

Smoking Women: A New Concern for Women's Health

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The Framework Convention for Tobacco Controll, in its Article 4 – Guiding Principles, says that: "it is necessary strong political commitment to establish and support at the national, regional and international levels, comprehensive multisectoral measures and coordinated response, taking into consideration: the need to take measures in preparation of tobacco control strategies, which take into account specific aspects of Gender."

As a member of this Convention, Brazil emphasizes that is necessary a different perspective to the smoking women and its complexity. In 1989, the first research that present information about the rate of smokers in Brazil noted that there were about 30 million smokers, between people of 15 years old or more, that represent 33% of the total population (40.3% are men and 26.2% are women). In 2008, the National Sample Survey of Households (PNAD) included the Special Survey on Smoking / Petab that pointed out the prevalence of smoking in Brazilian population over 15 years old, corresponding to 17.2% (or 25 million) smokers, being 21.6% among men and 13.1% among women. It is observed that reduced prevalence by Gender, in the studies cited, presents higher among men than among women.

Important indicator notes the reduction in smoking prevalence among men, which is the decrease in the mortality rate for lung cancer. Concurrently, there is increased mortality rate among women which makes fundamental the discussion about the vulnerability related to gender inequalities and that greatly influences this picture.

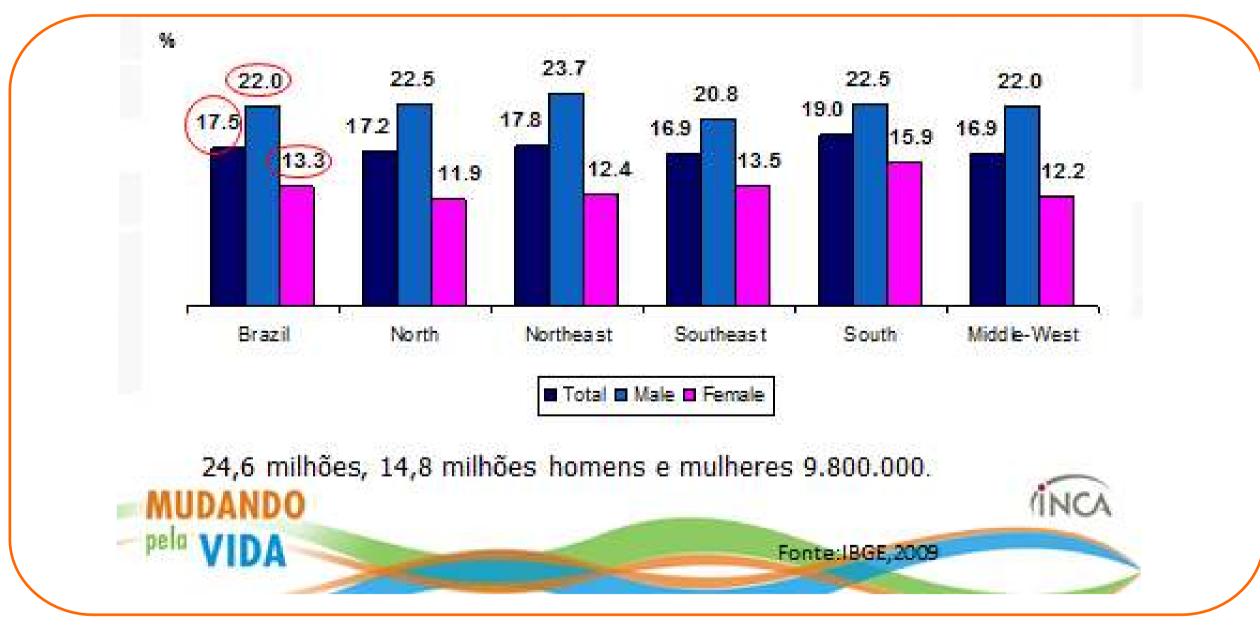


Figure 1 - Tobbaco smoker by gender and regions. PETAB, 2008.

The female smoking brings a new concern for public health in Brazil. Epidemiological data of female smoking from the perspective of sociological reading identifies three trends - the impoverishment, the younger players and feminização.³

Regarding the economic determinants, there is an evidence of strong correlation and prevalence of smoking among people with low incomes and less access to formal education. The highest percentage of smokers in Brazil are the less educated (25.7% among those without education or with less than one year of study) and lower income (19.9% among those without income or with less than a quarter of minimum wage).

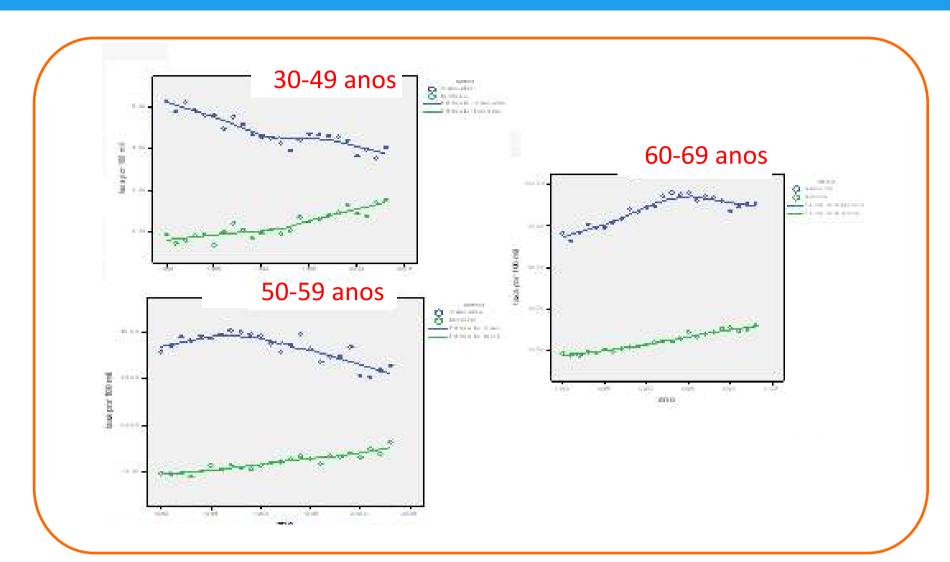


Figure 2 – Specific mortality rate by trachea, bronchi and lung cancer and by gender and age-group.

Tobacco use exacerbates this situation, increasing the risks, for example, associations between cardio and cerebrovascular diseases and hormonal contraception, and the traditional diseases, those related to pregnancy and childbirth. Added to these issues, the less access the popular classes to education, information and health care, which overlaps with gender issues, reinforcing the persistence of problems that profoundly affect women's health, such as mortality abortion, maternal mortality, the epidemic of HIV/AIDS, among others.

Studies in Brazil noted several reasons were mentioned in the initiation of smoking and the strengthening and maintenance of cigarette use, such as economic conditions, the stress caused by the double workday, the inequality of job opportunities and wages, the domestic violence or even for aesthetic beauty standards imposed by force in society today.^{3,4} There are other issues such as the determinants of health / disease, such as the fact that, nowadays, women are more susceptible to mood disorders such as depression and anxiety, or feelings of sadness and loneliness, and tobacco, often used as self-relief medication issues that should be addressed in other ways.

As a challenge to tackle smoking among women specifically, in 2013, INCA /MS launched the campaign "I really like is to live" with posters flyers and documentary oriented to female audience.



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