

# WHO FRAMEWORK CONVENTION ON TOBACCO CONTROL

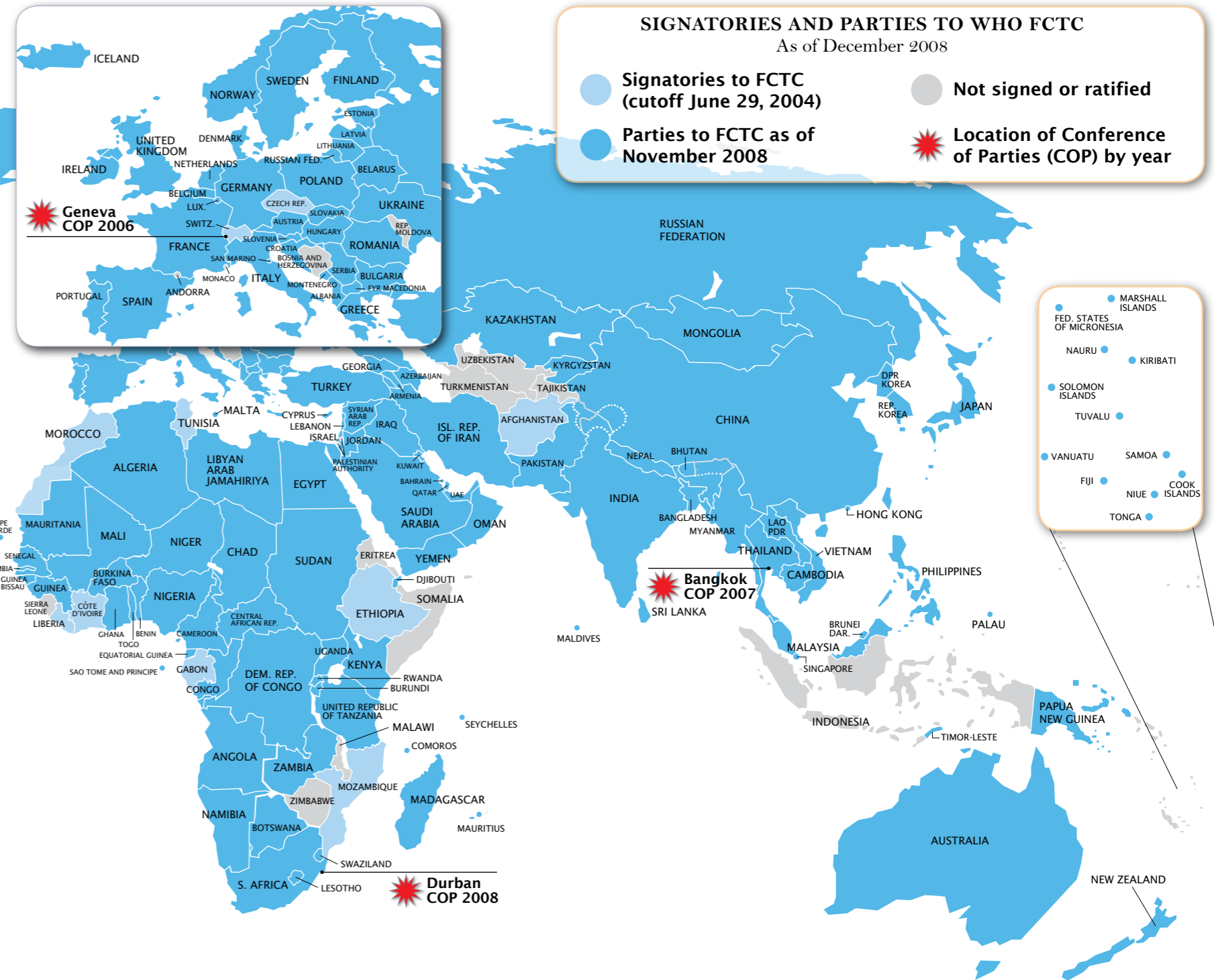
*Salus populi suprema lex esto.* (Let the welfare of the people be the supreme law.)  
—CICERO (106-43 BCE)

The FCTC came into effect on February 27, 2005, and to date 161 of 192 World Health Organization member states have become parties to the Convention, making it one of the most rapidly embraced international treaties of all time. The Conference of Parties' secretariat has been established and meets annually to develop protocols and guidelines for implementation.

The treaty helps legislators realize that the tide of tobacco control is global and inevitable, good for both the wealth and health of nations. Not surprisingly, the tobacco industry was against a strong, legally binding FCTC, and sought voluntary agreements and self-regulating market mechanisms, which are essentially ineffective.

The tobacco industry need not fear the FCTC, as between 2010 and 2025 the number of smokers worldwide is predicted to rise from 1.4 billion to 1.7 billion, due mainly to population increases, even as smoking prevalence rates decline. Health economists predict that the FCTC will not harm national economies, even of tobacco-growing nations, because the FCTC deals primarily with demand reduction strategies, except for the control of smuggling. The treaty has mobilized resources, rallied hundreds of non-governmental organizations (NGO), encouraged government action, led to the political maturation of health ministries, and raised tobacco control awareness in other government ministries and departments.

The first protocol will be on illicit trade, and guidelines have been adopted to protect public health policies from the interference of the tobacco industry (Article 5.3); to ensure that truth about tobacco use be properly reflected in packaging and labeling of tobacco products, using picture-health warnings (Article 11); and to ban advertising, promotion, and sponsorship of tobacco products nationally and across borders (Article 13).



## MAIN PROVISIONS OF THE WHO FCTC

### Regulation of:

- Contents, packaging, and labeling of tobacco products
- Sales to and by minors
- Illicit trade in tobacco products
- Smoking at work and public places

### Reduction in consumer demand by:

- Price and tax measures
- Comprehensive ban on tobacco advertising, promotion, and sponsorship
- Education, training, raising public awareness, and assistance with quitting

### Protection of the environment and health of tobacco workers:

- Support for economically viable alternative activities
- Research, surveillance, and exchange of information
- Support for legislative action to deal with liability

*"We need to move away from the adversarial approach of the WHO."*  
—Martin Broughton, CEO, BAT, 2003

## WHAT WILL THE TOBACCO INDUSTRY DO?

Propagate the myth that the FCTC will harm the economy

### Article 8 — Smoke-free areas:

- Argue for voluntary agreements
- Argue that smoke-free areas will harm the restaurant business
- Promote so-called accommodation policies
- Argue that smoke-free public places will lead to more smoking in the home

### Article 13 — Bans on promotion:

- Seek to portray advertising as a consumer choice
- Argue advertising has no influence on demand, only consumer preference
- Exaggerate economic impact on advertisers, media, etc.
- Frame argument around "freedom of speech"
- Promote voluntary restrictions
- Seek partial restrictions
- Employ sophisticated strategies to circumvent laws

## INITIAL TREATY PROTOCOLS AND GUIDELINES

Article	Topic	(under negotiation)
15	Illicit trade	1st Protocol
5.3	Protection of public health policies from tobacco industry interference	Guideline
8	Protection from exposure to tobacco smoke	Guideline
9	Regulation of the contents of tobacco products	Guideline
10	Regulation of tobacco product disclosures	Guideline
11	Packaging and labeling of tobacco products	Guideline
12	Education, communication, training, and public awareness	Guideline
13	Tobacco advertising, promotion, and sponsorship	Guideline
14	Demand reduction measures concerning tobacco dependence and cessation	Guideline
26	Financial resources and assistance to developing countries and countries with economies in transition	Under discussion