



## Perspective of the Campaign for Tobacco-Free Kids on Harm Reduction

As public health advocates, the Campaign for Tobacco-Free Kids supports policies, programs and products with a strong evidence base that have been proven to reduce the number of people who get sick and die from tobacco use – *whether by reducing the prevalence of tobacco use or by reducing the harm to those who smoke cigarettes* and other tobacco products. Tobacco industry actions that oppose proven tobacco control measures, create addiction, and deter cessation increase the risk of harm.

**Harm reduction is an important public health strategy that the Campaign for Tobacco-Free Kids supports.**

- Harm reduction can be an important public health tool to reduce or minimize harms, including when applied to reduce the harm caused by certain addictive products, including tobacco.
- Properly administered, a harm reduction approach to reduce the risks inherent in the use of harmful addictive products, like illicit drugs or tobacco products, can help people to reduce their health risk and/or stop using these products entirely, as well as reduce significant social and legal risks, as is the case with illicit drugs.
- To be successful, a harm reduction strategy that involves the use of different products that the evidence demonstrates are less harmful but not risk-free and still addictive needs to be carefully targeted to addicted users, overseen and/or conducted under rules established by health or governmental agencies whose *only interest* is to reduce harm, not financial gain, and administered with proper government controls to prevent its sale and distribution to youth and non-users.

**Genuine harm reduction can help reduce the harm caused by tobacco products, but only if properly administered.** Genuine harm reduction when it involves a product that is itself harmful, even if it is less harmful and/or addictive includes the following critical elements:

- Scientific review by government agencies in advance that concludes that there is strong evidence that the product a) will or is highly likely to reduce a tobacco user's health risk under the conditions that the products will be marketed, distributed and used based on the best evidence that can be produced and b) will result in an overall public health benefit under the conditions that the products will be marketed, distributed and used. In addition, measures need to be in place to provide smokers with accurate information about what products/treatments have been reviewed by the appropriate authorities and determined by those authorities to be effective at helping smokers quit and/or reduce the health risks for those smokers who can't and/or won't quit smoking cigarettes or other tobacco products.
- Measures to provide the less harmful products only in settings where they are provided directly to the people that are already addicted to the more harmful product to minimize the risk that the product leads non-users to start or those who have previously quit to resume.
- Regulation of product packaging, marketing and health claims to prevent unauthorized, misleading claims and/or the use of lifestyle language or imagery.
- Distribution of the less harmful product as part of an intervention designed by health professionals and/or government health officials to treat or reduce harm to the individuals who use the product.
- Distribution and surveillance monitored by the government/appropriate health authorities.
- A recognition that nicotine delivered through government-approved nicotine replacement therapies such as patches and gum can safely help smokers quit; nicotine, if delivered rapidly or in high doses, is highly addictive and makes it hard to quit.
- Instructions for use so the product is used in ways that reduce harm and/or increase the ability of a smoker to successfully quit smoking and does not increase nicotine dependence.

Not all governments/countries will have the capacity to regulate products in this manner. When a country implements harm reduction strategies, it must have in place measures to prevent the marketing of these products in ways that attract non-users, create new or increased addiction, deter cessation in those who would otherwise have quit tobacco, and are able to effectively assess and balance the net public health impact of how the product is marketed and will be used.

**Tobacco industry claims of harm reduction are not new. From filters they claimed represent technological breakthroughs to “light” and “low tar” cigarettes, the tobacco industry has introduced many new products claiming to reduce harm, but in ways that are always inconsistent with the goal of reducing harm. Instead of reducing harm, these products expanded their customer base by attracting youth and deterring smokers from quitting cigarettes.**

- The term harm reduction has been co-opted by the tobacco industry on multiple occasions to support the marketing of products they describe as less harmful than cigarettes, but instead resulted in more people still smoking and more kids starting to smoke.
- As with today’s new products, the tobacco industry claimed that “light”/“low tar” cigarettes were less hazardous. Public health leaders believed them. It took decades before the public discovered that they were not less hazardous although the tobacco industry knew the truth years earlier.
- In 2006, a U.S. Court found that the tobacco industry’s “light” and “low” scheme was intended to “keep smokers smoking; to stop smokers from quitting; to encourage people, especially young people, to start smoking; and to maintain or increase corporate profits.”
- Rather than reducing harm, the tobacco industry’s misuse of harm reduction has been used to divert attention from their continued marketing of cigarettes and opposition to proven tobacco control measures. The tobacco industry’s actions resulted in more smokers, fewer quitters, and greater suffering and death.

**The behavior of the tobacco industry today is inconsistent with harm reduction. It again prioritizes maintaining and expanding their customer base over reducing the number of people using tobacco.**

As it has in the past when faced with the risk that more smokers were likely to quit smoking because of their health concerns, the tobacco companies are marketing an ever-changing new generation of products that they claim will reduce the harm caused by the cigarettes they continue to sell.

The tobacco industry’s vision of harm reduction fails to adhere to the critical safeguards of regulated harm reduction. *Genuine harm reduction does NOT:*

- Allow for the addictive product to be sold widely in settings/locations accessible to the general public and without instructions for how to use the product most effectively.
- Include advertising or marketing that reaches a broad audience using imagery and features that make the product appealing to individuals not already addicted to the more harmful product.
- Lead youth or other non-tobacco users to initiate use of the addictive product.
- Permit marketing claims that mislead consumers about the impact of using the product.
- Permit a manufacturer or the industry that profits from causing the problem and sustaining the use of the more harmful product to drive the solution or control distribution of the alternative product.

In fact, the tobacco industry has and still regularly opposes policies that are proven to reduce demand for cigarettes including tax increases, retail restrictions, graphic warnings, and limits on flavored products.

**The experience in the U.S. is an example where tobacco companies marketed e-cigarettes without safeguards necessary for true harm reduction. The consequences of these actions were predictable.**

- Thousands of flavors of e-cigarettes entered the market. Youth use of e-cigarettes quickly reached epidemic levels, with millions of young people using the products.
- The products also attracted young adult users, the majority of whom have never been smokers.
- Every major U.S. public health authority found that there was insufficient evidence to conclude that e-cigarettes are effective at helping smokers quit, especially on a population basis under the conditions they are used most often. The World Health Organization reached a similar conclusion.

As currently marketed, the new generation of tobacco products helps the tobacco industry maintain and expand the commercial market for their products, while claiming they are interested in harm reduction, resulting in the increased risk of harm. **It’s time to move forward with genuine harm reduction.**