



In this shop, a "power wall" has been replaced by closed cupboards.

must be working if this tobacco company is suing us . . . The Government of Saskatchewan will defend The Tobacco Control Act from this attack. We will continue to prevent tobacco companies from displaying tobacco products that encourage people, especially youth, to smoke." The legal challenge was dismissed in September, but application to appeal was granted the following month. As with other measures aimed at reducing smoking, the tobacco companies never give up the fight. Nor, given the health issues involved, will Saskatchewan.

The banning of tobacco product displays is a new wave in tobacco control. Similar legislation has been passed in Iceland, Ireland, the Canadian province of Manitoba, and is being considered by other Canadian provinces and Australian states.

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Thailand: victories and defeats in the long war

November 8 is a date of special significance in Thailand, as it is both the date of official funding of ThaiHealth in 2001 and the effective date in 2002 of new restrictions banning smoking in public places, including air conditioned restaurants. A previous article has highlighted that the adoption of the health promotion fund is a crucial milestone for tobacco control (*Tobacco*

Control 2001;10:48–54). While a quick survey shows tremendous strides for tobacco control, the tobacco industry has quietly gained ground in many areas, too.

The industry has been able to limit Thailand's efforts to monitor tobacco control indicators, gained policymaking friends and slowed or disabled important tobacco consumer protection efforts. For example, the ingredient disclosure requirements did not result in direct consumer disclosure of ingredients. While the pictorial health warnings on cigarette packs are approved and will eventually be in place, processes like this are often unnecessarily delayed. Tobacco industry documents from court actions make it clear that the transnational tobacco companies working in Thailand have been able to gain many allies among politicians, circumvent or flagrantly violate advertising laws, and influence the nature and extent of research on tobacco, by providing money or support to major research institutes and influential academics in Thailand. These three strategies, together with corporate sponsorship and philanthropy, have slowed progress in tobacco control.

A recent newspaper editorial in support of tobacco control in Thailand challenged tobacco control agencies to do more to achieve a rapid decline in the total number of smokers. Tobacco control advocates and organisations are seriously pursuing these end points as well as intermediate goals. Nonetheless, building an infrastructure of positive tobacco control programmes takes some time. It requires



Students in Thailand pass a no smoking sign.

breaking down the industry's negative, well funded strategies of negligence, diversion, and delay. In short, the task is confronting and taking apart a complex hidden agenda supported by vast resources. So far so good, but the race is increasingly a case of constantly having to win the next victory, whether on November 8 or other dates each year, despite a continuous stream of obstacles from the tobacco industry.

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Japan: smoke clouds over the land of the rising sun

To western observers interested in tobacco control policy, Japan is a fascinating anomaly. Despite its extraordinary achievements in manufacturing and technology, coupled with its high levels of education and research, and an economy that until a recent blip, probably only temporary, has been a world leader, its smoking rates have been sky high, with subsequent disease levels to match. In many ways, to a westerner it is rather like a Germany of the East.

Two decades ago, Japan had the highest male smoking prevalence of any industrialised country, at around 80%, but an almost negligible prevalence among women. Then came the invasion of American tobacco companies led by the US Trade Representative in 1985. Along with Thailand, Taiwan, and South Korea, Japan rolled over and modern tobacco promotion began. Until then, the Japanese tobacco monopoly (ironically, in view of Japan's high incidence of hypertension and stroke, it was called the Japan Tobacco and Salt Public Corporation) had been supplying a large and eager male market but had desisted from what must have so attracted the