

Tobacco use is the second leading risk factor for early death and disability worldwide, claiming more than 5 million lives every year since 1990. The negative effects of smoking spread out beyond individual and population health affecting the economy as well. Worldwide in 2015, the age-standardised prevalence of daily smoking was 25% for men and 5.4% for women, representing 28.4% and 34.4% reductions, respectively, since 1990. It is estimated that in 2015 there were between 5.7 to 7 million deaths due to smoking, equivalent to 11.5% of all global deaths (Reitsma et al., 2017[23]). Currently, 1.1 billion people are estimated to be active smokers, 84% of which were males and 80% of which live in low- and middle-income countries. Moreover, second-hand smoke causes more than 1.2 million premature deaths per year, of which 65 000 are children (WHO, 2019[24]). The UN SDGs call for strengthening the implementation of the World Health Organization Framework Convention on Tobacco Control in all countries, as appropriate.

The proportion of daily tobacco smokers varies greatly across countries but close to one in four men aged 15 and above in the LAC18 smokes daily, a very similar rate to the OECD (Figure 4.20). Rates are particularly high in Cuba, where over half of all men smoke, followed by Surinam where 43% men smoke. The lowest rates among men are observed in Costa Rica, Panama and Mexico, all below 10%. Rates are lower among women with 7% smoking daily, lower than the OECD average. Chile is at the top with over one women of every five smoking, followed closely by Cuba and Argentina. Cuban women smoke three times less than men do. The lowest rates for women are found in Barbados and Ecuador with 2% or less, followed by El Salvador, Costa Rica, Haiti and Panama, all below 2%.

Among adolescents aged between 13 and 15 years old in 29 LAC countries, tobacco use prevalence for men was 15% and almost 12% for women. Chile shows the highest tobacco use among women (26%) followed by Argentina (25%) and Mexico (18%), while the lowest rates are found in Dominican Republic (6%) and Honduras (6%). Among men, Saint Vincent and the Grenadines has the highest tobacco use (24%) followed by Argentina (23%) and Mexico (22%). Paraguay has the lowest rate among men of 7% (Figure 4.21).

Increasing tobacco prices through higher taxes is one of the most effective interventions to reduce tobacco use, by discouraging youth from beginning cigarette smoking and encouraging smokers to quit. A recent review of studies conducted in LAC countries found that tax increases effectively reduce cigarette use and can also be expected to increase cigarette tax revenue (Guindon, Paraje and Chaloupka, 2018[25]), which can be used in complementary interventions. The average taxation in LAC is 48% for a pack of 20

cigarettes (Figure 4.22). The countries with the highest taxation on tobacco are Chile and Argentina with over 80%, but these are not the countries with the highest prices. The most expensive tobacco can be found in Jamaica with a price of USD 14.3, while the cheapest one is observed in Paraguay, Colombia, Cuba, Dominica and Guyana, all below USD 3 dollars.

LAC countries can strengthen its regulations to reduce tobacco use by fully implementing the WHO Framework Convention on Tobacco Control. For this, WHO's strategy MPOWER can be followed to Monitor tobacco use and prevention policies; Protect people from tobacco use; Offer help to quit tobacco use; Warn about the dangers of tobacco; Enforce bans on tobacco advertising, promotion and sponsorship; and Raise taxes on tobacco (WHO, 2019[24]).

Definition and comparability

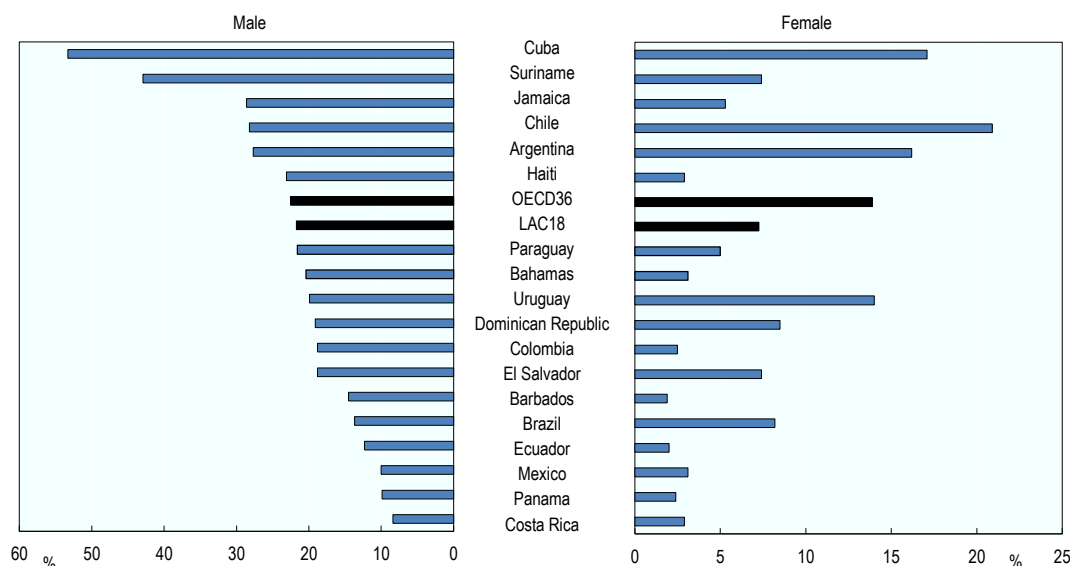
Adults smoking daily is defined as the percentage of the population aged 15 years and over who reported smoking every day. Estimates for 2015 were based on data obtained from a broad range of health and household surveys, including the Global Adult Tobacco Survey (GATS). Results were age-standardised OECD standard population for OECD countries and to the WHO Standard Population for non-OECD countries.

Current tobacco use among youth is derived from the Global Youth Tobacco Survey 2010-17. It is defined as the percentage of young people aged 13-15 years who consumed any tobacco product at least once during the last 30 days prior to the survey.

References

- [25] Guindon, G., G. Paraje and F. Chaloupka (2018), "The Impact of Prices and Taxes on the Use of Tobacco Products in Latin America and the Caribbean", *American Journal of Public Health*, Vol. 108/S6, pp. S492-S502, <http://dx.doi.org/10.2105/ajph.2014.302396r>.
- [23] Reitsma, M. et al. (2017), "Smoking prevalence and attributable disease burden in 195 countries and territories, 1990-2015: a systematic analysis from the Global Burden of Disease Study 2015", *The Lancet*, Vol. 389/10082, pp. 1885-1906, [http://dx.doi.org/10.1016/s0140-6736\(17\)30819-x](http://dx.doi.org/10.1016/s0140-6736(17)30819-x).
- [24] WHO (2019), *Tobacco*, World Health Organization, <https://www.who.int/news-room/fact-sheets/detail/tobacco>.

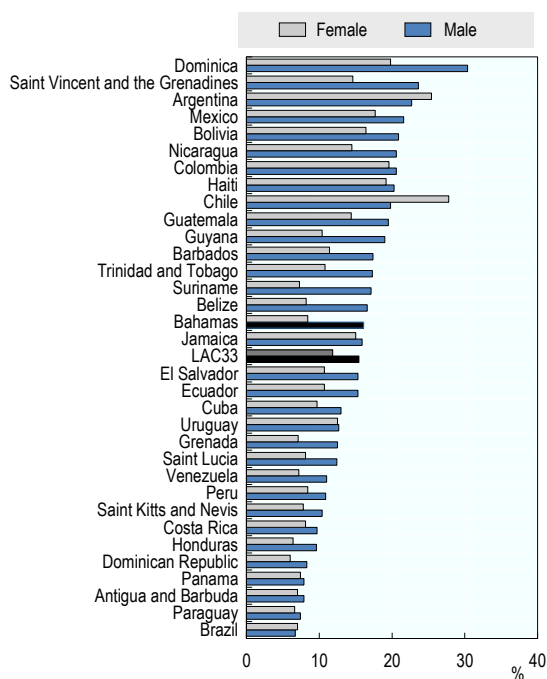
Figure 4.20. Age standardised prevalence estimates for daily tobacco smoking among persons aged 15 and above, 2016



Source: WHO GH0 2018. OECD Health Statistics 2019 for Mexico, Chile, Colombia, Costa Rica and Brazil.

StatLink <https://stat.link/bsx47w>

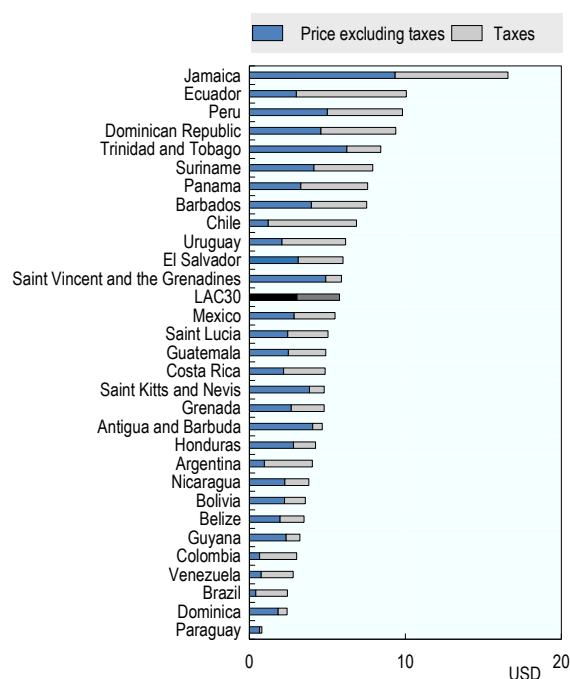
Figure 4.21. Prevalence of current tobacco use among youth aged 13 and 15, latest estimate available



Source: Global Youth Tobacco Surveys 2010-17.

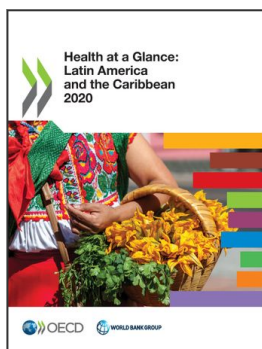
StatLink <https://stat.link/31hqq0>

Figure 4.22. National taxes and retail price for a pack of 20 cigarettes of the most sold brand, 2016



Source: WHO report on the global tobacco epidemic 2017.

StatLink <https://stat.link/ayoqbh>



From:

Health at a Glance: Latin America and the Caribbean 2020

Access the complete publication at:

<https://doi.org/10.1787/6089164f-en>

Please cite this chapter as:

OECD/The World Bank (2020), "Tobacco", in *Health at a Glance: Latin America and the Caribbean 2020*, OECD Publishing, Paris.

DOI: <https://doi.org/10.1787/b7cc1f42-en>

This work is published under the responsibility of the Secretary-General of the OECD. The opinions expressed and arguments employed herein do not necessarily reflect the official views of OECD member countries.

This document, as well as any data and map included herein, are without prejudice to the status of or sovereignty over any territory, to the delimitation of international frontiers and boundaries and to the name of any territory, city or area. Extracts from publications may be subject to additional disclaimers, which are set out in the complete version of the publication, available at the link provided.

The use of this work, whether digital or print, is governed by the Terms and Conditions to be found at <http://www.oecd.org/termsandconditions>.