

Questions around the candidacy of Dr Tedros Adhanom Ghebreyesus for WHO DG

With the final vote for the next WHO Director-General (DG) close upon us, I wish to raise concerns regarding the candidature of Dr Tedros Adhanom Ghebreyesus.

In 2016, the Ethiopian Government sold 40% of the shares in its tobacco monopoly, National Tobacco Enterprise (NTE), to Japan Tobacco International (JTI) for US\$510 million.¹ The deal was attended by two ministers from the Ethiopian Government's cabinet and occurred at a time when over 10 million Ethiopians were at risk for famine because of drought. The deal will likely lead to the expansion of tobacco farms, increased cigarette production, and an increase in the number of smokers in Ethiopia.

This tobacco deal with JTI seems to have contravened Article 5.3 of the WHO Framework on Tobacco Control (FCTC), a treaty that Ethiopia's Government ratified in 2014.² At the time of the deal, Tedros was Ethiopia's Foreign Minister. Because he was Health Minister from 2005 to 2012, and aims to be DG of WHO, I believe that he should have spoken out publicly against the tobacco deal.

In 2013, *The Lancet* reported that the Ethiopian Government authorised British American Tobacco (BAT) to post hundreds of posters advertising Rothmans cigarettes in Ethiopia's capital city, Addis Ababa, an action that seems to have been in breach of Ethiopia's own laws on tobacco advertising.³ At that time, Tedros, as Foreign Minister, did not appear to speak out publicly against this advertising. Indeed, not long after he became Foreign Minister, Tedros attended a meeting in London with the UK's then Secretary of State for Foreign and Commonwealth Affairs, William Hague, encouraging BAT,

among other UK businesses, to invest in Ethiopia.⁴

Dr Margaret Chan, the current WHO DG, has spoken aggressively against tobacco deals between governments and tobacco companies.⁵ This is to be expected of the WHO DG, given that tobacco continues to be a major cause of morbidity and mortality, and that the WHO Africa and Eastern Mediterranean regions, particularly, are at risk for increasing smoking prevalence in the coming decade.⁶

Smoking increases the risk of a person developing latent tuberculosis, active tuberculosis, and recurrent tuberculosis, and also increases the death rate from tuberculosis. It has been estimated that if smoking prevalence was reduced by 1% per year down to zero by 2050, then 27 million cases of smoking-related tuberculosis deaths would be avoided.⁷ By making deals with the tobacco industry that may well increase smoking prevalence in Ethiopia, the Ethiopian Government is, therefore, jeopardising its tuberculosis-control programmes.

The vote for the next WHO DG should not be a vote for Ethiopia, or for Africa, but it should be a vote for the most appropriate candidate for WHO DG. Given the aforesaid issues, I believe that Tedros is not the right candidate that WHO needs to take it forward.

I am the Director of the non-governmental organisation Africa Tobacco-Free Initiative. I declare no other competing interests.

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