



Tobacco and the Rights of Women and Girls in Japan

I. Summary

- A. Tobacco control is a human rights issue in Japan. According to the latest Tobacco Atlas, 142,800 people die each year from smoking, about 23.7% of all deaths in Japan.¹
- B. Tobacco is the world's leading cause of preventable death and is therefore a considerable obstacle to the right that all people living in Japan have to health.
- C. Tobacco is a human rights and women's and girls' rights issue and should be considered as part of the government's human rights obligations. Tobacco, and the actions of the tobacco industry, prevents the women and girls of Japan from enjoying the highest attainable standard of health.

II. Relevant facts and statistics

- A. Women and girls are also exposed to second hand smoke (SHS), both at home and in public places. A recent study showed that the characteristics of participants exposed to SHS at home were: younger, women, those with lower educational attainment, lower income, living with a larger number of people in household, never smokers, and those with poor knowledge of tobacco's adverse health effects.²
- B. Smoking during pregnancy is a cause of preterm delivery and impaired fetal growth. Smoking while pregnant is also associated with increased risk of sudden infant death syndrome.³
- C. The economic cost of smoking in Japan is 6,988,987,105,280 yen. This includes direct costs related to healthcare expenditures and indirect costs related to lost productivity caused by illness and premature death.⁴
- D. Tobacco use also negatively impacts sustainable development and the environment, both of which have obvious negative consequences of the right to health of women and girls.

¹ <https://globalactiontoendsmoking.org/research/tobacco-around-the-world/japan/>.

² Flor, L.S., Anderson, J.A., Ahmad, N. *et al.* Health effects associated with exposure to secondhand smoke: a Burden of Proof study. *Nat Med* **30**, 149–167 (2024). Available at <https://doi.org/10.1038/s41591-023-02743-4>.

³ Mitchell EA, Thompson JM, Zuccollo J, MacFarlane M, Taylor B, Elder D, Stewart AW, Percival T, Baker N, McDonald GK, Lawton B, Schlaud M, Fleming P. The combination of bed sharing and maternal smoking leads to a greatly increased risk of sudden unexpected death in infancy: the New Zealand SUDI Nationwide Case Control Study. *N Z Med J.* 2017 Jun 2;130(1456):52-64. PMID: 28571049, available at <https://pubmed.ncbi.nlm.nih.gov/28571049/>. See also <https://www.health.govt.nz/system/files/2022-05/sudden-unexpected-death-in-infancy-report-may2022.pdf>.

⁴ <https://tobaccoatlas.org/tobacco-atlas-japan/>

- E. Families of people who smoke spend resources on cigarettes that could be spent on other household expenses. The added healthcare expenses and lost income from tobacco induced-disease makes the financial situation much more dire.
- F. Cigarette butts are the most commonly discarded pieces of waste worldwide. It is estimated that 20,789 tons of butts wind up as toxic trash in Japan each year.⁵ This costs Japan ¥188 billion (US\$ 1,312,065,724.00) on marine pollution and waste management, a figure far higher than any so-called clean-up activities or environmental programs the tobacco industry conducts in Japan.⁶

III. **Special concerns**

- A. Japan was ranked 88 out of 90 countries in a global survey of tobacco control measures.⁷ Japan lags behind in many areas of tobacco control.
- B. Tobacco industry interference is a concern in Japan. The existence of the Tobacco Business Act and the strong association between Japan Tobacco, the Government (through 33% ownership) and policy makers, enables Japan Tobacco to participate in policy development which facilitates interference to weaken policies.
- C. In addition, contrary to the WHO FCTC, tobacco corporations are not prohibited from promoting themselves through “corporate social responsibility,” and are not prohibited from promoting their products through sponsorships.⁸ Japan Tobacco International owns *JT Marvelous Women*, a professional volleyball team,⁹ and Philip Morris International has conducted CSR in women’s issues such as domestic violence and empowering women.¹⁰
- D. There are no pictorial health warnings on tobacco packs in Japan. 134 other countries have implemented graphic warning labels; they are considered global best practice.¹¹ Japan Tobacco sells a cigarette brand, *Pianissimo*, specifically targeting women.¹²
- E. Japan still allows smoking sections in restaurants and smoking in other indoor places.¹³ This is a violation of the right to health of many, especially women and girls.
- F. Tobacco taxes in Japan are 61%. The global standard is 70%.¹⁴

⁵ <https://tobaccoatlas.org/factsheets/japan/>.

⁶ GGTC. Tobacco’s Toxic Plastic. <https://tobaccoplastics.ggtc.world/>

⁷ <https://globaltobaccoindex.org/country/JP>.

⁸ <https://globaltobaccoindex.org/country/JP>.

⁹ <https://betsapi.com/te/60529/JT-Marvelous-Women/p.2>

¹⁰ https://www.pmi.com/resources/docs/default-source/pmi-sustainability/2015_contributions.pdf?sfvrsn=2

¹¹ <https://globaltobaccoindex.org/country/JP>.

¹² [https://en.namu.wiki/w/%ED%94%BC%EC%95%84%EB%8B%88%EC%8B%9C%EB%AA%A8\(%EB%8B%B4%EB%B0%B0\)](https://en.namu.wiki/w/%ED%94%BC%EC%95%84%EB%8B%88%EC%8B%9C%EB%AA%A8(%EB%8B%B4%EB%B0%B0))

¹³ <https://globaltobaccoindex.org/country/JP>.

¹⁴ <https://globaltobaccoindex.org/country/JP>.

IV. **Legal obligations**

- A. Japan is Party to the World Health Organization's Framework Convention on Tobacco Control (FCTC). The FCTC has been ratified by 182 countries and the European Union, which are obligated to put in place a range of measures to reduce tobacco use. The preamble encourages States Parties "to give priority to the right to protect public health," and to respect the right of everyone to the enjoyment of the highest attainable standard of physical and mental health, as expressed in Article 12 of the International Covenant on Economic, Social and Cultural Rights (ICESCR).¹⁵
- B. The preamble of the FCTC also includes a statement "Recalling that the Convention on the Elimination of All Forms of Discrimination against Women, adopted by the United Nations General Assembly on 18 December 1979, provides that States Parties to that Convention shall take appropriate measures to eliminate discrimination against women in the field of health care."¹⁶
- C. In the preamble of the FCTC, Parties to the FCTC state that they are "Alarmed by the increase in smoking and other forms of tobacco consumption by women and young girls worldwide and keeping in mind the need for full participation of women at all levels of policy-making and implementation and the need for gender-specific tobacco control strategies."¹⁷

V. **Recommendations**

- A. We respectfully encourage the Committee to call on the government of Japan to protect the health of women and girls by implementing the best practices set out in the WHO FCTC including, but not limited to
 - 1. Encouraging the government to cut ties with the tobacco industry and to stop all activities that promote the tobacco industry.
 - 2. Banning tobacco industry promotion and sponsorship.
 - 3. Banning smoking in all indoor places.
 - 4. Increasing tobacco taxes.
 - 5. Implementing graphic warning labels.

Signed,

Action on Smoking and Health (ASH)
Global Center for Good Governance in Tobacco Control (GGTC)

¹⁵ World Health Organization, Framework Convention on Tobacco Control, Preamble, available at <https://apps.who.int/iris/bitstream/handle/10665/42811/9241591013.pdf;jsessionid=071ADE23A8056EE85BE6820E1A41A74E?sequence=1>.

¹⁶ Ibid.

¹⁷ Ibid.