

The Government Willingness to Legislate Tobacco Control and Changes on Individual Behavior in Brazil

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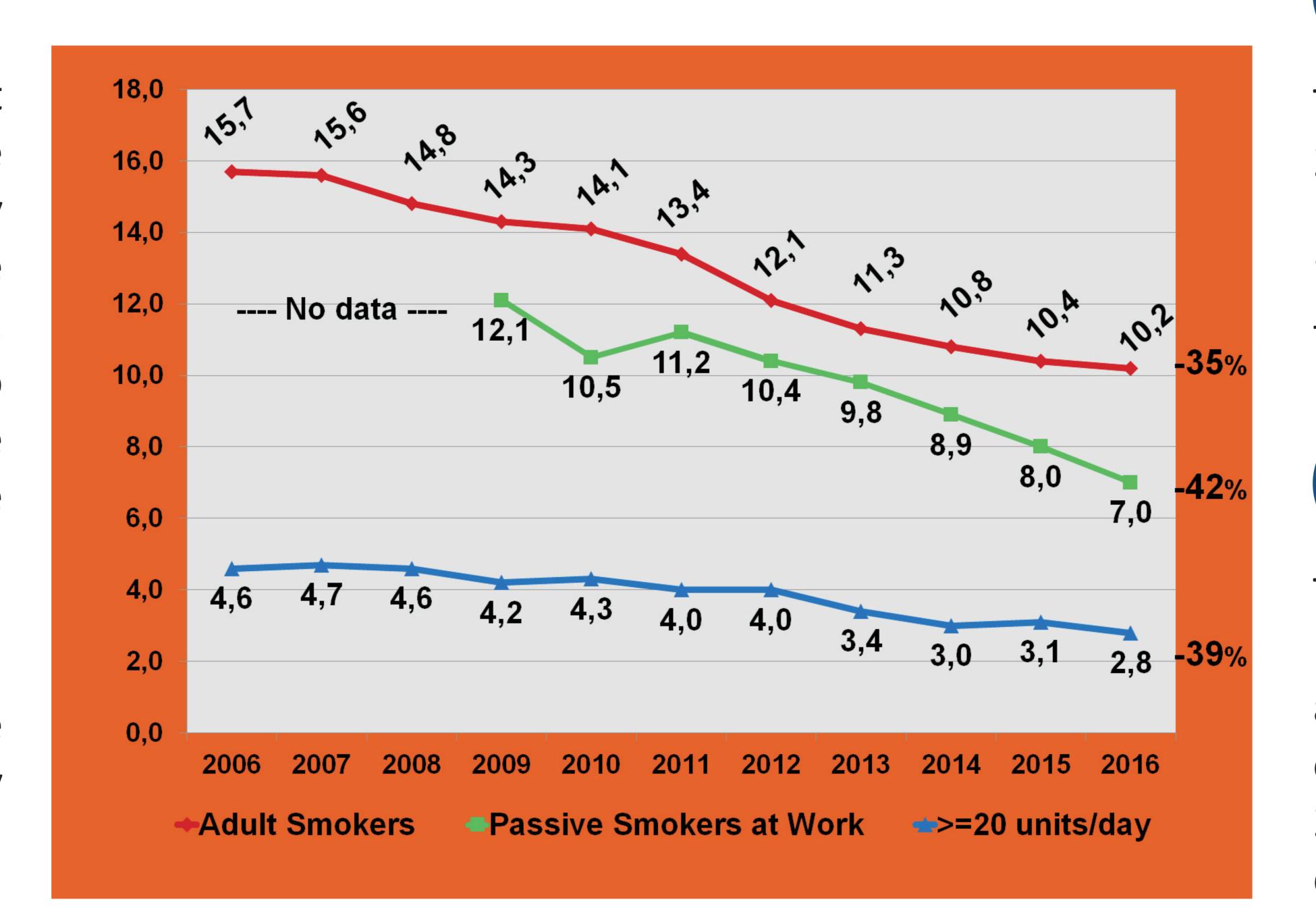
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BACKGROUND

The government willingness to legislate tobacco control, as part of the Complex Tobacco Landscape developed by the Initiative on the Study and Implementation of Systems (ISIS), is directly related to tobacco taxes and antismoking legislation to make changes on individual behavior. According to the NCI (2007)¹, "The willingness of government to take actions against tobacco interests depends on the balance of forces created by the protobacco and antitobacco constituencies and the government's perceptions of health risks associated with tobacco use". In 2011, the Brazilian government established a new taxation system and a minimum price policy for cigarettes. In 1996, Brazil started promoting smoke-free places, banning the advertising, promotion and sponsorship that were finally regulated in 2014 by a federal decree.



Quantitative secondary data analysis confronting the prevalence rates found in Risk and Protective Factors Surveillance for Chronic Diseases Telephone Survey (VIGITEL).



METHODS

The total adult prevalence rate decreased from 15.7% in 2006 to 10.2% in 2016 for both sexes; the prevalence of passive smokers at work decreased from 12.1% in 2009 to 7% in 2016 and daily smokers of 20 units or more also reduced from 4.6% in 2006 to 2.8% in 2016.

CONCLUSIONS

The present study shows a decline in prevalence as a positive result coming from smoke-free places, banning the advertising, promotion and sponsorship, and higher prices of cigarettes in Brazil between the years 2006 and 2016. In 2015, there were around 100,000 deaths of men and 55,000 deaths of women attributable to cigarettes. In 1990, an estimated 204,000 deaths were attributable to smoking. In absolute numbers, 49,000 lives have been saved².

Projeto Gráfico: Serviço de Edição e Informação Técnico-Científica / INCA









¹ National Cancer Institute. Greater Than the Sum: Systems Thinking in Tobacco Control. Tobacco Control Monograph No. 18. Bethesda, MD: U.S. Department of Health and Human Services, April 2007/

² Department of Surveillance and Health-Ministry of Health