

# THREE WAYS



**31 MAY: WORLD  
NO TOBACCO DAY**

[www.who.int/tobacco](http://www.who.int/tobacco)

# TO SAVE LIVES.



**F C T C**

WHO FRAMEWORK CONVENTION  
ON TOBACCO CONTROL



World Health  
Organization



*The international community has very few opportunities to protect the world's population from a cause of massive ill health and premature death. Tobacco control is unquestionably the greatest of these opportunities, and the WHO Framework Convention on Tobacco Control seizes this opportunity.*

**Margaret Chan,**  
Director-General, WHO

## Tobacco's toll on human life

- The tobacco epidemic kills nearly 6 million people each year, of whom:
  - more than 5 million are users and ex users
  - more than 600 000 are nonsmokers exposed to second-hand smoke
- After high blood pressure, tobacco use is the biggest contributor to the epidemic of noncommunicable diseases — such as heart attack, stroke, cancer and emphysema — which accounts for 63% of deaths
- Smokers are more susceptible to certain communicable diseases, such as tuberculosis and pneumonia
- No consumer product kills as many people and as needlessly as does tobacco. It killed 100 million people in the 20<sup>th</sup> century. Unless we act, it could kill **up to 1 billion people** in the 21<sup>st</sup>. All of these deaths will have been entirely preventable

## We have the means to curtail the tobacco epidemic

The most powerful tool at our disposal is a treaty, the WHO Framework Convention on Tobacco Control (WHO FCTC), which effectively protects people from the many harms of tobacco.

The WHO FCTC obliges its Parties to take incremental action against tobacco consumption, marketing and exposure, among many other measures.

**The key is full implementation of the WHO FCTC.**

## The poor are the most harmed

Tobacco use is growing fastest in low- and middle-income countries, owing to steady population growth and tobacco industry targeting. By 2030, more than 80% of the world's tobacco-related deaths will be in these countries.

The costs related to tobacco use are significant. Most tobacco-related deaths occur among working-age adults. Those who do not succumb immediately often face prolonged disability. In the low-income countries, where health insurance is scarce or nonexistent, the direct health-care costs are frequently borne entirely by families. The economic impact of early death, disability and lost productivity contributes to the burden of poverty, retarding national development and further widening health inequities. This is especially true in the low- and middle-income countries, where resources for tobacco control are often limited. Therefore, tobacco control is not only a public health priority, but also **a key development issue**.

## A comprehensive solution: the WHO FCTC

The **WHO Framework Convention on Tobacco Control**, the first international public health treaty developed under the auspices of WHO, provides a comprehensive approach to reduce the considerable health and economic burden caused by tobacco.

The WHO FCTC is a significant milestone in public health. Developed in response to the globalization of the tobacco epidemic, it is one of the most rapidly embraced treaties in the history of the United Nations. It was adopted by the World Health Assembly on 21 May 2003 and entered into force less than two years later, on 27 February 2005. **More than 170 of the 193 Member States of WHO are Parties to it.**

The Conference of the Parties is the treaty's governing body, and is supported by the Convention Secretariat. The Conference regularly reviews and promotes the implementation of the treaty. The Conference held its most recent session in Uruguay in November 2010.



In the past, each country tried to control the tobacco epidemic on its own. The globalization of the epidemic rendered these efforts ineffective. Traditional public health methods for reducing tobacco use, such as individual interventions by health-care professionals, were no match for the tobacco industry's power, transnational reach, formidable resources and active promotion of tobacco use.

A global public health problem required a global response. The WHO FCTC represents a new approach in international health cooperation, using a global legal framework to address a globalized epidemic.

### **The WHO FCTC contains core demand- and supply-reduction provisions of proven effectiveness.**

It reaffirms the right of all people to the highest standard of health. It inhibits the tobacco industry's ability to influence the health policies that are designed to protect people from tobacco. It calls for enhanced international cooperation to protect present and future generations from the devastating health, social, environmental and economic consequences of tobacco consumption and exposure to second-hand smoke.



## Demand reduction

The core demand reduction provisions in the WHO FCTC are covered in Articles 6-14, addressing:

- Price and tax measures to reduce the demand for tobacco
- Non-price measures to reduce demand, namely:
  - Protection from exposure to tobacco smoke
  - Regulation of the contents of tobacco products
  - Regulation of tobacco product disclosures
  - Packaging and labelling of tobacco products
  - Education, communication, training and public awareness
  - Tobacco advertising, promotion and sponsorship
  - Demand reduction measures concerning tobacco dependence and cessation

## Supply reduction

The core supply reduction provisions in the WHO FCTC are covered in Articles 15-17, addressing:

- Illicit trade in tobacco products
- Sales to and by minors
- Provision of support for economically viable alternative activities

## Other areas

The WHO FCTC also covers other important areas such as:

- Liability: protection of public health policies with respect to tobacco control from commercial and other vested interests of the tobacco industry (Articles 19 and 5.3)
- International cooperation, exchange of information and institutional arrangements (Articles 20-26)

## Advancing to the next level: promoting full implementation of the WHO FCTC

The WHO FCTC has achieved substantial progress.

- The principal bodies of the treaty, the Conference of the Parties and the permanent Convention Secretariat, have been established and are fully functional
- Guidelines for implementation of the treaty, covering more than 10 articles, have been adopted or are at an advanced stage of development
- A protocol to eliminate illicit trade in tobacco products is being negotiated
- The treaty reporting system is well established, with more than 80% of the reports expected from Parties already received and analysed
- Support for Parties in meeting their obligations is gradually being put in place through a variety of tools and mechanisms, such as the dissemination of guidelines, provision of technical and legal assistance, convening of needs assessments, training, facilitation of expertise and technology transfer and promotion of access to internationally available resources
- The absolute majority of States have now become Parties to the WHO FCTC, and several international organizations have been accredited as observers to the Conference of the Parties, which has resulted in broader international coordination and technical cooperation

## There is more to do

What is needed now is for the Parties to implement the WHO FCTC fully.

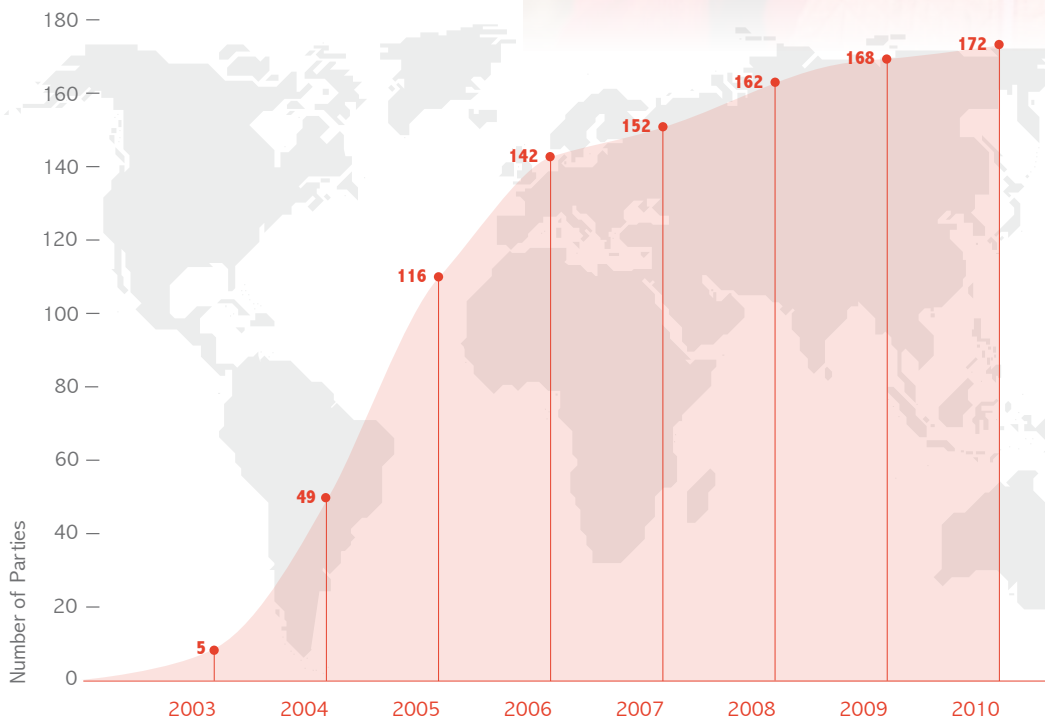
It is not enough to become a Party to the treaty. Countries must also pass the necessary legislation, and then enforce it.

Country experiences, as reflected in implementation reports, already indicate significant achievements as well as challenges and resource gaps. But much more needs to be done.

**World No Tobacco Day 2011 highlights the critical importance of ensuring full implementation of the WHO FCTC within all countries. We can each do our part to advance tobacco control to the next level by advocating for complete implementation of the treaty.**



## A popular and rapidly embraced treaty







## The call to action: implement the WHO FCTC

### Call to governments

- For Parties to the WHO FCTC: Meet all your obligations under the treaty. Pass the necessary legislation, and then enforce it
- For non-Parties: Prioritize the health of your people by becoming a Party to the WHO FCTC

### Call to civil society and nongovernmental organizations

- Strongly advocate for full implementation of the WHO FCTC

### Call to the public

- Demand that your governments fully comply with their obligations under the WHO FCTC
- If your government is not yet a Party to the WHO FCTC, mobilize public support and petition your leadership to ratify

### Call to WHO, the Conference of the Parties and international partners

- Fully support countries' implementation of the WHO FCTC
- Recognize the WHO FCTC as a major instrument in the fight against the epidemic of noncommunicable diseases

The tobacco epidemic poses a formidable challenge to public health and development. But with the WHO FCTC, the odds against mitigating the epidemic are no longer insurmountable, **if Parties tirelessly pursue full implementation.**

By making every day World No Tobacco Day, we stand the biggest chance of achieving what could be the single largest positive impact on health in this century.

### Links

World No Tobacco Day 2011: [www.who.int/tobacco/wntd/2011](http://www.who.int/tobacco/wntd/2011)

WHO Tobacco Free Initiative: [www.who.int/tobacco](http://www.who.int/tobacco)

Framework Convention Secretariat: [www.who.int/fctc](http://www.who.int/fctc)

### Acknowledgement

The World No Tobacco Day 2011 campaign was made possible through the generosity of the government of Japan.

### Contact information

World Health Organization  
Tobacco Free Initiative (TFI)  
20 Avenue Appia  
1211 Geneva 27  
Switzerland

Telephone: +41.22.791.4426

Fax: +41.22.791.4832

E-mail: [tfi@who.int](mailto:tfi@who.int)

[www.who.int/tobacco](http://www.who.int/tobacco)



**World Health  
Organization**