and decision models to predict future gain or losses, from successful or failed tobacco control, to visualize and foresee what should be the optimum policy options in Japan.

## 5 Closing Comments

The authors of this report, an international team of medical, public health, and other scientists, stepped forward to write this report because of a shared expectation that the report would advance public health nationally and even globally. With the recent internationalization of the Japanese tobacco industry, Japan's actions on tobacco control have not only national but global implications. While this report has addressed national tobacco control only, we urge an open discussion of the propriety of government ownership of a company that makes and markets a lethal product. The potential for short-term profits needs to be carefully weighed against the world's diminishing tolerance for the tobacco industry and the possibility for long-term adverse consequences arising from global liability for disease and death.

The Japanese tobacco industry has now become one of the world's largest players on the international scene of tobacco marketing. Unfortunately, like other multinational tobacco corporations, its targeted markets will inevitably include the developing nations where smoking is increasing. We question whether the government of one of the world's most advanced nations should be the major controller of the tobacco industry that exports such a deadly product. At the least, an open discussion of this issue should take place.

In the United States, the 1964 report of the Surgeon General stands as a landmark and defined the clear beginning of a national tobacco control agenda. The authors of this report are hopeful that it may some day have the same significance for Japan and that further reports, coming from a new national center, will sustain a movement that is just beginning.

## **Imprint**

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