For some delegates to the FCTC COP, today is a day to get re-acquainted with old friends from past COP sessions. For others, the new delegates, it’s a day to figure out how this confusing business of multilateral negotiations works in practice.

In one sense, maybe we should all think of ourselves as new delegates – because this COP session should and probably will be different from past ones. No lengthy haggling over new sets of guidelines; likely no lengthy discussions about whether a particular article needs a new working group to start work on a new set of guidelines.

Instead, COP7 is faced with a number of important interlocking decisions about implementing the FCTC. But making the right decisions will require patience, flexibility and vision throughout the week. The building blocks for major progress are all there, in the COP7 agenda, but delegates may find them difficult to identify, particularly if individual agenda items are treated as separate, unrelated issues.

FCTC implementation is a task that will take time, but the faster it happens, the fewer lives will be lost and less human suffering will occur. The COP needs to come up with a plan to accelerate implementation of the FCTC.

The first element of a successful plan is to know where you’re going. COP6 already took a major decision in that respect, by adopting the “30 percent by 2025” target – a 30-percent relative reduction in tobacco use prevalence by 2025, relative to 2010. The COP6 decision also called on Parties to adopt their own national target by 2015. We understand many Parties have in fact done so, but as of yet the COP has little information on how these national efforts are going – few Parties even report their target in their official reports.

The second element of a successful plan is identifying gaps – starting with what measures Parties have actually implemented and, if they haven’t implemented them, what is standing in the way. Here Parties already make an important effort by filling in a lengthy questionnaire – the official FCTC reporting instrument – every two years. But until there is a system to follow up with individual Parties, these reports will not be as useful as they could be. Recommendations from the expert group on reporting arrangements – in particular, the establishment of an Implementation Review Committee – provide a great basis for moving forward on this.

The third element is to prioritise technical assistance needs, i.e. draw up a global shopping list for work to address gaps in capacity or expertise that a large numbers of Parties face. This ‘shopping list’ should be a living document – possibly updated at each future COP session, and of course should not be seen as being exhaustive (i.e. some Parties will have particular needs that are also important).

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The report of the Secretariat of the Framework Convention on Tobacco Control (FCTC), “Global Progress in Implementation of the FCTC,” (document FCTC/COP/7/6), notes the incredible advances we’ve made in implementing the life-saving measures of the treaty—often despite aggressive attempts by the tobacco industry to block, weaken, and delay them. And the long-awaited legal victories in Uruguay and Australia over Big Tobacco have been won in the sails of public health officials globally. However, the summary also notes one incredibly important conclusion: “the tobacco industry continues to be the most important barrier in implementation of the Convention.”

This stark reminder highlights the urgency of national-level implementation of FCTC Article 5.3, which states: “In setting and implementing their public health policies with respect to tobacco control, Parties shall act to protect these policies from commercial and other vested interests of the tobacco industry in accordance with national law.”

Article 5.3 is the most powerful tool at Parties’ disposal to neutralise the money, power, and influence of this deadly industry and its allies. Implementation of this powerful measure at the national level, which safeguards and facilitates implementation of all other articles of the treaty, must be prioritised by the Parties at COP7. This means reviewing lessons learned from both the progress and challenges contained in the Secretariat’s report, but also a renewed commitment to prioritising implementation of Article 5.3 and its guidelines at the national level, coupled with additional investment and resourcing.

To date, dozens of governments have begun to implement measures in line with Article 5.3 at the national level, and more are expected to follow suit. Yet it remains clear that more work needs to be done. For one, though many health ministries have implemented policies in line with Article 5.3, other agencies, such as trade and agriculture, often have not, opening the door to tobacco industry influence. In addition, Article 5.3 is more akin to a good governance measure than a public health measure per se. This can be a barrier for public health officials who don’t have the expertise to implement and enforce, for example, conflict of interest policies for government employees. It also requires coordination across agencies to ensure the article and guidelines are enforced beyond the ministry of health.

Several COP7 agenda items will address the tobacco industry. Civil society will be watching governments closely. John Stewart

Tobacco Industry and Front Groups Pump Up Their Propaganda for COP7

The tobacco industry is very angry that the Conference of the Parties (COP) is using Article 5.3 of the Framework Convention on Tobacco Control (FCTC) to protect the policy-making process from industry interference. The industry has hijacked the “public space” of the COP. FCTC Parties have responded in recent sessions by not allowing participation from the “public”, which is dominated by industry representatives. For COP7, FCA is recommending Parties adopt pre-screening processes for the public and for the media. (Presently, media is in the category public).

The industry has gone on the offensive: conducting an international campaign to attack and discredit the COP and the World Health Organization (WHO) about lack of transparency, industry representatives have written angry letters to both the COP and WHO and published many statements in the media criticising the COP’s lack of transparency, which strikes a chord with broader society.

The industry throws a tantrum whenever it does not get its way, and has no qualms in criticising the 180 governments that are FCTC Parties. In one statement, a representative of Japan Tobacco International (JTI) said the industry wants to see change, (read, “we want to influence the COP”), and that it needs to “keep raising our voice about these censorship practices”.

Yet the industry has no credibility to criticise the COP if tobacco control, it has recruited front groups, think tanks and sympathetic individuals to sing from its song sheet. The Institute of Economic Affairs (IEA) is one such close ally. It advises the industry to talk more about “due process and fairness and less about the specifics of tobacco policy in drawing attention to this issue.”

According to the IEA, “With regard to [Article] 5.3 and COP, the industry needs to find allies amongst groups who take an interest in transparency, openness and constitutional structures. Such groups needn’t be sympathetic to the regulatory agenda of the industry; indeed they may even be antagonistic to the industry and tobacco products in general. That needn’t matter—the issue here is about the manner in which policy is developed and created, not the exact content of the policy.”

Another industry funded group, the International Tax and Investment Centre (ITIC), has stepped up its efforts to protect industry interests ever since the FCTC Secretariat issued a Note Verbale in 2014 about its activities. Earlier this year, an ITIC consultant, Gary Johns, wrote to several civil society groups involved in tobacco control taking issue with the critiques they had done on the ITIC’s skewed research. In a 3-page letter he sent to the Southeast Asia Tobacco Control Alliance (SEATCA) earlier this year Johns wrote, “vested interests are not the problem—debate behind closed doors is”. The letter was riddled with false accusations against SEATCA, mischaracterisations of law and disingenuous comments about the WHO, the Framework Convention Secretariat and FCTC Parties. SEATCA published an open letter in response.

In September, Johns, a former Australian Labour Minister, released a publication attacking WHO for not conducting its business in “transparent fashion and in public view.” The tobacco industry published his report in the Tobacco Reporter. Another industry front group, the International Tobacco Growers Association (ITGA), which routinely rounds up its members to rabble rouse at COP sessions, has stepped up its misinformation campaign. ITGA’s Indian member Federation of All India Indian member Federation of All India
Continued from page 1

WELCOME TO A NEW KIND OF COP SESSION

THE PATH TO REACHING THE 30% TARGET

The fourth element is to put this altogether with a clear mandate for the Convention Secretariat, and for the COP itself, to mobilise domestic and international resources for FCTC implementation. This is not just about funding COP or Secretariat business – though that too is important. It is mostly about ensuring that individual Parties have the resources and the technical capacity they need to implement the FCTC at national level. Because the national level is, of course, where implementation primarily occurs. All four elements can and should be put in place at COP7. Recommendations of the sustainable measures working group along with those from the expert group on reporting and proposals in the Secretariat’s report on funding efforts provide a good basis for this work.

Unlike at past COP sessions, the topic of resources needs to be properly addressed. There are at least three reasons why a resource mobilisation push by the Secretariat and the COP is more likely to be successful now than at any time in the past.

First, with the adoption of Article 6 guidelines at COP6, the COP now has an (almost) complete package of policy guidance on demand-side measures to reduce tobacco use.

Second, the Sustainable Development Goals, adopted last year, enshrine the FCTC as a “means of implementation target” for the overall global health goal. Indeed, the FCTC is one of the very few treaties mentioned by name in the SDGs. Official development agencies can no longer claim that tobacco control is somehow unrelated to development.

Third, tobacco taxation has also been recognised, in the Financing for Development process, as a key source of revenue for development. Cynics might see this as a backhanded way for rich countries to refuse development assistance for FCTC implementation. A more optimistic way of looking at this is that development assistance has an important role to play, particularly for low-income countries, as they build their tobacco control capacity.

That includes, of course, the capacity to tax tobacco at high rates. In the longer term, tobacco taxation should allow most countries to fund tobacco control efforts domestically – though there will likely always be a role for international co-operation and pooling of expertise.

COP7 has a chance to make a real difference. Not on paper, but it terms of lives saved. Capitalising on the promise of this COP session will require Parties to approach a number of agenda items holistically. It is important not to get bogged down in vocabulary issues (e.g. needs assessment vs. impact assessment vs. implementation review vs. mechanisms of assistance vs. implementation action plan). It’s also important not to get bogged down in discussing issues where consensus appears unlikely: COP7 timing is precious and needs to be spent wisely.

With that, best wishes for a four times more effective, at about 20 percent after a year, but even brief advice has a worthwhile effect.

One key reason why the majority of ex-smokers stopped without help is because they did not have access to help.

According to WHO, just 15 percent of the world’s population have access to appropriate cessation support.

Given a genuine need for cessation support, the fact that globally most tobacco users don’t have access to it, and that providing it implies at least some basic infrastructure, can anything be done quickly to improve the situation, something that low and middle income countries can afford?

- **CESSION SUPPORT** (ARTICLE 14) IS NOT COSTLY OR COMPLICATED – AND IT IS EFFECTIVE!

with appropriate tobacco cessation support and make Article 14 implementation both feasible and a significant contributor to global health.

**5**
**QUE PEUVENT FAIRE LES GOUVERNEMENTS POUR ATTEINDRE LES OBJECTIFS DE DÉVELOPPEMENT DURABLE ?**

Le renforcement des mesures pour lutter contre le tabagisme est une approche efficace qui peut rapporter aux gouvernements des revenus financiers importants.

Le monde a adopté en 2015, dans le cadre des Nations Unies, les objectifs de développement durable (ODD) qui ont pour but d’améliorer la planète et de ses habitants. Les ODD comptent parmi leurs objectifs à l’attention des gouvernements, d’une part de réduire « d’ici à 2030, d’un tiers ou plus de taux de mortalité due à des maladies non transmissibles» par la prévention et, d’autre part de renforcer, dans tous les pays, l’application de la Convention-cadre de l’Organisation mondiale de la Santé pour la lutte antitabac (CCLAT).

Le maladies non transmissibles (MNT) incluent les maladies suivantes : le diabète, les maladies cardio-vasculaires, les cancers et les maladies pulmonaires chroniques, qui cumulées, tuent plus de 38 millions de personnes chaque année, dont 28 millions de ces décès se produisent dans les pays à faible revenu. Que près des trois quarts des décès mondiaux liés aux MNT aient lieu dans les pays à revenu faible amène à considérer les MNT comme une cause majeure de pauvreté et un obstacle au développement. Dans les 10 prochaines années, l’impact des MNT augmentera, selon de cent pays la moitié du nombre de décès de mortalité dans le monde, 27 pour cent en Afrique.

Un facteur de risque commun aux MNT est le tabac qui est une cause prépondérante de la mortalité dans le monde, 27% des décès mondiaux liés aux MNT qui cumulées, tuent plus de 38 millions de personnes chaque année, dont 28 millions de ces décès se produisent dans les pays à faible revenu. Que près des trois quarts des décès mondiaux liés aux MNT aient lieu dans les pays à revenu faible amène à considérer les MNT comme une cause majeure de pauvreté et un obstacle au développement. Dans les 10 prochaines années, l’impact des MNT augmentera, selon de cent pays la moitié du nombre de décès de mortalité dans le monde, 27 pour cent en Afrique.

Grace aux droits d’accise sur le tabac, les gouvernements collectent déjà près de 622 milliards de dollars américains par an. Mais les gouvernements du monde devraient augmenter les taxes sur le tabac afin de générer plus de revenus. Selon l’OMS, une augmentation des taxes d’un dollar, par paquet de cigarettes, dans tous les pays, conduirait en moyenne à une augmentation de 42% du prix des cigarettes (63% dans les pays à faible revenu et 25% dans les pays à revenu élué) et réduirait de 66 millions le nombre de fumeurs, soit 15 millions de décès évités.

De plus, ces taxes pourraient générer 190 milliards de dollars supplémentaires en revenus. Ce revenu additionnel pourrait aider les pays à financer des projets destinés à atteindre les objectifs du programme de développement durable. Les gouvernements du monde entier ont recensé que la taxation du tabac peut être une source de revenus importante lors de la conférence sur le financement du développement qui a eu lieu à Addis-Abeba en Juillet 2015.

La mise en œuvre de la CCLAT et l’augmentation des taxes sur le tabac aideront les pays à atteindre les objectifs de santé ainsi que des objectifs de Développement durable, tels que l’objectif 1 : «Éliminer la pauvreté sous toutes ses formes et partout dans le monde»; l’objectif 2 : «Éliminer la faim, assurer la sécurité alimentaire, améliorer la nutrition et promouvoir l’agriculture durable»; l’objectif 8 : «Développer des économies équitables, solides et inclusives»; et l’objectif 13 : «Prendre d’urgence des mesures pour lutter contre les changements climatiques et leurs répercussions».

**UNE AUGMENTATION DES TAXES D’UN DOLLAR, PAR PAQUET DE CIGARETTES, DANS TOUS LES PAYS, CONDUIRAIT EN MOYENNE À UNE AUGMENTATION DE 42% DU PRIX DES CIGARETTES (63% DANS LES PAYS À FAIBLE REVENU ET 25% DANS LES PAYS À REVENU ÉLUVÉ) ET RÉDUIRAIT DE 66 MILLIONS LE NOMBRE DE FUMEURS, SOIT 15 MILLIONS DE DÉCÈS ÉVITÉS**

**CANCER ORGANISATIONS LAUNCH TOBACCO TAX INITIATIVE**

Cancer organisations have launched a new initiative to build a vigorous global coalition to support governments seeking to increase tobacco taxes.

The American Cancer Society’s Economic and Health Policy Research (EHPR) team published a report: the technical lead for the initiative — the tobacco tax. The report has developed a portfolio of easy-to-understand fact sheets and tools to support governments and civil society. The EHPR team’s main tool is a dynamic model that can predict the tax increase necessary for a country to reach the WHO target of a 30%-reduction in smoking prevalence by 2025 (2010 as the base year).

The team has already used publicly available data to model tobacco tax increases for 72 countries. For example, for Albania to reach the target, cigarette prices would need to be increased to 542.61 Albanian Lek per pack by 2025 (2010 as the base year).

The WHO target was adopted at the Sixth Conference of Parties of the Framework Convention on Tobacco Control (FCTC) in 2014. They will help countries reach the United Nations Sustainable Development Goal (SDG) of reducing premature mortality from non-communicable diseases (NCD) by one-third by 2030, but a report from WHO indicates that most countries aren’t on track to meet that target.

The cancer community has a vested interest in this issue. Around 20% of global cancer deaths are related to tobacco. As Harpal Kumar, Chief Executive Officer of Cancer Research UK said at the World Cancer Congress last week: “Global tobacco use remains, by far, the largest single preventable risk factor for cancer, and an area where cancer organizations could make a meaningful difference if we were able to help.”

According to Gary M. Reedy, Chief Executive Officer of the American Cancer Society (ACS): “The time is right for this campaign. There is an urgency for governments around the world to respond to the WHO’s call for a 30 percent relative reduction in adult smoking prevalence by 2025. The most plausible way for governments to reach this target is by raising tobacco taxes.”

Article 6 of the WHO FCTC requires parties to “take effective measures to increase tobacco excise taxes in order to reduce the affordability of tobacco products. This is one of the most effective tools to prevent initiation and promote cessation of tobacco use, with studies proving that it is particularly effective among the young and the poor. As detailed in the Addis Ababa Action Agenda last year, it is one of the most recommended means of generating millions of dollars annually in sustainable government revenue that can be reinvested in health and development priorities – including cancer screening, diagnosis and treatment. These revenues could easily fund the implementation of WHO FCTC’s provisions, too, and the strategy could deliver significant savings in future health care costs, thanks to a reduction in tobacco-related disease.”

In spite of these clear benefits, many countries have been slow to implement effective tax and price measures. Barriers to higher tobacco taxes include a lack of information in clear, non-technical language that can help potential policy makers understand the tax reform to effectively make their case — particularly in the face of misinformation promoted by the tobacco industry. Moreover, governments and their non-governmental allies sometimes lack the technical capacity to implement successful tobacco taxation program.

The cancer community’s tobacco tax initiative aims to increase understanding within the global health community – and within Ministries of Finance and Ministries of Health – of the power of tobacco taxation as an effective measure for reducing tobacco use, preventing NCDs, such as cancer, and raising sustainable revenues for national governments. Assistance is available to support stakeholders wishing to be part of the campaign, especially for those who have not worked in the field of tobacco taxation before.

The dynamic model can also be adjusted for country-specific needs to use data provided by in-country experts and to reflect other, perhaps more ambitious, scenarios for tobacco tax increases. The model also accounts for changes in the affordability of tobacco products, changing price elasticities, and any country’s tax structure.

Cancer organisations are ready to take action to raise the prominence of tobacco taxation as an essential intervention for cancer prevention, but ultimately it is only through a true partnership among motivated governments and non-governmental stakeholders – the people attending COP7 this week – that an effective tobacco tax strategy can be realised.

The EHPR team attending COP7 – Jeff Drope, Michal Stocklosa and Jacqui Drape – are available to discuss this initiative and provide advice on tobacco taxation. Fact sheets for 72 countries are available upon request and at the FCA booth. To arrange a discussion with an EHPR representative, please send an email to tobacotax@cancer.org.
CELEBRATING THE VISION OF YUL FRANCISCO DORADO

Yul Francisco Dorado passed away on 1 May 2016. The Latin America Director for Corporate Accountability International, he leaves an outsized legacy on public health and human rights that extends far beyond Latin America—and well beyond his lifespan. As governments gather at COP7, we are inspired by his years of commitment to rein in Big Tobacco. We are also determined to fulfill Yul’s vision of a world where decisions are made based on the good of people and communities everywhere, not on filling corporate coffers.

When Yul, a human rights lawyer, first learned about the WHO Framework Convention on Tobacco Control (FCTC) he knew immediately “it had great potential for human rights, far beyond tobacco,” said his son, Daniel Dorado. Yul understood that this international legally binding treaty would not only protect people from the tobacco industry, but also serve as a powerful tool to rein in corporate power and put it back in the hands of people and communities.

Before he died, Yul was working on FCTC Article 19 (on liability). He saw great potential in the ability to put the cost of the industry’s abuses—billions in healthcare costs, illegal activities and more—where it belongs: onto the corporations.

“He envisioned a day when we could take Big Tobacco to court all across Latin America,” said Daniel Dorado.

And we take up Yul’s vision as we head into the next meeting of the global tobacco treaty, prepared to advance this provision.

Patti Lynn
Executive Director, Corporate Accountability International

TOBACCO INDUSTRY AND FRONT GROUPS PUMP UP THEIR PROPAGANDA FOR COP7

Farmer Associations (FAIFA) has been applying pressure on the Indian government to allow its members to the COP using arguments of “principles of transparency and equity”.

ITGA’s president has also claimed that the FCTC had banned dozens of officials representing tobacco-growing countries from participating in COP7. A similar statement was made by a new NGO representative cum journalist, who claimed, “The policy of banning delegates having associations with tobacco production is said to be so broad that it will almost certainly prohibit finance ministers, economic development secretaries, public health officials, and even presidents and prime ministers …”

In September, ITGA members from North and South America, India, Europe, Africa, and Indonesia were in New Delhi for a two-day seminar to prepare their protests for COP7.

The ITGA claims COP decisions are being made “only by health officials and activists”. This is simply not true. Government delegations have included officials from non-health departments, such as ministries of agriculture, industry and trade, as official COP records show (Table 1).

In 2008, FCTC Parties adopted Article 5.3 guidelines. They include recommendations 4.9 and 8.3, which explicitly state that Parties should not nominate any person employed by the tobacco industry, or any entity working to further the industry’s interests, to serve on delegations to COP or other FCTC meetings, nor should any representatives of state-owned tobacco industries be included on government delegations.