



## **UNITED NATIONS AD HOC INTERAGENCY TASK FORCE ON TOBACCO CONTROL**

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### **REPORT OF THE FIRST SESSION**

**MAURICE PATE CONFERENCE ROOM, UNICEF, NEW YORK, U.S.A.**

**29-30 SEPTEMBER 1999**

#### **1) Opening and Overview of First Session of the Task Force:**

The first session of the United Nations Ad Hoc Interagency Task Force on Tobacco control was convened in the Maurice Pate Room, UNICEF, 29-30 September 1999. The Task Force session was opened by the Chairperson Dr Bill Kean, Director, Department of External Cooperation and Partnerships (WHO). Fifteen United Nations Organizations attended the first session of the Task Force.

The establishment of this new Task Force was endorsed by the Organizational Committee of the Administrative Committee on Coordination, at Part II of its first regular session of 1999 held in Geneva, 12 April 1999. United Nations Economic and Social Council resolution 1999/56 of 30 July 1999 (draft resolution E/1999/L.56) endorses the establishment of a United Nations Ad Hoc Interagency Task Force under WHO's leadership. This new body replaces the UN system focal point for tobacco that was located in UNCTAD.

Resolution 1999/56, *inter alia*, requests the Secretary-General to report to the Economic and Social Council at its Substantive Session of 2000 on progress made by the Task Force in the implementation of multisectoral collaboration on tobacco or health, with particular emphasis on the development of appropriate strategies to address the social and economic implications of the impact of tobacco or health initiatives. The report of the Secretary-General will be prepared by the Task Force.

The objectives of the first session of the Task Force are as follows:

- To outline current and future actions of the ACC members in tobacco control in general;
- To develop an operational approach, which will ensure that one United Nations' voice is heard throughout the Framework Convention on Tobacco Control process. This approach should build on the strengths and experience of other United Nations agencies/programmes and the United Nations/ECOSOC.

The first session focused on an overview of progress in global tobacco control under WHO's auspices; an update of the Ad Hoc Interagency Task Force on Tobacco Control; the content of the Secretary General's report to the Substantive Session of ECOSOC in 2000; current work/actions of the participating agencies in the area of tobacco control; WHO's Framework Convention on Tobacco Control and prospects for interagency collaboration in the ongoing work on the Framework Convention. A discussion of a response to a recent letter to the Secretary-General and to several other United Nations agencies from the International Tobacco Growers' Association (ITGA) highlighted the importance of understanding tobacco industry behaviour. This report provides a summary of the discussions focusing on these main issue areas, and the principal themes for future work by the Task Force.

## 1) Overview of progress in global tobacco control:

Dr Derek Yach, Project Manager, Tobacco Free Initiative, WHO provided an overview of the public health context of the tobacco epidemic, and global tobacco control efforts initiated by WHO over the past year.

*Public Health Trends:* The estimated 4.0 million deaths per year caused by tobacco at present, are expected to rise to about 10 million in 2030. Based on current smoking trends, tobacco is predicted to be the leading cause of disease burden by the 2020s, causing about one in eight deaths, more than any other single cause. 70% of these deaths will occur in developing countries, where cigarette smoking was once rare. The tobacco epidemic as with other epidemics due to communicable diseases, is characterized by a known exposure, a time-lag, and pathology. The epidemiologic curves look the same as with communicable diseases, but are more attenuated.

Tobacco-related diseases are the single most important cause of preventable deaths in the world. Smoking, for example, is the cause of 25 major categories of fatal and disabling disease, including lung and other cancers, ischemic heart disease, and chronic respiratory diseases. The risk of premature death due to tobacco is very high: half of all long-term smokers will eventually be killed by tobacco, and of these, half will die during the productive middle age, losing 20 to 25 years of life. In different regions of the world the tobacco epidemic has taken on different profiles. In China a significant increase in the risk of contracting tuberculosis has shown up in recent epidemiological studies. In India the widespread use of bidis is associated with a very high rate of oral cancer.

The tobacco epidemic shows a significant social class gradient, and increasingly tobacco use clusters in lower social classes. In high- and middle- income countries men in the lowest socioeconomic groups are up to twice as likely to die in middle age as men in the highest socioeconomic groups, and smoking accounts for at least half their excess risk. Social class gradients have also recently been demonstrated in countries such as South Africa and India.

Smoking also affects the health of nonsmokers. Babies born to smoking mothers have lower birth weights, face greater risks of respiratory disease, and are more likely to die of sudden infant death syndrome than babies born to nonsmokers. One major message from the recent WHO conference on Youth and Tobacco, Singapore is that tobacco use is causing a substantial amount of low birthweight in many countries, as well as middle ear infection and respiratory illnesses in children. Also, adult nonsmokers face increased risks of fatal and disabling disease from exposure to others' smoke.

*Economics of Tobacco:* To supplement the public health evidence base for tobacco control, the World Bank has recently published a major study, "*Curbing the Epidemic: Governments and the Economics of Tobacco Control*", which provides an extensive economic evidence base to inform tobacco control policies. This report demonstrates that tax and price increases are the most powerful mechanisms for controlling and reducing demand. Additional demand reduction strategies, including advertising bans and counteradvertising and nicotine replacement and other cessation therapies, are also endorsed. The World Bank report also demonstrates the benefits of controls on smuggling as an effective supply side intervention. Although not emphasized in the World Bank report, Dr Yach stressed that

agricultural diversification issues must be given attention, particularly because of their complex, politically contentious nature.

*Vector Analysis and Control:* In an attempt to understand the pathological chain of events leading to the diseases such as malaria the scientific community immediately turns to an analysis of the disease vector i.e. the mosquito. Likewise, in understanding the chain of events leading to tobacco-related diseases, vector analysis must also be pursued. In this case however, the disease vector is the tobacco industry. Our understanding of the tobacco industry has recently taken a major turn with the public disclosure of thirty-five million pages of once-secret documents from the files of the tobacco industry following recent litigation in the United States. These documents are housed in 2 depositories, one in Guildford, United Kingdom and the other in Minnesota U.S.A. These documents are in “the words of the industry itself-the best proof of its fraud regarding: i. What the industry knew- that smoking causes cancer; ii. when the industry knew it-in the 1950s; and iii. What the industry did about it-systematic denial and cover-up”<sup>1</sup>.

Also, as Dr Brundtland pointed out to a recent international conference of food and drug regulators, it is a misnomer to think of cigarettes as a simple agricultural product-chopped up tobacco leaves rolled into a paper tube. Cigarettes are amongst the most highly engineered consumer products available. The industry disclosure documents reveal that the tobacco industry considers cigarettes to be a drug delivery device, a nicotine delivery system. As a result, tobacco companies have devoted decades of research to studying the alteration of the chemical form of nicotine, by the use of additives such as ammonia, to increase the percentage of freebase nicotine delivered to the smoker.

Moreover, an initial review prepared for the first session of the Task Force reveals that the tobacco industry has focused its attention on various United Nations agencies. Decades ago, tobacco companies recognized that actions taken by United Nations agencies could have a negative impact on the industry's markets. Accordingly, tobacco companies began systematic efforts to thwart global tobacco control efforts undertaken by the United Nations agencies. For instance, the tobacco industry has paid consultants to influence the WHO budget, and have actively lobbied World Health Assembly delegates. The core of their argument was that “WHO spending should be concentrated on fighting diseases in third world nations, leaving rich, first world nations to finance their own programs. Hence funds would go for fighting malaria and cholera, but not go for campaigns for seat belts or against cigarettes.”<sup>2</sup> Of course, this entirely misses the point that almost all of the future burden of tobacco-related diseases will fall on developing countries.

The industry disclosure documents also reveal how agencies, such as the International Tobacco Growers Association (ITGA), have been established by the industry in order to split FAO and WHO. In an 1988 INFOTAB document, Board members stressed the need for the establishment of an agricultural lobby, and duly nominated the ITGA as an organization which “might get fully accredited observer status at the FAO” and which could “front for our [i.e. the tobacco industry] third world lobby activities at WHO”.<sup>3</sup>

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<sup>1</sup> Ciresi M.V., Walburn R.B., and Sutton T.D. (1999) , Decades of Deceit: Document Discovery in the Minnesota Tobacco Litigation”, In: William Mitchell Law Review, Volume 25, pp. 477-566.

<sup>2</sup> Tollison R., Wagner R., World Health and the World Health Organization, BATCo document, June 23 1993:502586979.

<sup>3</sup> Bloxcidge J., International Tobacco Growers' Association, INFOTAB document. File number BA0143, Box number DEP0304, October 11 1988: 5025555416.

*Global Tobacco Control Activities:* Over the past year WHO has stepped up its tobacco control activities. At the global level work will focus on the legal, economic, advocacy, and Framework Convention on Tobacco Control work. At the regional level, each region is being given a global focus on different specialized regional mandates. Strengthened private sector partnerships, for example with the pharmaceutical and entertainment industries, are being forged. In addition, extensive links with global and local NGOs are being established, for example in conjunction with World No Tobacco Day. The Ad Hoc Interagency Task Force on Tobacco Control represents a mechanism for developing stronger ties within the United Nations, in order to develop a unified United Nations voice on tobacco control issues.

As part of providing an appropriate model for the outside world, Dr Brundtland called for stronger action by United Nations agencies, pre-World No Tobacco Day 1999. As a result, several heads of agencies have indicated strong support for heightened tobacco control within United Nations buildings. At present, the University of Lausanne in conjunction with the Tobacco Free Initiative is in the process of completing a prevalence survey in the United Nations agencies in Geneva. The information from this survey may be used for policy dialogue and for stronger support for comprehensive cessation programmes in United Nations agencies in Geneva.

## **2) Current Work/Actions of Participating Agencies:**

Participating agencies provided an overview of their organization's current work in the area of tobacco control, and commented on possible areas of work that they may undertake in the future. The following is a summary of each organization's contribution:

- ***The United Nations: a) Department of Economic and Social Affairs (DESA)*** has been involved in the question of tobacco or health through its Divisions for the Advancement of Women and for Social Policy and Development. The Division for the Advancement of Women is monitoring implementation of the Beijing Platform for Action and is providing policy analysis related to women and health. The Committee for the Elimination of Discrimination against Women, when examining periodic reports of States parties to the Convention on the Elimination of All Forms of Discrimination against Women has repeatedly asked questions related to drug addiction, tobacco and alcohol. In the Beijing Platform for Action, a few recommendations relate to women and tobacco use. In 1999, the Commission on the Status of Women recommended to "design, implement, and strengthen prevention programmes aimed at reducing tobacco use by women and girls; investigate the exploitation and targeting of young women by the tobacco industry; support action to prohibit tobacco advertising and access by minors to tobacco products; and support smoke-free spaces, gender sensitive cessation programmes, and product labelling to warn of the dangers of tobacco uses, noting the Tobacco Free Initiative proposed by the WHO in July 1998." The Division For Social Policy and Development has monitored the question of tobacco or health in its work in the Poverty Eradication, Employment and Youth Branch. The World Conference of Ministers Responsible for Youth, Lisbon, 9-12 August 1998 supported comprehensive programmes to reduce the consumption of tobacco and exposure to environmental smoke.
- b) The Office of Human Resources and Management and the Medical***

**Service**, both within the Department of Management of UN Secretariat, because of its administrative and medical services, has also played an important role in promoting the fight against smoking.

- **Food and Agriculture Organization (FAO):** As part of its regular commodity analysis work, FAO maintains a continuing watch on trends in production, consumption, and trade for tobacco. FAO, in its work to improve agriculture and the condition of rural populations, is periodically called upon by Member Governments to provide assistance for agricultural development and technical assistance for cultivation and marketing of selected commodities. However, since the May 1976 WHO Resolution on Smoking and Health, FAO has not encouraged any activities leading to project formulation for tobacco, nor is FAO involved in any ongoing multilateral or bilateral supported tobacco project. However, in the context of cooperation with WHO, FAO is willing to assist in crop diversification efforts away from tobacco, subject to resource availability. FAO is currently initiating a training-cum-assistance programme on policies for crop diversification in Malawi, as part of a broader UNDP programme. In collaboration with WHO, in the late 1980s, FAO prepared two background studies: The Economic Significance of Tobacco (FAO ESD Paper No. 85) and Tobacco: Supply, Demand and Trade Projections 1995 and 2000 (FAO ESD Paper No. 86). A meeting between the Directors-General of FAO and WHO in June 1999 endorsed the strengthening of cooperation for the development of coherent longterm strategies for tobacco control so that full account was taken of both the health hazards of smoking and the economic benefits of tobacco cultivation.
- **International Civil Aviation Organization (ICAO):** Efforts have focused on promoting smoking restrictions on international passenger flights. The ICAO Assembly at its 29<sup>th</sup> Session in 1992 first adopted Resolution A29-15: Smoking restrictions on international passenger flights which, among other things, urged “all Contracting States to take necessary measures as soon as possible to restrict smoking progressively on all international passenger flights with the objective of implementing complete smoking bans by 1 July 1996. As requested by the ICAO Assembly in 1995, the Council conducted in 1997 a consultation with Contracting States and international organizations on the implementation of Resolution A29-15 and the current prevalence of smoke-free flights. Between September 1993 and January 1999 ICAO has circulated four State letters urging Contracting States to note and take appropriate action in accordance with Resolution A29-15.
- **International Labour Organization (ILO):** It was clear that there could be negative effects on employment of individuals in certain tobacco-producing and manufacturing areas, even if studies prepared pointed to longer term job increases. It was thus important to review employment diversification possibilities in other sectors of the economy. The ILO was in the process of developing a study proposal on employment diversification in the Indian bidi industry, where some evidence pointed to job losses from liberalization, which would be further compounded by tobacco control initiatives. Diversification initiatives were already being launched and one purpose of the study was to review their successes, sustainability, and replicability elsewhere. The ILO considered that social dialogue with full participation of governments and employers’ and workers’ organizations, was essential in any process of change.
- **International Monetary Fund (IMF):** The IMF has a mandate to focus on issues of macroeconomic stability and high-quality growth, and thus has generally relied

on the World Bank in areas relating to tobacco use: public health, government expenditures, and privatization and regulation. However, the IMF assistance in the future would be most effective on resolving technical issues that stand in the way of imposing higher tobacco excise taxes worldwide. Such assistance would be underpinned on the following assumptions: the effectiveness of higher tobacco excise taxes will be enhanced by coordination on rate setting and customs administration between neighbouring countries; the IMF will continue to provide technical assistance to member countries on tax policy and tax and customs administration, and that effective regulation of tobacco production and distribution is necessary to counter the negative externalities of tobacco consumption.

- **Joint United Nations Programme on HIV/AIDS:** Although UNAIDS was unable to attend due to extenuating circumstances, the organization is eager to collaborate with the Task Force in the area of Risk Taking Behaviour.
- **United Nations Educational, Scientific and Cultural Organization (UNESCO):** Although UNESCO was not able to attend the first session of the Task Force, the organization submitted a report of its ongoing tobacco-related work, and expressed interest in future collaboration with the Task Force's ongoing work. UNESCO collaborates with two French NGOs, CIPAPED and Vie et Santé, and within this framework has published a book on preventive education against tobacco use. A document entitled "Tobacco use prevention: an important entry point for the development of the health-promoting school" was prepared jointly by WHO and UNESCO. UNESCO networks as the UNESCO Associated Schools Project and the UNESCO Clubs, which contribute actively in the World No Tobacco Day by organizing local events on this theme. Within the organization a nonsmoking campaign has led to a considerable reduction in the number of smoker within the Organization.
- **The World Bank:** Since 1991, the World Bank has had a formal policy on tobacco, in recognition of the harm it does to health. The World Bank does not lend directly or indirectly for, invest in, or guarantee investments or loans for tobacco production, processing, or marketing. Bank loan/credit funds may not be used to finance imports of tobacco or tobacco products, tobacco processing machinery or equipment or related services. The Bank's work on tobacco control is in close partnership with WHO's Tobacco Free Initiative, and with other organizations, including the US Centers for Disease Control and Prevention Office on Smoking and Health, the International Monetary Fund, the FAO, and others. The World Bank's work focuses on its comparative advantage in economic and policy dialogue. In order to fill the gap in the area of economic analysis and tobacco, the Bank coordinated a major international study, "Curbing the Epidemic: Governments and the Economics of Tobacco Control". The Bank is currently working with partners to disseminate the report widely, especially to Ministries of Finance. In disseminating the report it is crucial to ensure that the IMF and the World Bank economists and Country Directors who manage the Bank's assistance strategies for client countries are well-informed about tobacco control, and are ready to ensure that tobacco control is an integral part of macroeconomic policy dialogue. There are already several health sector projects supported by World Bank loans or credits that fund tobacco control activities. Also, the Bank has helped to build local capacity and supports country-level economic analysis of tobacco use and control, in order to provide necessary data and to underpin recommendations to policy makers. Finally, tools will be developed to help NGOs, public health advocates and other to analyze

and discuss credibly the economic issues of tobacco control, and to provide direct information and recommendations to policy-makers, especially Finance Ministries.

- **United Nations Children's Fund (UNICEF):** The Executive Director of UNICEF has expressed strong support for WHO's leadership in the global fight against tobacco, and has made a number of press releases, stressing the serious negative impact of tobacco on children's rights. Through the UNF funded project on Building Alliances and Action for a Generation of Tobacco-free Children and Youth, UNICEF is working with the WHO and other partners to promote and support programming approaches to tobacco control in a number of countries, with a specific focus on young people in: Barbados/Caribbean, Brazil, China, Fiji/Pacific, Gaza/West Bank, Jordan, South Africa, Sri Lanka, Ukraine, and Zimbabwe. WHO and UNICEF collaborated in the recent conference on Tobacco and Youth, Singapore, 28-30 September 1999, "What in the World Works?", to further refine the country programmes that are being developed within the context of a UNICEF comprehensive approach to responding to the health and development rights of children and adolescents. As part of the UNF funded project, UNICEF with its partners in the fields of tobacco and child rights is completing a review of tobacco production, marketing, and use through the lens of the Convention on the Rights of the Child. The review makes a strong case for seeing tobacco not only as a health issue but also as a rights issue, for example in the context of environmental tobacco smoke (ETS), child labour, and the explicit targeting of adolescents by the tobacco industry through advertising and promotion.
- **United Nations Development Programme (UNDP) and United Nations Development Group (UNDG):** The involvement of these organizations is important, particularly regarding the dissemination of the Task Force's work into the Resident Coordinator system and to Country Teams.
- **United Nations Environment Programme (UNEP):** Although UNEP is a relatively new entrant into the area of tobacco control, the organization is interested in defining its role within the Task Force and developing collaborative activities accordingly. The two possible points of entry for the organization are linked to the environmental aspects of tobacco production and tobacco use, particularly within the framework of the recently concluded UNEP-WHO Memorandum of Understanding (MoU). The MoU, inter alia, stipulates enhanced cooperation in the areas of environmental health policy development and implementation, as well as technical guidelines and research, advocacy and public awareness. With regard to environmental aspects of tobacco use, UNEP could contribute to solidifying research and assisting in advocacy, for example with regard to Environmental Tobacco Smoke (ETS). With respect to the environmental aspects of tobacco production, UNEP's role could be linked to its work in the area of pesticides, including the environmental impact of the use of pesticides on tobacco crops and downstream implications. Secondly, UNEP could contribute in the area of land use and deforestation patterns linked to tobacco production, looking at crop substitution issues from an environmental perspective. Finally, given its extensive experience in the area of environmental law, UNEP could provide assistance to the development of the FCTC through its expertise with regard to treaty-making processes.
- **United Nations Office for Drug Control and Crime Prevention (UNDCP):** Though tobacco does not fall under UNDCP's mandate under the terms of its

drug control conventions, the organization is keen to share its experience in monitoring treaty implementation.

- **United Nations Population Fund (UNFPA):** With a strong commitment to the area of reproductive health, UNFPA, is in a position to address the issue of tobacco use through advocacy and IEC efforts at global, regional and country level. UNFPA's areas of interest which fall under the organization's mandate include: the various health problems amongst women who smoke; the increased risk of infertility and ectopic pregnancy associated with smoking; adverse reproductive outcomes reported with smoking/use of smokeless tobacco during pregnancy; the strong co-relation between smoking and oral contraceptives (OCs) use, and coronary heart disease, and; the health effects amongst nonsmoking women whose partners smoke. Moreover, utilizing UNFPA's channels of communication and networks, the agenda of adolescent reproductive health programmes can be further expanded to include tobacco use in terms of provision of information/counselling and advocacy.
- **World Intellectual Property Organization (WIPO):** Though the organization does not have programming in this area it is willing to collaborate with the Task Force's ongoing work. One possible link may be the implications of trademarks for global tobacco control work.

#### **1) WHO's Framework Convention on Tobacco Control and Interagency Collaboration:**

Dr Douglas Bettcher, Coordinator, Framework Convention on Tobacco Control (FCTC) Team, WHO outlined the FCTC process, as outlined in Resolution WHA52.18, as well as the public health and legal technical work that has been commissioned thus far. The rationale for the development of the FCTC and possible related protocols is to proffer a global complement to national tobacco control actions, and in so doing to encourage a complementarity of actions between countries for tobacco control issues which transcend state boundaries.

On 24 May 1999, the World Health Assembly unanimously adopted Resolution WHA52.18, which maps out the political process for negotiation of the Framework Convention on Tobacco Control (FCTC) and related protocols. A record 50 countries, including the 5 permanent members of the Security Council and tobacco growers and exporters expressed support for the FCTC. In Resolution WHA52.18 - Towards a WHO Framework Convention on Tobacco Control, two intergovernmental bodies were established as subsidiary bodies of the World Health Assembly: a working group on the WHO framework convention on tobacco control, and an intergovernmental negotiating body. The working group will prepare the technical foundation for formal negotiations by the intergovernmental negotiating body. The working group which is open to participation by all Member States and regional economic integration organizations, and observers (including other United Nations Organizations and NGOs in official relations with WHO) will complete its work and report back to the 53<sup>rd</sup> World Health Assembly in May 2000.

Dr Bettcher emphasized that all United Nations organizations have been invited to attend the first meeting of the working group in Geneva, 25-29 October 1999. Invitation letters from the Director-General, WHO were sent to all potential participants, including United Nations Organizations, in early August. All members of the Task Force were encouraged to attend, and were reminded that

the official working group documents were included in the package of documents distributed to Task Force members, and that the documentation was also available on the WHO web site (Governance and TFI web pages) in the six United Nations official languages. Dr Bettcher provided an overview of the documentation and the types of issues which could be addressed in the FCTC and possible related protocols.

In the end, the importance of developing a Framework Convention and protocols is the impact which it has on reducing tobacco consumption. WHO/TFI has already started to look at the experience of the environmental treaties, which demonstrate that conventions can have a major impact. A good example is the *Montreal Protocol on Substances that Deplete the Ozone Layer*. Between 1986 and 1996, global consumption of chlorofluorocarbons (CFCs), the principal contributor to the ozone depletion problem, declined more than 70% from 1.1 million tons worldwide to 160,000 tons. There is a need for further collaboration between UNEP and WHO relating to UNEP's experience in developing recent environmental agreements. There is also a need for further work on the potential relation of the FCTC to other conventions as follows:

UNICEF & TFI are examining the implications of *the Convention on the Rights of the Child* for tobacco control and the FCTC. The Committee on the Rights of the Child (CRC) has identified tobacco consumption, under State Reporting Guidelines. Under the State Party Reporting Guidelines established by the Committee, States are requested to: "provide information on legislative and other measures taken to prevent the use by children of alcohol, tobacco and other substances which may be prejudicial to their health and which may be available with or without restrictions to adults, and on any evaluation made of the effectiveness of such measures, together with relevant disaggregated data on the use by children of such substances". Although the Convention on the Rights of the Child does not contain any explicit right to protection from the harms of tobacco, interpretation of the articles of the Convention by the Committee on the Rights of the Child and the practice of States Parties demonstrates that tobacco is indeed a human rights issue.

The upcoming WHO global conference on Women and Tobacco, Kobe, 14-18 November will explore links between Convention on Elimination of all Forms of Discrimination against Women (CEDAW) and a global legal regime for tobacco control, for example in the area of marketing to women. Under CEDAW Article 12, State parties should report their understanding of how policies and measures on health care address the health rights of women from the perspective of women's needs, and interests and how it addresses distinctive features and factors which differ for women in comparison to men, such as biological factors, socio-economic factors, psychosocial factors. Further, a recent statement by Commission on the Status of Women points towards the need to strengthen prevention programmes aimed at reducing tobacco use by women and girls.

Links between the single package of WTO trade agreements, in areas such as agricultural subsidies (Agreement on Agriculture) and labelling and package design (TBT agreement) are self-evident. As part of expanding the technical interaction between WHO and WTO, the two organizations are exploring points of synergy. The FCTC is one important future area of cooperation.

WHO and UNDCP need to collaborate further regarding drug control treaties, especially on monitoring issues.

WHO was interested in requesting the ILO to review possibilities of collaboration. Although WHO and ILO have not yet collaborated in any depth in this area, relevant treaties could include, inter alia, the Occupational Cancer Convention (C139, 1974); Working Environment (Air Pollution, Noise, and Vibration) (C148, 1977); Occupational Safety and Health Convention (C155, 1981); and the Convention Concerning the Prohibition and Immediate Action for the Elimination of the Worst Forms of Child Labour (particularly regarding the bidi industry) (C182, 1999).

Bilateral technical collaboration between WHO and the abovementioned international organizations should examine the possible interrelationship of these international legal regimes, and the FCTC and possible related protocols.

It was agreed that WHO/TFI would fax to each of the participating agencies in the Task Force a copy of the Director-General's letter of invitation of 26 July 1999 to attend the first meeting of the WHO framework convention on tobacco control.

#### **1) Letter from the International Tobacco Growers' Association:**

The International Tobacco Growers' Association (ITGA) has recently sent a letter to the Secretary-General. The same letter was also sent to several other United Nations Organizations, including the World Bank and UNFPA. The letter from the ITGA was discussed by the Task Force members and consensus was reached on a key areas which should be addressed in the letter of reply from the Secretary-General. In particular, it was agreed that the following points should be pointed out in the letter of reply to the ITGA:

- Tobacco is a unique consumer product in that it eventually kills half of its regular users when used as recommended, and that nicotine shares addictive characteristics in common with drugs such as cocaine and heroin. In this regard, it was felt that it was only within WHO's competence to support this statement with scientific evidence;
- The ITGA was not restricted from attending the 52<sup>nd</sup> World Health Assembly as claimed in its letter. Since the ITGA does not hold formal consultative status with WHO or the United Nations as an NGO in official relations, it was explained by WHO that the ITGA could not attend as an observer of the World Health Assembly, but was welcome to sit in the public gallery;
- Approaches to dialogue with farmers should be considered.

It was agreed that a copy of the letter of response from the Secretary-General should be cc:ed to other members of the Task Force. Likewise, it was agreed that the replies from other participants in the Task Force should be cc:ed to other members.

#### **1) ECOSOC Report to the Substantive Session, 2000:**

As one of its terms of reference the Task Force is responsible, as stipulated in ECOSOC Resolution 1999/56 (adopted 30 July 1999) for drafting of the Secretary-General's report to the Substantive Session of ECOSOC, 2000 on progress made by the Task Force in the implementation of multisectoral collaboration on tobacco or

health, with particular emphasis on the development of appropriate strategies to address the social and economic implications of the impact of tobacco or health initiatives. The deadline for completion of this report is March 2000.

It was agreed that WHO, as the lead agency for the Task Force, would prepare an outline for the other Task Force participants to comment on and actively contribute to. It was proposed that the report should focus on how each organization is addressing the social and economic implications of tobacco, the progress made on the FCTC, and success in countries in moving towards national control strategies.

## 7) Conclusions and Principal Themes for Future Work:

The principal themes<sup>4</sup> for future work by the Task Force emerging from the first session were as follows:

- **Agricultural diversification issues:** the World Bank, FAO, WHO, and USAID will meet in early October in Washington to review specific terms of reference to take work forward in this area.
- **Dissemination of Task Force information to country level:** It was concluded that the Task Force should collaborate with UNDG to disseminate the Task Force's work to the Resident Coordinator System and to Country Teams.
- **Economics:** Country-specific analytic work on the economics of tobacco control is being planned by the lead agencies, principally the World Bank, in coordination with the IMF.
- **Employment:** particular interest was expressed by ILO, the World Bank, and the IMF regarding the employment effects of tobacco control in developing countries, as it was strongly felt that this work requires more attention. Several agencies were interested in being kept informed of the outcomes of ILO's beedi study to see how they could complement the work on employment diversification for beedi workers and eventually consider a joint project.
- **Environmental Tobacco Smoke (ETS):** ETS is the underlying rationale for ICAO's involvement in tobacco control, and UNEP and UNICEF are also interested in collaborating with WHO on this area of work.
- **Framework Convention on Tobacco Control:** the FCTC treaty-process will benefit from increased interaction with FAO, UNDCP, UNEP, UNICEF, UNIFEM and WTO.
- **Regulatory Framework for Tobacco Control:** WHO will interact more with UNDCP as the science of addiction is becoming understood in greater depth.
- **Risk Taking Behaviour:** interest in pursuing this area of work was expressed by UNAIDS, UNICEF, UNFPA, and WHO.
- **Trade issues:** the implications of global trade liberalization for tobacco control is an area where WHO will collaborate with FAO, UNCTAD and WTO.
- **Women and tobacco:** new work in the area of women and tobacco will be reported in Kobe, Japan at an upcoming WHO Conference focusing on women and tobacco. UNFPA, the United Nations/ECOSOC, and UNIFEM would be appropriate partners to carry this work forward.

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<sup>4</sup> WHO is playing a facilitative and/or lead role in each of these thematic areas.

WHO agreed to prepare a draft report for the consideration of other Task Force participants. It is envisaged that the next meeting of the Task Force will be held in Geneva in March 2000.