## CANADIAN COALITION FOR ACTION ON TOBACCO COALITION CANADIENNE POUR L'ACTION SUR LE TABAC

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July 31, 2008

The Honourable Tony Clement, P.C., M.P. Minister of Health Health Canada Brooke Claxton Building, Tunney's Pasture Postal Locator: 0906C Ottawa, Ontario K1A 0K9

**Dear Minister Clement:** 

Re: funding for comprehensive, effective tobacco control in First Nations and Inuit communities

We write to you out of concern over the continued lack of replacement funding for the cancelled federal First Nations and Inuit Tobacco Control Strategy (FNITCS).

The need for a comprehensive, effective and sustained tobacco control strategy is great among First Nations and Inuit peoples, who have the highest rates of commercial tobacco use in the country. While the national smoking rate has dropped below 20%, over half of First Nations and Inuit people are addicted to tobacco industry products. The *2002-03 First Nations Regional Longitudinal Health Survey*, a national survey of on-reserve communities, estimated that 59% of First Nations members smoked. Smoking rates for Inuit are generally believed to be about 66%. Research from 2001 showed that 76% of Arctic Inuit women between the ages of 20 to 24 were daily smokers, compared to 22% in the total Canadian population.

According to the 2006 Census of Canada, the Aboriginal population is growing more than 3.5 times faster than the non-Aboriginal. Since the population is young, with more than half of the people under the age of 25, Aboriginal tobacco use represents a tremendous future burden on Canada's health care system. If commercial tobacco use continues unchecked, tobacco-related diseases will become an even more significant cause of death amongst First Nations and Inuit peoples. The need for federal funding of effective and comprehensive tobacco control measures is urgent.

In September 2006, when the *First Nations and Inuit Tobacco Control Strategy (FNITCS)* was eliminated, Treasury Board justified this decision by indicating that the FNITCS was not achieving "value for money." On November 23, 2006, appearing before the House of Commons Standing Committee on Health, you assured committee members that the funding would be restored to a new and improved strategy:

"In terms of the tobacco strategy, I can assure you that we have not cancelled a strategy. We have held the funding. ... If we can change something, let's change it, and we will put the money in. I can assure you of that."

To date there has been no indication that a new and improved strategy has been developed or will be funded. September 2008 will mark the two year anniversary of the announcement to eliminate the FNITCS.

The Canadian Coalition for Action on Tobacco (CCAT) urges you to work with First Nations and Inuit community leaders to develop a comprehensive, effective and well-funded strategy to reduce commercial tobacco use. Although they share high rates of tobacco use, First Nations and Inuit have diverse cultures. Thus, community-based strategies are needed which recognize that they are distinct.

However, to be effective, the overall strategy must include the tobacco control best practices incorporated into the World Health Organization's *Framework Convention on Tobacco Control (FCTC)*, an international public health treaty which Canada has ratified:

- Community-implemented public policies, such as bans on smoking in public places and workplaces;
- High prices on tobacco industry products to discourage young people from buying cigarettes (which could be achieved by communities implementing levies equal to provincial tobacco tax rates);
- Bans on commercial tobacco advertising, as well as on displays of tobacco industry products at the point of sale;
- Public education programs and mass media campaigns that i) highlight importance of protecting children, adults and elders from second-hand smoke, ii) emphasize the importance of high pricing, and iii) discourage commercial tobacco use;
- Smoking cessation services provided with the support of physicians, nurses and other health professionals in the community.

Any new strategy also needs to include funding for the collection and ongoing monitoring of tobacco consumption data. Without adequate data, it is difficult to identify any changes in smoking rates and possible trends.

The organizations that comprise CCAT urge the government of Canada to make the provision of new funding for tobacco control in First Nations and Inuit communities a high priority. The need for such a tobacco control strategy is urgent. Funding should be commensurate with communities' needs, and ensure that the benefits of a commercial tobacco-free society can be shared by all people in Canada.

However, we believe strongly that restored funding for a FNITCS cannot come at the expense of the population-wide Federal Tobacco Control Strategy (FTCS). The FTCS has already suffered detrimental funding cuts; more than \$180 million that was promised to fund Health Canada initiatives over five years was never delivered.

We look forward to your response. Given that the need to discourage commercial tobacco use in First Nations and Inuit communities is so great, we are asking you to give this matter your most urgent attention.

CCAT looks forward to working with you, with Health Canada officials, and with leaders from First Nations and Inuit communities interested in implementing comprehensive and effective policies and programming to control the use of commercial tobacco.

Sincerely,

Aaron Levo

Chair

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Physicians for a Smoke-Free Canada

c.c. The Honourable Jim Flaherty Minister of Finance

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