



UNITED NATIONS AD HOC INTERAGENCY TASK FORCE ON TOBACCO CONTROL

REPORT OF THE FOURTH SESSION KOBE, JAPAN 5 DECEMBER 2001

Agenda Item 1: Opening and welcome from the Director of WHO Kobe Centre and the Chairperson

The fourth session of the United Nations Ad Hoc Interagency Task Force on tobacco Control convened in Kobe, Japan, 5 December 2001. Seven United Nations organizations, as well as the World Bank and the World Customs Organization participated in the fourth session of the Task Force.

The Chairperson, Dr Bill Kean, Director, Department of Governance, WHO, opened the session.

Dr Yuji Kawaguchi, Director, WHO Kobe Centre (WKC), welcomed the participants and stated that this meeting would consolidate the commitment of the different agencies to work together and facilitate interagency coordination in the area of tobacco control.

Dr Kean provided an overview of the agenda, with a specific reference to Agenda Item 4 on the preparation and structure of the Secretary General's report on Task Force activities to the 2002 Substantive Session of the Economic and Social Council (ECOSOC). He stressed that this item would take more time as the Task Force was established by ECOSOC and its members therefore bear responsibility for preparing the report.

Dr Kean also briefed the participants with updates on interagency coordination in the United Nations. He noted that the Administrative Committee on Coordination (ACC) is now being renamed the United Nations Chief Executives Board for Coordination. He said that one of the issues that came up during the reform of the ACC subsidiary machinery has been the abolition of these ongoing committees and the move to establish ad hoc task specific taskforces. He noted that this Task Force on Tobacco Control is ahead of its time, having now been established for two years. The Task Force was one of the examples cited in the private meeting of the executive heads to promote the idea of establishing specific taskforces.

Agenda Item 2: Introduction of participants, and brief update on agency activities

Dr Kean invited the participating agencies to introduce themselves and to briefly describe the tobacco control work in their agencies.

- **Food and Agriculture Organization (FAO)**

The FAO has been participating in the meetings of the Task Force since its inception and hosted the second session of these meetings in March 2000.

The FAO has worked mainly on the completion of a project that aims at a better understanding of the economic implications of a global reduction of demand for tobacco.¹

The work was presented during the International Meeting on Social, Economic and Health Issues in Tobacco Control, held in Kobe the two days preceding the Task Force meeting. The project needs to be finalized and will take into account the discussions and comments provided during the presentation. This project included a literature review of studies on the world tobacco economy and five case studies on China, India, Malawi, Turkey and Zimbabwe. A case study on Brazil is still in progress and will be completed by February-March 2002. Computerized generalised equilibrium models were done on data from four countries (China, Turkey, Malawi and Zimbabwe) to understand the consequences across the economy of a drop in demand for tobacco. Finally, the FAO drafted a set of projections on the likely levels of production, consumption and trade in tobacco in 2010.

- **International Labour Office (ILO)**

Since the last Task Force meeting, the ILO has produced two working paper drafts: “The world tobacco industry trends and prospects” and “Making ends meet: bidi workers in India today”, a study of four states within India. The ILO has also commissioned six case studies in Brazil, Bulgaria, Cambodia, China, Malawi and the United States. These are not nationwide studies, but instead look at specific regions where unemployment, as a consequence of decreased demand, might be a problem.

The ILO tobacco meeting on the future of employment in the tobacco sector has been scheduled for 2003; however, the events of 11 September necessitated a number of meetings related to the transport, hotel and tourism sectors. The ILO’s resources were therefore re-assigned and the March 2002 session of ILO’s governing body will decide whether this meeting will take place.

The working group for a smoke free policy in the Safety and Health department of the ILO is drafting a code of practice on tobacco control in the workplace and expanding the existing database on drugs and alcohol to include tobacco issues. It is also trying to include tobacco in other projects within the ILO.

- **United Nations International Drug Control Programme (UNDCP)**

UNDCP has no mandate on tobacco and no activities directly related to tobacco control. However, it has 30 years of experience in alternative development, working to find alternative sources of income for farmers and communities who depend on opium or coca growing. Many lessons have been learned and good practices have been identified. One of the first lessons has been that simple crop substitution does not work.

¹ This project is an inter-agency project funded by FAO and the Swedish International Development Cooperation Agency (SIDA). The steering committee of this project comprises FAO, ILO, WHO, the World Bank, the United States Department of Agriculture (USDA) and the International Development Research Centre (IDRC) of Canada.

UNDCP programme in the field of demand reduction is growing. Programmes have been developed on women and drugs, children, youth and high risk groups. The lessons from these experiences can provide significant input to the tobacco control process.

In the regulatory framework for the convention, UNDCP has served as the secretariat for the International Narcotics Control Board since its establishment in 1991. The International Narcotics Control Board (INCB or Board) is the independent and quasi-judicial control organ for the implementation of the United Nations drug conventions. It was established in 1968 by the Single Convention on Narcotic Drugs of 1961. It had predecessors under former drug conventions since the League of Nations.

Over the last 80 years, a worldwide system for control of drugs of abuse has developed gradually through the adoption of a series of international treaties. The important multilateral conventions currently in force are the Single Convention on Narcotic Drugs of 1961, as amended by the 1972 Protocol; the Convention on Psychotropic Substances of 1971 and, adopted in 1988, the United Nations Convention against Illicit Traffic in Narcotic Drugs and Psychotropic Substances. Each successive treaty brought complementary regulations and advances in international law. From the beginning, the basic aim of the international drug control treaties has been to limit the use of drugs to medical and scientific purposes only.

Thus, UNDCP's monitoring work also covers licit substances submitted to international control. In this activity, UNDCP has been able to establish a system for database, a system for monitoring, a system for reporting and a system for analytic trends; it has also established ways to pressure governments acting against the articles signed in the conventions.

UNDCP has considerable experience in the areas of trade control, organized crime and smuggling; it is working on money laundering, controlling of asset forfeiture and facilitating the co-operation of member countries in being able to use these assets for victim compensation as well as other activities for the control. Since 1997, UNDCP has become part of the United Nations Office for Drug Control and Crime Prevention (ODCCP) which also includes the Centre of International Crime Prevention (CICP). The CICP is responsible for crime prevention, criminal justice and criminal law reform. It pays special attention to combating trans-national organized crime, corruption and illicit trafficking in human beings. The Centre assists countries in the elaboration, ratification and implementation of international criminal law Conventions and protocols, such as the recently (2000) adopted Convention on Trans-national Organised Crime. This experience could also be very helpful to the FCTC.

- **The United Nations, Department of Economic and Social Affairs**

The UN Department of Economic and Social Affairs is involved in tobacco through two of its divisions, the division for the advancement of women and the division for social policy and development.

The division for the advancement of of women is responsible for monitoring the implementation of the Beijing Platform for Action which addresses women and health including tobacco. In addition, the committee on the elimination of discrimination against

women has expressed concerns about smoking. For instance, in the last two sessions, the committee expressed concerns over the increasing tobacco use among women in Kazakhstan and Uzbekistan as well as the increased use of tobacco by girls in the Netherlands and Finland. Several of its members have collaborated actively with WHO initiatives on tobacco including panel discussions in events organized during special sessions of the GA Beijing +5. Similar events are planned to coincide with a special session on children which was supposed to take place in September 2001 but was postponed due to the September 11 events.

The social integration branch of the division for social policy and development is presently reviewing the potential for activities in the areas of tobacco use by youth and persons with disabilities. This is specifically a follow up of a paragraph on further initiatives for social development adopted by the Social Summit +5 that calls for comprehensive programs to reduce the consumption of tobacco. Incidentally, the head of this branch is personally interested in suggestions and feedback on possible collaboration among agencies on the specific issue of tobacco and youth.

The division for ECOSOC support and coordination would be interested in collaborating at a round table or a panel discussion on issues related to tobacco in conjunction with the presentation of the Task Force report to ECOSOC in July 2002.

- **United Nations Environment Programme (UNEP)**

UNEP has been to some extent an outsider in the tobacco issue, largely because it does not have a mandate on life-style related diseases. However, it has worked in several areas which could be related to tobacco.

For the world summit in sustainable development, UNEP is developing a document: Global Environmental Outlook 3 (GEO3), which will include subjects like deforestation and air pollution (indoor and outdoor).

In relation with the Memorandum of Understanding (MOU) signed between UNEP and WHO, UNEP continues its work on Health and Environmental Effects of Chemicals (e.g. the agro chemicals used in the tobacco production).

Also, UNEP has recently concluded the Rotterdam Convention with FAO on Prior Informed Consent and the Stockholm Convention on the Persistent Organic Pollutants. UNEP has experience in developing and promoting internationally and legally binding instruments.

This meeting is important for UNEP as it will help the agency understand the tobacco-related activities of the other agencies; hopefully this will help it to develop an internal policy document on tobacco control use in its premises.

- **United Nations Children's Fund (UNICEF)**

UNICEF hosted the first session of UN Task Force on Tobacco Control in New York and this is the second session of the task force in which the agency has participated. Its focus is children and it recognizes that tobacco is an important health issue for children and

young people. UNICEF is looking forward to raising the profile of tobacco control with a special emphasis on children and young people, as well as to further collaboration with other UN agencies.

- **The World Bank**

The World Bank updated participants about its work on tobacco control since the last UN Task Force meeting. Its work focuses on the economic issues of tobacco control.

On policy discussions, the World Bank has worked on meetings with WHO, including the International Meeting on Social, Economic and Health Issues in Tobacco Control in Kobe, Japan, 3-4 December 2001 and the Malta Consultation on Effective Collaboration Between Health and Financial Sectors for Tobacco Control (fifteen Mediterranean countries bringing together Ministries of Health and Finance), 7-8 September 2001. It has worked with the IMF on a country meeting in Budapest, Hungary with the Ministry of Finance and the Ministry of Health, 25 May 2001 and with PAHO on a Caribbean Region Tobacco Meeting in Jamaica, 9 April 2001. The World Bank also led a session on tobacco control at a meeting with all the World Bank-funded project offices of the countries in their European region and Central Asia region in Warsaw, Poland, 11 September 2001.

The World Bank developed “Tobacco at a glance”, a four-page summary listing key interventions to reduce tobacco. In addition, it is still disseminating and distributing “Curbing the Epidemic” and the volume of background papers entitled “Tobacco Control in Developing Countries” both in hard copy and through the World Bank Website.

The World Bank has also continued its analytic work. It has commissioned local consultants to complete studies in a number of countries on the relationship between price and demand for tobacco products (in the case of China, with the partnership of RITC, Research for International Tobacco Control), and has worked with WHO to provide support to researchers in additional countries. This support includes making available its draft economics of tobacco control toolkit, written to help researchers. The World Bank has analysed the economic data on Global Youth Tobacco Survey in five countries and has also analysed several household expenditure data sets, to better understand expenditure on and use of tobacco product by different income groups. It has worked with WHO and other partners on the NATIONS² new tobacco database. Also, a pilot cessation project has begun in Indonesia, among poor communities to test whether cessation support methods developed in high-income countries can be successfully and cost-effectively adapted to low-income settings.

Finally, work has been done within the World Bank collaborating with health sector colleagues to assist with implementation and to plan for new tobacco control components in projects funded by the World Bank.

² The National Tobacco Information Online System (NATIONS) is an electronically integrated information system containing country-specific information on a wide variety of tobacco control issues. NATIONS is a collaborative effort of WHO-Tobacco Free Initiative, The American Cancer Society, the World Bank and the Centres for Disease Control and Prevention.

- **World Customs Organization (WCO)**

WCO's involvement is specifically related to the illegitimate aspect of tobacco trade (smuggling). WHO and WCO are working together in the area of illicit tobacco trade and are working towards the conclusion of a Memorandum of Understanding between the two organizations early in 2002.

The WCO also attended the last round of the negotiations for the Framework Convention on Tobacco Control and looks forward to a fruitful and continuing relationship. Likewise, WHO has been participating actively in various WCO technical meetings and committees focusing on discussions of illicit trade in tobacco products.

- **World Health Organization (WHO)**

WHO has actively collaborated with many of the present agencies in the economic aspects of tobacco control. It worked closely with the World Bank on country case studies looking at the demand side measures, with the FAO on their project and also with ILO and the World Bank on employment studies which were completed before this meeting and presented during the International Meeting on Social, Economic and Health Issues in Tobacco Control. In collaboration with the World Trade Organization (WTO), WHO has also published a report "Confronting the Tobacco Epidemic in an Era of Trade Liberalisation"³; this paper was originally prepared for the Commission on Macroeconomics and Health. Some work done within the WHO between different units examines the effect of trade on health and the cost-effectiveness of different interventions.

A prototype of collaboration between different agencies took place between the World Bank and WHO during the preparation for the meeting in Malta: the World Bank invited the Ministries of Finance from fifteen Mediterranean countries while WHO invited the Ministries of Health from those same countries. This meeting aimed to provide policy and technical links between the two sectors. Based on this prototype, WHO is planning to prepare other meetings in 2002-2003 considering additional regions and possibly broadening the debate by including representatives from other Ministries.

Agenda Item 3: Discussion of the recommendations and follow up to the "International Meeting on Economic, Social and Health Issues in Tobacco Control"

Dr Vera da Costa e Silva reported the different issues and recommendations that have come out of the International Meeting on Economic, Social and Health Issues in Tobacco Control. The list of recommendations includes the following:

- There is a need to explore in more depth the health care costs involved in tobacco-related diseases. More studies and dissemination of methodology are needed;
- Tobacco control should be added in the poverty issues agenda of the different organizations (impact of health care costs, death, taxes on sustainable livelihood);

³ WHO/NMH/TFI/01.4

- Statistical data needs to be improved and their limitations addressed (household surveys vs. aggregate statistics, smuggling data);
- Projections should consider a wide range of scenarios and the underlying assumptions and methodology should be clearly stated to facilitate greater understanding;
- The evaluation of components must be enforced, and there is a need to evaluate the different policies and trends to ensure that the right decisions are taken with regards to moving forward in tobacco control;
- Regarding privatisation, specific analysis should be performed for countries that are considering privatisation of the tobacco sector;
- As for employment issues, ILO's studies show that the trade-off between exploitation and poverty alleviation in bidi production should be carefully examined;
- There is a need to take into account remittance when examining impact on farming communities;
- Better studies should be done on participation of women and children on tobacco production;
- Studies should not only consider alternative crops but alternative economic scenarios and alternative sources of income;
- On tobacco production, studies of the health effect of tobacco crops on farmers need to be developed as well as taking into account the impact on the environment of tobacco growing;
- Regarding CGE studies, the methodology and assumptions needed to be clearly defined including the policy scenarios;
- The consequences of WTO's entry in economies like China's on tobacco communities livelihoods must be addressed;
- Finally, workplace passive smoking costs, including costs of fire, needed to be estimated.

Dr da Costa e Silva noted that the strong component of the outcomes is related to assessment and research. Some research is very specifically oriented to tobacco, but other research could incorporate some questions and issues regarding tobacco in broader research. This can be done by every organization. The main tobacco-related issues discussed during the technical meeting focused on employment, contraband, privatisation, economic transition and agricultural diversification. Many participating organizations already work on one or more of these issues (ILO, FAO and World Bank). All the potential and actual areas of collaboration can involve tobacco-related activities: One example is the smoke-free ILO, where ILO has the ownership but this can be shared with the other organizations.

UNDCP noted with regard to one of the main points mentioned above, that alternative economic activities should be considered instead of alternative crops. Alternative crops remain a fundamental part of the picture, since many of the illicit drug crop cultivation areas rely on agriculture. However, alternative economic activities such as livestock, agro-forestry, forest management and agro-processing should be considered, as well as non-farm activities. It is essential to put the people in the centre of decision, and to ensure that they have ownership of planning design and implementation of the interventions.

UNDCP also raised the issue of the importance of education in the process of reducing demand of tobacco. Therefore, a strong association with UNESCO should be considered.

The link between tobacco and other risky behaviours (alcohol and drugs) should be looked into because it opens up to a larger part of the civil society concerned with fighting alcohol and drugs. Also, since tobacco is a legal and attractive crop, efforts must be made to increase the disincentives of its use. The tobacco control framework must focus on this issue.

FAO noted that tobacco control requires a changing balance of economic benefits between tobacco and other agricultural products or economic opportunities in other parts of the economy. Thus, for example, stimulating demand for other products is a key to improving their prices while also contributing to efforts to resolve significant nutritional problems. Thus, instead of spending money on tobacco in some rural areas in developing countries, people might be encouraged to choose to improve their nutrition, a central issue for FAO. It was agreed that each agency would seek to identify areas within its own mandate where such shifts might be appropriate, and would cooperate with WHO and other agencies in developing appropriate messages and operational programs in these areas. FAO proposed that this matter might be considered at a future Task Force meeting.

On the issue of supply reduction, WHO pointed out that it is focusing on demand reduction in tobacco control. WHO is not using tobacco supply as a measure to improve health. As successful tobacco control programmes are implemented, per capita consumption of tobacco products will decrease. However, for global tobacco production and consumption to decrease and hence cause a reduction in employment, the per capita reduction will have to offset projected increases in global population and income. It is therefore unlikely that significant numbers of tobacco-related jobs will be lost in the coming years, rather, it is likely that fewer new ones will be created. That is not to say the short term transitions costs that may be associated with a global reduction in the demand for tobacco products should be ignored. Research is ongoing at WHO, FAO, ILO and The World Bank to provide a well defined and thoroughly researched analysis of economic issues as a basis for promoting the necessary international and national measures to address any transition costs that may arise because of a global reduction in the demand of tobacco products cause by the implementation of successful tobacco control programmes.

The Chair closed this agenda item by noting that the next step for the UN Task Force would be to look at the priority programs in each agency and to find how complementary ones that involve tobacco control, can be added in or become one of those priority programs. In the next meeting, the member agencies will look at what each agency has been doing and discuss how they have been able to incorporate tobacco control into other programs.

Agenda item 4: Preparation and structure of the Secretary General's report on Task Force activities to the 2002 Substantive Session of ECOSOC

Dr Bettcher presented a brief overview of the last Secretary General's report of this Task Force which was submitted to the Substantive Session of ECOSOC on July 2000. At the July 2000 session it was decided that the Secretary General should submit a second report of the Task Force for the July 2002 session. The last report covered different themes:

- The origin of the Task Force,
- A detailed overview of public health, economic and social implications of the global tobacco epidemic,
- A section on new areas of inter-agency collaboration and prospects for future cooperation,
- A section on the WHO FCTC,
- At the end, it reported general conclusions, recommendations and other proposed actions.

Regarding the method of work used for the preparation of the report, WHO coordinated the work as Chair. First, a timeline was presented for the members to submit individual written contributions. A first draft, based on the submissions was completed and distributed to the Task Force members for comments. Finally the report was finalized by WHO and submitted to ECOSOC.

Questions left to be addressed include the following:

- Should the next report follow the same structure?
- What will be the timeline?
- How should the report be organized in order to reflect the output of the Kobe consultation and the last Task Force session since the report submitted to ECOSOC on July 2000?
- How should the detailed recommendations and general themes be included in the report?

Discussions between the members of the Task Force led to the following decisions regarding the Secretary General's report:

- WHO will take the lead for drafting the report.
- Whereas the first report provided an overview of the epidemic, of the planned activities of the Task Force and of the Framework Convention on Tobacco Control, this report will be more of an update on the Task Force's work with more descriptions and summaries of what has taken place over the last two years.
- Regarding the latest studies undertaken by FAO, ILO and the World Bank, a summary of the key findings and messages, particularly those that are policy relevant, will be done and included in the report.
- The structure of this report will follow more or less the same structure of the first report.

- **Part I:** The first section of the report will be a short opening on the origins of the Task Force and an update on the Task Force mechanisms.
- **Part II:** This section will focus on the economic implications of tobacco control by including the technical issues brought up during the technical meeting; the summaries of the different studies and the technical outputs and major discussions of the meeting.
- **Part III:** This section will focus on new areas of multisectoral inter-agency collaboration.
- **Part IV:** This section will provide an update on the FCTC process.
- **Part V:** This section will propose recommendations and proposed actions.

The members of the Task Force discussed the summaries of studies to be included in the report. The representative of the ECOSOC's support division noted that the length of the

report had tight limits and suggested a short summary of the studies, describing results and recommendations, could be included in the report, while a more extensive description of the work done could be presented in a separate “background” document to be distributed to delegates. The issue of the type of summary to be included in the report will be presented to the bureau of ECOSOC and the Task Force members will be informed of the final decision.

The representative of the ECOSOC’s support division suggested holding a round table breakfast or lunch discussion, a dialogue with the member states of ECOSOC, to discuss in more details the results of the various studies. This meeting would take place before or during the Substantive Session of ECOSOC on July 2002. Having a technical session before the political one would give much more content to the discussions. In the past, these side events have been very useful for the formal discussions. After discussion with the bureau of ECOSOC, and if interest in collaboration is expressed by relevant agencies, the details regarding this roundtable will be circulated to the Task Force members.

The timetable of the drafting of the report, as agreed upon by Task Force members, is as follows:

- Submissions of individual written contributions to the report from Task Force members should be sent to WHO by 15 February 2002.
- Based on the submissions, WHO will draft the report and will send it to the Task Force members no later than 15 March 2002.
- The Task Force members will have two weeks to review the report and send WHO their comments on the draft by 31 March 2002.
- Based on these comments, WHO will finalize the report by 15 April 2002.

Agenda item 5: Summary of the third session of the FCTC Intergovernmental Negotiating Body

Dr Bettcher presented a general briefing on the FCTC. The FCTC is an instrument to address the globalization of the tobacco epidemic, those policy aspects of tobacco control which cross national borders, for example, trade issues, illicit trade, advertising and marketing. The ultimate goal of the FCTC is to reduce the burden of disease. This convention is the only platform available to develop binding global standards on tobacco. The treaty can incorporate mechanisms to monitor the conduct of countries and hold them responsible to the global public. Elements and provisions can also be included to help countries to strengthen tobacco control at the national level. There is also a possibility of developing protocols on particular issues like smuggling and advertising.

The pre-negotiation phase of the convention was completed in May 2000 after which a technical group developed a technical foundation on which the negotiations could proceed. The work was accepted by the World Health Assembly (WHA, the governing body of the WHO) and set as the basis for initiating the negotiations. Then, the political body, the Intergovernmental Negotiating Body (INB) commenced its work in October 2000. The third session of the negotiations just ended (22-28 November 2001). The fourth session will take place on 18-23 March 2002 in Geneva and the fifth session will take place in October 2002. The text of the FCTC is expected to be adopted by the World Health Assembly (WHA) of May 2003.

At the first session of the Intergovernmental Negotiating Body (INB 1), three working groups were established, the first one focused on public health issues, particularly non-price issues, issues related to demand reduction and cessation, and youth access. The second one focused on trade-related and economic issues and the third one focused on legal, procedural and institutional questions. The Chair's text was proposed by the Chair of the negotiations prior to the second session. Following the discussions of the chair's text, the Co-Chairs of the Working Groups developed a compendium of all of the textual proposals on the Chair's text. Those three papers were the basis for initiating the third round of the negotiations.

168 of 191 Member States attended the last round of negotiations. Considerable progress was made during INB 3. The Co-Chairs texts were elaborated and accepted as a sound basis for resuming negotiation at INB 4 for two Working Groups (Two and Three). Regarding Working Group One, because of complexity of tasks assigned to this group there was not enough time to complete final negotiable texts (this work will be completed between sessions). Protocols to the FCTC were discussed during the final Plenary meeting (28 November); several delegations favoured an early (possibly simultaneous) protocol focusing on illicit trade. The USA offered to host an intergovernmental technical meeting on illicit trade in 2002.

Dr Bettcher listed the various contributions of the FCTC Process to Global Tobacco Control: creating a global forum to highlight tobacco control issues, promoting multilateral coordination and domestic action, facilitating development of national coalitions, a launching pad for regional and sub-regional consultations on FCTC. In terms of national capacity building, the FCTC also provides important contributions; facilitating the development of national coalitions, establishing mechanisms to coordinate tobacco control actions by developing national plans as well as facilitating multisectoral responses (legislation, economics, advocacy) and evaluating and adjusting policies.

Finally, Dr Bettcher noted the potential links of the FCTC to other International Organizations:

- The possible provisions on restricting tobacco sales to youth and youth related surveillance have direct links to the Convention on the rights of the Child (UNICEF),
- In the development of the reporting provisions the experience of monitoring the UNDCP drug control treaties is relevant, as well as the experience of UNDCP in area of crop diversification,
- FCTC provisions and a possible protocol on illicit trade will benefit from multisectoral collaboration between public health and customs and from close institutional linkages between the World Customs Organization and WHO,
- Potential provisions focusing on the protection from exposure to passive smoking in the workplace will complement existing ILO conventions pertaining to occupational health and safety, also collaboration with ILO on alternative livelihoods,
- Potential FCTC provisions overlap with WTO TRIPS agreement; GATS; GATT 1994, TBT, and Agreement on Agriculture,
- Also the WHO Secretariat has actively collaborated with the Ozone Secretariat, UNEP regarding several substantive treaty negotiation and monitoring questions.

Dr Bettcher added that the presence of the International Organizations as observers in the negotiations was of high importance because of the helpful interventions they could contribute. Their specific expertise can provide empirical and technical clarifications regarding some provisions.

Referring to the FCTC, the ILO noted that Article (L) of the convention on Alternative Livelihoods was one of the most important issues related to their organization.

WCO noted that a meeting at a directorate level between WHO and WCO will soon take place in order to see how to advance the relationship between the two organizations. Regarding the activities of WCO, there has been a European review in the last two years of cigarette seizures. This review will be extended to a global analysis and can provide useful information for WHO. Also, the organization is doing work on tracking and tracing of illicit drugs and will keep WHO informed on this issue.

Agenda item 6: WHO update on Tobacco Product Regulation

Dr da Silva e Costa described the importance of product regulation. Any product of the society needs to be regulated to protect people from risks of harm, facilitate commercial trade and marketing and contribute to the evolution of better products. The context of tobacco regulation is different because it is very harmful and practically unregulated. Tobacco is excluded from consumer protection laws; for example, there is no disclosure of the contents of the cigarette product, also, there is little information about the ingredients delivered from tobacco smoke. Product regulation needs to address these issues. The approach of tobacco regulation is very different from country to country and there should be a framework policy that addresses different components of tobacco product regulation.

In response to the problem, WHO has created a Scientific Advisory Committee on Tobacco Product Regulation (SACTOB) to collect inputs and information from the main experts in the area of product regulation. The committee is composed of 20 international and national experts on product regulation, smoking cessation and policy making; the committee tries to have a regional and gender balance among its components. Three meetings have been held to date and a fourth will take place in Oslo, Norway from 4-6 February 2002.

The expected outcomes from the committee should provide Member States with scientifically sound recommendations in product regulation, policies at country/regional level (regulatory agencies, litigation, laboratory structure, regulatory framework), programmatic recommendations (not to mention “mild” and “light”, cigarette package labeling with ingredients) and discussions on the standards to adopt (ISO adoption of WHO standard). WHO launched a monograph on Advancing Knowledge on Regulatory Tobacco Products during its last World Health Assembly, which reported on the outcomes of the first meeting of SACTOB. Another activity of the committee involves discussions and issuing of recommendations on national/international reports and laws that address product regulation issues (The Institute of Medicine [USA] report, EU Directive, National Cancer Institute [USA] report on tar and nicotine).

Also, the committee invites various tobacco companies of the region to receive an update on their efforts to reduce the production of harm caused by tobacco products. It is important to note that this invitation should not reflect any partnership, collaboration or dialogue between WHO and the tobacco industry.

Agenda item 7: World No Tobacco Day 2002

World No Tobacco Day takes place the 31st May of each year. WHO Headquarters and its regional offices commemorate this day where the international community addresses tobacco in all its main aspects. There is strong participation by Member States and their Ministries of Health as well as by other bodies. Dr da Costa e Silva noted that every year a different theme is used. In 2001, the theme was: “Second-hand smoke kills, let’s clear the air”. It was based on the assumption that there was a need to increase awareness on the dangerous effects of exposure to tobacco smoke. Awards were distributed to cities, individuals, experts and authorities that contributed to improving second-hand smoke policy in different countries and regions.

In 2002, the World No Tobacco Day theme will be: “Tobacco free sports, play it clean”. The idea behind this theme is to ban completely the sponsorship of the tobacco industry from all sports activities. Sports are associated with life, health and well being and it is therefore very difficult and inconsistent to associate them with tobacco use. For this event, WHO received the full support of the International Olympic Committee, the Federation International de l’Automobile association, the Federation Internationale de Football Association and Olympic Aid, which joined in the Tobacco Free Sports Initiative. In November 2002, during the INB3, there was a launching ceremony of the Tobacco Free Sports Initiative; many sports athletes from all over the world were present and delivered the message about tobacco free sports. In relation to this initiative, some events will be organized during 2002: the World Cup, which will be launched in 31 May 2002, will be promoting Tobacco Free Campaign and the Winter Olympic Games in the US, Salt Lake City, will also address the Tobacco Free Sports Initiative. WHO welcomes the participation of its sister agencies and friends to commemorate the World No Tobacco Day and encourages them to incorporate this activity in their agenda.

The UNDCP representative noted that UNDCP has been working with FIFA for the 2002 World Cup for sports against drugs. UNDP and the World Anti-Doping Agency also share initiatives with FIFA. In the future all these fragmented activities should be coordinated in order to establish more synergy between these agencies and possibly creating a single initiative to address these risky behaviours.

Agenda item 8: Discussion of smoke free policies in the United Nations system

Dr da Costa e Silva noted that the idea of smoke free policy has been first addressed by many Member States in the World Health Assembly (WHA46.8). The United Nations building in Geneva, where the World Health Assembly was held, had no policies regarding smoking bans; this was clearly inconsistent with WHO’s work on tobacco control and the reason why Member States started asking for a smoke free policy in the UN. From this request a survey was developed to collect employees’ inputs on tobacco control. It was first distributed to WHO employees. The results showed that a total majority favoured a total ban on smoke. One third of the smokers believed that total ban

will help them quit smoking while 84% of smokers believe that total ban will help them cut their consumption. This policy is respected in WHO and the prevalence in the organization is lower than the prevalence in France and Switzerland. The same survey was distributed in ITU and ILO. The responses were different from WHO's employees, they were less in favour of a total ban, perhaps because there was more awareness within WHO on the health consequences of smoking. The number of smokers is not very different between the three organizations but the percentage of persons who smoke in the workplaces is twice as high in ITU and ILO as in WHO.

Dr da Costa e Silva also presented some ideas about how the different agencies could share and explore the possibility of building tobacco control policies. For example, a taskforce addressing the issue of tobacco control could be established in the United Nations. The present agencies could disseminate the result of the survey and look for people who would participate in the process of addressing smoke-free policies in the organization. Dr da Costa e Silva noted that regulation and education had to be addressed together in any policy regarding smoke free facilities. It is important to raise awareness among employees during the implementation of smoke free policies and activities such as, for example, the commemoration of World No Tobacco Day. Measures to address the persons who smoke in smoke free areas should be taken. Finally, a smoking cessation support for the people who want to quit smoking should be considered in the UN agencies.

ILO reviewed the developments in their agencies regarding smoke free policies; there is a ban on smoking in all the different areas of the building except for one cafeteria. More smoking areas are being created outside, and the building is supposed to be totally smoke free by the end of 2002. Some actions have also been taken to try to provide cessation aid for people who want to quit smoking. A hotline will be opened for people who want to make anonymous complaints about persons smoking in their offices and to help others get information about cessation.

FAO has banned smoking totally in the Headquarters and outside smoking areas have been established. FAO has also established a smoking cessation program.

Further to the Administrative Instruction issued in 1995, which considerably restricted tobacco smoking in the Secretariat Building, and the Information Circular issued in 1997, which prohibited smoking in other premises of the United Nations in New York, the United Nations Medical Services Division has become an outreach point for activities to assist UN staff and the delegates to quit smoking. Individual smoking cessation sessions, which encompass different techniques including treatment, continue. (A special Smoking Cessation Booth was set up during the recent Health Fair to increase motivation of the staff to quit smoking). At present, the UN Medical Services Division, OHRM, Staff Counselors, Staff Committee, Security and Safety Services, Facilities Management Division and the relevant representatives from the benefits office human resources and appropriate diplomatic personnel are in the process of staging the implementation of a Joint Worksite Wellness Program between the New York City Department of Health and the United Nations. The most important component of the Program is expected to be a Worksite Smoking Cessation Program. The New York City Tobacco Control Program would contribute with its expertise in developing a prototype for health promotion in a culturally diverse international community such as United Nations. A draft of the health

survey questionnaire has been already reviewed. Subsequent development of the Program will continue in the year 2002.

UNEP's offices in Nairobi are generally smoke free, at least the meeting rooms and the offices, this rule is rarely violated.

Two years ago, WHO established a free cessation program within its insurance scheme.

The Task Force members agreed that WHO will come up with a new questionnaire which will be distributed to all the organizations present at the meeting and the results will then be discussed as well as the steps that the committee will take forward in the next meeting. The questionnaire is based on the one already distributed in WHO, ILO and ITU and will include more questions, among those:

- How did the agencies approach the issue of implementing smoke free policies? (This question is addressed to the agencies who already have experience in the area).
- To what extent are the smoke free policies implemented/followed by the employees?
- What is the support given to staff who wish to quit smoking?
- Are cigarettes on sale within the building of UN agencies? And is there access to duty free cigarettes in the buildings?

This questionnaire will help the Task Force to have a clearer idea on what is happening in every organization.

Agenda Item 9: Closure of the fourth session

The next target for the Task Force will be to finish the Secretary General's report to ECOSOC. The Chair suggested organizing a videoconference with the Task Force members in June, before the Substantive Session of ECOSOC to discuss the finalized ECOSOC report. Just prior to the presentation of the Secretary General's report at the substantive Session of ECOSOC, a breakfast or lunch roundtable will be proposed. It would be a technical consultation that would involve the main inputs from the technical meeting and a panel where FAO, ILO, the World Bank and WHO could be the main presenters. Discussions should also focus on how to move on with the research agenda to the next stage, providing information to policy makers.