Globalisation and Health Laws: In the Light of Over Rising Smoking at Public Places

Ms. Madhvi Chopra[1]

Abstract

The Globalisation has many implications for health, presenting both risks and opportunities. The Challenge is to maximize the benefits and minimize the harm of globalization, keeping the questions of human rights and equality firmly in view. On the one hand states are forced to co-operate to solve their problems; this applies to health, peace, the environment and knowledge. On the other hand there is a trend towards subsidiary or the principle of devolving power of decision-making to the lowest possible levels. Many areas of public policy that were considered to be national now spill across borders and are global in reach and impact. Foreign policy makers must therefore broaden their horizons when devising policies aimed at national interests.

---

[1] Assistant Professor at Lingayas Vidyapeeth.

Introduction

No doubt we have made tremendous progress in the field of medical science but very little attention has been paid to impact of globalisation on health, resulting in many health problems. Various laws have been made by Indian Government to protect the right to health of people. This right includes improvement of all aspect of environment; working conditions and industrial hygiene; prevention and control of occupational, epidemic and other diseases. Some of them are as follows:-The Medical Termination of Pregnancy Act, The Pharmacy Act 1948, The Factory Act 1948, The Maternity Benefit Act, 1965, The Pre-natal Diagnostic Techniques Act. , The Prevention of Food Adulteration Act, 1954, The Consumer Protection Act, 1986, The Environment Protection Act, 1986, The Water Pollution (Prevention and Control) Act, 1972, The Air Pollution (Prevention and Control) Act, 1974, The Transplantation of Human Organs Act, The Mental Health Act, 1987, The Drug and Cosmetics Act, 1940, The Narcotic Drugs and Psychotropic Substances Act., The Insecticides Act.

Government of India is now debating whether to increase the dimensions of the frightening picture on cigarette packets. Limiting our attention to enlarging them and thereby their potential to scare may not be enough. Experience and the latest figures tell us that despite horrific images a great deal of tobacco still goes up in smoke. The real fight against tobacco lies elsewhere. According to the most recent edition of the Tobacco Atlas, smoking rates for men in India have shown a marginal decline, while the number of women smokers has registered as increase. When it comes to mapping the incidence of cancers of the mouth, head and neck.

Due to globalisation, the restructuring of the health sector is needed. It has led to the college of health care. The main criticism of globalization is that gap between rich and poor is increasing.

Globalisation

The Globalisation has many implications for health, presenting both risks and opportunities. The challenge is to maximize the benefits and minimize the harm of globalization, keeping the questions of human rights and equity firmly in view. On the one hand states are forced to co-operate to solve their problems: this applies to health, peace, the environment and knowledge. On the other hand there is a trend towards subsidiary or the principle of developing power of decision- making to the lowest possible levels. Many areas of public

policy that were considered to be national now spill across borders and are global their horizons when devising policies aimed at national interest.

Has the globalisation in any manner stood in the way of making health laws? If so, does it require any change? How current legal efforts for dealing with new and existing global challenge? Is globalisation limiting the governments' resources and policy options to confront health problems? Will globalisation ruin the governments' ability to prevent and control diseases? What are medicines? How is globalisation changing the relationship between property and health laws issues? Should we worry about democracy and governance in a globalized world? How appropriate current legal efforts are for dealing with new and existing global challenges?

Answer these questions; it is necessary to understand the dimension of globalisation. According to the Commission on Macroeconomics and Health (CMH)- There are at least three general notions of globalisation. First, globalisation refers to the multiplication and intensification of economic, political, social, and cultural linkages among people, organizations and countries at the world level. A second dimension is the tendency towards universal application of economics, institutional, legal, political and cultural practices. The increase in the number and coverage of environmental treaties, and even the controversial possibility of cultural homogenization in the entertainment, food, and health habits. A third meaning of globalisation is the emergence of significant spillovers to the rest of the world coming from the behaviour of individual and societies. Examples include environmental issues such as cross-border pollution and global warming, financial crises and contagion, the global spread of HIV/AIDS and other diseases, and international crime. These three notions are termed, in this paper, as "interactions", "homogenization", and "spillovers". They cobine in different degrees the main ideas that merge into the common notion of globalisation as deeper world integration, but it is useful to distinguish.

There are four dimension of globalisation: (a) National state system, (b) World capitalist economy, (c) World military order and, (d) International division of labour. All the four interact with each other –and influence the globalisation process.

The free global market economy gave new life to health services. On the whole this system has worked well. Unfortunately, large scale blemishing has threatened to undermine this system. Globalisation has its own merits for developing nation's i.e.

1. Free flow of trade and commerce.
2. Easy and cheap availability of medicine, healthy business competition.

3. The most rational and efficient allocation of resources can take place without government interference.

4. Rapid economic growth.

5. Free flow of goods and capital across national borders.

6. Single integrated market leads to growth, efficiency and healthy competition in health sectors.

7. Development and transfer of new technology.

8. Provide better health services.

Smoking at Public Places

Smoking is rising among women because cigarettes are being marketed as signs of success. Government of India is now debating whether to increase the dimensions of the frightening picture on cigarette packets. Limiting our attention to enlarging them and thereby their potential to scare may not be enough. Experience and the latest figures tell us that despite horrific images a great deal of tobacco still goes up in smoke. The real fight against tobacco lies elsewhere.

According to the most recent edition of the Tobacco Atlas, smoking rates for men in India have shown a marginal decline, while the number of women smokers has registered as increase. When it comes to mapping the incidence of cancers of the mouth, head and neck.

Talk to those associated with the cigarette industry and they will tell you that sales are up significantly in developing world: India, China and Russia are major markets. As incomes rise in India, men are switching from smoking bidis to cigarettes to mark their entry to a more affluent lifestyles. Similarly, young women are being lured to believe that smoking a cigarette signal their acceptance on equal terms at the work place.

Cigarette brands like Sobranie are laughing all the way to the bank as they offer young women with disposable income a style statement: Cigarettes in a variety of colours to match their outfits. This illustrates the point that smoking and tobacco use have less to do with logic but more to do with how we seek to define our roles and how we think society will perceive us.

If one studies countries such as the US and Canada, where smoking rates have fallen perceptibly in last few decades, there is no disputing the fact that people have been pressured to give up smoking by using a number of methods. Grisly looking cigarette packs are less effective than audio visual aids that change the smoker's image from that of a romantic and admired figure to that of a loser and villain.

The targeted audience, in such instances, includes three year olds who are read nursery tales in which the friendly dragon has given way to one who smokes and pollutes the atmosphere, threatening to choke the life out of anyone it meets. This change in role and image is reinforced outside the classroom is everyday life through legislation prohibiting smoking in public places as well as health conscious individuals who ask smokers quite unabashedly not to smoke in their presence.

No one feels awkward or guilty about doing this anymore as not only do they have the backing of the law and medical knowledge but, more importantly, widespread social sanction. Those who look silly instead are the smokers as they skulk about puffing on their sticks in a detestable haze of smoke. They have been banished physically to the outdoors and metaphorically to the sidelines of social discourse and the public imagination.

The strutting hero who rides about with a cigarette dangling from his lip now looks both ludicrous and out of place. So successful has the war of perceptions been that a recent study undertaken in the US revealed that smokers diagnosed with lung cancer get little sympathy from family members or even from their caretakers. This is the lesson that we need to learn in India.

It is all very well to make warning labels larger and pictures more graphic on cigarette and tobacco packers, but this is unlikely to lead a meaningful change in behaviour on its own. Ghastly pictures of the damage caused by tobacco have been shown over the years to a variety of age groups with little visible impact on the ground. What is needed instead is a subtle and imaginative campaign that seeks to engage with individuals and change social perceptions of tobacco users and non users from childhood onwards.

This should be reinforced at all levels of society and in all settings with enforceable legislation. For the teenager the tobacco user should no longer be 'cool'-the convivial man or liberated woman who everyone wants to befriend. The preferred role model should instead be the non-user whose unstained teeth, clean breath, unbound energy and superior performance act like a magnet for his or her peers.

When it comes down to it, a majority of us want to play the role of the good guy or gal and avoid social opprobrium. Let us build on this need for approval and adopt strategies that will isolate the tobacco user and make him look both foolish and on the wrong side. Not a person to be hated but rather a pitiable creature who needs our support and encouragement to shake off an unfortunate addiction.

It is far from clear if relying on gory images alone will accomplish this task. The viewer is more likely to switch off mentally. Instead, the effort should be to get tobacco users to reflect

on how their choice of habit is negatively affecting their own self-image and how they are turning off other people with their second hand smoke.

The game changes when you see yourself as the bad guy in the eyes of other people, even if they don't express it in words.

Adverse Impact of Globalisation on Health

Increasing infant and child deaths, malnutrition, cancer epidemic, emerging diseases causes of ill health (because of socio-economic condition), threat to life support system, debt-induced disasters, diseases out of control, global warming spreads diseases are result of globalisation.

Some more adverse Impact of Globalisation on Health are:

1. Increase in cost of medicine
2. Individual interests are given more preference than social interest.
3. Right to wholesome environment gets infringed as environmental pollution increase.
4. Consumerism undermines the human values.
5. Constitutional goal to achieve social justice has been hampered.
6. Increase of more channel of interaction.
7. Increase gap between rich and poor.
8. Conflict of individual and public interest.
9. National health laws are insufficient to control the problems occurring due to more channels of interactions outside the nation.
10. The opening of economies, increasing flows across borders, and
11. Increasing interdependence between people and places.

Conclusion

Harmonious interaction between Globalisation and health may help revitalize the heath areas and offer new avenues for developing countries as well as advance human well-being in Globalised world.