

## World Health Assembly to consider global treaty on tobacco control<sup>1</sup>

Following its approval by 171 Member States of the World Health Organization (WHO) on 1 March 2003, a groundbreaking public health treaty to control tobacco supply and consumption will be considered for adoption at the World Health Assembly (WHA) meeting that will begin 19 May in Geneva. The WHA is the supreme decision-making body for the WHO, and its main function is to determine the Organization's policies.

Called the Framework Convention on Tobacco Control (FCTC), the proposed treaty covers tobacco taxation, smoking prevention and treatment, illicit trade, advertising, sponsorship, promotion, and product regulation.

The negotiations that concluded on 1 March were the culmination of four years of work to produce an international tobacco control treaty. "The Convention we have agreed on is a real milestone in the history of global public health," said Dr. Gro Harlem Brundtland, Director-General of WHO. "Due to the actions that will follow from our shared commitments, millions and millions of lives will be saved."

If the World Health Assembly adopts the FCTC, the treaty will be opened for signature by WHO Member States. After it has been ratified by 40 countries, the treaty will go into force in the nations that have approved it.

The FCTC text requires signatories to implement comprehensive tobacco control programs and strategies at the national, regional, and local levels. In its preamble the text explicitly recognizes the need to protect public health, the unique nature of tobacco products, and the harm that companies that produce them cause.

In the area of taxes, the text formally recognizes that tax and price measures are an important way of reducing tobacco consumption, particularly among young people. Treaty signatories must consider public health objectives when implementing tax and price policies on tobacco products.

With respect to labeling, the text requires that at least 30%—but ideally 50% or more—of the display area on tobacco product packaging be taken up by clear health warnings in the form of text, pictures, or a combination of the two. Packaging and labeling requirements also prohibit misleading language that gives the false impression that the product is less harmful than others, through such terms as "light," "mild," or "low tar."

**Key words:** smoking, tobacco industry, World Health Organization, international cooperation.

<sup>1</sup> Based on: 1) World Health Organization. Agreement reached on global Framework Convention on Tobacco Control [press release]. Available from: <http://www.who.int> [Internet site]. Accessed 20 March 2003.

The final text requires parties to move toward a comprehensive ban on tobacco advertising within 5 years of the convention entering into force. The treaty also contains provisions for countries that cannot implement a complete ban—due, for example, to provisions covering free speech in their constitutions (and how those provisions relate to advertising and other forms of commercial speech)—by requiring them to restrict tobacco advertising, promotion, and sponsorship within the limits of their laws.

Parties to the convention are encouraged to pursue legislative action to hold the tobacco industry liable for costs related to tobacco use.

Parties are required to provide financial support to their national tobacco control programs. In addition, the text encourages the use of bilateral and multilateral development funds to aid in tobacco control.

The text also requires countries to promote treatment programs to help people stop smoking as well as educational efforts to prevent people from starting. Nations must also prohibit sales of tobacco products to minors and protect the public from secondhand smoke.

The elements of the treaty reflect WHO and World Bank policies on a comprehensive plan to reduce global tobacco consumption. While there have been nearly 20 World Health Assembly resolutions to support tobacco control since 1970, the difference with this treaty is that these obligations will become legally binding for parties to the convention once it comes into force.

The only three nations that explicitly opposed the draft treaty as approved on March 1 were Cuba, Germany, and the United States of America. According to various news reports, Cuba opposed the treaty's provisions on liability for the tobacco industry; in Cuba, that industry is government owned. German officials objected to language banning tobacco advertisements. United States Government officials said, among other things, that some of the treaty wording was unacceptable or violated the United States constitution's guarantees on freedom of speech. United States officials indicated that

they might push for changes in the wording of the proposed treaty at the World Health Assembly in May.

The full text of the proposed treaty as approved on 1 March can be viewed on the WHO Web site at: <http://tobacco.who.int>.

---

#### SINOPSIS

### **La Asamblea Mundial de la Salud contemplará la adopción de un tratado mundial para el control del tabaco**

*Tras su aprobación por 171 Estados Miembros de la Organización Mundial de la Salud (OMS) el 1 de marzo de 2003, un tratado que marca un hito en la historia de la salud pública y que se encamina a controlar el abastecimiento y el consumo de tabaco será presentado ante la Asamblea Mundial de la Salud (AMS), que contemplará su adopción en la reunión que tendrá inicio el 19 de mayo de 2003 en Ginebra, Suiza. La AMS es la máxima autoridad decisoria de la OMS y su principal cometido es determinar las políticas de dicha Organización. El tratado propuesto, que se conoce por Convenio Marco para el Control del Tabaco (CMCT), abarca asuntos tales como la gravación del tabaco; la prevención y el tratamiento del hábito de fumar; el comercio ilícito, la publicidad, el patrocinio y la promoción de los productos del tabaco, y la rotulación de los paquetes y cajetillas. Si la Asamblea Mundial de la Salud adopta el CMCT, el tratado se abrirá a la firma de los Estados Miembros de la OMS. Después de que sea ratificado por 40 países, el tratado entrará en vigor en los países que lo hayan aprobado. Aunque desde 1970 ha habido casi 20 resoluciones de la Asamblea Mundial de la Salud encaminadas a apoyar iniciativas para el control del tabaco, la diferencia entre dichas resoluciones y el presente tratado radica en que el cumplimiento de las provisiones de este último tendrá fuerza jurídica para las distintas partes cuando el convenio entre en vigor. Los únicos tres países que se opusieron abiertamente al proyecto de texto aprobado el 1 de marzo de 2003 fueron Alemania, Cuba y Estados Unidos de América. Funcionarios del Gobierno estadounidense han señalado que tratarán de lograr que se enmiende la redacción del texto del tratado en la Asamblea Mundial de la Salud en mayo.*

---