

SEA-Tobacco-6  
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# WHO Framework Convention on Tobacco Control

*Report of the First Sub-regional  
Awareness Raising Workshop  
Kathmandu, Nepal, 18-19 March 2004*

WHO Project: ICP TOB 001



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## 1. BACKGROUND

In accordance with World Health Assembly resolution WHA56.1 on the WHO Framework Convention on Tobacco Control (WHO FCTC), awareness raising and sub-regional consultations to move the process forward have been organized by the different WHO regions. The resolution stressed the important role that WHO as an interim Secretariat needs to play in raising awareness, building capacity and providing technical support to WHO Member States in order to facilitate rapid entry into force of the Convention. The workshops are expected to assist countries in preparing for the entry into force and implementation of the Convention. In addition, it is hoped that the workshops will promote the entry into force of the Convention in other ways and build capacity of countries to prepare for its implementation. Against this background, WHO, in collaboration with the Ministry of Health, Nepal, convened the First sub-regional Awareness Raising and Capacity Building Workshop on the WHO Framework Convention on Tobacco Control in Kathmandu on 18-19 March 2004.

## 2. OBJECTIVES

The objectives of the workshop were:

- (1) To promote a clear and comprehensive understanding of the objectives and provisions of the Convention;
- (2) To promote understanding of the national obligations that arises from the provisions of the Convention, including obligations of a procedural nature;
- (3) To identify legislative, technical, capacity building and infrastructural measures and actions needed in countries to lay the ground work for implementing the Convention, and
- (4) To promote early entry into force of the Convention by encouraging and facilitating signature, early ratification of and accession to the treaty through enhanced understanding of the relevant instruments and processes.

### **3. INAUGURAL SESSION**

The meeting began with an official opening ceremony (Session I). In his welcome speech, the Minister of Health, Nepal, Mr Kamal Thapa, expressed his governments' commitment for tobacco control. Nepal participated in the FCTC negotiations and subsequently signed the Convention. He thanked WHO for its efforts to mobilize countries for entry into force of the Convention and pledged to mobilize his country to ratify the Convention when practicable. He also commended India and Sri Lanka for having led the SEA region in ratifying the Convention and hoped that their actions would provide an impetus for further ratification by other countries. He also encouraged the remaining countries to sign and ratify the Convention.

On behalf of WHO, the WHO Representative to Nepal, Dr Klaus Wagner assured the participants of the catalytic role that WHO has and will continue to play in the FCTC process to ensure its early entry into force. He stated that the success of Convention depends on prompt signature and ratification by the countries.

Dr Vera da Costa e Silva (TFI/HQ) in her remarks encouraged the countries to sign and rapidly move on to ratify the Convention. She said that WHO was ready to provide technical support and facilitate capacity building to enable countries to prepare for the implementation of the Convention.

The workshop was attended by representatives from 6 countries of the South-East Asia Region, namely Bangladesh, Bhutan, India, Maldives, Nepal and Sri Lanka, as well as a representative of the South Asian Association for Regional Cooperation (SAARC) (See Annex 1 for the List of Participants). The participants consisted of governmental officials and experts were drawn from the Ministries of Health, Foreign Affairs, Finance and Trade and Justice.

### **4. ORGANISATION OF THE WORKSHOP**

The workshop sessions comprised presentations by panellists and country representatives, group discussions and individual country consultations (see Annex 2 for programme). The meeting generated greater exchange of information among country representatives and other participants. The meeting was broadly structured into four sessions. The first was the opening

session. Other technical sessions included sessions on the themes, "Know Your Convention" overview of important provisions; "Becoming a Party to WHO FCTC" and preparing for its implementation, and, finally, the session on building national capacity for the implementation of WHO FCTC. The meeting concluded with recommendations for advancing the Convention and national actions to prepare for its implementation.

## **5. PROCEEDINGS**

### **5.1 The FCTC : Know your Convention – Overview : (Session II)**

#### ***Panel presentations***

Dr Douglas Bettcher (WHO/HQ) made a presentation covering the background to the development of WHO FCTC. He said that protection and promotion of public health was the primary rationale for the development of the Convention in view of the 4.9 million human deaths every year. He discussed the role of globalisation in perpetuating the tobacco pandemic and the negative activities of the tobacco companies and their allies in undermining public health policies to regulate tobacco. He provided an update on the signature and ratification of the Convention including progress in the WHO South-East Asia Region. He stated that WHO FCTC had a broad objective to protect public health and called upon parties to enact, update and implement effective legislative, executive, administrative or other measures aimed at reducing the demand for, and the supply of tobacco, encouraging parties to cooperate through competent international bodies, taking necessary actions within a prescribed time-frame, taking into account pertinent international law, rules and practices. He discussed uniqueness of the WHO FCTC - it contains a mixture of general and specific obligations, emphasizes on demand control measures, calls for comprehensive multisectoral tobacco control measures, advocates public health as a priority, provides for liability unprecedented in framework conventions, includes an innovative funding approach and warns against and identifies possible saboteurs.

Mr William Onzivu (WHO/HQ) discussed the specific articles of the Convention, especially articles 2 to 26. The discussion centred on understanding the specific provisions of FCTC to enable countries to

undertake relevant actions in direct consequence of the requirements of the Convention.

The third paper in this session was on the Regional (SEARO) perspective on the Convention, by Dr Khalilur Rahman. He discussed the continuing role played by the WHO South-East Asia Region in the development of the Convention including the various informal negotiations in Thimphu, Bhutan, New Delhi, India and Jaipur, India that served to move the INB negotiations in Geneva. He also discussed the challenges for tobacco control in Asia.

### ***Discussions***

The presentations were followed by question-answer sessions and discussion. Participants exchanged information on their understanding of the Convention. The discussion prepared the ground work for the working group discussions.

## **5.2 Becoming a Party to WHO FCTC and Preparing for its Implementation : (Session III)**

### ***Panel presentations***

In this session, Dr Douglas Bettcher (WHO/HQ) presented the steps to becoming a party to the Convention. The underlying message was that national processes alone are not sufficient for a country to become a party. Countries need to ensure that the various international legal and practical steps that are needed in the process of treaty ratification and signatures are also met. These issues are discussed in depth in the United Nations Treaty Handbook.

Mr William Onzivu (WHO/HQ) presented a paper on the Checklist of legal and institutional measures for implementation of the Convention. This presentation provided an insight into the kinds of concrete measures that countries will need to undertake to implement WHO FCTC. It also discussed the general aspects of WHO FCTC that countries need to consider. The paper also identified the legal and institutional measures that countries may need to consider in translating the Convention into concrete actions in the domestic sphere. Key initial actions include the establishment of focal points or coordinating mechanisms and the development of tobacco control plans and strategies.

Dr TLC Somatunga (Sri Lanka) discussed how Sri Lanka proceeded to become a party to the Convention. She emphasized the importance of political will on the part of the government and the lead role played by the Minister of Health in galvanizing support within the cabinet and other Ministries to support ratification of the Convention. Furthermore, Sri Lanka did not have a comprehensive tobacco control legislation in place and this did not present any legal or practical hurdle in ratifying the treaty. The various piecemeal legislation for tobacco control would be consolidated in implementing legislation for WHO FCTC. In fact, ratification is providing a momentum to speed up the development of comprehensive tobacco control measures in Sri Lanka.

Mr K V S Rao (India) presented a case study of India's process of becoming a party to WHO FCTC. He underscored the role of political support, multisectoral coordination, the pivotal role of Ministry of Health in mobilizing other ministries involved with treaty ratification and legislation and the recent adoption by India of a comprehensive tobacco control legislation. India has already developed a roadmap to implement WHO FCTC through the existing comprehensive tobacco control legislation.

### ***Country presentations***

After the panel presentations, there were country presentations focusing on their law, policy and practice on how to become a party to a treaty. Participants also precisely updated the meeting on the current status of the process of their countries becoming a party to WHO FCTC. It was evident from their presentations that progress is being made by these countries to move the WHO FCTC process and sign, ratify or accede to the Convention.

### ***Discussions***

The participants were divided into two groups, comprising representatives of all countries in each of them, to discuss all aspects of the Convention. The discussions covered specific provisions of WHO FCTC. The participants were able to express their own understanding of specific FCTC provisions, make detailed comments on such provisions and present appropriate examples, opportunities and challenges in implementing specific provisions.

### **5.3 Building National Capacity for the Implementation of WHO FCTC : (Session IV)**

#### ***Panel presentations***

Under this Panel, Mr William Onzivu (WHO/HQ) made a presentation on Tobacco Control Legislation, An Introductory Guide. The paper discussed the role of legislation in tobacco control, legislative options for tobacco control, the key elements of tobacco control legislation and tobacco control law making and its implementation.

Dr Heide Richter Airijoki (WHO/HQ) made a presentation on attempts by the tobacco industry to undermine comprehensive tobacco control measures and WHO FCTC in a number of countries including those in the SEA Region. She detailed the recent tactics of the industry and urged decision-makers and the public in the countries to be alert to their attempts to undermine the progress so far achieved in regard to tobacco control and WHO FCTC.

Dr Khalilur Rahman (WHO/SEARO) introduced the discussion on key aspects of capacity building within countries. Thereafter, the participants discussed the challenges and opportunities in building capacity to prepare for the implementation of WHO FCTC. This concluded with an interactive discussion by participants on challenges to capacity building and ratification of WHO FCTC.

#### ***Individual country consultations***

There was an opportunity for each country delegation to meet in an informal manner with the staff of WHO headquarters and the regional office to discuss the current status of WHO FCTC in their countries, identifying the challenges and possible solutions to enable them to sign and ratify the Convention. The delegations presented their challenges and the WHO staff were on hand to provide advice. The individual country consultations worked very well as participants candidly recognized the problems and what they would need to do to move the ratification of WHO FCTC on return to their respective countries.

## 6. RECOMMENDATIONS

The following recommendations were made:

### For WHO

- (1) WHO should provide technical assistance in developing comprehensive tobacco control laws in line with the provisions of WHO FCTC, to Member States that do not have such laws.
- (2) WHO should support countries in identifying sources of funding and mobilize financial resources to sustain national tobacco control programmes.
- (3) WHO should facilitate regional bodies such as the Association of South East Asian Nations (ASEAN) and the South Asian Association for Regional Cooperation (SAARC) to include tobacco control measures in their agenda and future follow-up actions.

### For Member States

- (1) Carry out an assessment of the current tobacco control measures in order to identify gaps between those measures and the provisions of WHO FCTC with a view to addressing these gaps.
- (2) Formulate and implement national action plans for tobacco control with adequate and appropriate evaluation mechanism of the Plan.
- (3) Initiate multisectoral capacity building amongst parliamentarians and or opinion leaders and the media.
- (4) Advocate and initiate mechanisms for sustainable financial support for tobacco control such as budgetary provisions at country and local government levels.
- (5) Translate and widely disseminate the provisions of WHO FCTC in order to educate and empower and enhance public awareness of their respective rights and obligations under the treaty.

## **7. CONCLUSIONS**

As Member States continue to sign and ratify WHO FCTC and prepare for its implementation, efforts to support them in these objectives has become a central part of the work of the WHO interim Secretariat for WHO FCTC. Promotion of WHO FCTC and capacity building will ensure an early entry force of the treaty. Moreover, capacity building and WHO FCTC are mutually reinforcing in that building capacity will establish human and institutional capabilities required for the implementation of WHO FCTC. Likewise, WHO FCTC will establish a legal regime to build capacity within countries. In this regard, activities in the five pilot countries under the UNF project have raised awareness about the need for comprehensive national tobacco control and capacity building. WHO FCTC having set down the minimum standards and indicators for tobacco control, both national and transnational, will stimulate the development of comprehensive tobacco control. In this regard, the two combined workshops on awareness raising for WHO FCTC and capacity building aim to achieve an early entry into force of the Convention and the development of comprehensive tobacco control measures.

## Annex 1

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## Annex 2

### PROGRAMME

#### Thursday - 18 March 2004

0830-0900 hrs      Registration

#### Session 1: Opening Session

0900-1000 hrs      • Welcome to participants  
• Address by the WHO Regional Director (delivered by WR Nepal)  
• Address by Director, TFI  
• Address by Health Minister/Senior Representative of the Government of Nepal

1000-1100 hrs      Press Conference followed by tea break

1100-1120 hrs      Introduction to the Workshop

- Aims and objectives of the workshop
- Introduction of participants
- Election of Chair and officers
- Overview of the programme and organization of work by the secretariat

#### Session II. FCTC: Know Your Convention - Overview

1120-1205 hrs      Panel Presentations

1120-1135 hrs      Overview of the WHO Framework Convention on Tobacco Control, Dr Douglas Bettcher, Coordinator, WHO FCTC, (WHO/HQ)

1135-1150 hrs      Important provisions of WHO FCTC - Mr William Onzivu, (WHO/HQ)

1150-1205 hrs      Regional perspectives on the WHO Framework Convention on Tobacco Control - Dr Khalilur Rahman, (WHO/SEARO)

1205-1220 hrs      Practical approaches to national tobacco control - Dr Vera da Costa e Silva, (WHO/HQ)

1120-1300 hrs      Interactive discussion

#### Session III: Becoming a party to the WHO FCTC and preparing for its implementation

1430-1600 hrs      Panel Presentations

- 1430-1500 hrs Steps to becoming a Party to the WHO FCTC - Dr Douglas Bettcher, (WHO/HQ)
- 1500-1520 hrs Checklist of legal and institutional measures to implement WHO FCTC - Mr William Onzivu, (WHO/HQ)
- 1520-1600 hrs Country experiences on becoming a Party and preparing for its implementation:
- Sri Lanka
  - India
- 1630-1800 hrs Discussion on roadblocks and challenges to signing, ratification and preparation for implementation and how these could be overcome

**Friday - 19 March 2004**

- 0900-1100 hrs Know Your Convention: Working Group  
Group Discussions
- Relationship between WHO FCTC and other agreements and legal instruments
  - Objective, guiding principles and general obligations
  - Technical and financial assistance to developing countries and countries with economies in transition:
    - Development of national comprehensive tobacco control policy/system and its infrastructure
    - Cooperation in the scientific, technical, and legal fields and expertise
    - Research, surveillance and exchange of information
    - Financial resources
  - Mechanisms of implementation and institutional arrangements at the international level
    - Reporting and exchange of information
    - Conference of the parties
    - Secretariat
    - Liability
  - Measures relating to the reduction of demand for tobacco:
    - Price and tax measures;
    - Non-price measures to reduce demand for tobacco;

- Protection from exposure to tobacco smoke;
  - Regulation of 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.
- Measures relating to the reduction of the supply of tobacco:
    - Illicit trade in tobacco products;
    - Sales to and by minors; and,
    - Provision of support for economically viable alternative activities.
  - Protection of the environment and health of persons.

#### **Session IV: Building National Capacity for the Implementation of WHO FCTC**

1130-1230 hrs	Panel Presentations
1130-1145 hrs	National legislation for tobacco control - Mr William Onzivu, (WHO/HQ)
1145-1200 hrs	Strategies of the tobacco industry - Dr Heide Richter-Airijoki, (WHO/HQ)
1200-1230 hrs	Country case studies on building national capacity building for tobacco control - Dr Khalilur Rahman, (WHO/SEARO).
1230-1300 hrs	Interactive Discussions Participatory discussions will follow the above presentations to find the way forward.
1430-1630 hrs	Individual Country Consultations WHO/country consultations to discuss individual country concerns, challenges and needs and possible way forward to sign and ratify the FCTC including the building of country capacity for tobacco control.
1645-1745 hrs	Final Discussions On Way Forward and Recommendations
1745-1800 hrs	Closing