DECISION

FCTC/COP7(29) Delhi Declaration

Mindful of Article 25 of The Universal Declaration of Human Rights and the preamble of the Constitution of the World Health Organization (WHO), which states that the enjoyment of the highest attainable standard of health is one of the fundamental rights of every human being;

Recalling decisions FCTC/COP6(26) on the adoption of the Moscow Declaration; FCTC/COP5(5) on the adoption of the Seoul Declaration; and FCTC/COP4(5) on the adoption of the Punta del Este Declaration on the Implementation of the WHO Framework Convention on Tobacco Control;

Reiterating that it is the sovereign right of the Parties to protect public health by adopting national public health policies pursuant to and in consonance with conventions and commitments under WHO, particularly the WHO Framework Convention on Tobacco Control (WHO FCTC) and welcoming the recent developments and decisions of international tribunals that reaffirm this sovereign right;

Welcoming the United Nations General Assembly resolution on Transforming our world: the 2030 Agenda for Sustainable Development\(^1\), and in particular the inclusion of Target 3.a, Strengthen the implementation of the WHO Framework Convention on Tobacco Control in all countries, as appropriate, in the Sustainable Development Goals (SDGs);

Welcoming also the Addis Ababa Action Agenda, adopted by the Third International Conference on Financing for Development and endorsed by the United Nations General Assembly as

\(^1\) Resolution A/RES/70/1, 2015.
the framework for post-2015 development financing, which recognizes the role of tobacco price and tax measures in the prevention of noncommunicable diseases (NCDs);

Considering the importance of safeguarding regulatory space for public health objectives, including tobacco control policies, when entering into trade and investment agreements;

Recalling the Political Declaration of the High-level Meeting of the General Assembly on the Prevention and Control of Non-communicable Diseases, and emphasizing the crucial role of the WHO FCTC in its implementation;

Noting the 2016 report of the Convention Secretariat on Global progress in the implementation of the WHO FCTC (document FCTC/COP/7/4) and the observations contained in the reports of the intersessional working and expert groups, particularly those identifying priority needs of Parties,

The Conference of the Parties to the WHO Framework Convention on Tobacco Control:

1. **REAFFIRMS** that the effective implementation of the WHO FCTC, its guidelines and protocols facilitate the realization of the right of everyone to the enjoyment of the highest attainable standard of physical and mental health, recognized in the WHO Constitution and international human rights law as well as in national legislation of the several States;

2. **NOTES** that the heaviest burden of tobacco-related disease continues to be borne by the most disadvantaged population groups and is disproportionately high in lower-income countries;

3. **EXPRESSES** concern that the tobacco industry and its affiliates are continuing to promote tobacco products and intensify interference with international forums and national public health policies;

4. **NOTES** that the review of and assistance for implementation at the country level are critical to facilitate progress in treaty compliance;

5. **REITERATES** the need:
   (a) to counter any efforts by industry and other non-State actors that work to further the interests of the tobacco industry to subvert and undermine government policies on tobacco control;
   (b) to promote innovative financing and other measures for ensuring effective and sustainable assistance towards the implementation of the WHO FCTC and for making the best possible use of existing resources;
   (c) to support rapid entry into force and effective implementation of the Protocol to Eliminate Illicit Trade in Tobacco Products by encouraging Parties to take requisite steps towards this end;
   (d) to promote alternative livelihoods for tobacco growers and workers, tendu leaf growers and cigar leaf growers as a response to the expected gradual reduction in global tobacco consumption and promote regional and international cooperation for reaching this objective;

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2 Resolution A/RES/69/313, 2015, paragraph 32.
3 Resolution A/RES/66/2, 2014.
(e) to counter the threats from proliferation of all forms of tobacco use, including smokeless tobacco, as well as new and emerging tobacco or nicotine products that may encourage tobacco use and addiction;

6. CALLS ON Parties:

(a) to actively pursue the achievement of SDG Target 3.a and strengthen the implementation of the WHO FCTC, to request the Convention Secretariat to take the lead in coordinating support to Parties to this effect in collaboration with WHO and other intergovernmental organizations, and to make all efforts to promote additional related targets including but not limited to gender equality and reduced inequalities;

(b) to increase their efforts to prevent interference by the tobacco industry at all levels, in accordance with Article 5.3 of the WHO FCTC through legislative and regulatory measures and to inform non-health government departments of their obligations under Article 5.3;

(c) to increase, as appropriate, coordination and cooperation between health and trade/investment departments, including in the context of negotiations of trade and investment agreements;

(d) to engage in international cooperation to ensure effective implementation of the WHO FCTC, and to promote new and innovative forms of cooperation, including South–South and Triangular cooperation;

(e) to strengthen efforts, as appropriate, to increase financial, technical and human resources, particularly for and in developing countries, in order to assist Parties in fulfilling their obligations and providing support to build domestic technical capacities;

(f) to strengthen national capacity for tobacco taxes in accordance with Article 6 of the WHO FCTC in an effort to reduce consumption of tobacco products and improve revenue collection and domestic resource mobilization to meet the commitments contained in the Addis Ababa Action Agenda and support the implementation of the SDGs;

(g) to continue to promote ratification, acceptance and approval of the Protocol to Eliminate Illicit Trade in Tobacco Products in order to facilitate its early entry into force;

(h) to ensure that WHO FCTC implementation is an integral part of national multisectoral action plans and monitoring frameworks for the prevention and control of NCDs;

(i) to promote the implementation of policy options and recommendations on economically sustainable alternatives to tobacco growing, in relation to Articles 17 and 18 of the WHO FCTC;

(j) to promote a strengthened United Nations and bilateral interagency collaboration at the national, regional and international levels towards assisting WHO FCTC implementation;

(k) to use existing platforms, such as the WHO FCTC implementation database, and establish new mechanisms, where appropriate, to share and exchange best practices, lessons learnt and challenges in implementation including those related to implementation of policies and measures to prohibit, restrict or reduce the consumption of smokeless tobacco products as well as new and emerging tobacco or nicotine products that may encourage initiation, continued tobacco use and addiction;
(l) to utilize available resources and mechanisms of assistance, such as from the knowledge hubs and tobacco industry observatories, and to actively contribute to resource mobilization and assistance based on the recommendations from COP mechanisms;

(m) to integrate mechanisms for monitoring and evaluation of the Convention, such as the regularly updated reporting system, lessons learnt during needs assessment exercises, and the findings and methodology deriving from the work of the impact assessment expert group, to facilitate effective implementation;

7. REQUESTS the Convention Secretariat to support the implementation of the WHO FCTC as well as this Declaration.

(Fifth plenary meeting, 12 November 2016)