

CLASH OF DISCOURSES

# Feminism and Tobacco Control

by Lezak Shallat



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"Gender and Tobacco" was the theme of World No Tobacco Day, celebrated on May 31, 2010. This World Health Organization campaign provided us with an excellent occasion to reflect on an underlying issue: the lack of an alliance between the women's health and tobacco control movements to address high smoking rates among women in one of the heaviest smoking populations in the Americas: Chile.

This year, the campaign placed special emphasis on the marketing of cigarettes to women, a subject amply addressed by both the tobacco control and women's health movements from a gender perspective. For the feminist movement – women portrayed as sex objects with enforced standards of beauty (young, slender and sexy) – is a neverending battle.

From the tobacco control movement, there is ongoing denunciation of the ways that cigarettes are promoted as a symbol of women's liberation, autonomy and gender equality. These perspectives are an example of the interrelated concerns of the two movements.

At first glance, one might not expect to find contradictions between these two movements on the issue of safeguarding women's health through advocacy for better tobacco control. On the contrary, one would expect to find a collaborative effort, shoulder to shoulder, to confront tobacco use. In addition to health, the two movements share very broad common objectives, such as the creation of more healthy societies where justice, equality and democratic participation prevail. It may be hard for feminists to discern this fundamental element among the tobacco control movement's goals,

but behind the barrage of NO SMOKING notices, it is there.

Helping women shake tobacco abuse is part of the broader struggle to free women from the injustices of their daily lives, of the exhausting double and triple workloads that drive them to seek a moment's relaxation with a smoke. And the struggle against the tobacco industry's abuse of its corporate power is part of the broader challenge to the dominant model of globalization where all our demands come into play.

But something happens between feminists and anti-tobacco groups that is keeping these shared aims hidden from view. How many times have we attended meetings on HIV/AIDS or access to legal abortion only to be reminded that, in Chile at least, clouds of tobacco smoke take many more lives than AIDS and maternal deaths combined? According to a study published in 2009 (see the sidebar on p. 18), six out of the ten main causes of death for Chilean women are associated with smoking. At the global level, tobacco is the key factor in preventable deaths.

Cigarettes pose a blind spot for feminists. The typical explanation is that "we all smoke." While this is obviously not the case, it does have an element of truth. Many Chilean women smoke, and the greatest concentration of women smokers is among university students and health professionals. As a result, many movement leaders are reluctant to promote tobacco control because they do not see themselves as legitimate agents of change who are practicing what they preach. As one seasoned clean air activist put it, "No one comes to hear my presentations. Smokers aren't interested because they smoke. Non-smokers aren't interested because they don't smoke."

As a general rule, tobacco is absent from the Latin American feminist health agenda on rights and political participation. And, for its part, the



regional tobacco control movement does not include many feminist groups among its active members or many organizations devoted mainly to women's health. This chasm became apparent in a survey conducted in Chile by the EPES Foundation and which was subsequently repeated by other organizations in Argentina and Brazil. There is a great deal of mutual ignorance regarding the priorities, interests, instruments, strategic mechanisms and campaigns of each respective movement. As a consequence, there is a lack of engagement that weakens both. For example, the survey indicated that feminist health leaders are unaware of the Framework Convention on Tobacco Control (FCTC), despite the fact that it is an international public health instrument that establishes precedents that could serve to strengthen regional regulatory frameworks in issues at the center of the feminist agenda, such as eradication of violence and

the protection of reproductive rights. Tobacco control activists (even those with a special interest in women), on the other hand, tend to be unaware of mechanisms for gender equality operating in health and other areas (i.e., women's political participation, education, anti-discrimination) that are in place, both in their own countries and internationally.

### Language: Yes but No

There is one point in particular upon which the dialogue between the two movements flounders. It is located at the intersection of the discourses and vocabularies that express basic concepts of each movement. It is a linguistic terrain that constitutes an ideological barrier that impedes joint action towards common goals.

The sidebar on this page provides a summary of some of the reservations of feminists with respect to the tobacco control discourse.



### Cigarettes as a Symbol of Autonomy and Equality

- A right "won" in the 1950s.
- Symbol of equality with men.
- Difficult to retreat from a "victory" in the quest for the right to greater autonomy.

### Ideological Reservations

- "Nobody tells me what to do with my body."
- Tobacco control is a new fundamentalism.
- "What takes place in private among consenting adults is no one else's business."
- Tobacco lies outside the nexus in which the relations of power are expressed.

### Social Context

- Smoking as a symbol of rebellion, subversion of authority.
- Women's rights activists as fighters, challenging conventional norms.

### Tobacco, Mental Health and Gender

- Tobacco is associated with pleasure, socializing.
- Smoking is a coping mechanism, a response to anxiety, stress, etc.
- Why deprive women of this source of comfort and pleasure?

### Activists Who Smoke

- Perception of inconsistency in working on tobacco control issues.
- An obstacle to addressing the issue of tobacco more fully.

### Messages Not Well Received

- Exclusive focus on women in their reproductive role (i.e., tobacco is harmful to baby's health).
- Control, prohibitions, bans.
- Terror campaigns, scare tactics.
- Guilt-inducing.
- Failure to address women's specific concerns.

Summary of the results of the survey "A dialogue for understanding and action," Fundación EPES, 2007. For more information, visit the Website: <http://www.epes.cl/htm/nofuman.html>.





From the feminist discourse, these points rest on fundamental postulates of feminism, including: the right to exercise control over one's body; the right to autonomy; the inviolability of private conduct between consenting adults when these do not cause harm; the critique of health policies focusing exclusively on women's health from their reproductive functions and/or role as guardians of family health; and the critique of biomedical health models that ignore the psycho-social contexts of women's lives and health. These rest upon the underlying recognition and rejection of patriarchy as a hierarchical system that exercises

power (sexual, economic, social and cultural), authority and control.

## The Issue of Control

It is here that we find one of the knots of contention. For the tobacco control movement, the use of the word "control" encompasses an entire strategy to focus its discourse on the product – tobacco, tobacco industries, marketing, sale and use – and not on the people (smokers) who use tobacco. The tobacco control movement does not see itself chiefly as a movement "against" tobacco, but as a movement in favor of clean air and smoke-free areas, supporting the health of non-smokers. It is a "pro-control" movement seeking to control an industry, a product, a system of commercialization, an addiction, a harmful activity that is often fatal. Within the movement, there is no talk of "anti-tobacco" measures or policies. This abbreviated terminology is reserved for headlines and journalists.

Among feminists, on the other hand, the word "control" causes discomfort. It is located at the opposite end of the spectrum from autonomy, the right to do with one's body whatever one wants. Freedom and self-determination arise from the absence of controls imposed by others. The discourses clash. But if we look behind the words, we find many considerations – informed consent, self-care and empathy for others – that make it possible to steer these two apparently conflicting approaches towards a shared aim.

The same applies to the concept of "autonomy." It is an aspiration of modern women, recognized as such by the feminist movement and promoted as the right to decide for oneself about work, education, reproductive life and more. For this very reason, the tobacco industry has manipulated the notion of autonomy as a concept to sell cigarettes.

## Brazil: Participatory Research on Women & Tobacco

"Women and Tobacco: A New Issue on the Feminist Agenda" is the title of a study by the *Rede Feminista de Saúde, Direitos Sexuais e Direitos Reprodutivos* (Feminist Network for Health, Sexual Rights and Reproductive Rights) in Brazil in 2009, in alliance with the NGO *Coletivo Feminino Plural* (Plural Feminine Collective) and the support of the *Alianza para el Control de Tabaco* (ACT, Alliance for the Control of Tobacco), with technical guidance of the *Núcleo Interdisciplinar de Estudos sobre Mulher e Gênero* (Interdisciplinary Studies Group on Women and Gender) at the Federal University of Rio Grande do Sul.

The main goal of the project, based on the results of a participatory diagnostic assessment carried out throughout Brazil by the regional offices and focal points of *RedeSaúde*, was to incorporate its members and the Brazilian women's movement into tobacco control advocacy, by focusing on the effects of tobacco addiction on women's health.

The following specific goals have been set: the need to identify experiences in the use of tobacco in the daily lives of members; to identify the effects that it has had on their organization; and at the same time, to carry out actions to raise social awareness and foster public policies to move towards tobacco control in Brazil in accordance with the challenges set forth in the Framework Convention on Tobacco Control of the World Health Organization.

The researchers responsible for the study were: Jussara Reis Prá, Coordinator of the Inter-disciplinary Studies Group on Women and Gender, UFRGS; Telia Negrão and Maria Luisa Pereira de Oliveira, Adjunct Executive Secretary of *RedeSaúde*, project coordinators; and Neusa Heinzelmann, Health Consultant for the project and a member of the *Coletivo Feminino Plural*.

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For more information:  
<http://www.redesaude.org.br>

## Activists and Smokers

The women's health movement in Chile approaches tobacco control from a specific context and historic agenda. Forged, to a certain degree, in the battle against the military dictatorship, the women's movement has achieved many political victories and social advances. Its agenda focuses on three major goals: eliminate violence against women; promote reproductive and sexual rights and health (and especially access to legal, safe abortion); and promote gender equality and women's political participation. It is a movement that raises its voice, takes to the streets, challenges authority and conducts a sophisticated monitoring from civil society of governmental action on commitments to advance women's rights and health. It wears a mantle of mystique: the combative, progressive woman, questioning, transgressive, battle-hardened, gesticulating

with a cigarette like Che Guevara. It is a challenge to incorporate this woman into campaigns for smoking prevention, smoke-free areas and other tobacco control advocacy issues.

## Building Bridges

Although there are many gaps in research, we do not lack information on the impact of tobacco on women's health. What we are lacking is for women's health advocates to make the issue their own. Without their participation, neither governments nor citizen and social movements can stop the tobacco epidemic. In Chile, EPES Foundation has promoted dialogue with women's health and rights leaders by holding a national meeting to address obstacles and synergies and by conducting several projects that look at tobacco use from a gender perspective. The results are promising but not immediate. The

historic and current agendas of women's organizations are not negotiable or easy to shift, especially when there are no resources to support incorporation of new issues, campaigns or activities. And political circumstances also take a toll: the impetus EPES triggered with a national meeting of women's health advocates nearly collapsed completely when, weeks later, the movement faced a major political setback to provision of emergency contraceptives that demanded the movement's full attention for many months.

Nevertheless, the cause moves forward. In Argentina, the *Fundación Interamericana del Corazón* (Inter-American Heart Foundation) has made an alliance with the *Fundación de Estudio e Investigación de la Mujer* (FEIM, Foundation for Study and Research on Women) and Canadian tobacco control advocates to foster a gender perspective in



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tobacco policy. And in Brazil, ACTBr has funded feminist groups to look at gender and tobacco. One product of this research is the new study "Women and Tobacco Use: A New Issue on the Feminist Agenda" (November 2009) of the *Rede Feminista de Saúde, Direitos Sexuais e Direitos Reprodutivos*.

At the regional level, the International Network of Women against Tobacco has a Latin America/ Caribbean branch for information and exchange among tobacco control advocates interested in women's issues from a gender perspective. The going is slow, but we are beginning to see a convergence of issues and activists. To the extent that the women's health movement and the tobacco control movement in Latin America can overcome their misconceptions about one another and harmonize their discourses, women's health will benefit. ♦



- Mujer y Tabaco, Fundación EPES: <http://www.epes.cl/html/nofuman.html>
- "World No Tobacco Day" in Facebook: [www.facebook.com](http://www.facebook.com)
- Campaña No Tabaco blog: <http://notabaco.blogspot.com>
- INWAT Latinamericano y del Caribe: <http://inwatlack.blogspot.com/> (and also on Facebook)

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**[www.epes.cl](http://www.epes.cl) or write to:**  
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## ***Chile: Highest Smoking Rates for Women in Latin America***

Chile has one of the highest rates of tobacco use among women in Latin America and the world. Various studies have demonstrated the striking increase in the prevalence of women's use of tobacco over the past 30 years, which has gone from 25% from the mid-to-late 1980s to around 40% today. The prospects for reducing these high rates of smoking are not promising, particularly considering that the population of adolescent women in Chile also presents one of the highest levels of tobacco use in the world.

The consequences of this phenomenon are dramatic if we recall that six of the ten principal causes of death for Chilean women are associated with tobacco use. The mortality of the Chilean population attributable to tobacco has increased steadily from 1985 to 2005. In contrast to Europe, Canada and the United States, tobacco use has remained high for the last 20 years in Chile.

*Source: Klaus Puschel, et al., "Factores predictores de inicio y cesación de tabaquismo en una cohorte de mujeres chilenas con 5.5 años de seguimiento," Revista Médica de Chile, vol. 137, no. 8, August 2009.*