

## Contraband cigarettes becoming a national norm

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No question, I was slightly nervous. After all, I was about to commit a criminal act. “Got any cheap smokes?” I asked a scruffy guy sitting in a grungy coffee shop on Toronto’s Queen Street. I approached him after watching him brazenly counting a large wad of cash in a place that seemed filled with lost and desperate souls.

“How much do you want,” he asked, nonchalantly.

“One pack.”

“Three bucks,” he said, a bit more than a third of what a pack of 20 cigarettes would have cost me in a store. He fished the untaxed contraband out of an inside pocket in his dirty raincoat.

The entire brief transaction was conducted in plain view of the coffee shop staff and about 20 customers. Neither the buyer nor I made any effort to camouflage what we were doing.

Called DK’s, the cellophane-wrapped red package had “Manufactured by King Enterprises, LLC Akwesasne Mohawk Territory” embossed on one side and a health warning from the US Surgeon General on the other.

King Enterprises, located on the US side of the Akwesasne Reserve (which straddles Ontario, Quebec and New York state), is licensed by the St. Regis Mohawk Tribal Council to sell cigarettes in the US domestic market only. Its license specifically states “exclusive of Canada.”

Although cheaper than a latte at Starbucks, my deal was no bargain compared with the one Cynthia Callard, the executive director of Physicians for a Smoke-Free Canada, obtained on a recent trip to the Tyendinaga Reserve, near Belleville, Ont. “We bought 200 cigarettes [the equivalent of 10 small packages], in a plastic baggie, for \$8, as opposed to about \$80 in a store.”

It’s clearly become extremely easy to



Plastic baggies of 200 cigarettes, often without health warnings, can be purchased in most major cities for as little as \$8-\$10.

buy contraband tobacco on the streets of Canada’s major cities. The coffee shop where I shopped was just 4 blocks from the Eaton Centre, in an area known for drugs and prostitution. I was directed to the dealer by way of a simple inquiry on the street.

There’s also no doubt it’s become a nation-wide phenomenon. RCMP customs and excise unit Sergeant Jim Power says contraband tobacco sales have surged in Newfoundland and Labrador. In November 2005, an extensive police operation dismantled a sizable cigarette contraband ring operating mainly in Quebec and Western Canada. Large quantities of tobacco and manufacturing equipment were seized during 80 raids that took place in Vancouver, Calgary, Hamilton, Sherbrooke, Trois-Rivières and Montréal. A 2006 study by Imperial Tobacco — Tobacco Product Illicit Trade Phenomena — found that approximately 1 in 4 cigarettes smoked in Ontario and Quebec were illegal.

In late April (at press deadline), a coalition of 70 organizations launched a campaign to convince various levels of government to implement a crack-down on contraband tobacco, including stiff measures designed to curb the production and sale of cheap cigarettes on native reserves (see page 1569).

Inexpensive cigarettes can be readily obtained by all and sundry on First Nations’ territory, although, lawfully, only residents of the reserve and status Indians are entitled to purchase them. Occasionally, cigarettes available on reserves are professionally packaged and contain standard health warnings. But usually they come in clear plastic bags.

“Since 2001, we have seen a 1700% increase in the number of tobacco products the RCMP has seized,” says Superintendent Joe Oliver, director of the RCMP’s customs and excise program, who’s been investigating smuggling since the early 90s. “In 2001, we seized around 29 000 cartons. Last year, we seized 502 000.”

Although law enforcement agencies are primarily concerned about tobacco smuggling from a criminal perspective, particularly the involvement of organized crime, they’re also concerned about the potential health impacts from access to inexpensive cigarettes, says Power.

Yet, whether contraband cigarettes might be more dangerous, because of the potential inclusion of unknown substances (Box 1), is almost a non sequitur to the experts. Smoking any kind of cigarettes, contraband or otherwise, is hazardous, Callard says.

Nonsmokers Rights Association Director of Policy Francis Thompson con-

curs. “There can be about 4000 ingredients in cigarettes. There is a requirement that you report what they are if you’re operating legally, but the list of ingredients is only semi-public. There’s no evidence that the contraband product is any more dangerous.”

Both argue a greater concern rests with the potential effect that cheap and easy-to-obtain cigarettes will have on smoking rates, especially among youths and the First Nations population (Fig. 1).

“I think [contraband cigarettes] do pose an additional health risk because they’re cheaper,” says Callard. “The more you smoke, the more smoke you inhale into your lungs. Also, the cheaper cigarettes are, the less likely you are to stop smoking.”

Illicit cigarettes are also more easily obtained by underage smokers. Last year, Toronto inspectors laid 264 charges against retail stores for selling to minors, more than 4 times the number in 2003. About a third of those charges involved illegal cigarettes, says Rob Colvin, manager of healthy environments with Toronto Public Health.

Politics invariably enters the contraband tobacco debate when attention shifts to the involvement of some First Nations communities. Oliver says the “vast majority of product seized across Canada” came from the US side of the Akwesasne Reserve. The Imperial Tobacco study, meanwhile, estimated that 95% of Canada’s illicit tobacco trade

originates on reserves, while Thompson notes that Grand River Enterprises, a legal enterprise located on the Six Nations Reserve near Brantford, Ont., is now Canada’s third largest tobacco company. Annual sales at the reserve have been estimated in the hundreds of millions of dollars. Six Nations declined comment.

Smoking rates among Aboriginal peoples are “more than double the rate for the rest of Canada,” according to a 2006 report by the Assembly of First Nations (AFN). “First Nations girls between 15-17 years old have a smoking rate of 61% — 4 times the national smoking rate of girls in the same age range. First Nations boys between 15-17 years old have a smoking rate of 47%, compared with the national rate of 13% for boys in the same age range. Perhaps more disturbing, almost 60% of pregnant First Nations women smoke.

Reducing smoking rates within the First Nations communities is no simple task, particularly in light of larger social problems like poverty, alcohol abuse and staggering unemployment rates, says Dr. Valerie Gideon, senior director of the AFN’s Health and Social Directorate. She also cautions anti-smoking advocates from jumping to conclusions about the potential correlation between high smoking rates and the sporadic absence of health warning labels on native-manufactured packages. “The evidence is still unconvincing that actually links warning levels with reduction of smoking. And within our populations,

**Box 1: Top 6 toxins in tobacco products, as identified by Health Canada\***

- Tar†
- Nicotine
- Carbon monoxide
- Formaldehyde
- Hydrogen cyanide
- Benzene

\*An estimated 4000 chemical compounds have been identified in tobacco smoke, produced largely through the burning of additives such as moisturizers and flavourings. For a list of tobacco additives permitted in the United Kingdom, go to [www.ash.org.uk/html/regulation/html/ukadditives.html](http://www.ash.org.uk/html/regulation/html/ukadditives.html).

†Includes polyaromatic hydrocarbons, aromatic amines and inorganic compounds.

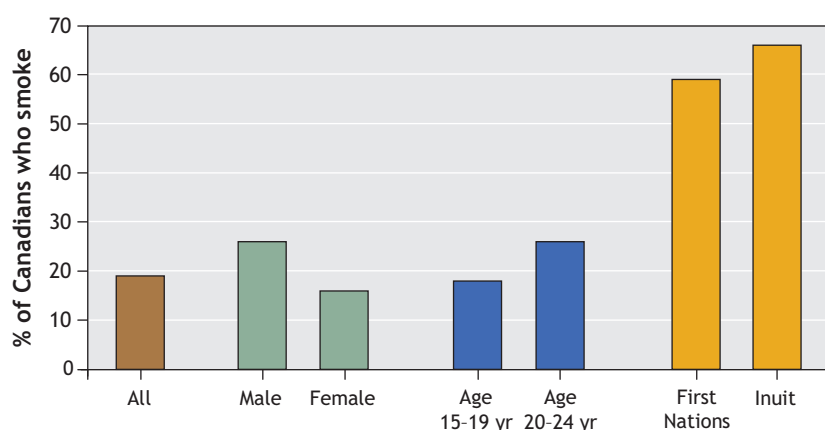
there are language issues, literacy issues and other factors to take into account.”

Among those factors is the role of tobacco within the First Nations culture, Gordon says. “This is a dimension to the issue that is not part of mainstream Canada and needs to be understood. We can’t just come out with a message that tobacco is bad for you because we have elders who use it in ceremonies. We offer it to elders. So you have to be far more culturally sensitive and appropriate in the messaging.”

With Health Canada having projected a reduction in smoking rates — to about 20% of the population in 2005 from 25% in 2001 — the contraband issue isn’t always seen as a major concern and political considerations become a factor, Callard says. “People don’t want to touch native issues. We erected a smoke shack right outside the PM’s office and normally a stunt like that would get a lot of [media] attention, but no, nothing.”

There appears to be some international movement, however. Oliver notes the world’s first health treaty, called the World Health Organization Framework Convention on Tobacco Control, “has an article dedicated to eliminating the illicit trade of tobacco, and about 145 countries have ratified it so far.”

But more must be done to address health concerns, Oliver adds. “The people who supply the product are only in it because of greed. They don’t care that they’re making cigarettes more easily obtainable by young people, and that’s just not right.” — Paul McLaughlin, Toronto



**Fig. 1:** Prevalence of smoking in Canada by selected demographic characteristics. Sources: Health Canada, 2005 Canadian Tobacco Use Monitoring Survey, 2002 First Nations Regional Health Survey, 2001 Aboriginal People’s Survey.

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