

Safeguarding Children's and Women's Health: Integrating Tobacco-Free Policies into Human Rights, SDGs, and NCD Frameworks in Iraq & MENA Region (Empowering Arab Communities: A Unified Stand Against Tobacco Use)

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ABSTRACT

The high rates of tobacco use among children globally (around 40 million) and the targeting of children by tobacco use and trade demand urgent action by governments and civil society working together to create tobacco-free generations as the norm within the next ten years. There is overwhelming scientific evidence for the harmful impact of tobacco use and second-hand smoke on children & women's health, as well as wide documentation on the targeting of children & women by tobacco advertising.

Among the objectives is to coordinate and strengthen support for tobacco-free generations by establishing an alliance of stakeholders in child health to develop and implement a strategy for TFG within a period of up to ten years, and to raise awareness with regular status reports on the impact of tobacco on children & women and their rights to health with regular reporting to government and treaty committees with obligations. Among the key activities focusing on Increasing the quality and quantity of coalition and government reports to protect children & women from tobacco by integrating policy measures into treaties and frameworks. The conclusion includes raising awareness of stakeholders and inserting provisions in treaties for mandatory reporting at country and global levels; strengthening implementation and enforcement of health policies; and changing social norms for protecting children and their families from tobacco exposure in public places and homes based on measurable data sources.

Introduction

Background:

Over 1 million people die every year from exposure to second-hand smoke, Non-smokers exposed to second-hand smoke are at risk of developing lung cancer, WCTOH 2018 delegates endorsed the [Cape Town Declaration on Human Rights and a Tobacco-Free World](#), which recommends several actions between 2018 and 2023.^{1,2}

Cigarettes remain an important cause of accidental fires and resulting deaths, What future for the world's children? WHO-UNICEF-LANCET COMMISSION landmark report identifies solutions and threats including underinvestment in child health by Parties and the industry's commercial predatory tactics targeting young people (Lancet Journal) 3

E-cigarettes also expose non-smokers and bystanders to nicotine and other harmful chemicals, Strengthening the Human rights dimension to tobacco control is an important goal for the FCTC Secretariat and a tobacco and human

rights resource hub with steps to take at <https://ash.org/human-rights-resources/>

The Sunset Project is a global campaign to phase out the commercial sale of tobacco products at <https://ash.org/sunset/> and California is leading the way with Beverly Hills Council being the first council to end commercial sales in 2021. ^{4,5}

Several jurisdictions have implemented strategies to end the tobacco epidemic with goals to reach under 5% tobacco use prevalence within a time frame of up to ten years.

Being exposed to second-hand smoke may increase the risk of progression from tuberculosis infection to active disease, being exposed to second-hand smoke is associated with type 2 diabetes.

Many health policies can be combined in a child & women's health and tobacco reporting process to improve the protection of children from tobacco and tobacco trade interference:

Tobacco advertising, promotion, and sponsorship Children are a vulnerable target for tobacco industry marketing. All tobacco advertising, promotion, and sponsorship, both direct and indirect, should be banned.

Protection from exposure to tobacco smoke Children & women are more vulnerable to the harmful effects of second-hand smoke. Providing comprehensive protection, particularly in indoor areas, is essential.

Price and tax measures Children are less likely to initiate tobacco use if tobacco taxes and prices are high. Tobacco taxation is a powerful and cost-effective way to minimize use and uptake among children.

Regulation of the contents of tobacco products Many tobacco products, including e-cigarettes, contain Flavors to appeal to children, and women making it easier for them to experiment with tobacco product use at an earlier age. Bronchodilators, such as menthol, may also increase the addictive potential of nicotine. Supply-side regulation is underdeveloped, and yet restricting additives is critical to reducing the likelihood that children will experiment and become addicted to tobacco and the industry's novel tobacco and nicotine products.

Packaging and labelling of tobacco products Children & women are influenced by advertising and warning labels on tobacco packaging. Large, pictorial warning labels and plain packaging can prevent tobacco use among children.

Preventing tobacco industry interference in health policies Monitoring interference in health policies that are undermining the health and rights of children & women is needed to protect children & women.

Roadmap tool for protecting children & women from tobacco adapted for context. A roadmap tool can assess current capacity, legal framework, and funding needs based on the ten main indicators below. A comprehensive assessment can help to break the inter-generational cycles of poverty and its links to tobacco use that harm the health of children, their families, their futures, and the environments they live in. ^{1,2,6}

Goals & Objectives

Our goal is to protect child & women's rights to health by encouraging Parties to implement a tobacco-free generations (TFG) strategy with multi-sectoral support for integrating tobacco health policies into strategies, in frameworks and treaties for human rights, SDGs, and NCDs. Moreover, integrating and coordinating with different companies and societies working toward a smoke-free environment. The high rates of tobacco use among children globally (around 40 million) and the targeting of children by tobacco use and trade demand urgent action by governments and civil society working together to create tobacco-free generations as the norm within the next ten years. There is overwhelming scientific evidence for the harmful impact of tobacco use and second-hand smoke on children & women's health, as well as wide documentation on the targeting of children & women by tobacco advertising. Comprehensive tobacco control is not only a valid concern falling within the legislative remit of governments, but also an obligation under several human rights treaties and conventions including the Rights of the Child & women. ^{6,7,8}

Specific Objectives

1. To coordinate and strengthen support for tobacco-free generations by establishing an alliance of stakeholders in child health to develop and implement a strategy for TFG within a period of up to ten years.
2. To raise awareness with regular status reports on the impact of tobacco on children & women and their rights to health with regular reporting to government and treaty committees with obligations to assess progress towards global goals in health, development, and human rights.
3. To expose and counter tobacco interference in child & women's rights with partners by monitoring tobacco trade interference for regular reporting to the government, the media, and global health leaders (Human Rights).^{9,10}

Results and Key Activities:

- Establish a coalition of stakeholders with terms of reference for developing the status report on children and tobacco with recommendations for policymakers in relevant Ministries
- Conduct a review of several treaties and frameworks with health goals to identify entry points and timelines for more systematic integration into government reporting requirements
- Develop a roadmap in consultation with stakeholders for integrating tobacco control into health and development strategies and treaty reporting processes
- Collaborate with health partners to monitor interference of the tobacco trade in denying children & women a tobacco-free future with reports to government, media, and global leaders on the tactics undermining child health
- Collaborate with international partners to identify opportunities for high-level advocacy with global leaders in Human Rights and funding for health.
- Increase the quality and quantity of coalition and government reports to protect children & women from tobacco by integrating policy measures into treaties and frameworks
- Evaluate the project based on a logic model for continuous improvement and sharing of lessons learned for creating tobacco-free generations of children & women.

The following indicators were selected:

TEN INDICATORS	PRESENT/ ABSENT	COMMENT
CAPACITY DEVELOPMENT		
1. COALITION FOR PROTECTING CHILDREN FROM TOBACCO IMPACTS		
1.1 Form a broad coalition of child health stakeholders to assess and develop an action plan		
1.2 Include youth and mentors among stakeholders for identifying project scope, tobacco's inter-generational impacts; and delivering key messages.		
2. POLITICAL WILL AND SUPPORT		
2.1 Assess the political will and support of champions or Ministries within the government that are required to report on children's rights, sustainable development, and other relevant treaties or frameworks.		
2.2 Engage champions in civil society that have been identified to support child health initiatives		
3. RESEARCH AGENDA FOR TOBACCO CONTROL – REPORT ON CHILDREN		
3.1 Develop a research agenda and gaps in evidence – including regular updates on tobacco's impact on young people and sustainable futures		
3.2 Identify the impact of tobacco and new products on children & women for reporting to the government and the media.		

3.3 Conduct opinion polls to monitor community concern for children and women's support.		
EVIDENCE		
4. TOBACCO Health INTERFERENCE IN HEALTH AND CHILD & WOMEN POLICIES		
4.1 Monitor and counter the tobacco industry's interference in health policies and CSR that impact children		
4.2 Coordinate with partners assessing if health policy measures have been adopted to protect health policies and child & women's rights from TI interference		
5. CHILDREN AND TOBACCO SURVEILLANCE CHECKLIST		
5.1 Are global youth surveys/national standardized surveys conducted to monitor tobacco use and harm to children including SHS exposure in public places and homes?		
5.2 Publicise tobacco marketing targeting children in old and new media, public places, and where they live, are educated, eat, and play		
5.3 Include survey results in reports to government with evidence and advocacy to reduce harm to children & women		
5.4 Ensure there is a national evaluation framework and reporting process in place to measure health and tobacco harm to children		
6. ECONOMIC AND SOCIAL COSTS DATA INCLUDING HARM TO CHILDREN & Women		
6.1 Include direct and indirect costs of harm assessed with impacts on children & Women		
6.2 Is the substitution of family spending on food and education for children & Women due to tobacco expenditure included in social impacts?		
6.3 Do costs of harm to children include conditions and time spent working in the tobacco industry as Child Labor		
6.4 Ensure regulatory impact assessments include a comprehensive assessment of health impact on families and children		
6.5 Support impact assessment on health including inter-generational harm to families and children caused by tobacco		
WS, POLICIES, PROGRAMS AND STRUCTURES		
7. TREATIES AND FRAMEWORKS FOR HUMAN RIGHTS, NCDS AND SDGs		
7.1 Review treaties and frameworks to identify entry points for integrating health policies into frameworks and including reporting requirements by the government. Refer to the guide in Tobacco and Human Rights Hub at https://ash.org/hrhub/		
PROTECTION FOR CHILDREN IN TOBACCO CONTROL LAW		
7.2 Assess if national law for tobacco control includes key health policies including reducing inter-generational harm to children and if the law includes comprehensive measures to monitor and protect children from tobacco		
7.4 SMOKEFREE: Identify if public places are 100% SF and enforced including educational/healthcare facilities, transport, and workplaces. Identify if exemptions permit smoking in enclosed places where children are exposed and consider a timeline for supporting tobacco-free homes and cars/transport.		
7.5 TAPS BANS: Does the law ban or only limit bans on Tobacco Advertising, Promotions, and Sponsorships? Are bans or limits enforced and evaluated to assess the impact on children and countermeasures?		
7.6 SALES TO MINORS: Are policies in place to prevent access to tobacco products by minors (under 18 years of age), particularly around educational institutions?		
7.7 Is there a national advisory or focal point to protect children and women and explain why tobacco should be addressed?		
7.8 Are there sufficient human resources for the implementation of the law and a budget allocation for protecting children from tobacco?		

7.9 Are civil society networks and youth represented in advisory committees?		
7.10 Are mass media campaigns tested and funded to expose TI interference and targeting of children?		
7.11 Have tobacco-free messages replaced pro-tobacco messages in media, educational and sports venues, public places (transport, eating, and faith venues), government workplaces, and homes?		
7.12 Are health warnings about tobacco harm to children included on all tobacco products and at points of sale?		
7.13 Are their policies on regulating nicotine products like ENDS to protect children & Women?		
8. TOBACCO CONTROL PROGRAMS		
8.1 Identify if the National Tobacco Control Program (NTCP) or sub-national programs are adequately enforced.		
8.2 Consider evidence-based activities that engage children and adolescents in tobacco control both in school and out of school		
8.3 Assess the need for intra-sectoral/inter-sectoral convergence across child health and child development programs for TFG		
8.4 To improve quit rates and SF environments, support integration of cessation policies into frameworks for health, development, and human rights		
9. PROTECTION FOR CHILDREN ACROSS MINISTRIES		
9.1 Strengthen the integration of TC policies across Ministries (education, trade, agriculture) and into related laws and policies (Child & Women rights, NCDs, SDGs).		
Reinforce inter-governmental coordination mechanisms to strengthen and evaluate collaboration across Ministries. Support ministries contributing to treaty reporting process on health and harm to children & Women.		
FINANCE		
10. TOBACCO TAXATION AND AFFORDABILITY OF TOBACCO PRODUCTS		
RAISE TOBACCO TAXES		
10.1 Has a cross-cutting group of tax experts been formed to review and recommend tobacco tax reforms with regular increases to keep pace with inflation and growth?		
10.2 Provide modeling evidence for a sustainable funding mechanism to achieve health goals within a ten-year time frame		
10.3 Has a status report on children and tobacco been produced for the government and the media on progress, challenges, and threats to children and their families?		

Conclusions

This project will use best practices in M&E (logic model) to enable it to be assessed, compared, and scaled up in priority countries with a high burden of preventable lung health diseases and links to poverty. The logic model for M&E will specify inputs (stakeholders coalition, best practices, supportive policymakers, media contacts, youth engagement); activities (needs assessment, review of treaties, action plan, M&E plan); reach (Ministry officials, partners, mass organizations, public); and impact outcomes (short, medium and long). For example, raising awareness of stakeholders and inserting provisions in treaties for mandatory reporting at country and global levels (short); strengthening implementation and enforcement of health policies (medium); and changing social norms for protecting children and their families from tobacco exposure in public places and homes based on measurable data sources.

Way forward:

Urgent Need for Integrated Tobacco-Free Strategies: The study highlights the critical need for comprehensive

strategies that unite governments, civil society, and international stakeholders to protect children and women from the harmful effects of tobacco use. The formation of coalitions and alliances dedicated to promoting tobacco-free generations (TFG) will be essential in achieving this within the next decade.

Strengthening Policy Frameworks: A key finding of the research is the importance of embedding tobacco-free generation goals within existing human rights treaties, SDGs, and NCD frameworks. Integrating health policy measures that safeguard children's and women's rights into government frameworks is essential for ensuring sustainable, enforceable protections.

Enhancing Reporting Mechanisms: The paper emphasizes the necessity of increasing both the quality and quantity of reports submitted to government and treaty committees. Regular, data-driven status updates on the impacts of tobacco on children's and women's health, along with clear recommendations, will provide a strong foundation for continuous progress.

Changing Social Norms: The study concludes that successful tobacco control efforts must include not only policy changes but also a shift in social norms. Creating environments where tobacco exposure is not tolerated whether in public spaces or homes will protect future generations. This cultural shift can only be achieved through widespread awareness campaigns and community involvement.

Collaboration for Sustained Impact: The establishment of an alliance of stakeholders is crucial for the long-term success of a tobacco-free generation. Coordination at local, national, and international levels, with a focus on enforcement, will ensure that protective measures are not only introduced but also sustained.

Mandating Accountability: By including provisions for mandatory reporting on tobacco control measures in global treaties and frameworks, countries can be held accountable for their progress in protecting children and women from tobacco use. This accountability will help drive tangible results and improve the enforcement of health policies.

For further information

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References

1. Cape Town Declaration on Human Rights and a Tobacco-free World, <https://ash.org/declaration/>
2. <https://www.americanbar.org/groups/gpsolo/resources/magazine/>,
3. https://scholar.google.com/scholar?q=Lancet+2020%3B+395:+605%E2%80%939358&hl=en&as_sdt=0&as_vis=1&oi=scholar
4. Phase Out the Commercial Sale of Cigarettes, <https://ash.org/sunset/>
5. 2023 progress report on the Global Action Plan for Healthy Lives and Well-being for All, What worked? What didn't? What's next? <https://www.who.int/publications/i/item/9789240073371>

6. **Global Action Plan for Healthy Lives and Well-being for All,**
<https://www.who.int/initiatives/sdg3-global-action-plan>
7. **WHO report on the global tobacco epidemic, 2023: protect people from tobacco smoke,**
<https://www.who.int/publications/i/item/9789240077164>
8. **Global Youth Tobacco Survey, Iraq (2019),**
<https://extranet.who.int/ncdsmicrodata/index.php/catalog/899>
9. **STEPS is a household-based survey to obtain core data on the established risk factors that determine the major burden of NCDs.2015,**
<https://extranet.who.int/ncdsmicrodata/index.php/catalog/420>
10. https://www.emro.who.int/images/stories/iraq/Iraq-Annual_Report_2022_FINAL_13-Jul_2023.pdf