

Tobacco control in Finland and Switzerland: opportunities to learn about overcoming resistance to change

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If current trends continue about 650 million people alive today will eventually be killed by tobacco, half of them during their productive middle age years. This reality should install a sense of urgency into the policy making and implementation process related to tobacco control. This edition provides evidence that in Finland, a leader in tobacco control for 3 decades, progress, albeit slow, is being made in reducing smoking rates among physicians (Barengo et al. 2005; Pärna et al. 2005). In contrast, Keller et al. show that the Swiss population has a high level of exposure to tobacco smoke (Keller et al. 2005). About half of the working population is exposed to secondhand smoke. Despite this, Switzerland has been resistant to introducing the policies and laws that could make a real difference (Kuntsche & Gmel 2005). Why do these countries differ so markedly in their response to tobacco? The answer seems to lie in understanding the different roles of the tobacco industry and leading academics in these two countries. In Finland, the tobacco industry has never had a major influence on public policy. It has been an irritant-but one that was easily overcome by solid epidemiological evidence of the harm tobacco caused. In the 1970s a group of inspiring public health professionals combined with law makers to create a steadily strengthening legal regime that has reduced the impact of tobacco in the country. These tobacco control leaders played a key role in the negotiations of the World Health Organization's (WHO) Framework Convention on Tobacco Control (FCTC).

Switzerland by contrast has been the home to many tobacco companies for decades. Their influence on academia and on the policy making process in the country has been well documented and remains strong despite the official government position being in support of the WHO's FCTC. Switzerland permits tobacco advertising that was long ago banned in many developed and developing countries; has one of the lowest levels of tobacco excise tax among developing

countries; and has the most rudimentary public place laws on smoking. Marketing on pump handles reach people when they fill up their cars; videos market Benson and Hedges as part of large in store campaigns; and a wide variety of promotional material and events aimed at young people is scattered throughout shops in the country.

Swiss health professionals and academics have tended to publish important studies on tobacco's impact outside of the country and rarely engage openly in the public debate about the need for serious control measures. Visitors to Geneva, the home of WHO, are amazed at how tolerant the city is of smokers and intolerant of those seeking clean air in public places. Keller showed that in restaurants and pubs in Switzerland nearly 9 out of 10 people are exposed to secondhand smoke (Keller et al. 2005)! The tobacco industry has cleverly used the very notion of tolerance to protect their interests and harm the health of populations. This has been especially effective in a country like Switzerland where the notion of tolerance and understanding is deeply embedded in the cultural and political fabric of life.

The paper by Kuntsche and Gmel (2005) is an example of how divorced tobacco control researchers are from the real influences on consumption and on policies to influence it. Their analysis uses an approach developed to study how innovative new forms of seed were used. Tobacco control policies ceased to be regarded as innovative by the mid 1980s! Further, Everett Rogers in his original development of diffusion theory highlights the importance of open communications of innovation. He did not have to contend with a multibillion dollar industry opposing the spread of innovation-or face colleagues being paid to resist progress. Yet that remains a major obstacle to progress in many countries – like Switzerland – with respect to tobacco control. Future progress in Switzerland will require a more assertive pro-health approach that exposes starkly the impact of

tobacco deaths and the economy. Health professionals could play a more decisive role by more actively engaging in the public debate needed if modern approaches to tobacco con-

trol are to be introduced. The Swiss could learn much from studying the Finnish experience.

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