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Report from the WHO FCTC Seventh Session of the Conference of Parties

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ABSTRACT

The 7th Session of the Conference of Parties (COP) to the WHO Framework Convention on Tobacco Control (FCTC), held in India in November 2016, revealed much about the state of global tobacco control. Unlike earlier COPs that focused largely on developing guidelines for key provisions such as smoke-free policies (Article 8) or tobacco taxation (Article 6), this meeting focused more on treaty implementation and conceptualising how to fund these efforts. Below we present a short report from this meeting.

KEY WORDS: tobacco control, WHO Framework Convention on Tobacco Control, COP7.

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The 7th Session of the Conference of Parties (COP) to the WHO Framework Convention on Tobacco Control (FCTC), held in India in November 2016, revealed much about the state of global tobacco control. Unlike earlier COPs that focused largely on developing guidelines for key provisions such as smoke-free policies (Article 8) or tobacco taxation (Article 6), this meeting focused more on treaty implementation and conceptualising how to fund these efforts. It was a slow, challenging week as the Parties struggled to find common ground. While progress was not totally obvious, there were some highlights. To begin, tobacco industry interference was an integral part of most core discussions, emphasising that the Parties are aware of its strong influence. Underscoring the issue's importance to sceptics, some Parties – Guatemala, Macedonia, and Moldova, to name a few – revealed positions that hewed suspiciously closely to the tobacco industry's. The COP also indicated a willingness to engage the FCTC with other major international agreements and universal concepts.

The Parties also confirmed their commitment toward the target of reducing tobacco use prevalence by 30% by 2025, as outlined in the WHO Global Action Plan (adopted by the Parties at COP6), and expressed their desire to identify more concretely the steps that are needed to achieve this target. The Conference of Parties committed to collect information on national tobacco use

reduction targets and report on the progress toward these goals. Additionally, the Parties recognised that the FCTC contribution to the UN Sustainable Development Goals is not limited to health and touches issues such as gender equality, human rights, and economic growth – all of which were discussed in Delhi.

Where do we go from here to best reach our shared goal of ending the tragic burden of tobacco-related avoidable disease and premature death? First, for future COPs, delegations must prepare better. This preparation must include developing and circulating proposed decisions before the COP, permitting better use of COP time to address the many complexities. Second, high-income countries (HICs) need to remind themselves that many of the issues closest to them are not necessarily the same ones for low- and middle-income countries (LMICs). For example, although the COP's decision on Articles 17 and 18 improved upon the COP6 statement, tobacco-growing countries – mostly LMICs – want and need more, particularly to think more pragmatically about how to find viable economic alternatives for tobacco farmers. Similarly, the COP wasted precious hours arguing about how the Parties were going to disagree about Electronic Nicotine Delivery Systems, with key disagreements mostly dividing HICs' and LMICs' approaches. Very clearly, the Parties' different contexts compel them to take different regulatory approaches currently, which

NOTE FROM THE EDITORS**THE WHO FRAMEWORK CONVENTION ON TOBACCO CONTROL (FCTC)**

The FCTC is a global treaty aiming to protect future generations from the consequences of tobacco smoking by providing a set of rules on the production, sale, distribution, advertisement, and taxation of tobacco [1]. The ultimate goal of FCTC is a world free from tobacco-related diseases.

Work on the Convention began in the mid-1990s. The originators of the initiative were Professor Ruth Roemer and Dr Judith Mackay [2, 3]. At that time, the World Health Organization (WHO) Director-General, former Norwegian Prime Minister Dr Gro Harlem Brundtland, provided full political support for the multilateral treaty. A special role in the preparation of the FCTC was played by international and national non-governmental organizations (NGOs).

Polish participants, including parliamentarians such as Seweryn Jurgielanec, Andrzej Wojtyła, or Ewa Sikorska-Trela, as well as experts from Polish NGOs, played an active part in the formulation of the FCTC. In December 1998, Professor Witold Zatoński (Health Promotion Foundation, Poland) was invited by the WHO to participate in one of the first meetings of the newly formed WHO Tobacco Free Initiative in Vancouver, Canada. In February 2002, one of the key meetings in the development of the FCTC, the WHO European Ministerial Conference for a Tobacco-free Europe, was held in Warsaw, Poland [4]. It was the first WHO regional meeting which discussed the FCTC, and all the participating European governments fully supported the Convention. An important part of the meeting was a presentation describing the implementation of the Polish anti-tobacco law adopted by the Polish Parliament in 1995. The WHO described the legislation as an “example to the rest of the world” [5]. Finally, Poland also spearheaded the initiative to include in the Convention a call for action to strengthen smoking cessation efforts [6, 7]. A result of this is article 14, which requires from the signatories “support for reducing tobacco dependence and cessation, including counselling, psychological support, nicotine replacement, and education programs” [1].

The Convention was unanimously accepted on 21 May 2003 at the 56th World Health Assembly in Geneva, and came into force in 2005. Currently, it has been ratified by 180 countries, including Poland. The WHO headquarter in Geneva has established a Convention Secretariat, which supervises FCTC implementation. To achieve the FCTC objectives, Conferences of the Parties (COP) are being organized periodically in various regions of the world. The first COP took place in Geneva in February 2006. The latest, seventh COP, took place in India in November 2016.

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everyone knew was the only reasonable consensus. More attention to the issues most relevant to LMIC Parties will serve to strengthen the overall process. Finally, the Parties simply need to pay their contributions, which are not large. All governments – no matter the country’s income level – must conceptualise tobacco control as an investment with serious positive returns. With so many Parties’ desires, especially for the Convention Secretariat, countries that can must give more, beyond their assessed contributions. Parties including the United Kingdom and Panama are already doing this, but more need to engage.

DISCLOSURE

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AUTHORS’ CONTRIBUTIONS

JD participated in writing of the article, in its critical revision and final approval. MS prepared concept and design of the publication and participated in writing of the article, in its critical revision and final approval.