

# Regional meeting on the implementation of Articles 9 and 10 of the WHO Framework Convention on Tobacco Control

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## Introduction

More than 8 million deaths are reported globally every year due to the tobacco epidemic (1). In the WHO Eastern Mediterranean Region (EMR), 19% of adults (approximately 92 million people) are current tobacco users (2). Articles 9 and 10 of the WHO Framework Convention on Tobacco Control (FCTC) (3), and their partial guidelines, aim to assist Member States in strengthening their tobacco control policies by regulating the contents and emissions of tobacco products and enhancing tobacco product disclosures. However, Member States need to understand the importance of these Articles and how to adapt, implement and evaluate them.

In March 2023, WHO held a regional meeting to discuss how to implement Articles 9 and 10 and share latest information.

## Summary of discussions

Only 1 of the 60 countries that are on track towards reaching the 30% relative tobacco use reduction target by 2030 is in the EMR (4). Regional, multisectoral collaborations are needed to achieve the tobacco control agenda, however, there are challenges. These challenges include tobacco industry interference, alarmingly high availability of cheap tobacco and nicotine products, availability of new and emerging products, aggressive marketing by tobacco companies, COVID-19 disruptions, nondisclosure of relevant information by tobacco companies to regulatory agencies, weak legislation with weak enforcement, budget constraints and competing priorities, bureaucracy, discrepancies in tobacco regulation across EMR, illicit trade, limited access to certified tobacco and nicotine testing laboratories, lack of training and awareness among decision-makers about tobacco control issues, and lack of national-level research on tobacco (5,6). These challenges are largely fuelled by the limited knowledge of, and limited evidence on, the long-term health effects of tobacco products.

## Country experiences in tobacco control

EMR countries have been using the Interactive Smoking Projection and Target Setting Tool (ISPT) (7) to identify

the best demand reduction options at country level. ISPT provides data on the number of lives lost under weak control policies and the estimated number of deaths that could be averted with appropriate control, which can then be used to develop a tailored action plan.

Islamic Republic of Iran has been using evidence to advocate for increases in tobacco taxes. Control efforts include the establishment of national quitting and cessation clinics, public campaigns on the availability of cost-covered counselling services, as well as continuous monitoring and evaluation to measure the effectiveness of the national cessation services.

Oman was inspired by Saudi Arabia's precedence to implement plain packaging, with the support of WHO and the Gulf Cooperation Council.

Pakistan has increased the size of graphic health warnings to 75%, banned the sale of single stick cigarettes, expanded the smoke-free places policy, strengthened bans and monitoring of TAPS, and increased tobacco tax. Its National Tobacco Control Strategy 2022–2030 is expected to help strengthen tobacco control.

Qatar has strengthened its tobacco control laws and regulations, is implementing a tracking and tracing system, and hosted a smoke-free FIFA World Cup 2022. Proposed initiatives include prioritization of the tobacco control legislation, awareness campaigns, tobacco surveillance, cessation services, and plain packaging.

Saudi Arabia conducted youth and adult tobacco use surveys, prohibited smoking in government facilities and public places, expanded its national cessation services, implemented plain packaging, enforced TAPS legislation, raised tobacco taxes, and implemented a tobacco tracking and tracing system. These have contributed to high-level achievements in all MPOWER policy areas (7).

Sudan proposed the ratification of the update to the Protocol to Eliminate Illicit Trade in Tobacco Products, ratification of its tobacco control legislation, application of larger graphic health warnings, and integration of cessation services into primary health care.

In Tunisia, there has been successes in enlarging graphic health warnings, strengthening the smoke-free public places laws, establishing a high-level national antismoking committee, releasing a tobacco control

<sup>1</sup> Summary report on the Regional meeting on the implementation of Articles 9 and 10 of the WHO Framework Convention on Tobacco Control. <https://applications.emro.who.int/docs/WHOEMTFI230E-eng.pdf?ua=1>.

investment case, and developing a national tobacco control strategy and action plan.

## Implementation of Articles 9 and 10 of the FCTC in the Region

EMR is an especially appealing market for the tobacco industry, however, the region has great potential for improving tobacco control. Preventing the initiation of new users, especially among young people, is crucial to ending the tobacco epidemic, just as product regulation is essential to reducing demand and to producing positive economic outcomes for countries. Evidence has shown that countries with robust regulation programmes have succeeded in generating more revenue from tobacco control, which they were able to use for other health-related interventions (8).

There is a need for stronger multisectoral participation and networking to increase awareness, understanding and implementation of Articles 9 and 10. It is important to strengthen tobacco product legislation by regularly updating the laws to include new and emerging products. National tobacco control policies should cover all types of tobacco products, it should prohibit flavouring, and specify minimum age requirements for purchasing the products.

Product testing can play a significant role in bolstering tobacco control regulatory efforts. Cross-border collaboration among EMR countries is required to leverage capacities for laboratory testing and ensure access to advance techniques and equipment. Testing will help regulate the use of ingredients in tobacco products, such as additives and flavours, which tobacco companies use in making their products more appealing and addictive.

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## Conclusions and recommendations

The meeting was an important first step in improving understanding and implementation of Articles 9 and 10 of the FCTC in the EMR. It made the following recommendations for Member States, WHO and the FCTC secretariat.

### For Member States

1. Strengthen tobacco product regulation and legislation by integrating Articles 9 and 10 into the national tobacco control legislation and actions, extending regulation to all tobacco products, avoiding and addressing legal loopholes, and regularly updating legislation to include emerging products.
2. Apply TAPS bans to all types of tobacco and nicotine products.

### For WHO

1. Continue providing technical support for implementation of Articles 9 and 10 by sharing the latest knowledge, research and available resources with Member States.
2. Provide recommendations and guidelines on how to regulate the various types of tobacco and nicotine products.
3. Strengthen tobacco and nicotine laboratory testing capacity in EMR.
4. Strengthen coordination and multisectoral collaborations at the regional level to enhance the control of tobacco and nicotine products.

### For FCTC Secretariat

1. Regularly disseminate information about upcoming tobacco-related conferences and events.
2. Develop and disseminate a step-by-step, user-friendly guideline on how to best implement Articles 9 and 10.