



Physicians for a Smoke-Free Canada

The first **20** years

The job is not yet done

Two decades have passed since a small group of Canadian doctors banded together to create a physicians' organization dedicated to promoting tobacco control policies. On June 14, 1985, Physicians for a Smoke-Free Canada was officially incorporated.

Twenty years ago, few Canadians would have dreamt that smoking rates could be pushed down by 40%, or that non-smoking would be the social and political norm. Among those few dreamers were Dr. Andrew Pipe, Dr. James Walker, Dr. Phil Hamilton and Dr. Rory McIntyre. They put their names (and more!) behind the idea that physician leadership could change Canada's tobacco policies.

In 1985, that change was sorely needed. More cigarettes were smoked per capita in Canada than in any other nation, there was virtually no protection from second hand smoke in any work place or public place and there were no meaningful controls on tobacco marketing. The political and social climate towards tobacco control was quite hostile.

Within a few years, hundreds of doctors had signed on to PSC, and the real work began. For 20 years, PSC has run an uninterrupted program of public education, research and policy development and promotion aimed at putting the policies and practices that reduce smoking in place.

When PSC's 20th birthday was celebrated during the fourth National Conference on Tobacco or Health this spring, there was much to cheer.

Many of the programs and policies supported by PSC over the past twenty years have been successfully implemented.

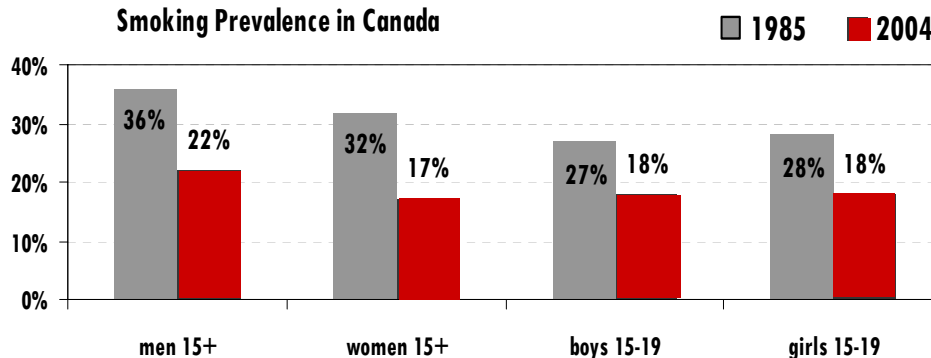
Today, the OECD reports that Canada has the lowest smoking rates in the developed world, almost every province protects workers and the public from second-hand smoke, and tobacco marketing has been substantially curbed.

Included in the celebrations of our 20th birthday was the pleasure and pride in receiving two important awards. The Heart and Stroke Foundation awarded PSC with the **Leadership Award in Heart Healthy Policy** and we were also a recipient of the World Health Organization **World No Tobacco Day Award**.

PSC has contributed to a major public health *advance*, but we will not be able to share in the *victory* until we have better managed the health needs of the five million Canadians who continue to smoke. That will require us to develop more and better public health interventions.

That's our challenge for the coming years.

Smoking Prevalence in Canada



Meeting the global challenge

A New Canadian Collaboration on Global Tobacco Control

PSC is one of the core Canadian partners that have come together under a newly created **Canadian Global Tobacco Control Forum** (CGTCF). This multi-agency consortium has challenged itself to help strengthen global tobacco control by supporting the work of colleagues in developing countries.

Our first collective project is aimed at facilitating the ratification and implementation of the new tobacco treaty, the Framework Convention on Tobacco Control. Health Canada has provided \$190,000 to fund the first phase of this project, which aims to:

- ◆ Support the establishment of networks and alliances, particularly in Africa and South America. (In most developing countries there are very few tobacco control workers, and they often work in isolation under very difficult circumstances.)
- ◆ Host special meetings to encourage governments to implement better tobacco control measures. (Canadian-style health warning messages, for example, are in place in very few countries, yet are relatively easy to implement.)

PSC is responsible for the development of a recommended approach to support tobacco control in China. We will be working with our colleagues in China to identify ways in which Canadian and Chinese governments and civil society organizations can work together to reduce smoking. There are over 300 million smokers in China, yet very few measures have been put into place to address the predictable and tragic consequences.

Working towards the establishment of the FCTC was an exciting process, and helping the treaty make a difference by supporting its implementation is proving to be even more challenging, complex — and rewarding.



Tobacco control in francophone Africa

Historically, strengthening tobacco control in francophone African countries has never appeared high on the priority list of major international health and aid agencies. After all, tobacco consumption was not high, there was little tobacco grown in the region, and war, famine, malaria, AIDS and other problems were obviously more pressing.

None of this logic has deterred multinational tobacco companies from becoming firmly entrenched in the region. Billboards like the one shown above from Cotonou, Benin are common in francophone Africa.

Moreover, through a series of mergers and acquisitions, multinational companies, like BAT, have acquired control of most of the cigarette manufacturing and distribution in francophone countries of West Africa. With their savvy, aggressive marketing, these multinational companies are well-positioned to addict millions in countries where smoking rates have historically been low.

Health agencies, on the other hand, are not well-prepared to prevent this moving pandemic. In most francophone West African countries, little infrastructure exists to actually effectively implement the provisions of the FCTC. International resources to help these countries do not begin to match the size of the problem.

Canada, a French-speaking nation, is well-positioned to provide technical cooperation and assistance. Canada has model tobacco control policies and no history of colonial domination in Africa, making it a highly credible source of advice and assistance on tobacco control matters.

Canadian NGOs have helped revitalize national public health associations and develop regional networks in the region. These are the beginnings of institutional frameworks that can help deliver comprehensive advice and assistance to strengthen tobacco control in all countries of francophone Africa.

Now we are building on that knowledge and expertise to take those efforts to scale. With the support of federal and Quebec governments, we are working to develop an all-out effort to quickly and effectively implement the FCTC in all francophone African countries.

Setting and achieving a common goal of comprehensive tobacco control by 2010 in all francophone African countries would have benefits well beyond the mere prevention of the tobacco epidemic in one region of Africa. It would also increase the ability of citizens to act globally towards strengthening public health.

The right court. The wrong question.

Physicians for a Smoke-Free Canada calls on the federal government to refer the question of a comprehensive ban on tobacco advertising to the Supreme Court of Canada.

The decision of the federal government to appeal to the Supreme Court a decision of the Quebec Court of Appeal which opens the door to some forms of corporate sponsorship prompted PSC to call on the government to not squander the opportunity by being too restrictive in the question it puts to the court.

In our view, a total ban on tobacco advertising remains a vital missing element of Canada's tobacco control strategy. The current *Tobacco Act* allows cigarettes to be advertised in newspapers, bars and direct mail. Although tobacco companies have been refraining from these promotions while the law was contested in the courts, they are widely expected to return to direct advertising in the near future.

In the 8 years since the *Tobacco Act* was adopted, there have been many developments which should encourage the government to go further. The

evidence in support of a total ban is more voluminous and more unequivocal. The number of other countries which have adopted promotion bans has increased (including all of Europe). The political opposition from sponsored agencies has diminished.

And, importantly, Canada has ratified a treaty which obliges countries which do not have a constitutional impediment from doing so, to adopt a comprehensive ban on tobacco advertising before February 2010.

The FCTC states, "Each Party shall, in accordance with its constitution or constitutional principles, undertake a comprehensive ban on all tobacco advertising, promotion and sponsorship."

By referring the larger issue of this comprehensive ban to the Supreme Court now, the government will clear the legal air in time for this obligation to be met.

The popular belief that Canada's constitution does not allow tobacco advertising to be banned is an incorrect interpretation of the 1995 Supreme Court ruling. The Court did not rule that there could never be a total ban on tobacco advertising, only

that it had to be justified with evidence. In 1995, 5 of 9 judges felt that sufficient justification had not been shown, and struck down the law.

Although Health Minister Diane Marleau promised in 1996 to re-introduce a total ban and provide sufficient evidence to satisfy the court, her successor, David Dingwall, under great pressure from Quebec arts and sporting events, backed down and introduced a weaker bill.

Now, ten years later, the evidence in favour of a total ban on tobacco advertising is stronger and more voluminous. The new evidence led Judge André Denis in his Quebec Superior Court decision in favour of the *Tobacco Act* in December 2002 to state, "*A close reading of all the opinions handed down by the Supreme Court in the first case, together with the evidence introduced at this trial indicates that a total ban on tobacco advertising would be much more easily defended now than in 1989.*"

We need a clear answer from the Supreme Court on whether or not a comprehensive ban on tobacco advertising is constitutional. The fastest way to get that answer is for the government to formally refer the question to the Supreme Court.

PSC files complaint over pharmacy sales in Alberta

Physicians for a Smoke-Free Canada has filed an official complaint with the Alberta College of Pharmacists against the sale of tobacco products in that province's pharmacies.

The Alberta College of Pharmacists has resisted previous appeals by their own members and by other health agencies to either implement a ban on tobacco sales in pharmacies.

"By filing an official complaint, we hope to trigger the College into meeting its responsibilities under the Pharmaceutical Professional Act to set ethical standards for pharmacists and protect the public interest," said Physicians for a Smoke-Free Canada's regional director in Alberta, Dr. Charl Els. "Tobacco is the leading avoidable cause of disease and premature death in Alberta, and should not be sold in agencies which have a responsibility to health, like pharmacies."

As a psychiatrist, Dr. Els finds the sale of tobacco products hinders his patients' ability to quit. "Persons with mental illness are at increased risk of smoking, and may be impacted more severely by these tobacco sales practices," he said. "Patients have complained that they find it difficult to resist buying cigarettes in pharmacies and when they go to pharmacies to buy smoking cessation products, they face a 'powerwall' of cigarettes."

At least six other provinces have already passed legislation banning the sales of tobacco from pharmacies, and in at least one province, Quebec, the College used its powers to regulate the profession to trigger legal change.

"We fear that the College of Pharmacists is listening to the concerns of the 'big business' chain pharmacies and not to the concerns of their own members, or the needs of the public," said Dr. Els.

As numerous pharmacies are now owned by non-pharmacists, the decision to sell tobacco in a pharmacy may no longer lie in the hands of the pharmacist. "This places pharmacists in the precarious position of potentially violating their *Professional Code of Conduct* by offering tobacco products for sale", Els added. "The practice of sales from pharmacies, albeit legal, is tarnishing the reputation of the profession and sends a mixed and harmful message to the public," he added.

"Pharmacies should not put financial gain ahead of public health," Els concluded. PSC is recommending to the Alberta College of Pharmacists that it call on the Alberta Government to immediately bring forth legislation to ban the sales of tobacco from all pharmacies in Alberta.

Bringing Big Tobacco to justice

This September, the Supreme Court of Canada paved the way for British Columbia to proceed with its lawsuit against the tobacco industry. This unanimous court ruling makes it more likely that—finally—tobacco companies will be held accountable for the costs they have created for provincial health care systems.

Much editorial and opinion ink has been spilled addressing the issue of whether or not it is appropriate for governments to grab money from tobacco companies through taxation and then grab more money from them through the courts. Most opinions expressed in the press hold that the governments go too far when they contemplate a money grab through the court. "Big tobacco doesn't owe a penny," was the headline on an editorial in the October 1 *National Post*, a sentiment that was echoed in editorial opinion in many other media.

But all this talk of money misses the point. Collecting money is incidental to the true purpose the British Columbia lawsuit, as described when the lawsuit was launched in 1998 under the auspices of the B.C.'s Attorney General of the day, Ujjal Dosanjh, now

Canada's Minister of Health, and the B.C. Health Minister, Joy MacPhail. Minister MacPhail was not confused about the government's motivation in launching the suit. In her speech announcing the suit, she outlined a three-pronged approach for the new government strategy on tobacco:

- ♦ expose the truth about tobacco and the tobacco industry's behaviour;
- ♦ pursue justice for the damages caused by tobacco; and
- ♦ improve public health by protecting children from tobacco addiction.

She went on to state that the government's goal was nothing less than to change the behaviour of tobacco companies, including getting them to pay for cessation and treatment programs. Clearly, the B.C. suit was intended to do much more than collect money from tobacco companies.

The American example is instructive for the coming battles in Canada. In 1998, tobacco companies and US states agreed on what was hailed as the largest out-of-court settlement ever. The tobacco companies agreed to pay 516 billion dollars over 25 years to

settlement ever," is considered by many American health experts to have been of very little public health value and has not perceptibly changed the behaviour of tobacco companies. Notwithstanding the large sums of money involved, and the reduction of some types of advertising, the tobacco companies merely passed the cost of the settlement on to their consumers. The state governments which received the money viewed it as a general revenue source, not a public health improvement fund. Barely eight per cent of the money is being spent on improved tobacco control.

Public health benefit, however, has flowed from the MSA requirement that previously secret tobacco industry documents be made public. These documents have given us a far more comprehensive understanding of tobacco industry behaviour and provided a much sounder basis for pursuing liability suits against the tobacco industry.

So what should British Columbia and other provinces be demanding in their claims against tobacco companies?

Money, to be sure. Financial compensation is part of redress that tobacco companies should be making in the name of justice. The provinces should, however, ask for much, much more. **They should demand nothing less than a complete phase-out of the tobacco industry within twenty years.**

The tobacco industry's clever marketers, who have devoted decades to stimulating demand for tobacco, should now be required to shift gears completely and use their craft to extinguish demand for tobacco. Failure to do so would result in the court-ordered seizure of the tobacco companies and their transfer to a public interest agency that would rid of this scourge once and for all.

Courts can and do order wrongdoers to change their behaviour and stop their wrongdoing. It is time for courts to issue such edicts to tobacco companies.

Neil Collishaw

* THE TORONTO STAR, 1st OCTOBER 2005, D1-4

The companies say they won't settle out of court. Observers say they will, and that a massive settlement could be devastating

But could it break the bank at Big Tobacco?

SHARDA PRASHAD

BUSINESS REPORTER
Tobacco manufacturers could be dealt a devastating blow by an onslaught of litigation after their setback at the Supreme Court of Canada this week. The court's unanimous ruling paved the way for provincial governments to pursue billions of dollars in restitution for tobacco-related health-care costs. Analysts believe tobacco companies will eventually settle out

Shares of Britishman, Benson & nadian manufacturers Imperial Tobacco Canada and JTI-MacDonald Corp. and other foreign manufacturers, including Philip Morris, were also named in the legal action. Certainly the markets took a dim, although not devastating view, of the ruling, which allows British Columbia to sue tobacco manufacturers for related health-care costs dating back 50 years and for future related costs.

vice, meanwhile, placed the company's commercial paper and senior unsecured debt "under review with negative implications." The ratings service indicated in a statement that litigation represented a "material risk and concern to the company." The debt review should be completed within a month, said spokesman Paul Macciachera. Other observers sounded similar warnings. Blackmont Capital Inc. analyst David Hostline said

US states in return for withdrawal of liability suits. They also agreed to some restrictions on tobacco marketing and agreed to make documents obtained during the legal proceedings available to the public.

Seven years later, we have some idea of the public health value of various provisions of the Master Settlement Agreement (MSA). The money involved in the "largest out-of-court

A growing list of court cases

Criminal investigations and charges

January 2002: RCMP searched the premises of Rothmans, Benson and Hedges in connection with cigarette smuggling in the 1990s, as part of an investigation that is apparently ongoing.

February 2003: the RCMP laid charges of fraud and against JTI-Macdonald and 8 former corporate executives. Investigators claimed the companies defrauded Canada, Ontario and Quebec of \$1.2 billion in tax revenue between 1991 and 1996. Hearings in the preliminary inquiry began earlier this year.

November 2004: RCMP agents searched the Montreal office of Imperial Tobacco Canada. The RCMP affidavit claims that smuggling led to \$607 million in unpaid taxes to the federal government.

Government lawsuits

January 2001: the province of British Columbia launched a lawsuit against all the tobacco companies operating in that province and their multinational owners. In September 2005, the Supreme Court upheld the legislation B.C. developed to manage the lawsuit. Newfoundland and Labrador and Nova Scotia have developed similar legislation, and other provinces have indicated they may be interested in 'following suit.'



"I am applying the law of Quebec as it was adopted by the legislature. We are a democratic province, and we are fulfilling the responsibilities of the Minister of Revenue."

Lawrence Bergman
Quebec Minister of Revenue



"I was moved to challenge the industry when I realized that they had used the idea of 'freedom' to sell me a product that enslaved me, and that would eventually shorten my life."

Cécilia Létourneau,
plaintiff

August 2003: the Attorney General of Canada filed a suit in Ontario against JTI-Macdonald for \$1.5 billion to recover tax losses caused by what it called a "massive conspiracy" to smuggle cigarettes. These proceedings have now been stayed pending resolution of the bankruptcy protection.

August 2004: the Québec government requested and obtained a court order for JTI-Macdonald to pay nearly \$1.4 billion immediately for unpaid taxes, penalties and interests. JTI-Macdonald subsequently filed for bankruptcy, and protection was extended (the most recent extension ends November 30, 2005). Other provinces have filed notice of their own potential claims in this matter of more than \$9 billion.

Class Action Suits

November 1998: Two class action suits are filed in Quebec.

- ♦ the "Létourneau" case claims damages for addiction. The claim is made on behalf of 1.78 million Quebecers who became addicted to nicotine through smoking, and claims \$10,000 for each smoker (for a total claim of \$17.8 billion).
- ♦ the "Blais et al" suit seeks compensation for smokers who are victims of cancers of the lung, larynx and throat as well as emphysema sufferers. The total claim is estimated at \$5 billion.

May 2003: The "Knight" case is filed in British Columbia against Imperial Tobacco for engaging in "deceptive trade practices" when it used the term 'light' on its Players Light cigarettes. This case became the first class action suit against tobacco companies to be certified in February 2005. This decision of the B.C. Supreme Court is now being appealed. The case seeks the return of money made from the sale of 'light' cigarettes as well as an injunction against their future sale.

July 2004: The "Sparkes" suit is filed in Newfoundland against Imperial Tobacco, claiming that customers were deceived by the marketing of 'light' cigarettes. The case is very similar to the "Knight" case.

February 2005: A third class action for deception arising from the sale of 'light' cigarettes is filed, this time in Quebec on behalf of representative claimant "Yves Gagnon."

February 2005: the Quebec Superior court grants certification to both the "Létourneau" and "Blais" suits, making them the second and third certified class actions suits against tobacco companies in Canada.

(Two other class action suits have been filed in Ontario, but both were denied certification)



"We want big tobacco companies to admit the truth and take responsibility for the damage they cause, instead of pretending to be good corporate citizens while carrying on a deliberate campaign to addict kids to tobacco."

Joy Macphail,
former B.C. Health Minister



Heather Crowe's campaign

Political successes, but health set-backs.

Neil Collishaw, PSC's research director, looks back on the impact of Heather Crowe's campaign to protect workers from second hand smoke

In the early fall of 2002, Heather Crowe, a never-smoker who had been recently diagnosed with inoperable lung cancer contracted from a lifetime of waitressing in smoky restaurants, began her campaign to make sure that no other worker would suffer the same fate. One of her first campaign actions was to write to each of the ministers responsible for occupational health and safety in the federal government, and in every province and every territory – fourteen jurisdictions in all.

She asked them all to ban smoking in all workplaces. She also asked for the opportunity to visit each Minister to discuss how such a ban could be accomplished. At the time, not a single one of these jurisdictions had a complete ban on smoking in workplaces.

To Heather's surprise and delight, Ministers in most jurisdictions agreed to meet with her, and throughout 2003, 2004 and 2005, she visited almost every provincial and territorial capital city one or more times to talk to ministers and officials about banning smoking in workplaces.

And that was only part of her tireless campaigning on behalf a smoke-free Canada.

She visited mayors and councillors, high schools, workplaces, First Nations communities, town hall meetings and many other places where people were interested in implementing new measures to improve protection from second-hand smoke. Wherever she went, better workplace rules, better municipal by-laws and better provincial and territorial laws to control second-hand smoke followed.

During this time Heather enjoyed relatively good health. Following aggressive radiotherapy and chemotherapy in late 2002, her cancer went into remission for about two-and-a-half years.

Throughout this period, more and more municipalities, oftentimes inspired by Heather's story, banned smoking in workplaces, creating patchworks of regions where some workers would be fully protected from tobacco smoke in one municipality and none would be protect in adjacent municipalities. Finally, once again often inspired by Heather's story, territories and provinces began implementing provincial and territorial smoking bans.

The results of Heather's campaign to date are remarkable.

When she began in 2002, not a single one of the fourteen federal, provincial or territorial jurisdictions protected all their workers from second-hand smoke. Now seven of them either do or soon will. These are Nunavut, the Northwest Territories, New Brunswick, Manitoba, Ontario, Quebec and Nova Scotia. Two more, Newfoundland and Saskatchewan, have made significant improvements, but still need to extend their protection to cover all workers. Most, but not all workers are protected in British Columbia, Prince Edward Island and in federal jurisdiction. And much better protection is needed in Alberta, the Yukon and on First Nations land throughout Canada.

Sadly, Heather's cancer has returned.

Secondary cancer has spread widely through her skeletal system - to her spine, hips, pelvis, coccyx, legs and one arm - and to her liver, lungs and kidneys. She is in pain and her pain management regime needs to be continually adjusted. She has trouble sitting and now can only get around with the aid of a walker. She has moved to a nursing home and is undergoing further chemotherapy and

radiotherapy treatments.

Despite all her pain and anguish, Heather never stops working on behalf of workers all across Canada. While Saskatchewan has a new law that protects waitresses and some other workers from second-hand smoke, many other Saskatchewan workers still have no protection from tobacco smoke at work. In the midst of packing up her apartment for good to leave and move into a nursing home, Heather spoke out about tobacco smoke in Saskatchewan workplaces.

"I just want legislation that states when you go to work, you're going to be protected," she told the Regina Leader-Post on September 8.

A week earlier, on August 28, she had spoken to a reporter at the Calgary Sun. Here is an extract of the article by reporter Licia Corbella that appeared in that newspaper:

"I don't think I'm going to make it," she says. "That's why I hope many other Canadians will take up my fight. Do you think you can help me do that?" she asks softly.

Yes, Heather. It's the least we can do.



Heather clears the smoke across Canada



Nunavut and the Northwest Territories were the first, banning smoking in all workplaces as of May 1, 2004.

New Brunswick and Manitoba followed, banning workplace smoking as of October 1, 2004.

Saskatchewan banned smoking in public places, including bars and restaurants, as of January 1, 2005. However, smoking is still allowed in Saskatchewan workplaces that are not public places.

Newfoundland banned smoking in all public places and workplaces as of July 1, 2005. The Newfoundland law bans smoking on outdoor bar and restaurant patios but allows designated smoking rooms in workplaces that are not public places.



In the spring of 2005, **Ontario** and **Quebec** passed laws that will ban smoking in all workplaces as of May 31, 2006. In Quebec, a few remaining designated smoking rooms will be phased out by 2008.

In October 2005, **Nova Scotia**, Heather's home province, introduced legislation that would ban smoking in all workplaces and on outdoor patios of bars and restaurants. The government hopes the new law will come into force on December 1, 2006.

Prior to 2003, **British Columbia** and **Prince Edward Island** had banned smoking in most workplaces. However, their laws allow smoking rooms in some locations, including bars and restaurants. Neither of these provinces has improved their laws since 2003.

The **Yukon** has yet to adopt any new laws to protect workers from second-hand smoke, but the government is considering the matter. There was a public consultation on this issue in the Yukon in the spring of 2005.

A private member's bill was launched in **Alberta** in 2005 to ban smoking in all workplaces. The bill enjoyed support from many Alberta MLA's, but in the end, the government imposed

its will and weakened the bill, as passed, into an instrument largely ineffective for protecting workers from second-hand smoke.

Through a series of administrative practices, smoking is banned in most places under **federal jurisdiction**, but there is no legislative guarantee of such protection. The Non-Smokers' Health Act of 1988, was a good law at the time it was passed, but is now badly out of date. Because the law has not been updated, there are some areas of federal jurisdiction where workers remain unprotected. One is prisons. However, smoking will be banned in the indoor areas of prisons as of January 2006. The other is smoking rooms in airports. Even in cities with total smoking bans, like Ottawa, there are smoking rooms in the federally-regulated airports.

Throughout Canada, even in provinces with a total smoking ban, smoking on land under the **jurisdiction of First Nations** remains problematic.



"I want to be the last Canadian to die from second hand smoke in the work-place."

Heather Crowe

Heather takes her message to:

- ♦ **Communities** (top: meeting with Nunavut youth)
- ♦ **Politicians** (left: with Premier Lord)
- ♦ **Workers** (above: meeting with prison guards)
- ♦ **The media** (above right, one of countless radio interviews).

Tobacco control milestones in 2005

January

Saskatchewan goes smoke-free. *Tobacco Control Act* bans smoking in public places (including bars). Workers in other settings (like offices), however, still have no provincial protection.

Whitehorse goes smoke-free.

Knight v. Imperial Tobacco Canada Limited becomes the first Canadian class action suit to be certified. The suit claims that ITL used "deceptive trade practices" when it sold 'light' cigarette brands.

Canadian Competition Bureau is sued by a coalition of health groups (lead by the Non-Smokers' Rights Association) for failing to act on its complaint about the sale of 'light' cigarettes.

Canada's Supreme Court upholds a **Saskatchewan provincial law** banning the display of tobacco products in stores.

Ontario increases cigarette taxes by \$1.25 per carton (5.6 percent). Ontario cigarettes are still the cheapest in Canada.

February

Quebec Superior Court certifies two more class action lawsuits against Canada's big three tobacco companies.

The **Framework Convention on Tobacco Control** comes into force.

April

Alberta legislature rejects a proposal for a meaningful smoking ban.

May

Governments of Ontario and Canada pay out \$150 million to buy out tobacco quota from 279 **tobacco farmers**.

Physicians for a Smoke-Free Canada is presented with WHO's World No Tobacco Day award.

June

Fourth National Conference on Tobacco or Health is held in Ottawa.

Ontario and **Quebec** both pass laws which ban smoking in all work and public places after May 31, 2006 and ban retail displays of cigarettes after May 31, 2008.



Retail cigarette displays BEFORE provincial bans



Retail cigarette displays AFTER provincial bans (Saskatchewan, Manitoba and, after 2008, Ontario and Quebec)

July

Correctional Service of Canada announces that all federal penitentiaries and correctional facilities will be smoke-free by February 2006.

Provincial and federal governments give notice of \$9.6 billion of claims for tax revenues lost to smuggling. These claims build on the claim by the Quebec government last year.

August

Manitoba becomes the second province to ban the display of cigarettes in stores where children are allowed.

Quebec Court of Appeal strikes down certain provisions of the federal *Tobacco Act*, including bans on sponsorships under corporate names.

September

Supreme Court of Canada unanimously upholds British Columbia's *Tobacco Damages And Health Care Costs Recovery Act* and allows the provinces suit against tobacco companies to continue.

October

Health Canada requirements that cigarettes manufactured in Canada meet fire safety standards come into effect.

Nova Scotia's government introduces legislation to make the province smoke-free by December 2006 and to clear the way for a law lawsuit against big tobacco companies.

BAT's Canadian subsidiary announces that it will be closing its manufacturing facilities in Canada and moving production to Mexico.

November

More than **100 countries** ratify the Framework Convention on Tobacco Control.

Nova Scotia passes the *Smoke-free Places Act*.

PSC files complaint with Alberta College of Pharmacists regarding tobacco sales in pharmacies.

Physicians for a Smoke-Free Canada
1226A Wellington Street, Ottawa, Ontario,
K1Y 3A1.
1-800-540-5418