









REPORT ON A REGIONAL CONSULTATION

Consultative meeting to address the evolving activities of the tobacco industry in the Eastern Mediterranean Region and response strategies:

Article 5.3 – what's next?

Cairo, Egypt 12–13 February 2020



















Article 5.3



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Faculty of Health Sciences



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1. INTRODUCTION

In recent years, the tobacco industry has radically changed its operations and strategies in order to continue to influence tobacco control policy and further its interests in a world that increasingly views cigarettes in a negative light. It has promoted new products that it claims are less harmful than conventional cigarettes and pursued a "harm reduction" public relations strategy to influence public perception and policy-making. This "harm reduction" or "reduced risk" marketing strategy has been extended through the introduction of novel and emerging nicotine and tobacco products – including electronic nicotine delivery systems (ENDS), electronic non-nicotine delivery systems (ENNDS) and heated tobacco products (HTPs) – into markets around the world. The reduced risk approach is currently being promoted as part of a "smoke-free" public relations strategy, through which the tobacco industry seeks to rebrand itself as an important ally for public health advocates and policy-makers.

For many years, pursuing policy change has been the only tool used by Member States of the WHO Eastern Mediterranean Region to prevent tobacco industry interference. However, during the 66th session of the Regional Committee for the Eastern Mediterranean in October 2019, Member States requested WHO technical advice on exploring other strategies including litigation. Such litigation would not only aim for compensation from the tobacco industry, but for legislative enforcement and prevention of interference in general. Exploring this possibility requires examining past cases of litigation against the tobacco industry globally and the capacity of legal systems in the Region for such litigation to be pursued.

In the light of the evolving strategies of the tobacco industry to subvert tobacco control efforts and the new challenges thus posed, the WHO Regional Office for the Eastern Mediterranean technically partnered with the American University in Beirut, Lebanon, to hold a consultative meeting on future implementation of Article 5.3 of the WHO Framework Convention on Tobacco Control (WHO FCTC) and to explore new strategies for ending tobacco industry interference, including litigation.

The aims of the meeting were to:

- examine the scope and details of tobacco industry interference in the Region;
- discuss how health advocates and governments should address the "harm reduction" marketing strategies that the tobacco industry is pursuing;
- discuss suitable tools for responding to these new marketing strategies.

The meeting was opened by Dr Ahmed Al-Mandhari, WHO Regional Director for the Eastern Mediterranean. Dr Al-Mandhari welcomed the participants and thanked them for all their work in the area of tobacco control. He stressed the importance of the meeting, emphasizing the mandate given to the WHO Secretariat by Member States during the Regional Committee in 2019 to provide technical advice on addressing the tobacco industry's evolving tactics in the Region. Dr Al-Mandhari acknowledged the regional commitment to the WHO FCTC and to Article 5.3 as a tool for protecting public health policies from the interference of the tobacco industry. He stated that further options for tobacco control, such as litigation, should be discussed and considered by the meeting participants.

Dr Rima Nakkash, Associate Professor, American University of Beirut, emphasized the importance and timeliness of the consultation. She referred to the huge potential that monitoring of tobacco industry tactics had for improving public health. Dr Nakkash acknowledged the success of public health and tobacco control measures in the Region, and stressed that more work was needed to respond to the tobacco industry's continuous attempts to undermine public health policies. She gave the examples of online selling of tobacco products and use of social media to promote tobacco products as new factors that create a challenging environment for tobacco control. Dr Nakkash stressed that innovative interventions would be needed to address these evolving tobacco industry tactics.

In his opening remarks, Minister Plenipotentiary, Mr Said El Hadi, Director of the Health and Humanitarian Aid Department, Arab League, highlighted the necessity of intercountry and international cooperation in addressing tobacco industry interference. His Excellency referred to the decisions of the Council of Arab Ministers of Health, where a guiding law had been drafted in 2018 to combat smoking and tobacco products. His Excellency presented the measures listed in this law, noting that they aligned with WHO's recommendations and the WHO FCTC obligations for tobacco control. His Excellency also stated that all articles of this law apply to novel and emerging nicotine and tobacco products.

Dr Asmus Hammerich, Director, UHC/Noncommunicable Diseases, WHO Regional Office for the Eastern Mediterranean, stated that the consultation presented a good opportunity to consolidate the knowledge and consensus on interventions for tobacco control. He referred to the importance of cooperation and coordination of efforts between all tobacco control advocates including Member States, academics and experts. Dr Hammerich presented the objectives of the meeting and its focus on how Article 5.3 implementation guidelines can apply to novel and emerging nicotine and tobacco products and their associated industry, and the exploration of different legal tools for advancing tobacco control including litigation.

The opening speeches were followed by a presentation on the meeting objectives and introduction of the agenda by Dr Fatimah El-Awa, Regional Advisor, Tobacco Free Initiative, WHO Regional Office for the Eastern Mediterranean. The participants agreed to appoint Dr Ejlal Al-Alawi of Bahrain as the chairperson of the meeting. The programme for the meeting and list of participants are included as Annex 1 and Annex 2, respectively.

2. SUMMARY OF SESSIONS

2.1 Setting the scene

Dr Rima Nakkash, Associate Professor, American University of Beirut, presented on the tobacco industry's presence in the Eastern Mediterranean Region. She identified the tobacco industry as the groups and individuals that grow, manufacture, market and retail tobacco products. Over 70% of the world's tobacco by volume is sold by four manufacturing and marketing companies: the state-owned China National Tobacco Corporation, Philip Morris International (part of the Altria group), British American Tobacco and Japan Tobacco International. In the Region, there is a growing industry of novel and emerging nicotine and tobacco products, in addition to the waterpipe industry. Other industries that may work as allies

to the tobacco industry include hospitality, gambling and gaming, advertising, packaging, transport, chemical production, agriculture suppliers, labour unions and investment advisers.

Various tactics used by the tobacco industry to promote its products globally and in the Region were clarified, including: interfering with government; threatening legal action; manipulating public perception; misrepresenting concerned groups; using economic manipulation; and undermining scientific research. Numerous examples exist of the industry aggressively marketing cigarettes in ways attractive to children and to promote cigarette sales/profits; expanding the market of novel products and waterpipes, while maintaining cigarettes as the core of its business; offering scholarships for education and promoting discussion among students about the potential benefits of novel products; introducing appealing flavours; sponsoring social activities; and advertising over social platforms.

The Lebanese experience in the 2019 Global Tobacco Industry Interference Index was presented, showing the different tactics used by multinational and local tobacco companies. Measures to protect public health policies from tobacco industry interference have been adopted in different countries, including implementation of WHO FCTC Article 5.3 and its guidelines in addition to codes of conduct based on Article 5.3.

The floor was opened for discussion on the definition of the tobacco industry, smokeless tobacco products and the role of tobacco control advocates in monitoring the tobacco industry. Potential actions based on the discussions were noted and included in the meeting recommendations.

2.2 Tobacco industry and novel tobacco products

Dr Mary Assunta, Head of Research and Advocacy, Global Center for Good Governance in Tobacco Control, presented on tobacco industry tactics for novel and emerging nicotine and tobacco products. The long history of tobacco industry tactics and lies was delineated, including a timeline showing tobacco companies' deception of the public from the 1950s to the present day. For decades, the tobacco industry has employed tactics such as: using front groups and allies; exaggerating the economic importance of the industry; direct lobbying of political figures; spending on corporate social activities; and diverting the media debate to other issues rather than the harms of their products.

Tobacco industry internal documents show how the industry is working to undermine public health policies through tactics such as undermining implementation of the WHO FCTC and normalizing the use of tobacco. The industry's short- and long-term plans involve maintaining its market of current tobacco products and expanding the market further through novel and emerging products. Tobacco industry marketing strategies and sponsored events are carried out globally and in the Region. Such industry tactics seek to gain the appearance of being part of the solution rather than the cause of the problem, including efforts to appear socially responsible and through providing an award-giving platform to present an image of being advocates for noble causes such as innovation and equality. There is discrepancy between the public narrative and the true objectives of the tobacco industry with regard to novel and emerging nicotine and tobacco products. Action is needed to ensure that implementation of the WHO FCTC is not compromised.

The floor was opened for discussion on issues in implementing WHO FCTC obligations in regard to novel and emerging nicotine and tobacco products, the legal situation around availability of such products, and platforms for information sharing among tobacco control advocates. Potential actions based on the discussions were noted and included in the meeting recommendations.

Ms Sabina Timco Iacazzi, Treaty Officer, WHO FCTC Secretariat, presented on the obligations of Parties under Article 5.3. A review was provided on implementation of Article 5.3 of the treaty and its guidelines, the work of the WHO FCTC Knowledge Hubs and the role of the Conference of the Parties (COP) in protecting public health interests. The obligation of Parties to adhere to Article 5.3 guidelines was emphasized, including avoiding conflicts of interest. COP decisions relevant to novel and emerging nicotine and tobacco products were highlighted. It was noted that the 2018 global progress report on implementation of the WHO FCTC states that tobacco industry interference, combined with the emergence of novel tobacco products, is the greatest barrier to WHO FCTC progress.

Ms Iacazzi also discussed Article 19 of the WHO FCTC and options of litigation as tobacco control measures for liability. She presented the WHO FCTC Article 19 Civil Liability Toolkit that was developed by the expert working group on liability, based on COP decisions. Although Article 19 gives a legal framework for Parties to consider criminal or civil liability, it is among the articles of the treaty with the lowest implementation rate. Ms Iacazzi discussed how litigation could be used in the public interest to reveal tobacco industry tactics.

Dr Fatimah El-Awa, Regional Advisor, Tobacco Free Initiative, WHO Regional Office for the Eastern Mediterranean, presented on the importance of monitoring and exposing the tobacco industry's tactics in the Region. Reports published by WHO were presented, showing tobacco industry tactics at global, regional and country levels. Legal frameworks and resolutions exist at global, regional and country levels that support the work of tobacco control advocates against industry interference. An overview of tobacco industry interference in the Region was provided, with examples from Member States. Currently, there is an ambiguous situation in the Region around allowing or banning novel and emerging nicotine and tobacco products. WHO is working to support Member States and provide technical advice in this area. A summary was provided of existing legislation in Member States to ban novel and emerging nicotine and tobacco products. However, there are gaps in legislation at national level and countries need to act against tobacco industry tactics and strategies.

Ms Peggy Hanna, WHO Strategic Communications Consultant, moderated a brainstorming session on country experiences, needs and priorities. Representatives of Member States shared their countries' experience in dealing with the challenge of novel and emerging nicotine and tobacco products, which initiated a discussion on options to address such products. The WHO FCTC and COP decisions regarding novel and emerging nicotine and tobacco products were discussed, with an understanding that such international obligations need to be reflected in national legislation. Potential actions based on the discussions were noted and included in the meeting recommendations.

A draft text on implementation of Article 5.3 guidelines for novel and emerging nicotine and tobacco products was distributed to participants, seeking their input. The side-by-side text was updated to accommodate feedback and adopted by the consultation (Annex 3).

2.3 The possibility of litigation at country level

Dr Doug Blanke, Executive Director, Public Health Law Center, United States of America, presented remotely on the experience of the United States in using litigation as a tool for strengthening tobacco control. The development in litigation processes in the United States and the response of the tobacco industry in each phase were delineated, and examples given of tobacco tactics and lies that have been used as the basis for litigation. During the first wave of litigation in the United States in the 1950s and 1960s, the industry's core defence was that cigarettes do not kill and are not addictive. The industry changed these claims overnight after the release of the Surgeon General's 1964 report on smoking: smoking cause cancer and heart disease. This started a second wave of litigation, where the industry's defence shifted to blaming the smoker: saying everyone knows cigarettes are dangerous, we put warnings on cigarettes packs but smokers chose to ignore them. The third wave of litigation started in the 1990s and continues until now, in which cases are brought on behalf of large numbers of smokers allowing pooling of resources. The benefits of litigation include: uncovering dramatic evidence about industry misconduct; forcing tobacco companies to change their marketing and business practices; providing financial compensation; and focusing public attention where it belongs - on the industry and its executives.

Dr Bassam Hijawi, President, Jordanian Anti-Smoking Society, Jordan, presented the Jordanian experience in litigation. In Jordon, tobacco control legislation started in 1977 and was updated after the country became Party to the WHO FCTC to align with its mandates. Comprehensive legal tools are employed in Jordon to control tobacco use, including legislation to ban tobacco advertising and to mandate graphic health warnings on tobacco packages. In Jordon, anti-smoking liaison officers carry judicial identification cards and have the right to observe and document tobacco industry violations and to enforce the law through litigation. Litigation against the tobacco industry in Jordon leads to compensation verdicts that the industry can easily afford, and greater awareness-raising activities are needed to advance litigation as a tool for tobacco control. Successful examples in the country include the intervention of tobacco control society managed to push for the implementation of tobacco control acts, especially in banning advertising. The Global Tobacco Industry Interference Index 2019 estimated that industry interference in Jordan is very high.

Dr ZiaUddin Islam, Technical Head, Tobacco Control Cell, Ministry of National Health Services, Regulations and Coordination, Pakistan, presented the Pakistani experience in litigation as a tool for tobacco control. There have been a number of litigation cases in Pakistan in the past three decades:

- in 1994, a case to ban television commercials for cigarettes was dismissed by the court;
- in 2006, a case initiated by letter to the Supreme Court led to a ban on waterpipes in 2018;

- in 2011, 2012, 2013, 2014 and 2015, cases filed by cafe managers and associations complained of police acts in confiscating waterpipe devices or closure of cafes serving waterpipes; such cases were dismissed by the court;
- in 2011, a nongovernmental organization petitioned the Punjab provincial government to stop waterpipe use in cafes on the basis of Ordinance No. LXXIV 2002; the court ordered authorities to strictly enforce the law, leading to a waterpipe ban in Punjab's cafes;
- in 2012, the court found Philip Morris Pakistan guilty of advertising in magazines despite an established ban and fined the company, warning of imprisonment for repeat violations;
- in 2014, Philip Morris challenged Statutory Notification 1086 issued by the Ministry of National Health Services, Regulations and Coordination on tobacco advertisement guidelines. Following a long process, Philip Morris withdrew its petition and undertook to abide by the notification of the Government of Pakistan;
- cases are still pending from 2015 and 2018, related to enforcement of laws requiring graphic health warnings covering 85% of tobacco packs;
- in 2017, the Pakistan National Heart Association filed a complaint in the office of the Federal Ombudsman alleging that the Federal Board of Revenue and the Ministry of National Health Services, Regulations and Coordination made inappropriate tax decisions, which resulted in a reduction in price for certain tobacco products. The Ombudsman ruled that the Government's departure from established practice amounted to maladministration;
- in 2018, a petitioner importing e-cigarettes claimed legality of the product and complained of harassment by local law enforcement agencies conducting raids against the business; the case is still pending.

Mr Behzad Valizadeh, Secretary General, National Tobacco Control Secretariat, Ministry of Health and Medical Education, Islamic Republic of Iran, presented on the litigation experience in the country. The Islamic Republic of Iran is Party to both the WHO FCTC and the Protocol to Eliminate Illicit Trade in Tobacco Products. The tobacco industry has already started using litigation as a tool against tobacco control in the country. The structure for tobacco control and enforcement of relevant laws in Islamic Republic of Iran was presented, with a brief on the National Tobacco Control Act. There have been some successful cases of litigation for tobacco control, including a case to ban flavours. It was emphasized that different techniques are required in different countries, according to their context and legal system.

Ms Luluwah Mohammed Alghamdi, Health Educator and International Relations Coordinator, Tobacco Control Programme, Ministry of Health, Saudi Arabia, presented on the litigation experience in Saudi Arabia. In Saudi Arabia, tobacco industry litigation started from the year 2001 when King Faisal Specialist Hospital and Research Centre filed a case against the tobacco industry in the United States of America, requesting compensation for 25 years of treatment costs caused by tobacco use. It was highlighted that using litigation as a tool for tobacco control needs more research and exploration of options to be considered by Member States. Mr Mishal Al Tamimi, Tobacco Products Manager, Saudi Food and Drug Authority, presented the experience of Saudi Arabia in implementing plain packaging of tobacco products. He stressed the need to raise public awareness on their right to sue the tobacco industry to claim compensation for health deterioration caused by tobacco products; lack of awareness could shift the public against tobacco control advocates rather than the industry. The floor was opened for discussion of litigation issues including: laws supporting litigation; advocacy for litigation; criteria for selecting place of litigation; and the role of the WHO FCTC in providing international law coverage for litigation. Potential actions based on the discussions were noted and included in the meeting recommendations.

Dr Thomas Hird, Lead, Rapid Engaged Action Team (REACT), Stopping Tobacco Organizations and Products (STOP), University of Bath, United Kingdom of Great Britain and Northern Ireland, presented the STOP initiative and the work of Bath University in monitoring tobacco industry tactics. STOP acts as a global tobacco industry watchdog for four partners: University of Bath, the Global Center for Good Governance in Tobacco Control, the Union, and Vital Strategies. The methods and tools used by the STOP team to monitor the industry were explained. The outcome of the STOP initiative includes a policy advising on response that the REACT team can provide to countries upon need and request. The University of Bath regularly provides a learning course on monitoring the tobacco industry, which countries are invited to join. The objective of this monitoring, research and accountability course is to support participants in: developing a tobacco industry monitoring model; conducting effective research on the tobacco industry; writing for diverse audiences and effectively disseminating findings; and promoting successful advocacy and accountability. STOP tools and resources can provide support to Member States to understand and expose tobacco industry behaviour in all its forms, to arm and support them with evidence and tools to counter the industry and to build broad whole-of-government support across sectors.

Mr Phillip Chamberlain, Tobacco Tactics Managing Editor, STOP, University of Bath, presented on investigative journalism in support of tobacco control policies and litigation. He outlined the Tobacco Tactics team's approach in exposing tobacco industry structures, interference, work and economics. The aim of publishing data on the Tobacco Tactics website is to make impact and improve people's health through exposing tobacco industry tactics. The impact of investigative journalism was illustrated through the example of data collection on bribery by whistle-blowers. For example, the disclosure of information about British American Tobacco activities in Africa by a whistle-blower showed alleged bribes to parliamentarians and public officials, as well as bribes to secure a competitive advantage against rivals. Examples where investigations formed the basis for litigation against big tobacco industry, such as Phillip Morris and British American Tobacco, were also presented. There are challenges in using investigative journalism as the basis of litigation and as tool for tobacco control, but Tobacco Tactics can provide support. Tobacco Tactics is a safe space for tobacco control advocates to share information. The platform that Tobacco Tactics uses for data collection and monitoring of the tobacco industry was introduced, and participants were invited to enrol in these continuous monitoring efforts.

Ms Deborah Ko Sy, Head of Global Public Policy and Strategies, Global Center for Good Governance in Tobacco Control, WHO FCTC Secretariat's Knowledge Hub on Article 5.3, STOP, presented on litigation in other regions: history and legal basis. The rationale behind using litigation as a tobacco control tool to achieve justice and compensation for industry wrongdoing was explained. Based on internal industry documents, it was highlighted how the tobacco industry defrauded and deceived both consumers and the public about the risk of its products, the risk of second-hand smoke, addiction, its manipulation of nicotine and its

marketing to children. Litigation cases from around the world were presented, including clarification on when civil society can start the litigation process. The presented cases covered tobacco industry violations of different acts in many countries including advertising bans, packaging labelling rules, product regulation, consumer protection laws, and tax and smuggling laws. A study showing the existence of civil liability, criminal liability and laws providing for compensation in tobacco control acts in Member States of the Region was presented.

Ms Ko Sy also presented on WHO FCTC Article 19 (liability) and the work done by the relevant expert group reporting to the COP. She clarified how seeking litigation can benefit tobacco control by holding the industry accountable, disclosing information and securing funds for tobacco control. Article 19 gives a legal framework for Parties to consider criminal or civil liability; however, it is one of the articles with the lowest implementation rate. The Article 19 Civil Liability Toolkit has been developed by the expert group to help Parties to strengthen civil liability mechanisms.

The floor was opened for discussion on issues including digitalization of tobacco control monitoring, evaluation of countries' implementation of WHO FCTC Article 5.3, access to data, and actions to initiate litigation, civil liability and criminal liability. Potential actions based on the discussions were noted and included in the meeting recommendations.

Dr Khaled Serry, Professor of Law, Ain Shams University, Egypt, presented on the possibility of litigation and compensation in the light of regional legal systems. The benefits of using litigation as a tool in tobacco control were clarified. The three main positive outcomes of using litigation are: effective implementation of the WHO FCTC, especially Articles 8, 9, 10, 13 and 19; facing down the threat of new tobacco products; and limiting the negative effects of tobacco industry tactics with consideration to Article 5.3. It was noted that there are challenges in following the United States' experience in litigation can extend from suing tobacco companies (manufacturers, distributors and sellers) to suing governments for failure to fulfil affirmative action to protect public health in accordance with already existing national legislations. Different types of litigation and areas of law can be used for tobacco control including civil liability, criminal litigation, administrative litigation and other legal options. Examples were presented on establishing liability, including a case-study of the New Consumer Protection Law No. 181 issued in Egypt in 2018.

Dr Patricia Lambert, Director, International Legal Consortium, Campaign for Tobacco-Free Kids, presented remotely on contemporary litigation in the area of tobacco control. The International Legal Consortium works to help countries to pass laws and implement evidencebased policies in accordance with the WHO FCTC. In addition to its role in defending tobacco control laws from attack by the tobacco industry, the Consortium supports capacity-building for tobacco control in low- and middle-income countries. The Tobacco Control Laws website (https://www.tobaccocontrollaws.org) is maintained by lawyers and provides easy access to laws and court decisions from around the world as well as summaries, fact sheets and legal analysis. It was emphasised that strong laws are essential in the fight against tobacco use. The tobacco industry has used or threatened to use litigation to undermine public health policies. Resources were shared to give a global picture of tobacco control laws, and examples were shown of litigation from Australia, the European Union, Kenya, Uganda, United Kingdom and Uruguay. Ms Peggy Hanna moderated an open discussion on the possibility of litigation at national level. Participants highlighted the need for: community empowerment and engagement in building the case for litigation against the tobacco industry; multisectoral cooperation and procedures for consolidating one governmental position in litigation against the industry; capacity-building of nongovernmental organizations to contribute in the fight against tobacco, including in leading cases of litigation; empowering municipalities and other branches of the government to lead in monitoring of tobacco industry interference on the ground; building partnership between public sectors and civil society to have a front for both monitoring and litigation of tobacco industry. These potential actions were noted and included in the recommendations from the consultation.

Dr Fatimah El-Awa delivered a brief conclusion and presented the recommendations noted during the consultation to participants, seeking their feedback and input. The text was updated to accommodate comments and the recommendations were adopted by the consultation.

3. CONCLUSION

During the consultation, it was well documented that the tobacco industry is using similar marketing strategies for novel and emerging products to those used for traditional tobacco products, including: marketing to women and children; denying any negative health consequences; using health professionals to promote products; and using products as tools to promote the acceptability of tobacco use. In addition, tobacco companies are marketing novel and emerging nicotine and tobacco products such as HTPs as "reduced risk" in order to create a new segment in the tobacco market and limit regulation. Tobacco companies are also engaged in the production and marketing of ENDS. The tobacco industry often seeks to conflate products which do not contain tobacco, with HTPs. This serves to confuse governments in a context where WHO FCTC obligations apply to all tobacco products including HTPs, which the industry refers to as "smoke-free" products. In summary, and based on COP decisions, HTPs are tobacco products to which all WHO FCTC regulations apply. While ENNDS are not tobacco products, based on the suggested regulatory options of the COP this consultation considered all possible options for regulating the activities of their associated industry.

During the consultation, several information gaps were highlighted, including: lack of a definition for the novel and emerging nicotine and tobacco industry; inadequate informationsharing between countries; limited information resources on novel and emerging products; and lack of factual information at country level on novel and emerging products and their associated industry. Accordingly, there is a need to: learn from each other's experience at country level; obtain guidance on where to find/access information; document best practices in dealing with novel and emerging nicotine and tobacco products; raise awareness among different government sectors on novel and emerging products and the associated industry. There is a need to address the fact that the tobacco industry has not taken responsibility for the harm it has caused society for decades. The industry continues to oppose tobacco control efforts, while simultaneously introducing novelty products for which evidence of harm is accumulating.

Following the request of Member States at the 66th session of the Regional Committee in 2019 for WHO support to move forward in using different legal options and tools for tobacco control, the consultation discussed the history of litigation and public inquires and their use in other

WHO regions whether by states, individuals and/or the industry. In that context, and based on COP decisions FCTC/COP5(9), FCTC/COP6(7), FCTC/COP7(11) and FCTC/COP8(18), it was agreed that:

- COP has provided significant support to countries in this regard through work on Article 19;
- Parties to the WHO FCTC and Member States in the Region should use the available information and tools provided by the WHO FCTC Secretariat in response to COP decisions;
- taking legal options/actions to strengthen tobacco control is a national-level decision for governments;
- in considering legal options, there is no "one size fits all" approach and different legal systems may apply different approaches as well as different rules and regulations.
- a specific form of litigation in one country may not be suitable in another country; countries need to assess the situation at national level and take action in line with critical analysis of needs and gaps.

Having reviewed the evidence from different countries in the Region and other WHO regions, and taking into consideration the regulatory options that were approved by the regional consultation on regulating e-cigarettes and novel tobacco products in July 2019, the consultation agreed two sets of recommendations for needed actions by Member States, WHO, the WHO FCTC Secretariat, academia and civil society. The first set of recommendations address application of the WHO FCTC, particularly Article 5.3, to novel and emerging nicotine and tobacco products. The second set of recommendations address the use of policy and legal options as tools for advancing tobacco control. Recommendations should be applied as suitable to each country's context.

Participants encouraged the engagement of civil society in supporting application of the WHO FCTC, particularly Article 5.3, to novel and emerging nicotine tobacco products as well as in supporting legal, administrative and judicial actions by Member States of the Region.

4. **RECOMMENDATIONS**

4.1 Application of the WHO FCTC, particularly Article 5.3, to novel and emerging nicotine and tobacco products

To Member States

- 1. Establish an updatable country profile on the tobacco industry at national level, update as needed and make available to the public.
- 2. Based on Article 5.3 guidelines, demand from national bodies that the industry of both traditional and novel and emerging nicotine and tobacco products release information related to their activities (such as budgets, strategies, market size and so on).
- 3. Continue to monitor and document tobacco industry activities in promoting its traditional and novel and emerging nicotine and tobacco products including in digital media.
- 4. Apply Article 5.3 guidelines to all public health policies with respect to tobacco control including policies on novel and emerging nicotine and tobacco products, recognizing that in some instances tobacco companies also market these products.

- 5. Develop and update national guidelines based on Article 5.3 to cover the novel and emerging nicotine and tobacco industry as well as the traditional tobacco industry.
- 6. Ensure, through national-level measures, that the WHO FCTC, its guidelines and COP decisions are comprehensibly applied to novel and emerging nicotine and tobacco products such as HTPs; and ensure that relevant COP decisions are applied to ENDS and ENNDS.
- 7. Ensure that all government sectors are regularly updated on government policy with regards to novel and emerging nicotine and tobacco industry interference in public health and tobacco control policies, and strengthen internal communication with all government sectors in order to share information and updates related to this front.¹
- 8. Strengthen awareness-raising efforts about industry or related third-party funding among research institutions, targeted government agencies and relevant international intergovernmental and nongovernmental organizations, and consider adopting policies that would prevent the use of such institutions' research outputs in policy development.²
- 9. Empower municipalities and other branches of government to lead in monitoring tobacco industry interference on the ground.

To WHO

- 10. Continue to monitor and document the activities of the novel and emerging nicotine and tobacco industry at regional level, including in digital media.
- 11. Establish a database of experts on the novel and emerging nicotine and tobacco industry and its activities for use by Member States as needed.
- 12. Document best practices in countering the activities of the tobacco industry, including in the context of novel and emerging nicotine and tobacco products, and share with Member States accordingly.
- 13. Link Member States with international organizations, academia, nongovernmental organizations and other entities with expertise in this field, as needed.
- 14. Engage with the medical community to reinforce its commitment to noncollaboration with the tobacco industry.
- 15. Develop a fact sheet/Q&A on novel and emerging nicotine and tobacco products, and disseminate to Member States and stakeholders.

To the WHO FCTC Secretariat

16. Continue to provide guidance to Parties to the WHO FCTC, based on COP decisions and WHO findings, on countering the activities of the novel and emerging nicotine and tobacco industry and share country and regional experiences in this regard with all Parties, as mandated by the COP and as requested by the Parties.

¹ Decision FCTC/COP8(18) encourages Parties: (d) to further enhance policy coherence within governments and require that all government sectors relevant to the implementation of the Convention, not only the health sector, comply with the requirements of Article 5.3 of the WHO FCTC, and reflect the same in positions put forward in different governing bodies of the United Nations system.

² Decision FCTC/COP8(18) encourages Parties: (b) to strengthen, where necessary, their awareness-raising efforts about the tobacco industry or related third-party funding among research institutions, target government agencies, and pertinent international intergovernmental and nongovernmental organizations, and to consider adopting policies that would prevent the use of such institutions' research outputs in policy development.

- 17. As relevant and as requested by the Parties, strengthen and expand the observatories and Knowledge Hubs network and capacity to overcome gaps in the area of novel and emerging nicotine and tobacco products and industry interference (for example, Article 5.3 Knowledge Hub resources on novel and emerging nicotine and tobacco products).
- 18. Consider establishing a Knowledge Hub for novel and emerging nicotine and tobacco products, which takes into account liability of the industry and socioeconomic realities, in a neutral institution that is known for its scientific non-bias and excellence to support Parties in this regard and as requested by Parties.
- 19. Expand the observatories network to include the establishment of an observatory for the Eastern Mediterranean Region and ensure it covers monitoring of novel and emerging nicotine and tobacco products and industry interference.
- 20. Provide clarificatory guides and examples for the Parties core questionnaire under the reporting system in order to capture the behaviour of the tobacco industry in promoting novel and emerging nicotine and tobacco products as well as progress in making the industry accountable (for example, Article 5.3, Article 13 and Article 19).

To academia

- 21. Support governments and civil society organizations in raising awareness about novel and emerging nicotine and tobacco products and industry practices.
- 22. Support governments and civil society organizations to develop evidence-informed leaflets and/or fact sheets on novel and emerging nicotine and tobacco industry practices for a variety of stakeholders and audiences including policy-makers.
- 23. Monitor and gather information on users of novel and emerging nicotine and tobacco products, including characteristics and reasons for initiating use.
- 24. Study factors related to industry practices including lobbying, marketing and advertising, and dissemination of misinformation that drive youth and adult use of novel and emerging nicotine and tobacco products.
- 25. Promote research and evidence generation on the harmful effects of novel and emerging nicotine and tobacco products and on policy options to address such products.
- 26. Observe Article 5.3 of the WHO FCTC and adopt policies to prevent any support and promotion of tobacco industry-backed research.

To civil society

- 27. Establish relevant databases of experts for use by countries and nongovernmental organizations.
- 28. Raise public awareness on novel and emerging nicotine and tobacco products as well as on the activities of the tobacco industry in general.
- 29. Exchange information with civil society organizations in other regions and document best practices.
- 30. Strengthen partnership with other tobacco control stakeholders including international organizations, nongovernmental organizations, academia and advocates (nationally, regionally and internationally).
- 31. Continue to monitor and report on the tobacco industry and its activities, including in digital media, and counter misleading information propagated by the tobacco industry about its addictive products.

4.2 Policy and legal options to advance tobacco control

To Member States

- 32. Establish a national-level expert group to assess the situation and gaps in relation to policy and legal options and identify required action; a legal committee should comprise experts from different legal disciplines and cover relevant government sectors.
- 33. National tobacco control leads, including health ministries, should coordinate with existing international and regional mechanisms to share information in this regard and benefit from available resources such as global initiatives for tobacco industry monitoring.
- 34. Document legal, administrative and judicial actions as well as best practices at national level that have advanced tobacco control and relevant policies.
- 35. Protect any administrative, legislative and judicial action taken by the government to advance tobacco control from the vested interests of the tobacco industry and its front groups.
- 36. Ensure that any legal option is taken within a comprehensive approach for tobacco control that allows for awareness raising, capacity-building, information sharing and strengthening of regulations and legal systems in support of tobacco control policies.
- 37. Ensure multisectoral cooperation and arrangements to consolidate one governmental position for legal, administrative and judicial actions against the tobacco industry.
- 38. Involve relevant sectors including the media, academia and others to take forward administrative, legislative and judicial actions (such as public inquiries, public investigations and so on); strengthen national-level partnerships in this regard to acquire the needed social support for any agreed action.
- 39. Build partnership between the public sector and civil society to present a united front for both monitoring and taking of legal, administrative and judicial action against the tobacco industry, and ensure community empowerment and engagement in the process.
- 40. Build capacity of nongovernmental organizations to contribute in the fight against the tobacco industry, including leading cases of legal, administrative and judicial action.
- 41. Bring the matter to the upcoming COP of including an agenda item on strengthening the use of legal options, including litigation, to hold the tobacco industry accountable in the context of WHO FCTC implementation at national level.

To WHO

- 42. Continue to support Member States in pursuing different legal options to hold the tobacco industry accountable for the purpose of strengthening tobacco control at the national level.
- 43. Continue to coordinate with the WHO FCTC Secretariat in this regard and ensure that the needs of regional Parties are well reflected in the COP agenda through the recognized legal mechanisms.

To the WHO FCTC Secretariat (in addition to its mandate from the COP³)

- 44. Continue work to develop, as requested by Parties, a roster of legal experts and resources to support Member States through the sharing of experiences and providing international-level legal advice in using different legal tools for the advancement of tobacco control.
- 45. Raise awareness about existing technical reports and information tools adopted by the COP on the implementation of Article 19 (liability) of the WHO FCTC.
- 46. Present a study that elaborates on the wide range of approaches to make the industry accountable for its behaviour as well as its products in administrative, legislative and judicial systems.
- 47. In the context of coordinating the work of experts on Article 5.3, and with the support of the Article 5.3 Knowledge Hub, promote the use of existing platforms that allow for automatic translation to promote information exchange or share intelligence about tobacco industry tactics.

³ Decision FCTC/COP8(18) requests the Convention Secretariat: to develop and implement, with the support of the Convention Secretariat's Knowledge Hub for Article 5.3, as appropriate, a comprehensive communications plan aimed at raising awareness of tobacco industry tactics and activities among international and regional government organizations as well as non-State actors, particularly those working on SDGs and NCDs, and in other international developmental initiatives/platforms.

Annex 1

PROGRAMME

Wednesday, 12 February 2020

Session 1 Introduction

- 08:30–09:00 Registration
- 09:00-10:00
- Opening remarks Dr Ahmed Al-Mandhari, Regional Director for the Eastern Mediterranean
- Opening remarks Dr Rima Nakkash, Associate Professor, American University of Beirut
- Opening remarks Minister Plenipotentiary, Said El Hadi, Director of the Health and Humanitarian Aid Department, Arab League
- Objectives of the meeting and introduction of agenda Dr Asmus Hammerich, Director, UHC/Noncommunicable Diseases, WHO Regional Office for the Eastern Mediterranean
- Introduction of participants

Session 2	Setting the scene		
10:30-11:00	Tobacco industry in the Region, symptoms and solutions Dr Rima Nakkash		
11:00–11:30	Revealing the tobacco industry tactics in the Eastern Mediterranean Region Dr Fatimah El-Awa		
11:30–12:00	Obligations of parties under Article 5.3 Ms Sabina Timco Iacazzi, Treaty Officer, Legal Affairs Team, WHO FCTC Secretariat		
12:00-13:00	Brainstorming session for countries on experiences, needs and priorities (oper discussion) Moderated by Ms Peggy Hanna, WHO Strategic Communications Consultant		
Session 3	Tobacco industry and novel tobacco products		
14:00–14:30	• Quick introduction to the challenges Dr Fatimah El-Awa		
14:30-15:00	 Tobacco industry tactics with novel tobacco products Dr Mary Assunta, Head of Research & Advocacy, Global Center for Good Governance in Tobacco Control (GGTC), Tobacco Interference Index and Rapid Engaged Action Team (REACT) of Stopping Tobacco Organizations and Products (STOP) 		

- 15:00–16:00 Pressure from the tobacco industry at country level with regards to novel tobacco products (open discussion with intervention from countries) *Moderated by Ms Peggy Hanna*
- 16:00–16:30 Litigation as a tool for strengthening tobacco control in the US experience (online presentation) Dr Doug Blanke, Executive Director, Public Health Law Center, United States of America
- 16:30–17:00 Summary of the day

Thursday, 13 February 2020

Session 4	The possibility of litigation at country level		
09:00–09:30	Setting the scene Dr Fatimah El-Awa		
09:30–10:30	 Litigation in Jordan Dr Bassam Hijawi, President of Jordanian Anti-Smoking Society Litigation in Pakistan Dr ZiaUddin Islam, Technical Head, Tobacco Control Cell, Ministry of National Health Services, Regulations and Coordination Other countries 		
11:00–11:30	The STOP initiative and the work of Bath University Dr Thomas Hird, Rapid Engaged Action Team (REACT) Lead, Stopping Tobacco Organizations and Products (STOP), University of Bath		
11:30-12:00	Investigative journalism in support of tobacco control policies and litigation Mr Phillip Chamberlain, Tobacco Tactics Managing Editor, Stopping Tobacco Organizations and Products (STOP), University of Bath		
12:00-12:30	Litigation in other regions: history and legal basis Ms Deborah Ko Sy, Head of Global Public Policy and Strategies, Global Center for Good Governance in Tobacco Control (GGTC), WHO FCTC Secretariat's Knowledge Hub on Article 5.3, Stopping Tobacco Organizations and Products (STOP)		
12:30-13:00	Open discussion		
14:00-14:30	Possibility of litigation and compensation in light of regional legal systems Dr Khaled Serry, Professor of Law, Ain Shams University		
14:30–15:00	Contemporary litigation in the area of tobacco control Dr Patricia Lambert, Director, International Legal Consortium, Campaign J Tobacco-Free Kids		

- 15:00–16:00 Possibility of using different legal tools in support of tobacco control at national level (open discussion) Moderated by Ms Peggy Hanna
- 16:00–17:00 Recommendations and closure

Annex 2

LIST OF PARTICIPANTS

MEMBER STATES

BAHRAIN

Dr Ejlal Faisal Ali Al-Alawi Public Health Consultant/Head of Tobacco Control Unit Ministry of Health Manama

EGYPT

Dr Galal Elshishiney Assistant for H.E. Minister of Health and Population for Public Health and Health Policies Ministry of Health and Population **Cairo**

Dr Mai Zein ElDeen Member of Technical Support Office for H.E. Minister of Health and Population Ministry of Health and Population **Cairo**

IRAN (ISLAMIC REPUBLIC OF)

Mr Behzad Valizadeh Secretary General of the National Tobacco Control Secretariat Ministry of Health and Medical Education **Tehran**

JORDAN

Ms Abeer Mohammad AlRao'sh Department of Prevention of Smoking Diseases Awareness and Communication Health Directorate Ministry of Health **Amman**

KUWAIT Dr Amaal Hussain Al Yahia Tobacco Control Focal Point Ministry of Health **Kuwait**

LEBANON

Mr Fadi Snan Director of the National Tobacco Control Programme Ministry of Public Health **Beirut**

OMAN

Dr Jawad Al-Lawati Senior Consultant of Public Health Ministry of Health **Muscat**

PAKISTAN

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SAUDI ARABIA

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Mr Mishal Al Tamimi Tobacco Products Manager Saudi Food and Drug Authority **Riyadh**

SUDAN

Ms Sara Elmalik Ahmed Focal Point for Tobacco Control Local Health System Program Manager Federal Ministry of Health **Khartoum**

TUNISIA Dr Faycal Samaali Tobacco Control Focal Point Primary Health Care Directorate Ministry of Health **Tunis**

Mr Mohamed Amine Achour Director Presidency of the Government **Tunis**

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Dr Basem Abdul Moneim Aldamanhory Public Health Specialist, Primary Health Care Technical Advisor, National Tobacco Control Program Ministry of Health and Prevention **Dubai**

THE ARAB LEAGUE

Mr Said El Hadi Minister Plenipotentiary Director of Health and Humanitarian Aid Department Responsible of Technical Secretariat for Arab Health Ministerial Council

Ms Shaimaa Adly Amer Member of Health Department

FRAMEWORK CONVENTION ALLIANCE (Eastern Mediterranean Region) (online)

Dr Hani Al Gouhmani Regional Coordinator Framework Convention Alliance (Eastern Mediterranean Region) Egypt

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Dr Essam Elmoghazy Chairman Cairo Association Against Smoking, TB and Lung Diseases (CASTLE) Egypt

Dr Wael Safwat President of Egypt Health Foundation Egypt

EXPERTS

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Ms Deborah Ko Sy Head of Global Public Policy and Strategies Global Center for Good Governance in Tobacco Control (GGTC) WHO FCTC Secretariat's Knowledge Hub on Article 5.3 of Stopping Tobacco Organizations and Products (STOP) **Thailand**

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Ms Peggy Edmond Hanna WHO Strategic Communications Consultant

Mr Phillip Chamberlain Managing Editor Tobacco Tactics Tobacco Control Research Group University of Bath **United Kingdom of Great Britain and Northern Ireland**

Dr Raouf Alebshehy Consultant of Public Health Egypt

Dr Rima Nakkash Associate Professor Department of Health Promotion and Community Health Faculty of Health Sciences American University of Beirut **Lebanon**

Dr Thomas Hird Rapid Engaged Action Team (REACT) Lead STOP: Stopping Tobacco Organizations and Products University of Bath **United Kingdom of Great Britain and Northern Ireland**

SKYPE

Dr Doug Blanke Executive Director Public Health Law Center **United States of America**

Dr Patricia Lambert Director International Legal Consortium Campaign for Tobacco-Free Kids **United States of America**

WHO SECRETARIAT

Dr Ahmed Salim Al-Mandhari, Regional Director, WHO Regional Office for the Eastern Mediterranean Dr Asmus Hammerich, Director, UHC/Noncommunicable Diseases Dr Fatimah El-Awa, Regional Advisor, Tobacco Free Initiative, UHC/Noncommunicable Diseases Dr Mahmoud Ismail, Technical Officer, Tobacco Free Initiative, UHC/Noncommunicable Diseases Mr Charles Fraser, International UN Volunteer, Tobacco Free Initiative, **UHC/Noncommunicable Diseases** Mr Keyrellous Adib, Fellow, Tobacco Free Initiative, UHC/Noncommunicable Diseases Ms Sophia Elgohary, Intern, Tobacco Free Initiative, UHC/Noncommunicable Diseases Ms Radwa El Wakil, Programme Assistant, Tobacco Free Initiative, UHC/Noncommunicable Diseases Ms Sabina Timco Iacazzi, Treaty Officer, Legal Affairs Team, WHO FCTC Secretariat Dr Randa Abou Elnaga, NCD and Tobacco Control Focal Point, WHO Representative's Office, Egypt Mr Mansour Ranjbar, National Professional Officer, WHO Representative's Office, Islamic Republic of Iran Mr Shahzad Alam Khan, National Professional Officer, WHO Representative's Office, Pakistan

Annex 3

SIDE-BY-SIDE TEXT OF ARTICLE 5.3 IMPLEMENTATION GUIDELINES: NOVEL AND EMERGING NICOTINE AND TOBACCO PRODUCTS

This side-by-side text advises WHO Member States of the Eastern Mediterranean Region on options to consider for protecting public health policies from commercial and other vested interests of the tobacco industry in relation to the industry's evolving activities to promote novel and emerging nicotine and tobacco products including heated tobacco products (HTPs), electronic nicotine delivery systems (ENDS) and electronic non-nicotine delivery systems (ENNDS).

The text is developed based on the WHO FCTC Article 5.3 implementation guidelines, which are comprehensive evidence-driven guidelines produced and adopted by the Conference of the Parties to the WHO FCTC. Article 5.3 states that: "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".

This side-by-side text is necessary as the tobacco industry is aggressively promoting novel and emerging nicotine and tobacco products in the Eastern Mediterranean Region and many Member States have requested guidance on how best to proceed in relation to the tobacco industry's tactics. In line with the eight main recommendations of the Article 5.3 implementation guidelines, the text suggests measures that Member States can take to address novel and emerging nicotine and tobacco products and provides examples of tobacco industry tactics to promote these new products.

The suggested measures are not limited to Parties to the WHO FCTC and could also be useful to Member States in other WHO regions.

1. Raise awareness about the addictive and harmful nature of tobacco products and about tobacco industry interference with Parties' tobacco control

Novel and emerging nicotine and tobacco products are proven to be harmful to health. Considering that the commercial and other vested interests of the tobacco industry are known to be in contradiction with public health aims. the tobacco industry employs tactics to interfere with the setting and implementation of public health policies and is working to promote novel and emerging nicotine and tobacco products.

Raise awareness among all government sectors and the public on:

- the evidence-based harmful effects and addictive nature of novel and emerging nicotine and tobacco products;

- tobacco industry practices and tactics in promoting novel and emerging nicotine and tobacco products;

- the individuals, front groups and organizations affiliated with the tobacco industry.

Examples of tobacco industry tactics that need to be addressed by awarness-raising campaigns:

– manoeuvring to influence tobacco control policy and to further industry interests by promoting novel and emerging nicotine and tobacco products, claiming they are an innovative and effective way to reduce the prevalence of traditional tobacco smoking. However, evidence shows that this "harm reduction" claim in many cases leads to dual use of novel and emerging nicotine and tobacco products and traditional tobacco, and that many youth initiate tobacco smoking through first using novel and emerging nicotine and tobacco products;

- in marketing novel and emerging nicotine and tobacco products, the tobacco industry claims to be targeting traditional tobacco users by introducing a less harmful product while avoiding referring to the harmful effects of such products;

- activities that cannot be interpreted as promoting novel and emerging nicotine and tobacco products as alternatives for traditional tobacco, but are obviously targeting a new youth market through adding flavours to products and selling them online in social media platforms accessible to all age groups;

- despite claiming it is trying to be part of the solution, the tobacco industry is seeking to reframe itself while sustaining its business through promoting novel and emerging nicotine and tobacco products.

2. Establish measures to limit interactions with the tobacco industry and ensure the transparency of those interactions that occur

Considering that the objectives and intentions of the tobacco industry are known to be in contradiction with public health aims. and recognizing that the harmful effects of novel and emerging nicotine and tobacco products are well proven, there is no need for any interaction between Member State officials and the tobacco industry and its affiliated institutes in this regard, which could lead to prompting the use of novel and emerging nicotine and tobacco products. Measures to avoid such unnecessary interactions listed in the Article 5.3 implementation guidelines can be used in the context of regulating novel and emerging nicotine and tobacco products.

Member State representatives and officials should:

- not interact with the tobacco industry in this regard except when and to the extent strictly necessary to enable them to effectively regulate novel and emerging nicotine and tobacco products;

- in exceptional cases when interactions are needed, those interactions should be conducted transparently and, whenever possible, records of such interactions should be disclosed to tobacco control officials and the public.

Examples of interactions with the tobacco industry that Member State representatives and officials need to avoid:

- engaging in dialogue and discussion with the tobacco industry or its affiliated institutes and organizations about public health policies regulating novel and emerging nicotine and tobacco products;

- participating in surveys and studies conducted by the tobacco industry, or in other institutes' research funded by the tobacco industry;

- responding to inquiries from the tobacco industry about market shares of novel and emerging nicotine and tobacco products;

- attending forums, meetings or workshops about novel and emerging nicotine and tobacco products organized by the tobacco industry or its affiliated institutes.

3. Reject partnerships and nonbinding or nonenforceable agreements with the tobacco industry

In their efforts to protect people from novel and emerging nicotine and tobacco products, Member States should not engage in any kind of partnership with the tobacco industry or any entity or individual working to further its interests. Such partnerships, if existing, give the tobacco industry more credibility in the public eye. In the case of novel and emerging nicotine and tobacco products, while their market is expanding despite public health efforts, it is critical that governments do not provide credibility to tobacco industry claims through partnerships. Measures to avoid such partnerships listed in the Article 5.3 implementation guidelines can be used in the context of regulating novel and emerging nicotine and tobacco products.

Governments of Member States should:

- reject any non-binding, non-enforceable or voluntary agreements with the tobacco industry regarding regulation of novel and emerging nicotine and tobacco products;

- refuse the tobacco industry organization of or participation in public education that is directly or indirectly related to novel and emerging nicotine and tobacco products, in particular targeting youth;

- decline any legal advice, legislation drafts or policy suggestions provided by the tobacco industry regarding regulation of novel and emerging nicotine and tobacco products.

Examples of tobacco industry tactics to promote novel and emerging nicotine and tobacco products through partnership with governments:

- conducting workshops with ministries of finance to claim economic benefits of introducing novel and emerging nicotine and tobacco products;

- signing memorandums of understanding with customs authorities to build capacities for better control of the import of novel and emerging nicotine and tobacco products;

- engaging with doctors in public faculties of medicine and ministries of health to train them on innovative tobacco cessation services including the use of novel and emerging nicotine and tobacco products.

4. Avoid conflicts of interest for government officials and employees

In their efforts to protect people from novel and emerging nicotine and tobacco products, Member States should avoid conflicts of interest for government officials and employees. Measures to avoid such conflicts of interest listed in the Article 5.3 implementation guidelines can be used in the context of regulating novel and emerging nicotine and tobacco products.

Measures to avoid conflicts of interest for government officials and employees:

- mandate disclosure of conflicts of interest of officials and others involved in discussions and decisionmaking on public health policies for regulating novel and emerging nicotine and tobacco products, and ban involvement if such conflict is declared;

- adopt codes of conduct to restrict and regulate, if necessary, officials' interactions with the novel and emerging nicotine and tobacco industry;

- ban public office holders involved in policy-making for regulating novel and emerging nicotine and tobacco products from any engagement in occupational activities with the tobacco industry within a specific period of time after leaving service;

- avoid the nomination of any person employed by the tobacco industry or any entity working to further its interests to serve on delegations to meetings of the Conference of the Parties, its subsidiary bodies or any other bodies established pursuant to decisions of the Conference of the Parties.

Examples of tobacco industry proposals that governments should decline include:

- pushing Member States to send representatives from non-health sectors to the WHO FCTC Conference of the Parties, as such representatives may view tobacco as a business rather than a health hazard;

- proposing local manufacturing of novel and emerging nicotine and tobacco products in partnership with the State-owned tobacco industry;

- offering public officials gifts or services and/or tours to countries where novel and emerging nicotine and tobacco products are produced;

- proposing funding for political parties or for government institutes in the form of donations.

5. Require that information provided by the tobacco industry be transparent and accurate

In their efforts to protect people from novel and emerging nicotine and tobacco products. Member States should be able to obtain transparent and accurate information from the tobacco industry. In their efforts to obtain such information, Member States can use the measures listed in the Article 5.3 implementation guidelines in the context of regulating novel and emerging nicotine and tobacco products.

Measures to secure access to transparent and accurate information:

- require the tobacco industry to submit information on manufacturing, market share, marketing expenditures, revenues and any other activity including lobbying, philanthropy and political contributions aiming to promote the use of novel and emerging nicotine and tobacco products;

- require the tobacco industry to disclose or register tobacco industry entities, affiliated organizations and individuals acting on their behalf, including lobbyists;

- impose mandatory penalties on the tobacco industry in the case of provision of false or misleading information, in accordance with national law;

- adopt and implement effective legislative, executive, administrative and other measures to ensure public access to a wide range of information on tobacco industry activities.

Examples of tobacco industry tactics to promote novel and emerging nicotine and tobacco products through inaccurate information:

- claiming to only want current smokers to use novel and emerging nicotine and tobacco products, while in reality promoting such products among youth;
- avoiding reference to the harmful effects of novel and emerging nicotine and tobacco products;
- funding research to generate data supporting its efforts or disputing evidence that highlights the harmful effects of novel and emerging nicotine and tobacco products;
- funding third parties, including think tanks, to give credibility to its claims in policy discussions and forums;
- hiding information on its strategies to expand its market in developing countries.

6. Denormalize and, to the extent possible, regulate activities described as "socially responsible" by the tobacco industry, including but not limited to activities described as "corporate social responsibility"

Use of "socially responsible" activities by the tobacco industry including so-called "corporate social responsibility" is a well documented manoeuvre aiming to manipulate public opinion to gain the appearance of respectability and to promote products. Member Ŝtates can regulate the "socially responsible" activities of the tobacco industry using the measures listed in the Article 5.3 implementation guidelines in the context of protecting people from novel and emerging nicotine and tobacco products.

Measures to regulate the "socially responsible" activities of the tobacco industry:

- raise awareness of government officials and the public on the actual purpose of the tobacco industry in performing, endorsing or supporting "socially responsible" activities;
- avoid any participation or partnership with the tobacco industry in its "socially responsible" activities;
- ban public disclosure by the tobacco industry of its "socially responsible" activities, except if legally required, to prevent the false appearance of the industry as a socially responsible entity;
- decline any donations or support to government activities from the tobacco industry;
- decline any contributions to the government from the tobacco industry, except for compensations due to legal settlements or mandated by law.

Examples of tobacco industry tactics to promote novel and emerging nicotine and tobacco products through "socially responsible" activities:

- claiming to be public health advocates in promoting the use of novel and emerging nicotine and tobacco products, using the claim of harm reduction;
- funding hospital and medical research on tobacco control and on introduction of novel and emerging nicotine and tobacco products as healthy alternatives to traditional tobacco use;
- announcing so-called corporate social responsibility activities on tobacco industry websites and using such activities to improve its public image;
- providing an award-giving platform to claim an image of advocating for noble causes such as innovation and equality.

7. Do not give preferential treatment to the tobacco industry

Novel and emerging nicotine and tobacco products are proven to be harmful and a threat to public health. Therefore, no preferential treatment should be given to the tobacco industry in promoting such products. Member States can use the measures listed in the Article 5.3 implementation guidelines to avoid giving preferential treatment to the tobacco industry.

Measures to avoid giving preferential treatment to the novel and emerging nicotine and tobacco industry:

- grant no incentives, privileges or benefits to the tobacco industry to establish or run its business, including manufacturing of and trade in novel and emerging nicotine and tobacco products;
- do not invest in State-owned industry of novel and emerging nicotine and tobacco products;
- fully implement the obligations of the WHO FCTC and decisions of the Conference of Parties related to novel and emerging nicotine and tobacco products;
- provide no preferential tax exemptions to the tobacco industry including on novel and emerging nicotine and tobacco products.

Examples of tobacco industry tactics to promote novel and emerging nicotine and tobacco products through securing preferential treatment:

- requesting tax exemptions on novel and emerging nicotine and tobacco products for a period of time following their initial launch;
- seeking exemption of novel and emerging nicotine and tobacco products from the obligations of national tobacco control acts;
- seeking exemption of some novel and emerging products from obligations of the WHO FCTC claiming absence of nicotine in product contents;
- expanding existing traditional tobacco manufacturing to produce novel and emerging nicotine and tobacco products without going through new licencing processes.

8. Treat Stateowned tobacco industry in the same way as any other tobacco industry

In cases where the Member State has a State-owned tobacco industry that produces novel and emerging nicotine and tobacco products, such industry should be treated in same way as any other tobacco industry. Member States can use the measures listed in the Article 5.3 implementation guidelines to avoid giving preferential treatment to Stateowned industry.

Measures to avoid giving preferential treatment to State-owned tobacco industry:

- ensure that the State-owned tobacco industry is treated in the same way as any other member of the tobacco industry with respect to setting and implementing tobacco control policy;

- ensure that the setting and implementation of tobacco control policy is separate from the oversight and management of the State-owned tobacco industry;

- ensure that representatives of the State-owned tobacco industry do not form part of delegations to any meetings of the Conference of the Parties, its subsidiary bodies or any other bodies established pursuant to decisions of the Conference of the Parties.

Examples of State-owned tobacco industry tactics to promote novel and emerging nicotine and tobacco products through preferential treatment:

- engaging in government discussions on public health policies and influencing regulation of novel and emerging nicotine and tobacco products;
- seeking exemptions from obligations of the WHO FCTC or national tobacco control acts;
- receiving fast-track processing to initiate businesses in production and trade of novel and emerging nicotine and tobacco products.

RESOURCES

Tobacco industry tactics

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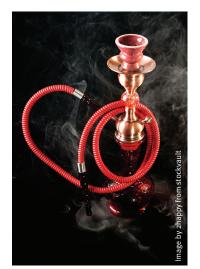
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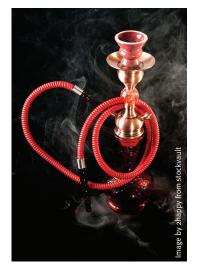














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