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Report on the

Consultative meeting on tobacco advertising, promotion and sponsorship (TAPS) in drama

Cairo, Egypt
24–25 August 2014



World Health
Organization

Regional Office for the Eastern Mediterranean

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CONTENTS

1.	INTRODUCTION.....	1
2.	IDENTIFYING THE PROBLEM.....	3
2.1	Historical relations with Hollywood.....	3
2.2	TAPS in drama in the Eastern Mediterranean Region.....	3
2.3	Lessons learnt from working with countries to control TAPS in drama.....	4
3.	EVIDENCE AND BEST PRACTICES.....	6
3.1	The evidence: what is science telling us on TAPS in drama?.....	6
3.2	The Bollywood experience in controlling TAPS in drama.....	6
3.3	TAPS control in Turkish drama.....	7
3.4	TAPS control in Egyptian drama.....	8
3.5	Efforts of the GCC in banning TAPS in drama.....	8
3.6	TAPS in Kuwaiti and Saudi Arabian drama: the way forward.....	8
4.	SOLUTIONS, THE WAY FORWARD AND ROLE OF DIFFERENT PARTNERS.....	10
5.	CONCLUSIONS.....	11
6.	ACTION POINTS.....	11
	Annexes	
1.	PROGRAMME.....	14
2.	LIST OF PARTICIPANTS.....	16
3.	ACTION POINTS FOR WHO.....	21

1. INTRODUCTION

Enforcing a total ban on tobacco advertising, promotion and sponsorship (TAPS) is a key obligation of the World Health Organization (WHO) Framework Convention on Tobacco Control (FCTC) and one of the main components of the MPOWER policy package. The TAPS ban is a comprehensive ban on all forms of both direct and indirect advertising. This includes direct advertising on national and local television and radio, magazines and newspapers, billboards and outdoor advertising and at points of sale. It also includes indirect advertising through free distribution of tobacco products by mail or other means, promotional discounts, non-tobacco goods and services being identified with tobacco brand names (“brand stretching”), brand names of non-tobacco products being used for tobacco products (“brand sharing”), and the appearance of tobacco brands or products in television and/or films and/or any other drama (“product placement”). In addition, it covers sponsored events, including corporate social responsibility programmes and a ban on all other means of advertising promotion and sponsorship, whether existing now or those that will exist in the future.

Evidence has shown, beyond doubt, that banning all forms of TAPS is fundamental to the success of tobacco control efforts. Exposure to TAPS is associated with higher smoking prevalence rates, particularly the initiation and continuation of smoking among youth. It has been estimated that experimentation with tobacco in about a third of young people occurs as a result of exposure to TAPS. Comprehensive bans on TAPS reduce cigarette consumption in all countries regardless of their income level. Comprehensive bans that cover tobacco advertising in all media and all promotions or displays using tobacco brand names and logos have been documented to decrease tobacco consumption by about 7%, independent of other tobacco control interventions, and point-of-sale advertising bans reduce spontaneous tobacco purchases by 30%.

In the WHO Eastern Mediterranean Region it has been repeatedly documented that drama, including films and television series, is extensively used to advertise and promote different types of tobacco. This practice is a clear breach of the total ban on TAPS that jeopardizes tobacco control efforts at all levels. Studies in countries of the Region have reported a high frequency of tobacco use appearing in drama scenes. In one study that examined 100 Egyptian movies, tobacco was found to have been used 544 times, while another study that looked at six Ramadan television series, found that tobacco was used 211 times. In a third study that focused on 10 Ramadan television series, tobacco was used 628 times, with tobacco use in scenes accounting for a total of 570 minutes in all 10 series. The negative impact of this form of tobacco advertising and promotion goes beyond the countries producing the dramas to affect all countries where a drama is aired. Addressing this problem is essential to the success of tobacco control in the Region.

To begin to address this problem, the WHO Regional Office for the Eastern Mediterranean organized a consultative meeting on 24–26 August 2014 in Cairo, Egypt, to focus on TAPS in drama, examine its status in the Region and identify how it can be controlled, who should be involved and what actions are needed.

The specific objectives of the meeting were to:

- analyse the situation in different countries of the Region
- identify the different aspects of the problem
- agree on solutions and the way forward
- ascertain the roles and responsibilities of different partners.

The meeting focused on drama-producing countries, such as Egypt, Kuwait, Lebanon, Syrian Arab Republic and United Arab Emirates, and was organized around three main sessions, corresponding to the main objectives of the meeting: identifying the problem; evidence and best practices; solutions and the way forward; and the role of different partners. The programme is included as Annex 1.

Participants included national programme managers for tobacco control from selected countries, drama-makers from different sectors, including script writers and directors, representatives of key regional organizations including the Director-General of the Executive Board of the Health Ministers' Council for Gulf Cooperation Council (GCC) States, nongovernmental organizations, international and regional experts, and WHO staff from headquarters, regional and country level. The list of participants is included as Annex 2. Professor Tawfik bin Ahmed Khoja, Director-General of the Executive Board of the Health Ministers Council for GCC States, was selected as Chair of the meeting.

In relation to the objectives of the meeting, the participants were provided with the following documents: the concept note for the meeting; guidelines from Article 13 of the WHO FCTC on TAPS; *Smoke-free movies: from evidence to action* (WHO, 2011); "TAPS in drama, with a focus on Ramadan", a background report prepared for the meeting; and *Tobacco kills, it shouldn't be advertised, glamorized or subsidized* (WHO Regional Office for the Eastern Mediterranean, 2003).

In his welcoming remarks, Dr Samer Jabbour, Director, Noncommunicable Diseases and Mental Health, WHO Regional Office for the Eastern Mediterranean, noted that TAPS in drama was spreading throughout different types of drama with clear brands being identified without any dramatic necessity. He acknowledged that the more other traditional means of TAPS were banned, the more tobacco brands and use appeared in dramas, even in cartoons targeting children. With the knowledge gained from internal tobacco industry documents, there was clear evidence that the tobacco industry had manipulated the drama industry in many countries, he said.

Dr Jabbour explained that controlling TAPs in drama was not an optional step, but was rather a mandatory legal obligation based on the guidelines of Article 13 of the WHO FCTC that clearly called for a total ban of all forms of TAPS in films and television. He called for joint efforts between different sectors and stakeholders to monitor tobacco use and presence in drama and to develop innovative legal regulatory schemes. A comprehensive ban on TAPS should not interfere with legitimate types of expression such as journalistic, artistic or academic expression and commentary, he said, but rather such expression or commentary should not be used to promote tobacco use or products.

Finally, Dr Jabbour reminded participants of the legal obligation under Article 5.3 of the WHO FCTC on the protection of public health policies with respect to tobacco control from commercial and other vested interests, and said that the countries of the Region needed to be aware of the serious challenge posed by the tobacco industry to tobacco control efforts from TAPS in film and television drama.

2. IDENTIFYING THE PROBLEM

2.1 Historical relations with Hollywood

Professor Stanton Glantz

There is an historical relationship between drama-makers in Hollywood and the tobacco industry. The many industry documents that were released as part of the litigation process of the tobacco industry in the United States of America (USA) provide clear evidence that the tobacco industry has for years manipulated the film industry. In the 1930s and 1940s, 75% of top box office film stars were on the payrolls of tobacco companies. In the 1950s and 1960s, with the expansion of television, tobacco advertising shifted to broadcasting. But after television and radio tobacco commercials were banned in 1970, the cigarette companies pursued systematic product placement campaigns, encompassing more than 500 mainstream Hollywood films up until at least the mid-1990s.

Contrary to the claim that films are just reflecting reality, it is evident that films are helping to create a new reality and are being used as a vehicle for spreading tobacco use, especially among young people. One of the clear examples is the Superman films. The first film did not contain any tobacco use scenes, but in the second one, tobacco use and adverts were everywhere. It was later discovered that a special contract had been signed for all these tobacco use scenes and branding to be present in the film. There are many other examples that prove the direct links between the tobacco and film industries, and even agreements for specific top stars to smoke a particular brand on screen. The past is being repeated in the present, despite the exposure of the historical relationship between Hollywood and the tobacco industry. Branding, product placement, brand sharing and brand stretching are still very much a feature of the silver screen.

2.2 TAPS in drama in the Eastern Mediterranean Region

Dr Fatimah El-Awa and Dr Tawhida Khalil

The presence of scenes of tobacco use in drama in the Region has been well documented, not only through observation, but also through different surveys conducted by WHO and countries, such as the Global Youth Tobacco Survey (GYTS) and other surveys. In particular, the exposure of young people to tobacco products in drama and television has reached alarming levels; in many countries it has reached over 90%. Accordingly, in the last WHO report on the global tobacco epidemic, 2013, only a few countries had attained the highest level of compliance with a TAPS total ban. Although there is not always clear evidence that links the tobacco industry with drama-makers, the heavy presence of tobacco scenes in drama raises many concerns that a relationship might exist. To tackle the problem,

there is a need for legislative measures, professional code of conducts, and further research and awareness-raising activities.

There have been three important studies that have monitored tobacco use in drama in the Region, one on 100 films, the second on six television drama series, and the third on 16 television drama series. These all found a very high presence of tobacco use scenes. In the majority of the analysed drama series, tobacco scenes were more frequent than scenes without tobacco in them. A link between tobacco use in dramas and certain emotional situations such as anger, action, romance and social activities was also identified. Further findings include the increasing presence of tobacco use by women, tobacco use by lead actors in dramas, and the presence of particular brands.

2.3 Lessons learnt from working with countries to control TAPS in drama

Dr Luminita Sanda

To sell a product that kills up to half of its users requires extraordinary marketing ability, and tobacco companies are among the most manipulative product sellers and promoters in the world. Smoking in films is a public health problem, because films reach every corner of the globe, effectively promote smoking and have done so without much public health scrutiny until now.

To build a strong and comprehensive ban on TAPS at country level it is very important to consider legislative action. One of the key elements of any national legislation on TAPS is the definition: good definitions are the foundation of a good law. Without good definitions, countries can end up with many loopholes that the tobacco industry can take advantage of through their advertising and promotion strategies.

Several countries have initiated tangible action to reduce tobacco imagery in films, either in the cinema environment or in ancillary exposure opportunities that exist in video/DVD, Internet, and cable and satellite channel use. Interest in this area of tobacco control is rapidly increasing at both the national and subnational levels. In many cases, the issue has been brought forward by civil society organizations, such as nongovernmental organizations, that are recognizing this important gap in tobacco control efforts, and have started advocating for increased action. In other cases, governments are starting to examine the issue more closely.

Bans on depicting tobacco use or showing tobacco brands and products on television and in films have been enacted in 106 countries (covering 74% of the world's population). Since 2010, eight countries (covering 5% of the world's population) have introduced this requirement, while 11 countries (covering 25% of the world's population) have required that anti-tobacco advertisements be shown before, during or after television, film and other visual entertainment media that depict tobacco products, use or images. Identified elements of success in controlling TAPS in drama include adopting a multisectoral approach, enacting comprehensive legislation, and excluding of voluntary and self-regulatory measures and approaches.

Discussion

It was agreed that the presence of tobacco scenes in drama raises many questions, especially the clear branding of certain products. However, some participating drama-makers felt that despite the excessive use of tobacco use in much drama, there is still a “green” type of drama that promotes healthy lifestyles and supports health messages. It was argued that the role of drama should expand beyond the mere absence of tobacco use from drama products towards promoting healthy lifestyles and should include refraining from tobacco use within a larger framework of health for all.

In many countries nongovernmental organizations have played a very positive role in either supporting health authorities to push for a total and comprehensive ban on TAPS in drama or by leading the way in advocacy for one. There are many examples including Canada, India, the United Kingdom (UK) and other countries. Some nongovernmental organization participants highlighted their activities in promoting comprehensive TAPS in drama, including monitoring TAPS in movies (Etijah) and television (Life Without Smoking), the “white circle” non-smoker campaign (El Sawy Culture Wheel), and strengthening ties with journalists and monitoring tobacco news in different media (Coalition for Tobacco Control). It was agreed that nongovernmental organizations have a leading role to play in promoting healthy lifestyles and a comprehensive ban on TAPS in drama and elsewhere.

Conclusions of the first session

- There is a well-established historical relationship between the tobacco industry and Hollywood.
- The heavy presence of tobacco use and products in regional dramas in film and television raises many concerns about the relationship between the tobacco industry and the drama industry in the Region.
- The extensive presence of tobacco use scenes in regional drama goes beyond considerations of historical context, dramatic necessity or freedom of speech.
- The continued monitoring of tobacco use in drama is a fundamental step towards freeing drama from tobacco.
- Nongovernmental organizations have a vital role to play in monitoring tobacco use in drama and putting pressure on decision-makers to take the needed actions to control this phenomenon.
- Nongovernmental organizations and civil society groups can play a key role in exposing TAPS in drama.
- Drama-makers can play a key role in shifting the dominant paradigm towards less tobacco use in drama, by refraining from depicting tobacco use in their products and in conveying messages to the public on the health consequences of tobacco use.
- The lessons learnt from other country experiences indicate the importance of carefully written legislation to avoid loopholes that the tobacco industry can take advantage of in the future to extend TAPS through different means and that a multisectoral approach to TAPS is vital for achieving a comprehensive ban.

3. EVIDENCE AND BEST PRACTICES

3.1 The evidence: what is science telling us on TAPS in drama?

Professor Stanton Glantz

There is strong scientific evidence on the impact of tobacco use in drama in television and films that indicates that seeing smoking promotes teenage smoking. Research has found that regardless of school grade, children who see more than 150 incidents of tobacco use are about three times more likely to have tried smoking as children who see less than 50 incidents. Other research has shown that non-smoking teenagers whose favourite actors smoke are 16 times more likely to have a positive attitude towards smoking in the future. The population-attributable risk associated with onscreen tobacco imagery is significant, at around 37%. Its impact is larger than conventional advertising and larger than peer influence, and is therefore the largest stimulus for youth smoking. In the USA, giving films containing tobacco use or products an R-rating (requiring a parent or adult guardian to be present in order to view the film), would reduce adolescent smoking by an estimated 18%.

3.2 The Bollywood experience in controlling TAPS in drama

Dr Prav Sinha

Nearly 0.8–0.9 million persons die due to tobacco use every year in India. It has been estimated that smoking alone will cause one million deaths in India in the current decade, and that 70% of these will occur in the middle age group, with 30% of cancer deaths, the majority being cardiovascular and lung disorders, and 40% of tuberculosis and other related diseases, attributable to tobacco consumption. The total economic costs attributable to tobacco use from all diseases in India in the year 2011 for persons aged 35–69 amounted to US\$ 22.4 billion. This estimated cost constituted 1.16 % of Gross Domestic Product and was 12% more than the combined state and central government expenditures on health in 2011–2012.

In 2003, WHO conducted research on Indian films that showed that 76% portrayed tobacco consumption, with “good” characters accounting for approximately 50% of incidence. The smoking incidence amongst lead actors rose sharply from 22% in 1991 to 53% in 2002. A more recent study by the Burning Brain Society in 2005 found even higher rates. Responding to this epidemic, the Indian government issued a tobacco control law in 2003, which prohibited TAPS in all its forms. Despite this comprehensive ban on TAPS, tobacco scenes have increased in Indian films, in what seems to be a planned shift from traditional TAPS methods to using films. This has led the government to give more attention to specific regulations for banning tobacco use in films.

The banning of TAPS in films went through many stages. However, the final regulations divided films into two groups: old films and new films.

For old films and television programmes it was decided that:

- an anti-tobacco health spot of a minimum 30 seconds duration should be screened for films being shown in cinemas (in the beginning and middle of the screening)
- an anti-tobacco health spot of a minimum of 30 seconds duration should be screened for television programmes (in the beginning and middle of the screening)
- an anti-tobacco health warning should be screened as a prominent permanent message on screen during the period of display of tobacco products or their use in television programmes.

For new films it was decided that:

- a strong editorial justification should be provided to the Central Board of Film Certification explaining the necessity of use or display of tobacco products
- an anti-tobacco health spot of 30 seconds duration should be screened (in the beginning and middle of the screening)
- an anti-tobacco audiovisual disclaimer of 20 seconds duration should be screened (in the beginning and middle of the screening)
- an anti-tobacco health warning should be screened as a prominent permanent message during the period of display of tobacco products or their use.

Failure to comply with the rules entails cancellation of the film or suspension of the license of the producing company by the competent authority after giving reasonable opportunity to explain such failure. Although many compromises had to be made until strong regulation was finally in place in India, due to these strong penalties, the compliance level is now very high.

3.3 TAPS control in Turkish drama

Dr Hilal Ozcebe

Turkey is a tobacco-producing country. The state controlled the farming, production, pricing and selling of tobacco and tobacco products until the 1980s, when multinational tobacco companies were allowed to establish their own import and distribution networks in 1986. From then on, the country has faced new challenges, with the start of aggressive TAPS campaigns and a dramatic increase in tobacco consumption. To counter this, the Turkish National Coalition on Tobacco and Health was established in 1995 by leaders of medical associations, and became very active in the development and enforcement of the 1996 tobacco control legislation that banned all forms of TAPS in the country.

Following the privatization of the national tobacco company there was a need for a new body to follow up on tobacco regulation. The resulting Tobacco Products and Alcoholic Beverages Market Regulatory Authority, established in 2002, introduced a changes to the existing tobacco control law in 2008 and 2013, when stricter rules were adopted to overcome loopholes that had become apparent in the implementation of the old legislation. The new rules not only introduced new measures to strictly enforce a total ban on TAPS, but also introduced for the first time measures to promote tobacco control in drama, such as free air time and incentives for tobacco-free television drama. Monitoring the change in the prevalence overtime clearly shows the success of the various policies applied in Turkey, including the total ban on TAPS, with an overall decline in smoking prevalence from 31.2% in 2008 to 27.1% in 2012.

3.4 TAPS control in Egyptian drama

Dr Amr Osman

The Fund for Drug Control and Addiction Treatment has been monitoring television drama production in Egypt since 2010. The selection of products to be monitored is based on airing time, audience size and other elements that determine popularity. They have found a heavy presence of TAPS in drama that is used to promote tobacco use and is increasing. Tobacco use in drama occurs in all age groups and is mainly linked to moments of stress, happiness and joy. Furthermore, over the years tobacco use in drama by women has increased. While tobacco use by women in Egypt is nearly 1%, in various drama productions the use of tobacco by women reached up to 17.6% in selected drama productions in 2013.

There is therefore an urgent need to continue the monitoring of TAPS in drama production for television and cinema. However, drama-makers should be engaged not after the monitoring of their output, but from the beginning of the process for better engagement and stronger collaboration. There is a need for a rating mechanism for TAPS in drama and to support a positive role for drama in promoting tobacco control. Finally, governments have a key role to play where the film industry is being financially supported by the state.

3.5 Efforts of the GCC in banning TAPS in drama

Professor Tawfik bin Ahmed Khoja

Many decisions have been taken by the Ministers of Health of the GCC to ban TAPS comprehensively in all GCC Member States. However, the tobacco industry has monitored these and engaged in efforts to undermine the activities of the GCC through media campaigns, such as the “voice of reason” campaign that was run in many media outlets in GCC countries. There is a need for a better enforcement system, because while legislation is often well written, it is not equally well implemented.

The next step for GCC countries is to involve non-health sectors in the work of tobacco control, such as the Information and Communication Ministers’ Council, to identify gaps jointly and work together towards bridging them. Professor Khoja concluded by presenting a profile of TAPS in each of GCC country, highlighting gaps and achievements.

3.6 TAPS in Kuwaiti and Saudi Arabian drama: the way forward

Dr Watfa Hamadi

Research on Kuwaiti and Saudi Arabian drama, has found that TAPS is very present. This has now gone beyond the traditional depiction of the use of tobacco, which had been limited to men only, to include use by women. There is also use by different age groups and clear branding of different tobacco products. There is a need for continued monitoring of TAPS and the engagement of both the academic sector and drama-makers in efforts to control tobacco. This could include training and engaging drama-makers early on in the drama-making decision-making process.

Discussion

Research has confirmed that TAPS in drama is a tool used by the tobacco industry to influence the behaviour of young people and other viewers. The participants raised many concerns over tobacco industry tactics in infiltrating drama with TAPS at all levels and in different types of media. The prolific use of tobacco in drama does not reflect real tobacco use prevalence at national levels. Instead, drama is being used to create a new reality and to increase the use of tobacco among different age groups and among men and women equally. It was felt that there is a need for specialists to continue monitoring the situation and to engage as many sectors as possible in the monitoring and in both the diagnosis of the problem and the solution-building process.

Drama-makers' representatives in the meeting agreed that it is key to engage all professional bodies related to the drama industry in this discussion, and also affirmed that there is a need to go beyond the role of the mere management of TAPS in drama to the real prevention of tobacco use. It was stated by more than one drama-maker that the tools of drama can be used to promote tobacco control without the need for major changes in the flow of the drama product.

It was noted that the main elements of success in both the Indian and Turkish experience were the existence of strong political commitment along with the application of a multisectoral and comprehensive approach to tobacco control. Other elements of success include aiming for the strictest measures and engaging drama-makers in finding and agreeing on solutions.

Conclusions of the second session

- There is strong scientific evidence that associates the increase in tobacco prevalence, especially among youth and non-smokers, with tobacco presence in drama.
- The tobacco industry has exploited drama to increase the prevalence among special groups such as youth and women.
- Tobacco use in drama is not reflective of social realities but is rather a mechanism that is used to create new realities.
- Country experience has shown that once TAPS is banned in other mediums, it increases in drama.
- Country experience has shown that a TAPS ban has to be enforced through legal obligations and not voluntarily.
- Country experience has shown that TAPS must be tackled in a comprehensive manner together with other recommended tobacco control policies.
- The engagement of drama-makers and their associations throughout the process can improve the situation, and may reflect positively not only in the absence of tobacco use in drama but also in a commitment to advance public health awareness through drama in line with health priorities.

4. SOLUTIONS, THE WAY FORWARD AND ROLE OF DIFFERENT PARTNERS

In his presentation on suggested policy actions and the way forward, Dr Stanton Glantz indicated that solutions are based on best practices and country experiences. The bottom line is that TAPS in films seen by children has to stop.

The solution, as recommended by WHO in its publication *Smoke-free movies: from evidence to action* (second edition, 2011), includes the following actions.

- **Certify no pay-offs.** The producers of dramas should be required to post a certificate in the credits at the end of the film declaring that nobody on the production received anything of value (cash money, free cigarettes or other gifts, free publicity, interest-free loans or anything else) from anyone in exchange for using or displaying tobacco.
- Require strong anti-smoking adverts. Studios and theatres should be required to run a genuinely strong anti-smoking advert (not one produced by a tobacco company) before any film with any tobacco presence, regardless of its rating.
- Stop identifying tobacco brands. There should be no tobacco brand identification or presence of tobacco brand imagery (such as billboards) in the background of any film scene.
- Rate new films containing tobacco for adult audiences only. Any film that shows or implies tobacco use should be rated for adult audiences only. The only exceptions should be when the presentation of tobacco clearly and unambiguously reflects the dangers and consequences of tobacco use or when it is necessary to represent accurately a real historical figure.
- For old films similar solutions can apply.

Discussion and working groups

Participants agreed that the solutions must be divided into four main areas: legislative; professional, including codes of ethics; raising awareness; and research and monitoring. It was also agreed that success cannot be achieved without a comprehensive and multisectoral approach to tobacco control, national and local evidence, a lead agency (ministries of health) and the strict enforcement of policies.

Four working groups were convened to discuss the actions required by: drama-makers; governments (in particular, ministries of health); nongovernmental organizations; researchers; and WHO.

Conclusions of the third session

- Action must target four areas of work: legislative; professional, including codes of ethics; raising awareness; and research and monitoring.
- Everyone has a role: governments; drama-makers and their professional associations; nongovernmental organizations; academics; and regional and subregional organizations.

5. CONCLUSIONS

Participants developed conclusions in relation to the objectives of the meeting and the corresponding themes of discussion.

- It is important to address tobacco control through a comprehensive approach, and to consider it a national priority.
- Drama products are influential in shaping and developing both social awareness and public health practices in the Region.
- The existence of extensive tobacco use in drama that does not reflect reality but rather reflects messages commonly used in tobacco marketing.
- There are two exceptions to the comprehensive ban on TAPS in drama: for historical context, but without branding of specific tobacco products; and for showing the health consequences of tobacco use.
- The commitments of Parties to implement the WHO FCTC should not only be driven by legal commitment but also by the moral framework of the Region.
- Each sector has a role to play in enforcing a comprehensive ban on TAPS in drama.
- Enforcement of comprehensive bans on TAPS in drama should expand to cover all drama types and all mediums.
- The academic sector has a vital and important role in conducting research on TAPS in drama and in engaging a variety of groups including researchers, students and academics in research on TAPS and developing enforcement mechanisms for a total ban on TAPS in drama.
- The recommendations of the consultative meeting should not target one sector in particular, but rather address all relevant sectors in a comprehensive and complementary manner.
- Controlling TAPS in drama requires action on many fronts: legislative and legal; professional conduct; research; and advocacy.

6. ACTION POINTS

While the suggested action points are broadly applicable across all countries, participants recognized the variation in the situation in countries in the Region and the need to adapt them to country needs, contexts and resources. The action points suggested for WHO are also presented in tabular form, specifying partners and timeframes in Annex 3.

The ultimate goal is to ensure that all drama targeting children is free from tobacco use and all forms of TAPS. The suggested measures are not aimed at controlling the freedom of speech or censoring drama, but rather at putting in place measures to protect future generations and societies from the devastating impact of TAPS in drama.

Member States

- Establish a national observatory body, which can be hosted by any of the national bodies working in tobacco control, to monitor TAPS in drama and report on it on a regular basis.

- Establish a national coordination mechanism to support work in this area.
- Comprehensively implement the WHO FCTC Article 13 Guidelines on enforcing a comprehensive ban on TAPS.
- Update or introduce a rating system that will rate films containing TAPS as not appropriate for audiences under 18 years old and that prohibits the sale of tickets of such films to people under 18.
- Mandate by law that any drama product containing tobacco use or products be immediately preceded by an anti-tobacco advertisement in all distribution channels.
- Mandate by law that scenes containing tobacco use must be accompanied by simultaneous on-screen health warnings.
- Control cross-border drama products that contain TAPS through collaboration between relevant sectors such as health, information, trade and customs authorities.
- Stop any financial aid/subsidary to drama containing TAPS through coordination between the health and financial sectors.
- Implement evidence-based programmes to support tobacco control with targeted action for groups such as youth, students and women.

Drama-makers

- Build bridges between drama-makers and the health sector.
- Use dramatic tools to address the harmful effects of tobacco use within drama productions.
- Support the adoption and enforcing of laws to ban TAPS in drama.
- Support the introduction of adult ratings for films containing TAPS.
- Supporting the placement of health warnings inside cinemas.
- Enforce a no “pay-off” (for TAPS) declaration for each drama production.
- Produce anti-tobacco adverts for use in cinemas before and during presentations.
- Engage professional associations for media workers in enforcing a total ban on TAPS in drama.
- Even where there is dramatic necessity for tobacco use in a drama, ban the branding of specific tobacco products.
- Show health warnings during and in the middle of presentations of imported drama productions containing TAPS.
- Monitor old drama productions and introduce health warning spots on DVDs of TAPS-containing drama products.

Civil society groups and nongovernmental organizations

- Consider the establishment of national alliances in the area of tobacco control including prevention of TAPS.
- Involve drama-makers in tobacco control national alliances.
- Coordinate with drama-makers in all efforts to ban TAPS in drama.
- Exchange information and knowledge at national and regional levels.
- Acknowledge annually the efforts of individuals and institutions working in the area of enforcing a comprehensive ban on TAPS in drama.
- Consider litigation as a tool for controlling any violations of the ban on TAPS in drama.

- Establish a regional observatory to monitor TAPS in drama.
- Conduct joint research on TAPS in drama and disseminate the results publicly.
- Create pressure groups for the adoption and enforcement of the maximum levels of all tobacco control measures.
- Implement measures to mobilize society against TAPS in drama through clear and evidence-based communication plans.
- Raise funds to tackle the various tobacco control challenges.
- Continue to monitor tobacco control activities in the Region.

Researchers

- Collaborate for the establishment of national and regional observatories to monitor TAPS in drama.
- Identify research gaps and work jointly to bridge them.
- Establish a scientific methodology for monitoring TAPS in drama.
- Study the impact of TAPS in drama on young people and other vulnerable groups.
- Evaluate the impact of policy on TAPS on a regular basis.

WHO

- Draft standard legislative articles on TAPS in drama and develop a list of key indicators for banning TAPS.
- Provide technical support to countries on issuing a code of ethical conduct between the health and drama-making sectors.
- Inform the Secretariat of the WHO FCTC of the outcomes of the meeting and request it provide a detailed breakdown of TAPS and outline special actions for TAPS in drama.
- Monitor the commitment of countries to a comprehensive ban of all forms of TAPS, and reflect the outcome of monitoring within ongoing reporting systems.
- Dedicate an annual award by the WHO Regional Director for the Eastern Mediterranean to a health-friendly, tobacco-free drama (a “smoke-free” production).
- Approve and apply a tobacco-related rating for selected dramas (a “traffic signal”).
- Send regular letters to media officials concerning media practices in general and during particular seasons, such as the month of Ramadan.
- Notify countries of the recommendations of the meeting via the Regional Director.
- Appoint Goodwill Ambassadors from anti-tobacco drama supporters.
- Continue to support the monitoring of TAPS in drama.
- Provide training on applying the guidelines of Article 5.3 for drama-makers, including workshops in art academies and institutes for film-makers.
- Develop a fact sheet on TAPS in drama.
- Communicate with organizers of regional film festivals asking to make them tobacco-free and to hold seminars addressing TAPS in drama for participants.
- Hold a multisectoral consultative session for ministers of health in the Region and a roundtable meeting for ministers of information regarding TAPS in drama.
- Hold a consultative session for regional and subregional organizations in the Region concerning TAPS in drama.

Annex 1**PROGRAMME****Day 1. Sunday, 24 August 2014**

08:30–09:00	Registration
09:00–10:00	Opening session Welcome remarks <i>Dr Samer Jabbour</i> Introduction of participants Adoption of Agenda Selection of Chair Purpose of meeting <i>Dr Fatimah El Awa</i> TAPS and the guidelines of article 13 of the WHO FCTC <i>WHO FCTC Secretariat</i>
10:00–10:45	Discussion

First session. Identifying the problem

10:45–11:45	Historical relations with Hollywood <i>Dr Stanon Glantz</i>
11:45–12:15	TAPS in drama in the Eastern Mediterranean Region <i>Dr Fatimah El Awa and Dr Tawhida Khalil</i> Lessons learnt of working with countries to control TAPS in drama <i>Dr Luminita Sanda</i>
12:15–13:30	Discussion

Second session. Evidence and best practices

13:30–14:15	The evidence: what is science telling us on TAPS in drama? <i>Dr Stanton Glantz</i>
14:15–14:45	The Bollywood experience in controlling TAPS in drama <i>Dr Prav Sinha</i>
14:45–15:00	Discussion
15:00–16:00	Working groups: Theme (e.g. Everyone has a role) Working group 1: How can WHO contribute to the TAPS control in drama? <i>Coordinator Dr Fatimah El Awa</i> Working group 2: How can we better engage the drama community in advocating for our health message? <i>Coordinator Dr Ashraf Mohammed</i> Working group 3: Support needed by civil society <i>Coordinator Ms Rania Baroud</i> Working group 4: How can governments contribute to TAPS control in drama? <i>Coordinator Dr Sahar Labib</i>
16:00–17:00	Feedback of working groups and open discussion

Day 2. Monday, 25 March 2014**Second session. Evidence and best practices (continued)**

08:45–09:00	Recap of day 1
09:00–10:00	TAPS control in Turkish drama <i>Dr Hilal Ozcebe</i>
10:00–11:00	TAPS control in Egyptian drama <i>Dr Amr Osman</i>
11:00–11:15	Efforts of the GCC in banning TAPS in drama <i>Professor Tawfik bin Ahmed Khoja</i>
11:15–11:30	TAPS in Kuwaiti and Saudi Arabian drama <i>Professor Watfa Hamadi</i>
11:30–12:00	Discussion
12:00–13:00	Working groups on converting best practices into regional reality. <ul style="list-style-type: none">• Drama-makers• WHO• Nongovernmental organizations• Governments• Coordination

Third Session. Solutions, the way forward and the role of different partners

14:00–14:30	Reports of working groups and open discussion
14:30–15:00	Suggested policy action and the way forward <i>Professor Stanton Glantz</i>
15:00–15:30	Possible action by WHO and the health sector <i>Coordinators Dr Fatimah El-Awa, Dr Wedad Al-Maidoor, Dr Sahar Labib</i>
15:30–16:00	Possible action by the drama sector <i>Coordinator Professor Ashraf Ahmad</i>
16:00–16:30	Possible action by civil society <i>Coordinator Mr Mohammad El Sawy</i>
16:30–17:00	Closing remarks

Annex 2

LIST OF PARTICIPANTS

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Annex 3.**ACTION POINTS FOR WHO**

No.	Action point	Partners	Timing
Legislative measures			
1	Setting standard legislative articles about TAPS in drama as well as developing a list of the key indicators for banning TAPS	Selected experts	First quarter of 2015
2	Providing required technical support for countries to issue a code of ethical conduct between the health sector and the drama sector	The countries present at the meeting (Egypt, Kuwait and United Arab Emirates)	Last quarter of 2014
3	Informing the Secretariat of the WHO FCTC of the outputs of the meeting and requesting it to provide a detailed breakdown of TAPS and to dedicate special activities for TAPS in drama	WHO FCTC Secretariat	Last quarter of 2014
4	Monitoring the detailed commitment of countries to the comprehensive ban of all types and forms of TAPS and reflecting the outcome of the monitoring within ongoing reporting systems	WHO headquarters and the WHO FCTC Secretariat	On a regular basis
Awareness procedures			
5	Dedicating an annual award to be granted by the WHO Regional Director to a health-friendly, tobacco-free dramatic work (a “smoke-free” production)	A selected panel of specialists	On a regular basis, starting from the beginning of 2015
6	Approving and applying a rating for selected dramas (a traffic signal system)	A selected panel of specialists	The month of Ramadan
7	Send regular letters to media officials concerning media practices in general and during particular seasons, such as the month of Ramadan	TFI	Immediately before Ramadan
8	Notifying countries of the outputs of the consultative meeting via the WHO Regional Director	TFI	Last quarter of 2014
9	Appointing Goodwill Ambassadors from anti-tobacco drama supporters	To be selected by a specialized committee	

Research procedures and capacity-building			
10	Continue to support monitoring of TAPS in drama	Relevant bodies	Annually
11	Provide training for applying the guidelines of Article 5.3 for drama-makers sector, conducting workshops in art academies and in institutes for young drama-makers	Drama-makers in the Region, international experts	Second quarter of 2015 or simultaneously with World Conference on Tobacco or Health
12	Developing a fact sheet about TAPS in drama	A specialized expert	Second quarter of 2015
13	Communicating with regional festivals to make them tobacco-free and asking organizers of festivals and cultural events to hold seminars addressing TAPS in drama for their regular participants	Regional and subregional organizations	On a regular basis
Procedures for awareness raising and political commitment			
14	Holding a multisectoral consultative session for ministers of health in the Region concerning TAPS in drama	National organizations and ministries of health	End of 2015
15	Holding a roundtable meeting for ministers of information regarding TAPS in drama	National organizations and health ministries	End of 2015
16	Holding a consultative session for regional and subregional organizations in the Region concerning TAPS in drama	Regional and subregional organizations	First quarter of 2016



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