



WHO FRAMEWORK CONVENTION  
ON TOBACCO CONTROL

**Conference of the Parties to the  
WHO Framework Convention  
on Tobacco Control**

Seventh session  
Delhi, India, 7–12 November 2016

---

**Report of the seventh session of the Conference of the Parties  
to the WHO Framework Convention on Tobacco Control**

Delhi, India, 7–12 November 2016

<b>1.</b>	<b>Opening of the session .....</b>	<b>6</b>
1.1	Adoption of the agenda and organization of work .....	7
1.2	Credentials of participants .....	7
<b>2.</b>	<b>Applications for the status of observer to the Conference of the Parties .....</b>	<b>7</b>
<b>3.</b>	<b>Invited speaker.....</b>	<b>8</b>
<b>4.</b>	<b>Address by the Head of the Convention Secretariat and report on global progress in implementation of the WHO FCTC: report by the Convention Secretariat, followed by a general debate .....</b>	<b>8</b>
<b>5.</b>	<b>Treaty instruments and technical matters .....</b>	<b>10</b>
5.1	Status of the Protocol to Eliminate Illicit Trade in Tobacco Products .....	10
5.2.	Impact assessment of the WHO FCTC: report by the expert group .....	12
5.3	Implementation of Article 5.3 of the WHO FCTC .....	12
5.4	Further development of the partial guidelines for implementation of Articles 9 and 10 of the WHO FCTC: “Regulation of the contents of tobacco products” and “Regulation of tobacco product disclosures”: report by the working group and report by WHO .....	14
5.5	Control and prevention of globally emerging products .....	15
5.5.1	Control and prevention of waterpipe tobacco products: report by WHO .....	15
5.5.2	Electronic nicotine delivery systems and electronic non-nicotine delivery systems: report by WHO .....	16
5.6	Economically sustainable alternatives to tobacco growing (in relation to Articles 17 and 18 of the WHO FCTC) .....	17
5.7	Implementation of Article 19 of the WHO FCTC: “Liability”: report by the expert group .....	18
5.8	Addressing gender-specific risks when developing tobacco control strategies (item proposed by a Party) .....	19
5.9	Tobacco advertising, promotion and sponsorship: depiction of tobacco in entertainment media (item proposed by a Party).....	20
<b>6.</b>	<b>Reporting, implementation assistance and international cooperation .....</b>	<b>20</b>
6.1	Reporting arrangements under the WHO FCTC: report by the expert group.....	20
6.2	International cooperation for implementation of the WHO FCTC, including the implementation of the 2030 Agenda for Sustainable Development, the global NCD targets and human rights .....	21
6.3	South–South and Triangular cooperation .....	22
6.4	Sustainable measures to strengthen implementation of the WHO FCTC: report by the working group .....	22
6.5	Financial resources and mechanisms of assistance.....	23
6.6	Issues related to implementation of the WHO FCTC and settlement of disputes concerning the implementation or application of the Convention .....	23
6.7	Trade and investment issues, including agreements, and legal challenges in relation to the implementation of the WHO FCTC.....	24

<b>7.</b>	<b>Budgetary and institutional matters.....</b>	<b>25</b>
7.1	Performance report for the 2014–2015 workplan and budget.....	25
7.2	Interim performance report for the 2016–2017 workplan and budget .....	26
7.3	Payment of the voluntary assessed contributions and measures to reduce Parties in arrears .....	26
7.4	Proposed workplan and budget for the financial period 2018–2019.....	28
7.5	Convention Secretariat’s fundraising efforts and collaborative work .....	31
7.6	Process and methodology to conduct the performance evaluation for the current and subsequent Head of the Convention Secretariat: report by the Bureau of the Conference of the Parties .....	32
7.7	Review of accreditation of nongovernmental organizations with the status of observers to the Conference of the Parties .....	32
7.8	Review of accreditation of intergovernmental organizations with the status of observers to the Conference of the Parties .....	33
7.9	Maximizing transparency of Parties’ delegations, intergovernmental organizations, nongovernmental organizations and civil society groups during sessions of the COP and meetings of its subsidiary bodies .....	33
7.10	Possible amendments to the Rules of Procedure of the Conference of the Parties .....	34
7.11	Strengthening synergy between the Conference of the Parties and the World Health Assembly ...	35
7.12	Relationship of the Convention Secretariat with other international entities: observer status .....	36
7.13	Hosting arrangements between the Convention Secretariat and WHO.....	36
<b>8.</b>	<b>Date and place of the eighth regular session of the Conference of the Parties .....</b>	<b>37</b>
<b>9.</b>	<b>Election of the president and vice-presidents of the Conference of the Parties.....</b>	<b>38</b>
<b>10.</b>	<b>Adoption of the provisional report of the seventh session of the Conference of the Parties ...</b>	<b>38</b>
<b>11.</b>	<b>Closure of the session .....</b>	<b>39</b>
<b>Annex 1: Agenda .....</b>		<b>40</b>
<b>Annex 2: List of documents .....</b>		<b>43</b>
<b>Annex 3: Address by Shri J. P. Nadda, Minister of Health and Family Welfare, Government of India.....</b>		<b>46</b>
<b>Annex 4: Statement delivered on behalf of Dr Margaret Chan, Director-General of the World Health Organization by Mr Derek Walton, Legal Counsel.....</b>		<b>49</b>
<b>Annex 5: Address by H.E. Mr Maithripala Sirisena, President of the Democratic Socialist Republic of Sri Lanka .....</b>		<b>52</b>
<b>Annex 6: Address by Dr Vera Luiza da Costa e Silva, Head of the Secretariat of the WHO Framework Convention on Tobacco Control .....</b>		<b>55</b>
<b>Annex 7: Address by Dr Oleg Salagay, President of the Conference of the Parties to the WHO Framework Convention on Tobacco Control .....</b>		<b>59</b>
<b>Annex 8: Decisions .....</b>		<b>60</b>
FCTC/COP7(1)	Applications for the status of observer to the Conference of the Parties.....	62
FCTC/COP7(2)	Election of the officers of Committees A and B.....	63
FCTC/COP7(3)	Credentials of participants .....	63
FCTC/COP7(4)	Control and prevention of waterpipe tobacco products .....	64

FCTC/COP7(5)	Tobacco advertising, promotion and sponsorship: depiction of tobacco in entertainment media.....	65
FCTC/COP7(6)	Status of the Protocol to Eliminate Illicit Trade in Tobacco Products (ITP).....	66
FCTC/COP7(7)	Impact assessment of the WHO FCTC.....	67
FCTC/COP7(8)	Protection of public health policies with respect to tobacco control from commercial and other vested interests of the tobacco industry.....	68
FCTC/COP7(9)	Electronic nicotine delivery systems and electronic non-nicotine delivery systems .....	70
FCTC/COP7(10)	Economically sustainable alternatives to tobacco growing (in relation to Articles 17 and 18 of the WHO FCTC).....	71
FCTC/COP7(11)	Implementation of Article 19 of the WHO FCTC: “Liability” .....	73
FCTC/COP7(12)	Addressing gender-specific risks when developing tobacco control strategies ....	74
FCTC/COP7(13)	Measures to strengthen implementation of the Convention through coordination and cooperation.....	76
FCTC/COP7(14)	Further development of the partial guidelines for implementation of Articles 9 and 10 of the WHO FCTC (Regulation of the contents of tobacco products and Regulation of tobacco product disclosures) .....	78
FCTC/COP7(15)	Process and methodology to conduct the performance evaluation for the current and subsequent Head of the Convention Secretariat.....	86
FCTC/COP7(16)	Review of accreditation of nongovernmental organizations with the status of observer to the Conference of the Parties .....	87
FCTC/COP7(17)	Review of accreditation of intergovernmental organizations with the status of observer to the Conference of the Parties .....	87
FCTC/COP7(18)	Strengthening synergy between the Conference of the Parties and the World Health Assembly .....	89
FCTC/COP7(19)	Relationship of the Convention Secretariat with other international entities: observer status.....	90
FCTC/COP7(20)	Hosting arrangements between the Convention Secretariat and WHO.....	91
FCTC/COP7(21)	Trade and investment issues, including agreements, and legal challenges in relation to the implementation of the WHO FCTC.....	91
FCTC/COP7(22)	Amendment to the Workplan and Budget for the Financial Period 2016–2017 ...	92
FCTC/COP7(23)	Payment of the voluntary assessed contributions and measures to reduce Parties in arrears.....	94
FCTC/COP7(24)	Workplan and budget for the financial period 2018–2019.....	95
FCTC/COP7(25)	Convention Secretariat’s fundraising efforts and collaborative work .....	114
FCTC/COP7(26)	International cooperation for implementation of the WHO FCTC, including on human rights.....	116
FCTC/COP7(27)	Contribution of the Conference of the Parties to achieving the noncommunicable disease global target on the reduction of tobacco use .....	117
FCTC/COP7(28)	Amendments to the Rules of Procedure of the Conference of the Parties to the WHO FCTC .....	118
FCTC/COP7(29)	Delhi Declaration .....	123

FCTC/COP7(30)	Election of the President and the five Vice-Presidents of the Conference of the Parties to the WHO FCTC.....	125
FCTC/COP7(31)	Date and place of the eighth regular session of the Conference of the Parties to the WHO FCTC.....	126

## **1. OPENING OF THE SESSION**

1. The seventh session of the Conference of the Parties (COP7) to the WHO Framework Convention on Tobacco Control (WHO FCTC) was held at the India Exposition Mart (IEM) in Noida, India, from 7 to 12 November 2016. Representatives of 134 Parties to the Convention took part. Also present were representatives of five State non-Parties as well as four intergovernmental organizations and 13 nongovernmental organizations (NGOs) accredited as observers<sup>1</sup>.

2. The session was opened by the President of the Conference of the Parties (COP), Dr Oleg Salagay (Russian Federation), who expressed his thanks to the Government of India, the host of the meeting, on behalf of all present. The WHO FCTC now had 180 Parties, the latest to ratify being Zimbabwe.

3. Mr Jagat Prakash Nadda, Minister of Health and Family Welfare, India, welcomed participants to India and briefly outlined the challenges of tobacco control facing his country. In April 2016, the Government had introduced pictorial health warnings covering 85% of the surface of the tobacco packaging, and it had taken measures to regulate the use of smokeless tobacco and penalize sales of tobacco products to minors. Mr Nadda's statement is reproduced in Annex 3 of this report.

4. Mr Derek Walton, WHO Legal Counsel, addressed the meeting on behalf of Dr Margaret Chan, the Director-General. The tide of tobacco control was at last beginning to turn against the powerful tobacco industry, with tobacco sales slowly declining and governments prevailing in court cases despite the industry's lobbying and propaganda efforts. He called upon civil society organizations to help to put the record straight. The WHO Secretariat could offer legal and technical advice to Member States. Mr Walton's statement is reproduced in Annex 4 of this report.

5. Dr Oleg Salagay, President of the COP, briefly addressed the meeting, and his statement is reproduced as Annex 7 of this report. The President thanked the Bureau for its work during the intersessional period and the Convention Secretariat for its support. He called on Parties to work persistently to protect people against the health impact of tobacco use, taking into consideration new challenges and threats, including new tobacco products and new nicotine delivery systems. He concluded by emphasizing the need to strengthen public health diplomacy for tobacco control.

6. Following a short video on the hosting of the COP in India, featuring young anti-tobacco activists, Mr C.K. Mishra, Secretary, Ministry of Health and Family Welfare, India, took the floor to thank the Convention Secretariat and host-country staff for their hard work in preparing for the session. He paid particular tribute to the local government officials and police of Uttar Pradesh state and to the representatives of the mass media, who had a crucial role to play in countering tobacco industry propaganda.

---

<sup>1</sup> For the list of participants, see document FCTC/COP/7/ DIV/Rev2 available at <http://www.who.int/fctc/cop/cop7/Final-list-participants-COP7.pdf?ua=1>

## **1.1 Adoption of the agenda and organization of work**

*Documents FCTC/COP/7/1 Rev.1 and FCTC/COP/7/Rev.1 (annotated)*

7. The COP adopted the provisional agenda as contained in document FCTC/COP/7/1 Rev.1 without amendment. This agenda is reproduced in Annex 1 of this report and the list of documents in Annex 2.
8. In considering the organization of its work, it was agreed by the COP at its first plenary meeting that Committee A would be entrusted with work under Agenda items 5 and 6, and Committee B would focus on matters under agenda item 7. The remaining agenda items would be dealt with by the plenary.
9. During its fourth plenary meeting, the COP agreed to transfer Agenda items 6.2, 6.6 and 6.7 from Committee A to Committee B.
10. The following representatives were elected to serve as the officers of Committees A and B, pursuant to Rule 28 of the Rules of Procedure (RoP) of the COP (Decision FCTC/COP7(2)):

Committee A:

Mr Caxton Masudi Ngeywo (Kenya), Chairperson

Dr Pekka Puska (Finland) and Mr Behzad Valizadeh (Islamic Republic of Iran), Vice-Chairpersons.

Committee B:

Dr Nuntavarn Vichit-Vadakan (Thailand), Chairperson

Ms Suzy McDonald (Canada) and Dr Nestor Santiago (Philippines), Vice-Chairpersons.

## **1.2 Credentials of participants**

*Document FCTC/COP/7/2*

11. In accordance with Rule 19 of the RoP, the COP agreed at its first plenary meeting that the Bureau of the COP, with the assistance of the Convention Secretariat, would examine the credentials of the delegates and would report thereon to the COP during the session. The report was duly produced as document FCTC/COP/7/2, on 9 November 2016. The COP adopted the relevant decision (FCTC/7COP7(3), Credentials of the Parties) at its third plenary meeting on 9 November. In addition, the COP agreed to accept the credentials of Ukraine and Pakistan, which had been received in full form.

## **2. APPLICATIONS FOR THE STATUS OF OBSERVER TO THE CONFERENCE OF THE PARTIES**

*Document FCTC/COP/7/3*

12. The COP7 noted that Palestine was attending the conference as an observer in keeping with its participation in COP1.
13. The COP was asked to consider applications for observer status from one intergovernmental organization, the East African Community, and 16 nongovernmental organizations: All India Bidi

Industry Federation, Aman-Saulyk, American Cancer Society, Childlink Foundation, Consumer Packaging Manufacturers Alliance, Federation of All India Farmer Associations, InterAmerican Heart Foundation, Kelab Integrasi Komuniti dan Sosial, Lega Italiana Anti Fumo, Philippine Tobacco Institute Inc., Polish Cancer Patient Coalition, Sarhad Chamber of Agriculture, Tobacco Vapor Electronic Cigarette Association, Virginia Tobacco Farmers Associations, Vision mondiale de la santé (World Health Vision) and World Farmers' Organisation.

14. At the request of two Parties from the African Region, the COP agreed to further defer its decision on the East African Community until its next session.

15. The COP decided to grant observer status to the American Cancer Society, the InterAmerican Heart Foundation and Vision mondiale de la santé (World Vision Health), in accordance with Rule 31.2 of the RoP. It denied observer status to the remaining organizations.

16. The COP adopted decision FCTC/COP7(1) at its first plenary on 7 November 2016.

### **3. INVITED SPEAKER**

17. President Maithripala Sirisena of Sri Lanka addressed COP7 as an invited speaker. The issues of particular importance to his country were smokeless tobacco use, e-cigarettes and waterpipes, economically viable alternatives to tobacco growing and gender-related risks in tobacco control. His Government had adopted a unique joint Tobacco and Alcohol Act in 2006, and he had appointed a Presidential Task Force to monitor the situation relating to drugs and narcotics. His country's tobacco control measures were integrated into more general efforts to combat noncommunicable diseases and achieve the Sustainable Development Goals (SDGs).

18. President Sirisena's statement is reproduced in Annex 5 of this report.

### **4. ADDRESS BY THE HEAD OF THE CONVENTION SECRETARIAT AND REPORT ON GLOBAL PROGRESS IN IMPLEMENTATION OF THE WHO FCTC: REPORT BY THE CONVENTION SECRETARIAT, FOLLOWED BY A GENERAL DEBATE**

*Documents FCTC/COP/7/4 and FCTC/COP/7/DIV/3*

19. In her address (see Annex 6), Dr da Costa e Silva, Head of the Convention Secretariat, noted that the inclusion of target 3.a within the Sustainable Development Goals required the strengthening of WHO FCTC implementation. Advocacy by the Secretariat in partnership with WHO at the Third United Nations International Conference on Financing for Development (Addis Ababa, 13–16 July 2015) had secured agreement that tobacco taxation should be a key source of funds for implementation of activities to attain the Goals. Those advances placed the WHO FCTC and the work of this session at the heart of the global health and development agenda for the decade ahead and represented a tremendous opportunity to agree on unified action by the international community.

20. Bold action had been taken by many Parties in the previous two years. The treaty and standards adopted by the COP had protected government decisions against legal challenges, demonstrating that international trade could not expand at the expense of health and human rights. Almost no Party to the Convention opposed legitimate public health measures, while many Parties had rejected the inclusion of

tobacco industry members in delegations attending the session. The number of Parties to the Protocol to Eliminate Illicit Trade in Tobacco Products had risen to 24, and it seemed likely that the Protocol would enter into force before the eighth session of the COP in 2018.

21. The Secretariat had supported a wide range of work, including 11 needs assessment and post-needs assessment missions to Parties since the previous session, measures to implement Article 5.3 of the Convention on protecting public health policy from the interference by the tobacco industry, and efforts to increase transparency. New ventures had included the establishment of Knowledge Hubs to provide global expertise on tobacco taxation, matters related to waterpipe and smokeless tobacco use, tobacco-related litigation, research and surveillance, south-south and triangular cooperation, and Observatories to act as global sentinels of tobacco industry behaviour.

22. Parties had improved their compliance with the Convention in important areas such as pricing and taxation, and liability. However, one quarter of reporting Parties had not yet confirmed implementation of time-bound measures under Article 8 (Protection from exposure to tobacco smoke) and 40% of reporting Parties lacked a comprehensive advertising ban. The Convention Secretariat had been called on to strengthen the response to gender-specific risks in tobacco control policy, to strengthen implementation of Article 17 (Tobacco growing and support for economically viable alternatives) and Article 18 (Protection of the environment and health of persons), and to establish relationships beyond the health sector.

23. The Secretariat had been an active member of the United Nations Interagency Task Force on the Prevention and Control of Noncommunicable Diseases (UNIATF) and a participant in the WHO Global Coordination Mechanism on the prevention and control of noncommunicable diseases (NCDs). Nonetheless, its hosting arrangements with WHO would benefit from some clarification, and better ties should be established between the COP and the World Health Assembly. Positive consideration should be given by the COP to the modest proposals concerning voluntary assessed contributions, in view of the 80% increase in the number of Parties since the Convention had entered into force. Mozambique was about to become the 181<sup>st</sup> Party to the Convention.

24. In the debate that followed, widespread appreciation was expressed to India for its hospitality. Participants underlined the importance of the Convention as the first international public health treaty negotiated under the auspices of the WHO, and its contribution to tackling the health, social, economic and environmental impact of tobacco use. Representatives of WHO regions drew attention to salient developments or events such as the increasing number of countries ratifying the Protocol to Eliminate Illicit Trade in Tobacco Products, the exclusion of tobacco industry representatives from national delegations, measures to combat the use of waterpipes and smokeless tobacco, and the adoption of the Algiers Call to Action for Tobacco Control. Several regions had adopted roadmaps or plans to strengthen implementation of the Convention. Numerous examples were given of action taken by Parties to strengthen price and tax measures (Article 6), to protect against exposure to tobacco smoke (Article 8), to implement new or improved packaging and labelling (Article 11), and to ban tobacco advertising, promotion and sponsorship (Article 13).

25. While public health was the overriding concern, other aspects of tobacco control, such as support for alternative livelihoods, should not be overlooked. In particular, Article 17 and relations with tobacco farmers should be tackled in a humane way. Numerous parties emphasized the human rights dimension of tobacco control; others highlighted the need to balance the various competing rights involved and to ensure respect for State sovereignty and understanding of States' particular circumstances in

implementing the Convention. Attention was drawn to challenges to implementation, including lack of sufficient and sustainable resources and interference from the tobacco industry, which was continuing to pursue a strategy of litigation. While positive note was taken of the work by the Convention Secretariat to promote the principles of Article 5.3, more stringent restrictions were called for to prevent the tobacco industry infiltrating the proceedings of the COP. Some Parties sought further information on innovative tobacco products and for guidance on their control.

26. Observer countries present at the session were urged to become Parties to the Convention and those Parties that had not already done so were called on to ratify the Protocol to Eliminate Illicit Trade in Tobacco Products. All Parties were encouraged to involve the necessary ministries across their governments, in order to implement the Convention in a comprehensive and multisectoral manner, and the importance of international cooperation was also highlighted. The Secretariats of the Convention and WHO were urged to strengthen their collaboration in order to provide coordinated support to Parties. From a governance perspective, one region expressed concern about the growing number of agenda items and documents for sessions of the COP, and the Bureau was urged to advise the Convention Secretariat on the possibility of merging items in order to achieve more coherent discussions. There were also requests that every effort be made to avoid simultaneous meetings, which placed smaller delegations at a disadvantage.

27. One Party announced that its Government would contribute an additional US\$ 19 million by 2021 to support implementation of the Convention in low- and middle-income countries.

28. A representative from a nongovernmental organization urged the COP to keep the tobacco industry out of public health policy-making and to exclude it from proceedings, to take new steps to promote Article 5.3 of the Convention, and to hold the tobacco industry to account under Article 19.

29. At its second plenary meeting, the COP decided to hold its meetings in open session, in accordance with Rule 32 of the RoP, thereby excluding the general public from participation with immediate effect.

30. At its third plenary meeting, the COP considered a proposal to allow members of the public to attend the closure of the session, which some delegations supported, as they believed it would contribute to greater transparency. Others preferred to maintain the earlier decision to exclude the public from all COP proceedings. It was suggested that a mechanism should be put in place for screening members of the public in order to exclude anyone representing or seeking to further the interests of the tobacco industry and that the COP should consider requiring all members of delegations to sign a conflict of interest declaration.

31. It was decided that the meeting would remain an open session in accordance with Rule 32 of the RoP.

## **5. TREATY INSTRUMENTS AND TECHNICAL MATTERS**

### **5.1 Status of the Protocol to Eliminate Illicit Trade in Tobacco Products**

*Document FCTC/COP/7/5*

32. The Convention Secretariat introduced its report on the status of the Protocol, and activities undertaken by the Secretariat since COP6 relating to the promotion of ratification and entry into force of

the Protocol and requested the COP's further guidance on future steps, including options should the Protocol enter into force well before COP8.

33. Parties expressed thanks to the Secretariat for its efforts to promote ratification or accession to the Protocol and to support Parties in putting in place the mechanisms and capacity needed to implement it. The Secretariat was urged to continue those activities. Support for capacity-building was considered especially important. Parties emphasized the importance of broad ratification or accession, since illicit trade in tobacco products was a global phenomenon and international cooperation was needed to address it effectively. Representatives of several Parties indicated that their Governments were taking steps, including putting in place the necessary domestic legal provisions, to enable them to ratify or accede to the Protocol, and several also said that their Governments were taking action to curb the illicit trade even before becoming Parties to the Protocol.

34. Numerous Parties favoured extending the mandate of the panel of experts established pursuant to decision FCTC/COP6(6). Regarding options should the Protocol enter into force well before COP8, although it was agreed that implementation – particularly of the track and trace regime – should move forward as soon as possible after entry into force, the idea of convening the first session of the Meeting of the Parties (MOP1) in conjunction with an extraordinary COP, as proposed in paragraph 29 of document FCTC/COP/7/5, was generally not supported. Most Parties preferred the option put forward in paragraph 28, namely the establishment of an intergovernmental working group or other subsidiary body to carry out substantive preparations for MOP1. Support was expressed for the allocation of the funds not spent for MOP1 in the current biennium to fund Protocol-related activities, including an intergovernmental working group.

35. One Party called for cooperation and sharing of information between neighbouring States to mitigate the financial burden of implementing the Protocol. Another Party expressed concern about the implications of eventual implementation of the Convention and Protocol on its economy, to which tobacco-growing made a major contribution.

36. The Head of the Convention Secretariat, responding to the points raised, said that the funding set aside for MOP1 in the current budget might usefully be put towards the employment of an additional staff member to assist States Parties with technical issues.

37. Committee A considered a draft decision proposed by a Party. The text was amended by the Committee to provide for preparation of the draft agenda of MOP1 and other preparatory measures. Following some discussion, it was agreed that in order to keep costs to a minimum, the preparatory meeting would be held in Geneva with the participation of two Parties that have ratified or acceded to the Protocol from each region. A paragraph intended to avoid any track and trace system promoted or influenced by the tobacco industry was also added. A representative of the World Customs Organization said that some interaction with the tobacco industry was bound to occur, as it remained a part of legitimate trade. Nevertheless, it was important to ensure appropriate engagement with the industry and prevent it from exerting undue influence on policy-making.

38. The draft decision was further revised by an informal drafting group in order to accommodate the concerns of some Parties in relation to interactions with the tobacco industry. It was agreed that such interactions should occur only to the extent strictly necessary and that Parties should be urged, in accordance with their obligations under the Convention, not to consider any proposal or assistance related

to tracking and tracing from the tobacco industry or submitted on the industry's behalf, including in the course of preparatory activities for MOP1.

39. Committee A approved the draft decision, which was transmitted to the COP for adoption, in the second report of Committee A (document FCTC/COP/7/A/R/2). At its fifth plenary meeting, on 12 November 2016, the COP adopted decision FCTC/COP7(6).

## **5.2. Impact assessment of the WHO FCTC: report by the expert group**

### *Document FCTC/COP/7/6*

40. At its sixth session, the COP (in decision FCTC/COP6(13)) had decided to proceed with the impact assessment and had requested the Bureau of the COP to select independent experts nominated by Parties and observers. The group's report, contained in document FCTC/COP/7/6, summarized the findings of the impact assessment and requested the COP to provide further guidance. The Chairperson of the expert group introduced its report.

41. Some Parties suggested that further impact assessments should be carried out, with the suggested interval between assessments ranging from six to 10 years, although further country missions would not be necessary at present. Some Parties noted the lack of data in the report on issues such as smokeless tobacco use. Others called for the sharing of tools and methodology and for the development of quantitative and qualitative indicators that would enable all Parties to carry out their own assessments. Parties broadly welcomed the expert group report and noted the important findings of the impact assessment.

42. Committee A approved a draft decision on the impact assessment of the WHO FCTC proposed by a Party on behalf of the European Region. The draft decision was transmitted to the COP for adoption, in the second report of Committee A (document FCTC/COP/7/A/R/2). At its fifth plenary meeting, on 12 November 2016, the COP adopted decision FCTC/COP7(7)

## **5.3 Implementation of Article 5.3 of the WHO FCTC**

### *Document FCTC/COP/7/7*

43. At its sixth session, the COP had adopted decision FCTC/COP6(14) and requested the Convention Secretariat to carry out various activities and report on its findings to COP7. The report, contained in document FCTC/COP/7/7, summarizes the progress made in the implementation of Article 5.3 by the Parties, and details the work carried out by the Convention Secretariat, in collaboration with WHO, other partners and international experts. A representative of the Convention Secretariat introduced the report, noting that Article 5.3 remained the greatest barrier to implementation for a number of Parties.

44. Support was expressed for the Convention Secretariat's collaboration with pertinent international organizations to strengthen the implementation of Article 5.3 and for the establishment of tobacco industry monitoring centres (Observatories) and one Knowledge Hub to assist Parties in implementing the provisions of the article. Support was also expressed for the establishment of a panel of experts to provide Parties with policy-making and capacity-building support. At the same time, it was recommended that maximum use should be made of existing mechanisms, such as the working group on sustainable measures to strengthen implementation of the WHO FCTC. The Convention Secretariat was also asked to

facilitate sharing of best practice and cooperation among countries, especially South-South and triangular cooperation.

45. Some Parties expressed the view that nothing in Article 5.3 provided a basis for excluding legitimate government representatives from Parties' delegations. They emphasized that States had a sovereign right to select the members of their delegations. Some representatives were particularly concerned about the practice of sending notes verbales, which, as they understood it, effectively threatened to exclude delegation members merely on the basis of a suspicion that they might have links to the tobacco industry. Other representatives noted that, in order to ensure transparency, all stakeholders should be allowed to participate in policy-making, although no single group should have undue influence. Some representatives voiced concern about the exclusion of members of the public and the media from COP sessions, which in their opinion was not in the interests of transparency.

46. Several delegations pointed out that Article 5.3 required Parties to protect their policies from commercial and other vested interests of the tobacco industry in accordance with national law; it did not require them to change their national laws. Moreover, the Convention did not prohibit governments from interacting with the tobacco industry.

47. Other delegations strongly supported additional measures to strengthen the implementation of Article 5.3, as preventing the influence of the tobacco industry was at the heart of the Convention. Hence, compliance with Article 5.3 was crucial to the implementation of the Convention as a whole and to the achievement of its objectives. These delegations also pointed out that the Parties had agreed to implement the Convention without reservations. They considered the guidelines for the implementation of Article 5.3 sufficiently clear to enable Parties to implement its provisions in accordance with their national laws. One representative was of the view that appropriate sanctions should be applied to Parties whose laws allowed them to succumb to the influence of the tobacco industry.

48. A representative of the Convention Secretariat clarified that the main function of the Observatories would be monitoring of tobacco industry practices and dissemination of information to Parties, whereas the hub would be more directly involved in providing assistance to Parties through training and capacity-building, technical documentation and other activities. The two sets of knowledge networks would work together to support Parties in implementing Article 5.3. Ideally, the networks would be located within academic institutions and other entities in Parties that would voluntarily provide additional support to ensure their sustainability.

49. Committee A considered a draft decision proposed by a number of Parties. Some Parties expressed concern about potential budgetary implications associated with the establishment of a Knowledge Hub and the development of global media strategies, given Committee B's decision in principle on a zero-nominal growth budget, while others emphasized that implementing Article 5.3 and preventing the influence of the tobacco industry lay at the heart of the Convention and should be a priority in terms of budgeting. There was also some discussion as to whether Parties or the Convention Secretariat should be called on to review the Guidelines on cooperation between the United Nations and the business sector. It was suggested that the text might provide for greater flexibility to reflect the sovereign right of Parties in establishing their own tobacco control policies.

50. Following informal consultations, Committee A resumed its discussion of the draft decision, specifying that the Convention Secretariat, rather than Parties, should establish the proposed Knowledge

Hub, in order to maintain consistency with earlier similar decisions and the working practices of the Convention Secretariat. The Convention Secretariat, rather than Parties, should consider the Guidelines on cooperation between the United Nations and the business sector, and report to COP8 on its findings. One preambular paragraph was revised in order to reaffirm obligation of Parties under the Convention to implement Article 5.3.

51. Committee A approved the draft decision, which was transmitted to the COP for adoption, in the second report of Committee A (document FCTC/COP/7/A/R/2). At its fifth plenary meeting, on 12 November 2016, the COP adopted decision FCTC/COP7(8).

#### **5.4 Further development of the partial guidelines for implementation of Articles 9 and 10 of the WHO FCTC: “Regulation of the contents of tobacco products” and “Regulation of tobacco product disclosures”: report by the working group and report by WHO**

*Documents FCTC/COP/7/8, FCTC/COP/7/9 and FCTC/COP/7/INF.DOC/1*

52. The report by the working group contained in FCTC/COP/7/8 was developed in accordance with the mandates given in decision FCTC/COP6(12) of COP6. A working group key facilitator proposed a draft decision requesting the COP to consider adopting the further development of the partial guidelines for the implementation of Articles 9 and 10 as proposed by the working group.

53. Some representatives endorsed the amendments to the partial guidelines contained in Annexes 1–3 of the report, while others claimed that there was not yet enough scientific evidence to justify them, notably because a comprehensive and scientific definition of addictiveness was lacking. Some Parties suggested that Annex 4 should be included as a progress report. Representatives highlighted the need to consider tobacco product design, including “slim” cigarettes targeted at women, and smokeless and other emerging tobacco products. A representative speaking on behalf of Parties in the WHO African Region called for technical assistance from WHO to strengthen laboratory testing and analysis capacity, since in many countries the only laboratories available belonged to the tobacco industry. The importance of engaging local authorities in efforts to measure cigarette contents and emissions was highlighted.

54. The COP also noted the reports contained in documents FCTC/COP/7/9 and FCTC/COP/7/INF.DOC/1, prepared by WHO at the invitation of the Convention Secretariat at the request of COP6. Parties welcomed the progress of the validation of analytical chemical methods for testing and measuring cigarette contents and emissions. One representative said that potential conflicts with the Technical Barriers to Trade Agreement of the World Trade Organization should be investigated in relation to a future ban on slim/superslim cigarettes.

55. Committee A discussed a draft decision on the further development of the partial guidelines for implementation of Articles 9 and 10 of the WHO FCTC. One Party said that it had concerns about the status and activities of the diverse group of stakeholders to which the text referred, and another considered that the stakeholders should include nongovernmental organizations. It was suggested that addictiveness should not be covered by the draft decision. An informal open-ended drafting group was established to consider the text further. The drafting group also reviewed annexes to document FCTC/COP/7/9 and made several amendments to them.

56. At a later meeting, the Committee considered a revised draft, including revised Annexes and decided to adopt the further partial guidelines contained in Annexes 2 and 3, relating to product characteristics and contents (disclosure). The Committee also decided to retain Annex 1 of the draft, dealing with addictiveness, even though the drafting group had been unable to reach a consensus on Guidelines relating to that term and instead agreed to take note of them, with appreciation. One Party objected that an explicit reference to addictiveness would distract attention from the other harmful effects associated with tobacco use.

57. Committee A approved the draft decision, which was transmitted to the COP for adoption. At its fifth plenary meeting, on 12 November 2016, the COP adopted decision FCTC/COP7(14) on further partial Guidelines.

## **5.5 Control and prevention of globally emerging products**

### **5.5.1 Control and prevention of waterpipe tobacco products: report by WHO**

#### *Document FCTC/COP7/10*

58. At its sixth session, the COP requested the Secretariat, in decision FCTC/COP6(10), to invite WHO to prepare a report, contained in document FCTC/COP7/10, presenting policy options and best practice for the control of waterpipe tobacco product use in relation to the WHO FCTC, and to provide further guidance on how to strengthen responses to this emerging global epidemic. A representative of the WHO introduced the report.

59. Parties considered that waterpipe tobacco products should be regulated in the same way as other tobacco products and covered by the provisions of the FCTC. The policy options and suggested action set out in the report were welcomed, but two Parties expressed surprise that the import, sale and distribution of waterpipe tobacco products had not been included. Concern was expressed about the increasing use of waterpipes globally, in particular among young people; continuing misconceptions regarding their safety in comparison to other tobacco products; their contents and emissions, and associated health risks. The existence of regulatory challenges owing to the heterogeneity of the products and the context of their consumption and preparation was noted. The sovereign right of States to choose the level of public health protection for their citizens was recognized, and one Party did not agree that waterpipe tobacco should be subject to similar taxation schedules as cigarettes. Parties agreed that Article 6 of the WHO FCTC should apply to waterpipe tobacco. One Party indicated that the Government was involved in the manufacture of tobacco products, which created an obvious conflict of interest between the public health sector and some other sectors. The Convention Secretariat was asked to provide guidance on how to deal with that situation.

60. A number of Parties outlined steps being taken by their governments, including subjecting waterpipe tobacco to the same labelling requirements as other tobacco products, banning waterpipe tobacco smoking in public places and increasing the price of waterpipe tobacco. The establishment of a global Knowledge Hub for waterpipe smoking at the American University in Beirut was welcomed. The Convention Secretariat and WHO were requested to promote the sharing of experience and best practice. Efforts should also be made to devise standardized methods to determine the impact on health of emerging tobacco products and smokeless tobacco, set priorities for action, verify methods of testing and fill gaps in scientific research.

61. The Chair of the WHO Study Group on Tobacco Product Regulation said that taxation approaches were a matter for the Parties, noting that waterpipe and smokeless tobacco were not included in the same taxation schedules as cigarettes in some countries. Considerable information on health effects, research needs and recommended actions already existed, including in the Study Group's 2015 advisory note on waterpipe tobacco smoking.

62. Committee A discussed a draft decision on control and prevention of waterpipe products and made a number of amendments before approving it. At a subsequent meeting, the European Union and a group of Parties from the European region requested that paragraph 1(g) of the decision be reopened because it did not accurately reflect the Article 6 guidelines adopted by COP. The EU and a group of Parties from the European region proposed to amend the text as follows: "to fully implement the provisions of Article 6 of the Convention and its guidelines in relation to waterpipe tobacco".

63. Several Parties having spoken in favour of the request, the agenda item was reopened for discussion of one subparagraph. A number of Parties challenged the reopening of the agenda item, citing Rule 48 of the RoP, which stated that an agenda item that had been closed could not be reopened at the same session except by decision of the COP, with a two-thirds majority. One said specifically that the content of the proposed amendment was acceptable; it was the precedent of reopening an agenda item for debate that was problematic. Other Parties noted that they had refrained from requesting the reopening of other agenda items in the interests of consensus and the efficient conduct of the Committee's business.

64. A representative of the WHO Office of the Legal Counsel clarified a number of issues related to the RoP. Rule 50.3 stated that, if all efforts to reach consensus had been exhausted, the COP should proceed to a vote as a last resort. The reopening of the agenda item had been decided by consensus by the Parties present in the room at the time, so a vote was not required. Pursuant to Rule 25.3, rules referring to the COP also applied, *mutatis mutandis*, to its subsidiary bodies, of which the Committee was one.

65. Parties were at liberty to move the adjournment of the debate under Rule 40, in which case two Parties would speak for closure of the debate and two against, and a vote would be held. Parties were likewise at liberty to reopen any agenda item in a plenary meeting; however, it was a longstanding custom that draft decisions recommended by the committees were adopted by the COP without further debate.

66. After an extensive discussion, the European Union and a group of Parties from the European region withdrew their proposed amendment in light of the information given by the Head of the Convention Secretariat and the WHO Legal Counsel, that decisions of the COP were not legally binding on Parties and that the decision in question would therefore not impose any obligations with respect to taxation on European Union Member States.

67. Committee A approved the draft decision, which was transmitted to the COP for adoption, in the first report of Committee A (document FCTC/COP/7/A/R/1). At its fifth plenary meeting, on 12 November 2016, the COP adopted decision FCTC/COP7(4).

### **5.5.2 Electronic nicotine delivery systems and electronic non-nicotine delivery systems: report by WHO**

*Document FCTC/COP/7/11*

68. At its sixth session, the COP requested the Secretariat, in decision FCTC/COP6(9), to invite WHO to prepare an expert report. The report, in document FCTC/COP/7/11, gave updated evidence of the health impact of electronic nicotine delivery systems and electronic non-nicotine delivery systems (ENDS/ENNDS), their potential role in tobacco cessation and their impact on tobacco control efforts. It also set out a non-exhaustive list of regulatory options to achieve the objectives outlined in paragraph 2 of document FCTC/COP6(9). The COP was requested to provide further guidance.

69. Parties called for further unbiased, commercially independent and scientifically-based research to ascertain the overall health impact and long-term public health risks of ENDS/ENNDS, as well as the role of those delivery systems in smoking initiation and cessation. Some Parties expressed concern at the use of health claims as a marketing tool for ENDS/ENNDS. Regulation was considered challenging, given the wide variety and continually evolving array of products involved, and the list of regulatory options was deemed useful. Many of the steps already taken by Parties to achieve the ENDS/ENNDS objectives were consistent with the regulatory options set out in the report. Some Parties considered that ENDS/ENNDS should be regulated under national legislation in the same way as food, drugs or tobacco products, while others called for them to be banned outright. It was suggested that WHO should be requested to promote continued evidence-based scientific research and prepare an expert report for submission to COP8.

70. Committee A considered a draft decision proposed by a Party, which would invite Parties to consider regulating ENDS/ENNDS, including as tobacco products, medicinal products, consumer products, or other categories, by applying measures such as those referred to in the report. Another Party proposed that, in line with the regulatory options put forward in the report, Parties that had not banned the importation, sale and distribution of ENDS/ENNDS should be invited to consider either prohibiting or regulating such products. That suggestion was supported by several other Parties. One representative pointed out, however, that if neighbouring countries regulated ENDS/ENNDS in different ways, tobacco control interventions might be subverted and illicit cross-border trade might increase; the representative proposed that the COP should agree to regulate ENDS/ENNDS in the same way as tobacco products.

71. Further extensive discussion of the draft took place, focusing on the scope of the terms “regulation”, “prohibition” and “restriction” of interactions with the tobacco industry and on the expediency of referring explicitly to scientific research and evidence. It was pointed out that the text must provide sufficient flexibility to cover varying national circumstances and observed that whether products were to be regulated or prohibited, measures would need to be implemented consistent with other obligations such as those under World Trade Organization (WTO) agreements. Some Parties requested this regulation to be science-based and insisted to insert the word “science or science-based” in paragraph 2 of the decision but this suggestion was rejected by some Parties. This suggestion was eventually not reflected in the decision.

72. Committee A approved the draft decision, which was transmitted to the COP for adoption, in the second report of Committee A (document FCTC/COP/7/A/R/2). At its fifth plenary meeting, on 12 November 2016, the COP adopted decision FCTC/COP7(9).

## **5.6 Economically sustainable alternatives to tobacco growing (in relation to Articles 17 and 18 of the WHO FCTC)**

*Document FCTC/COP/7/12*

73. At its sixth session, the COP adopted policy options and recommendations on economically sustainable alternatives to tobacco growing (in relation to Articles 17 and 18 of the WHO FCTC) in decision FCTC/COP6(11). The report from the Secretariat contained in document FCTC/COP/7/12 summarized the progress made on the implementation of the decision and requested the COP to provide further guidance. A representative of the Convention Secretariat introduced the report, noting that national implementation reports indicated that an increasing number of Parties had taken steps to assist tobacco growers in shifting to viable alternative livelihoods.

74. In the ensuing discussion, representatives acknowledged the importance of Articles 17 and 18 as key elements of a comprehensive tobacco control policy and expressed appreciation to Brazil for sharing its strategies for agricultural diversification in tobacco growing areas. A representative speaking on behalf of the WHO African Region proposed that the Secretariat should work with the WHO Regional Office for Africa to establish pilot projects on alternative livelihoods for tobacco farmers in at least two African countries, provide opportunities for information sharing on good alternative crop growing practices and carry out education programmes for tobacco growers on the health, environmental and social problems associated with tobacco production. One representative called for tobacco workers to be involved in decisions about a switch to alternative crops, although it would be necessary to prevent any interference by the tobacco industry.

75. A number of Party representatives described their countries' economic dependence on tobacco growing, while another drew attention to the health and environmental effects which would prove much more costly in the long term.

76. Committee A considered a draft decision proposed by several Parties. During the discussion, it was emphasized that Parties should be encouraged not to introduce tobacco growing and that economically, socially and environmentally sustainable alternatives must be promoted.

77. Committee A approved the draft decision, which was transmitted to the COP for adoption, in the second report of Committee A (document FCTC/COP/7/A/R/2). At its fifth plenary meeting, on 12 November 2016, the COP adopted decision FCTC/COP7(10).

## **5.7 Implementation of Article 19 of the WHO FCTC: "Liability": report by the expert group**

### *Document FCTC/COP/7/13*

78. At its sixth session, the COP extended the mandate of the expert group, as set out in decision FCTC/COP6(7). The expert group submitted its final report, contained in document FCTC/COP/7/13, detailing the progress made and proposing a toolkit as a mechanism of assistance to Parties in their implementation of Article 19. The Chair of the expert group introduced the report, noting that the toolkit was intended to be a living document, which would evolve as legal practice developed. It would be an online resource available to Parties through the WHO FCTC Information Platform.

79. In the ensuing discussion, representatives affirmed the need to strengthen Parties' ability to hold the tobacco industry liable, with several noting that the industry had long used the threat of legal action to undermine government tobacco control efforts. At the same time, it was pointed out that lawsuits against

the tobacco industry were unlikely to stop anyone from smoking and that strong regulation could be a more efficient means of shaping tobacco control policy than litigation.

80. The toolkit was seen as potentially useful for information-sharing and for helping Parties to develop capacity in relation to civil liability; however, it was emphasized that it should be considered a reference, not a set of guidelines or recommendations, since national legal systems varied widely and therefore no single approach would work for all Parties. The Secretariat should update the toolkit regularly as new information and resources became available.

81. Parties considered that the expert group had fulfilled its mandate and should not continue; any further work in relation to the implementation of Article 19 should be done by the Convention Secretariat or through direct contacts between Parties.

82. Committee A considered a draft decision proposed by a Party. The decision was revised by an informal drafting group, which agreed to add a preambular paragraph recognizing that scientific evidence had established that tobacco consumption and exposure to tobacco smoke caused death, disease and disability, and noting that Article 19 recognized the possibility of Parties taking various types of action to promote tobacco control and international cooperation.

83. Committee A approved the draft decision, which was transmitted to the COP for adoption, in the second report of Committee A (document FCTC/COP/7/A/R/2). At its fifth plenary meeting, on 12 November 2016, the COP adopted decision FCTC/COP7(11).

## **5.8 Addressing gender-specific risks when developing tobacco control strategies (item proposed by a Party)**

### *Document FCTC/COP/7/14*

84. This agenda item was proposed by a Party in accordance with Rule 7 of the RoP of the COP. The Guiding Principles of the WHO FCTC, as contained in Article 4, refer to the “strong political commitment” necessary for the development of multisectoral tobacco control measures and emphasize the need to address “gender-specific risks” when developing tobacco control strategies. This was the first time that the COP had addressed this issue. The Secretariat introduced the report contained in document FCTC/COP/7/14.

85. Representatives identified a number of risks specific to women, including exposure to second-hand smoke, marketing campaigns targeted directly at women and the particular risks faced by women in low- and middle-income countries and those of lower socioeconomic status, even in countries where the overall rate of tobacco use among women was low.

86. One representative of a regional group said that it was important to consolidate information and recommendations relevant to gender made by other WHO FCTC bodies, including the various expert groups. Gender-specific indicators should be employed in the collection and use of tobacco data.

87. Committee A considered a draft decision, which requested the Convention Secretariat to invite WHO to prepare and submit a paper to COP8. There was some discussion about inclusion of the term “vulnerable groups”, which was not referred to in the WHO FCTC.

88. Committee A approved the draft decision, which was transmitted to the COP for adoption, in the second report of Committee A (document FCTC/COP/7/A/R/2). At its fifth plenary meeting, on 12 November 2016, the COP adopted decision FCTC/COP7(12).

## **5.9 Tobacco advertising, promotion and sponsorship: depiction of tobacco in entertainment media (item proposed by a Party)**

*Document FCTC/COP/7/38*

89. This agenda item had been proposed by a Party in accordance with Rule 7 of the RoP of the COP. The report, contained in document FCTC/COP/7/38, discussed depictions of tobacco in entertainment media in relation to the guidelines for the implementation of Article 13, identified implementation gaps, highlighted the growing issue of cross-border advertising, promotion and sponsorship, and requested the COP to provide guidance on any future work.

90. Representatives highlighted the emerging problems associated with the increased use of mobile technology, especially among young people. The main concern was the regulation of cross-border advertising. One Party said that it would be willing to host two meetings of the expert group.

91. Committee A considered a draft decision prepared by a Party, which was further amended to provide for greater flexibility in reporting and monitoring cross-border advertising in accordance with national legislation and priorities, and considering existing experience in order to limit duplication of efforts.

92. Committee A approved the draft decision, which was transmitted to the COP for adoption, in the first report of Committee A (document FCTC/COP/7/A/R/1). At its fifth plenary meeting, on 12 November 2016, the COP adopted decision FCTC/COP7(5).

## **6. REPORTING, IMPLEMENTATION ASSISTANCE AND INTERNATIONAL COOPERATION**

### **6.1 Reporting arrangements under the WHO FCTC: report by the expert group**

*Document FCTC/COP/7/15*

93. At its sixth session, the COP established an expert group to review reporting arrangements under the WHO FCTC in decision FCTC/COP/6(15). The report by the expert group, contained in document FCTC/COP/7/15, presented the outcome of the expert group's work including the recommendation for the COP to establish a WHO FCTC Implementation Review Committee and possible terms of reference for the consideration of the COP. The Chair of the expert group introduced the report.

94. Parties acknowledged the importance of reporting in identifying implementation gaps and challenges to be addressed. Some Parties welcomed the proposed establishment of a WHO FCTC Implementation Review Committee, which they considered should be fully funded from core resources. Many other Parties expressed concern about the establishment of such a subsidiary body of the COP. Issues raised included legality, given that it would not be an intergovernmental body, the number of implementation reports to be reviewed and how they would be selected. Several Parties highlighted the need to consider reporting arrangements in conjunction with other agenda items that provided for the

different types of assistance available to Parties in their implementation work, notably item 6.3 (South-South and triangular cooperation), item 6.4 (Sustainable measures to strengthen implementation of the WHO FCTC: report by the working group), and item 6.5 (Financial resources and mechanisms of assistance) in order to avoid duplication. It was suggested that the COP should focus on methods of improving the reporting process, such as reducing the length of reports, making online reporting more accessible and user-friendly, and facilitating the amendment of previous reports for use in subsequent reporting cycles.

95. After the intervention of the representative of the WHO Office of the Legal Counsel regarding the legality of the subsidiary body, the Committee agreed to take up Agenda items 6.3, 6.4 and 6.5 before establishing a drafting group to produce a draft decision on all four agenda items. Please see paragraphs 106 to 110 for the outcome of the Committee's deliberations on these items.

## **6.2 International cooperation for implementation of the WHO FCTC, including the implementation of the 2030 Agenda for Sustainable Development, the global NCD targets and human rights**

### *Document FCTC/COP/7/16*

96. At its sixth session, the COP in decision FCTC/COP6(16) requested the Secretariat to report on Parties' efforts to reduce tobacco use and to strengthen international collaboration to assist progress towards the NCD global target. The report in document FCTC/COP/7/16 discussed developments in the adoption and implementation of the 2030 Agenda for Sustainable Development and achievement of the NCD global target on the reduction of tobacco use, as well as the importance of human rights in WHO FCTC implementation. A framework of international cooperation was also proposed for the consideration of the COP.

97. In Committee A, Parties praised the efforts of the Convention Secretariat in strengthening international collaboration. Support was expressed for gathering information on the action of international entities to advance support of WHO FCTC implementation, and one Party called for a baseline to measure progress in achieving the target of a 30% relative reduction in the prevalence of current tobacco use. Several Parties emphasized the importance of the human rights element of tobacco control, although one Party considered that the COP was not the most appropriate forum for a discussion of human rights issues. It was pointed out that tobacco control was related to a number of Sustainable Development Goals and targets, not only target 3.a, and that Parties must be free to set their own priorities in relation to the Goals.

98. Due to reorganization of the work of the two committees, this item was transferred to Committee B. Committee B considered two draft decisions: the first on international cooperation for implementation of the WHO FCTC, including human rights; and the second on the contribution of the COP to achieving the NCD target on the reduction of tobacco use.

99. The aim of the draft decision on human rights was to ensure consistency and coherence between the WHO FCTC and the activities of the United Nations Human Rights Council's open-ended intergovernmental working group on transnational corporations and other business enterprises with respect to human rights. One party suggested an amendment to the last operative paragraph of the draft decision in order to broaden its scope to cover existing United Nations mechanisms and processes that focus on issues of business and human rights.

100. The draft decision on NCDs had been proposed by one Party in view of the fact that there was no mechanism for Parties to report to the COP on efforts to set national tobacco use reduction targets in line with the global voluntary NCD targets. In the second part of the draft decision, the Convention Secretariat was requested to take a number of actions, including leveraging opportunities as a member of the WHO Global Coordination Mechanism on the prevention and control of NCDs and UNIATF. Parties suggested that the draft decision should include reference to the 2030 Agenda for Sustainable Development and the WHO Global Action Plan for the Prevention and Control of Noncommunicable Diseases 2013–2020. Furthermore, it should call on Parties to develop WHO FCTC implementation plans or highlight such plans within national multisectoral NCD policies and plans, as appropriate to Parties' national contexts.

101. Committee B approved the amended draft decision, which was transmitted to the COP for adoption. At its fifth plenary meeting, on 12 November 2016, the COP adopted decision FCTC/COP7(26).

### **6.3 South–south and triangular cooperation<sup>1</sup>**

*Document FCTC/COP/7/17*

102. The sixth session of the COP requested the Convention Secretariat to work on the promotion of South–South cooperation in the exchange of scientific, technical and legal expertise relevant to the implementation of the Convention (in decision FCTC/COP6(27) on the workplan and budget). The report, in document FCTC/COP/7/17, examined the progress made, highlighted the importance of South–South and triangular cooperation for implementation of the WHO FCTC, and requested the COP to provide further guidance.

103. Parties attached importance to South–South and triangular cooperation as a tool for exchanging experience and best practice and promoting the implementation of the Convention, and several Parties highlighted the benefits they had derived from such exchanges. Support was expressed for the strengthening of existing Knowledge Hubs within existing resources.

### **6.4 Sustainable measures to strengthen implementation of the WHO FCTC: report by the working group<sup>2</sup>**

*Document FCTC/COP/7/18*

104. In decision FCTC/COP6(17) at its sixth session, the COP extended the mandate of the working group established by COP5 in FCTC/COP5(17). The report of the working group, contained in document FCTC/COP/7/18, presented strategic direction for implementation assistance for the consideration of the COP. One of the key facilitators introduced the report.

105. Parties agreed that implementation of the Convention should be accelerated. The measures proposed in the report should be prioritized to assist Parties in implementing tobacco control policies. It was suggested that the Secretariat should be given a mandate to match the needs of the Parties with available development assistance and that the COP should endorse a shortlist of implementation priorities.

---

<sup>1</sup> Please see paragraphs 106 to 110 for the outcome of the Committee's deliberations of these items.

<sup>2</sup> Please see paragraphs 106 to 110 for the outcome of the Committee's deliberations of these items.

Support was expressed for the development of a medium-term strategic framework to guide the development of the biennial workplans and budgets of the COP.

## **6.5 Financial resources and mechanisms of assistance**

### *Document FCTC/COP/7/19*

106. The report from the Secretariat, contained in document FCTC/COP/7/19, reviewed resources and mechanisms of assistance in three areas: (i) resources to support implementation of the workplans and budgets, (ii) mechanisms of assistance for the Convention Secretariat to support implementation of the workplans and budgets approved by the COP and (iii) assistance to Parties through coordination and collaboration with other entities to maximize available resources.

107. Some Parties considered that financial resources and mechanisms of assistance should prioritize work at the country level. It was suggested that the Convention Secretariat and WHO should continue to provide Parties with implementation assistance, including financial resources; that the COP should call on the Convention Secretariat to collaborate with other United Nations agencies, including the World Bank, to mobilize resources for implementation; and that the COP should encourage Parties to support the work of the Convention Secretariat through extrabudgetary resources.

108. Committee A discussed a draft decision relating to Agenda items 6.1, 6.3, 6.4 and 6.5, which presented three options: 1) immediately to create an Implementation Review Committee to assist Parties in complying with their obligations under the Convention, as recommended in document FCTC/COP/7/15; 2) to create a working group to finalize the terms of reference for the future Implementation Review Committee, and also guide a series of other activities related to implementation assistance, including the development of a draft medium-term strategic framework as outlined in decision FCTC/COP7(13), or 3) dispense with a review committee, given that the review of WHO FCTC implementation is a competency exclusive to the COP. The working group would be limited to 18 members. Regions would be able to nominate up to two members representing Parties through regional coordinators to ensure equal regional participation.

109. Most Parties considered that the current draft of the terms of reference of the Implementation Review Committee, contained in document FCTC/COP/7/15, Annex 1, would not be acceptable without considerable amendment. They therefore favoured the other options. Most also favoured the restricted format of the future working group. Concerns were expressed about the financial implications of both options and some Parties also raised legal concerns.

110. Committee A approved the draft decision, which was transmitted to the COP for adoption, in the second report of Committee A (FCTC/COP/7/A/R/2). At its fifth plenary meeting, on 12 November 2016, the COP adopted decision FCTC/COP7(13).

## **6.6 Issues related to implementation of the WHO FCTC and settlement of disputes concerning the implementation or application of the Convention**

### *Document FCTC/COP/7/20*

111. The COP was requested to consider and provide further guidance on the report contained in document FCTC/COP/7/20, which examined the issues identified in decision FCTC/COP6(18) and set out

ways in which disputes concerning the interpretation or application of the Convention might be addressed in parallel to, or as an alternative to, procedures under Article 27. Document FCTC/COP/7/20 also addressed issues specifically related to possible procedures for settling disputes in accordance with Article 27. A representative of the Convention Secretariat introduced the report, noting that there had recently been several high-profile cases in which Parties had prevailed over the tobacco industry.

112. In the ensuing discussion, it was suggested that those cases should be studied with a view to extracting lessons with a more general application. Parties were encouraged to make every effort to avoid the abuse of international trade and investment instruments by the tobacco industry to oppose tobacco control measures. A representative expressed the view that the triggering of Article 27 of the Convention should be a last resort and used only in disputes related to the interpretation or application of the Convention concerning two or more Parties. Another representative expressed disagreement with the presentation of the procedure under Article 27 in document FCTC/COP/7/20. Other disputes should be handled by the Convention Secretariat and the proposed implementation review committee.

113. It was considered that the procedures to be developed for ad hoc arbitration should cover the scope of the arbitration procedure, the selection of arbitrators and the implementation or enforcement of arbitral awards. A representative pointed out, however, that there was little need to draw up arbitration procedures since very few Parties had indicated their willingness to be bound by an arbitration decision as provided for in Article 27.2. Another representative noted that Parties had clearly shown a preference for diplomatic means of dispute settlement, as only a few had agreed to be bound by ad hoc arbitration. In his view, an arbitration procedure should be developed only if future experience showed that diplomatic means were not working, particularly as developing a procedure would require resources, which might be better invested in enhancing tobacco control strategies. The representative emphasized that any arbitration procedure eventually developed should not become a means for one Party to impose its legislation on another.

114. As the matters addressed under this item and item 6.7 were similar, it was proposed that the COP should consider a combined draft decision on the two items. A decision put forward by a Party was considered in an informal drafting group; as consensus on the combined draft decision proved impossible, the draft was revised to refer only to item 6.7. Consideration of item 6.6 was concluded with no decision being taken by Committee B, to which this agenda item had been transferred.

## **6.7 Trade and investment issues, including agreements, and legal challenges in relation to the implementation of the WHO FCTC**

### *Document FCTC/COP/7/21*

115. At its sixth session, the COP requested the Convention Secretariat to prepare a report on the potential impact of new trade and investment provisions on WHO FCTC implementation in developing countries (in decision FCTC/COP6(19)). The Secretariat's report, contained in document FCTC/COP/7/21, examined key characteristics of new trade and investment agreements and WHO FCTC implementation challenges relating to international investment agreements, and offered policy options.

116. One representative expressed the view that all trade-related disputes, even those related to tobacco, should be resolved by the WTO, which had the necessary mandate and expertise. Another said that existing trade agreements already allowed Parties to impose restrictions on trade in tobacco products,

provided that their actions were proportionate and non-discriminatory. Several Parties considered that the proposed policy was beyond the mandate given to the Secretariat. A third drew attention to potential conflicts with national legislation. Other representatives considered that tobacco was a special case and should not be treated in the same way as other, less deadly commodities.

117. One representative called upon the Convention Secretariat and WHO to develop tools and mobilize resources to build capacity among Parties in international trade and investment law. Two representatives endorsed the suggestion to create an expert group. Other representatives with the suggestion of creating a group of expert supposed that they considered that the issues of trade and investment, amongst others, are not a competency of the COP but of the WTO, which is the only international body can decide upon trade disputes. Others considered that the information already provided by the Convention Secretariat was sufficient. One representative considered that the research described in the report displayed serious methodological flaws and questioned whether a decision on the issue was needed.

118. A draft decision, originally covering items 6.6 and 6.7 together, but later revised to deal only with the latter, was considered by an informal drafting group before being taken up by Committee B at its eighth meeting.

119. Committee B approved the draft decision, which was transmitted to the COP for adoption, in the second report of Committee B (document FCTC/COP/7/B/R/2). At its fifth plenary meeting, on 12 November, the COP adopted decision FCTC/COP7(21).

## **7. BUDGETARY AND INSTITUTIONAL MATTERS**

### **7.1 Performance report for the 2014–2015 workplan and budget**

*Document FCTC/COP/7/22*

120. The COP was invited to note the report in document FCTC/COP/7/22 describing the implementation of the workplan and budget for the full biennium, including activities mandated by the COP through various decisions not directly referred to in the workplan. The report also provided details of financial implementation.

121. While Parties welcomed the report and commended the Secretariat's efforts to ensure transparency, several said they would prefer future financial reporting to be presented in a consolidated document, in tabular form, and with as much detail as would be presented by the WHO Secretariat to the World Health Assembly. According to the performance report, mobilized funds had amounted to some US\$ 3 million less than the adopted budget and total spending had been US\$ 2 million less than the total funds available. More information on how actual income and spending had impacted the implementation of the 2014–2015 workplan would therefore be welcome, and would assist the COP in improving its planning for the next budget cycle.

122. Responding to a question about the system for auditing the Secretariat's activities, the Convention Secretariat said that the Convention was included in the WHO external audit. One Party suggested that the results of that audit should be more readily available.

123. The COP took note of the report contained in document FCTC/COP/7/22.

## **7.2 Interim performance report for the 2016–2017 workplan and budget**

*Document FCTC/COP/7/23*

124. An interim report on implementation of the 2016–2017 workplan and budget had been requested by the COP at its sixth session. The COP was invited to note the report in document FCTC/COP/7/23 and was asked for further guidance regarding the possible use of the outstanding US\$ 300 000 that had been set aside for the first Meeting of the Parties (MOP1) to the Protocol to Eliminate the Illicit Trade in Tobacco Products, which could not take place as the Protocol had not yet entered into force.

125. Parties welcomed the progress made in implementing the workplan and reiterated the desire to receive financial reports in a consolidated document at the next session of the COP. One Party requested detailed information on cost-bearing for participants invited to attend the meetings of expert groups and working groups: it was unclear exactly when those costs would be absorbed by the Convention Secretariat, and when they should be borne by participants. The Secretariat agreed to prepare an explanatory document on the financial details for the various types of expert groups and working groups, which would be distributed during the current COP.

126. With regard to the outstanding US\$ 300 000, several Parties from one region said that the spare funds should be spent on providing support and assistance to States that were Parties to the Protocol and, pending its entry into force, were becoming increasingly vulnerable to the influences of the tobacco industry. One Party proposed using some of the available funds to extend the mandate of the expert group to review reporting arrangements. Another suggested that technical assistance could be provided to Parties that did not have the capacity to collect and analyse data on tobacco use. Others wanted the funds to be carried over for use in the preparation and running of MOP1. Under agenda item 5.1, Committee A would consider the proposal to establish supporting bodies to prepare for MOP1. Should that decision have financial implications, the funds might need to be allocated to the establishment of those bodies.

127. Following informal discussions, Parties agreed to a proposal that the funds in question should be allocated to Protocol-related activities during the intersessional period. Part II, section 2.1, of the workplan and budget for the financial period 2016–2017 was therefore amended in a decision to reallocate the initial fund to organize MOP1 to support activities related to the entry into force and implementation of the Protocol.

## **7.3 Payment of the voluntary assessed contributions and measures to reduce Parties in arrears**

*Document FCTC/COP/7/24*

128. At its sixth session, the COP in decision FCTC/COP6(21) had requested the Convention Secretariat to appraise the status and reasons for arrears and to work with the Bureau on recommended action. The COP was invited to consider the Bureau's proposed draft decision contained in Annex 1 to document FCTC/COP/7/24, which was aimed at incentivizing Parties (especially those failing to meet their financial obligations without due cause) to comply with their treaty obligations.

129. Concern was expressed that 82 Parties were in arrears of their voluntary assessed contributions (VACs) and that 21 Parties had never paid contributions since the entry into force of the Convention. It was important to secure predictable funding by means of a mix of incentives and disincentives. The

Secretariat was requested to exhaust all means of facilitating payment by Parties, such as providing clear payment information on the Secretariat's website and coordinating more closely with permanent missions and WHO country offices, before imposing the sanctions provided for in the draft decision. There was a risk that the suspension of Parties' entitlement to voting rights would give the tobacco industry an opportunity to advance its own interests. Some Parties accordingly proposed that paragraph 2(a) of the draft decision should be deleted, and that paragraph 3 should be amended to the effect that the privileges and services enjoyed by Parties should be immediately restored by the Bureau once a Party had met its financial obligations. A new paragraph 5(c) should be added, to read: "to communicate to Parties, through their permanent missions in Geneva, reminding them of their outstanding payment obligations and the modalities of payment of voluntary assessed contributions." Other Parties, however, believed that the imposition of any type of sanctions on Parties for failure to pay voluntary assessed contributions was legally inappropriate; yet others supported the draft decision as proposed by the Bureau, while suggesting that the sanctions listed in paragraph 2 should be prioritized and sequenced, and that the criteria for their application should be specified.

130. Opinions were also divided as to whether the word "voluntary" should be dropped from the term "voluntary assessed contributions". Some Parties believed that the term was misleading, since there was an obligation to pay such contributions, which ministries of finance needed to acknowledge. Others believed that the term should be retained, in view of the fact that the Convention did not make provision for assessed contributions, and because a change in terminology would require the adoption or amendment of enabling legislation at national level. The Head of the Convention Secretariat noted that the workplans and budgets that were formally adopted by the COP included details of activity costs to be funded by voluntary assessed contributions and extrabudgetary funds.

131. When discussion of the item resumed the following day, the Head of the Convention Secretariat described the procedure currently followed by the Secretariat for collecting voluntary assessed contributions. Parties made a number of suggestions for improving that procedure and subsequently agreed on the following practices, to be applied by the Convention Secretariat with immediate effect:

- Note verbale sent to Permanent Mission, WHO FCTC treaty focal point in Geneva, Ministry of Foreign Affairs, Ministry of Health, WHO FCTC technical focal point and WHO Country Office before the beginning of the biennium;
- Note verbale contains invoice with amount in US dollars, date of payment, bank details and scale of assessment, and the invoice will be posted on a protected website;
- Reminders for the current biennium, as well as for arrears, sent on several occasions to Permanent Mission, WHO FCTC treaty focal point in Geneva, Ministry of Foreign Affairs, Ministry of Health, WHO FCTC technical focal point and WHO Country Office;
- Payment through bank transfer or through WHO Country Office;
- Acknowledgement of payment sent by note verbale to Permanent Mission, WHO FCTC technical focal point and WHO Country Office;
- Parties must specify that the payment constitutes their VAC to WHO FCTC.

132. Parties made a number of innovative suggestions of ways to encourage payment of arrears in voluntary assessed contributions. It was recognized that WHO country funds could not be used for that purpose. Neither the RoP nor the Convention itself stipulated how such arrears should be collected.

133. One Party suggested that one way to move forward with consideration of the issue would be to drop the word “voluntary” from the term “voluntary assessed contributions”, provided that was done as part of a package that included sanctions for non-payment. The draft decision was amended along those lines and subsequently presented as a conference paper (FCTC/COP7/B/Conf.Paper No.4).

134. A representative of the WHO Office of the Legal Counsel explained that the amended draft decision began by stating that the COP urged those Parties in arrears to make full payment before 31 December 2017. The second operative paragraph changed the designation of voluntary assessed contributions to assessed contributions. The third operative paragraph established the process and methodology with respect to any Party that was in arrears in the payment of its assessed contributions in an amount that equalled or exceeded the amount of the contributions due from it for the preceding two full calendar years at the time of opening of the COP. If a Party failed to submit a satisfactory payment plan, the Bureau could recommend, and the COP could decide, that the Party would not be eligible to become or nominate a member of the Bureau or to chair any subsidiary body or working group. In subsequent years, if the payment plan had not been established or was not being fully implemented, the Bureau could recommend, and the COP could decide, that the Party’s right to vote would be suspended. Those measures would lapse once the Party was no longer in arrears to the extent set out above. The fourth operative paragraph provided for the COP to review the process and methodology at its tenth session. In the fifth operative paragraph, the Convention Secretariat was requested to invite the support of the Secretariat of WHO and the intergovernmental organization observers to the COP in following up with Parties to collect assessed contributions. In the sixth and final operative paragraph, the Convention Secretariat was requested to communicate the decision to all Parties in arrears of payment of their assessed contributions, and to report the status of assessed contributions at each COP session.

135. Committee B approved the amended draft decision, which was transmitted to the COP for adoption. Two Parties expressed reservations concerning the change in terminology from “voluntary assessed contribution” to “assessed contribution” and with regard to the legal admissibility of imposing sanctions for non-payment of voluntary contributions. Nonetheless, they did not wish to stand in the way of the consensus view of the Committee. Canada expressed its concerns that the removal of the word voluntary would require a complex and lengthy process in Canada, likely making it difficult to implement this decision. Brazil also stated that “it was not able to follow the consensus on this matter, but it would not block the consensus reached in favour of the adoption of the decision”.

136. Committee B approved the draft decision, which was transmitted to the COP for adoption, in the second report of Committee B (document FCTC/COP7/B/R/2). At its fifth plenary meeting, on 12 November 2016, the COP adopted decision FCTC/COP7(23).

#### **7.4 Proposed workplan and budget for the financial period 2018–2019**

*Documents FCTC/COP/7/25 and FCTC/COP7/INF.DOC./2*

137. In accordance with Article 23 of the Convention, the COP was required to adopt the budget for the financial period until the next ordinary session. Committee B, at its second, fifth, sixth and seventh meetings, discussed the proposed workplan and budget for 2018–2019 contained in document FCTC/COP/7/25 and the detailed information contained in the explanatory note to the workplan and budget in document FCTC/COP/7/INF.DOC./2.

138. The COP was invited to consider an additional contribution of US\$ 707 933 in VACs, corresponding to 8% nominal growth when compared with the VAC budget adopted by the COP for the workplan 2014–2015 and a 4.5% increase compared to the VAC budget adopted for the workplan 2016–2017 period (when a US\$ 300 000 one time exceptional contribution was given). The COP was requested to review and consider adopting the proposed workplan and budget for 2018–2019.

139. In the ensuing discussion, Parties welcomed the timely submission of the relevant documentation and the Convention Secretariat's efforts to identify efficiency savings. Given the prevailing climate of austerity and the general trend towards zero nominal growth budgeting within the United Nations system, a number of Parties opposed any nominal growth in VAC, and the Secretariat was encouraged to adapt its priorities accordingly and to avoid duplication of effort wherever possible. Further savings might be made if some areas of the workplan were to be delivered by WHO. One Party proposed that the COP should develop a medium-term plan setting out its priorities, merging activities as appropriate, so as to guide the Convention Secretariat; another suggested that an interim report on budget implementation would facilitate the COP's decision-making on budget matters. One Party expressed the view that the proposed increase in VAC was justified, pointing out that it represented a small amount for individual Parties in absolute terms. Clarification was sought on the rationale for proposing an 8% increase in VAC when some Parties were still in arrears.

140. Specific concerns were expressed regarding the proposed recruitment of two additional legal officers, as legal services could be provided by the WHO Office of the Legal Counsel, and the upward reclassification of certain posts within the Convention Secretariat. It was suggested that the number and length of documents submitted to the COP should be curtailed, keeping in mind that the volume of documentation would inevitably increase when the Protocol to Eliminate Illicit Trade in Tobacco Products came into force. Differing views were expressed on whether the COP's policy on travel and daily subsistence allowance should be harmonized with that of WHO in order to be able to reduce the VAC, with one Party urging the Convention Secretariat not to decrease travel support for low- and lower-middle-income countries.

141. The Head of the Convention Secretariat, emphasizing that the overall budget was small considering the amount of work needed to curb the tobacco epidemic and defend the Convention from constant attack by the tobacco industry, said that an independent management review had been conducted and it concluded that the Convention Secretariat had reached full capacity and needed to review its staffing levels. Furthermore, a pro bono study by an advertising agency had recommended that the Convention Secretariat invest in improving the visibility of the Convention. Upgrading various posts was being proposed as an alternative to appointing a deputy head of secretariat, with a view to increasing the number of senior staff available to represent the Convention in other forums. Regarding the hiring of a senior legal officer, the Head of the Convention Secretariat explained that the Convention Secretariat was hosted by WHO and therefore WHO took care of administrative legal matter. However, there was some technical work of a legal nature relating to implementation of the Convention that was not provided by the WHO Office of the Legal Counsel; moreover, the Convention Secretariat had supported parties facing litigation by tobacco firms. The two additional legal officer posts requested were currently filled on a temporary basis, and it was hoped that they could be made permanent. The Senior Legal Adviser added that, without those two staff members, the Convention Secretariat would have to scale back its legal and other activities significantly.

142. The Committee was invited to consider the proposed workplan contained in Annex 1 to the document in closer detail, and was informed that the figures presented therein did not include programme support costs. Committee A had decided that the Panel of Experts on Impact Assessment would not be necessary and would thus be deleted from the workplan. It was agreed that a number of activities in the proposed workplan could be merged to avoid duplication between budget lines 2 and 3 and to potentially save costs. While some Parties considered that greater preparation of the workplan and budget was required prior to COP sessions and should be considered further, others felt there was no need to establish a group of advisers for that purpose; budgetary considerations were the role of the Bureau and all decisions related to the workplan and budget should be taken by the COP. After further discussion, Parties agreed to delete that item from the workplan and amend the draft decision to the effect that Parties would be informally consulted prior to the presentation of the proposed budget and workplan at future COPs. One Party underscored that any proposed decisions presented to the COP should be accompanied by an assessment of their financial and budgetary implications.

143. A more detailed communications and media strategy, with costing, should be prepared for the next COP. Parties requested further information on the circumstances in which external communications agencies were engaged, and on the composition and functions of the “United Nations tobacco control newsroom”. In response, the Head of the Convention Secretariat explained that the Convention Secretariat was unable to sufficiently promote the treaty and its provisions without a specific communications mandate from the COP, and was struggling to compete with large-scale marketing and information campaigns from the tobacco industry. While technical support, such as printing of documents and publications, was provided by WHO secretariat, FCTC was a hosted entity, and as such was expected to fund its own information campaigns. External agencies were only used on an ad hoc basis, to promote particular events, much as WHO uses them for campaigns like the World No Tobacco Day. Further information on those campaigns would be provided at the Committee’s request. The “newsroom” was intended as a virtual hub of user-friendly information, updated daily and presented in the form of images, infographics and videos. The costing for the “newsroom” included information technology costs, and provided for technical aspects to be coordinated by the Convention Secretariat, while other aspects would be managed by external agencies.

144. After further consideration, Parties agreed to zero nominal growth in VAC for the 2018–2019 budget and that the Convention Secretariat should be entrusted to decide how the available funds would be distributed across the workplan taking into considerations COP7 decisions.

145. The Head of the Convention Secretariat pointed out that zero nominal growth would in fact constitute a decrease in funds available, since the 2018–2019 budget did not include the US\$ 300 000 that Parties contributed as a one-time exception in 2014–2015 and 2016–2017 to travel expenses for representatives from low- and lower-middle-income countries to attend COP7. General administration, staff and finance management were funded from VAC, since mobilizing extrabudgetary resources for staffing and administration could be problematic. The de facto reduction in VAC caused by zero nominal growth would have a serious impact on staffing and administration. Without those funds, participation in meetings would decrease owing to lack of travel funds and there was a risk that the COP would no longer be quorate. She therefore asked whether Parties wished to consider repeating the US\$ 300 000 exception for the next biennium.

146. At the request of Committee B, the Convention Secretariat proposed a scenario for zero nominal growth in VAC, according to which, funds to cover travel expenses for representatives of low- and

lower-middle-income countries would no longer be available. Several Parties objected to that proposal, since it would impede the participation in the COP of Parties from a particular region; the COP would thus risk not being quorate, and those Parties' efforts to implement the Convention would be seriously undermined. In view of those expressions of concern, the scenario was revised to reinstate funding for travel for low- and lower-middle-income countries, and to cut staffing costs by US\$ 200 000. That scenario would mean that the funds to recruit a senior legal officer would have to be mostly found from outside VAC. Parties expressed concern that the funds for such an important post would not be secure.

147. The Secretariat was granted time to produce a revised workplan and budget for the financial period 2018–2019 on the basis of zero nominal growth, which was distributed in the Committee room as a white paper. Parties supported the revised workplan and budget.

148. Committee B agreed to approve the draft decision subject to the possibility of reopening consideration of the draft budget and workplan in response to the potential financial and budgetary implications of decisions pending in Committee A. The Secretariat was requested to make appropriate amendments to finalize the draft workplan and budget in line with the discussions and decisions made in both Committees.

149. Committee B transmitted the draft decision to the COP for adoption in the second report of Committee B (document FCTC/COP/7/B/R/2). At its fifth plenary meeting, on 12 November 2016, the COP adopted decision FCTC/COP7(24), on the understanding that the Secretariat would make appropriate adjustments to the workplan in line with discussions and decisions made in both Committees.

## **7.5 Convention Secretariat's fundraising efforts and collaborative work**

### *Document FCTC/COP/7/26*

150. The Convention Secretariat submitted a report in document FCTC/COP/7/26 reflecting discussions with the Bureau of the COP and offering three mechanisms to raise extrabudgetary funds: dedicating revenues for tobacco control; an international fund for tobacco control; and a financing dialogue. The COP was invited to note the report and the draft fundraising policy by the Secretariat of the WHO FCTC contained in the annex to the document and to provide further guidance.

151. Parties drew attention to the need to focus on those fundraising activities that were most likely to yield results. A report on fundraising activities should be included in each biennial workplan and budget. Some recommended that the Convention Secretariat focus its fundraising strategy on the COP budget and workplan, while others called on the Secretariat to play an increased role in fundraising at the national level. With regard to the first mechanism set out in the report, several Parties recalled that countries remained sovereign in their decisions concerning the use of revenues, and this matter had already been dealt with by the COP during development of the Guidelines for implementation of Article 6. The possibility of establishing an international fund, with contributions to be made on a voluntary basis, had also been previously considered, and the viability, sustainability and cost-effectiveness of such a proposal would require consideration. Parties expressed support for a financing dialogue, provided synergies with WHO's fundraising efforts were maximized, and called for preparations to be launched in the near future with a view to raising funds for use in the 2017–2018 biennium. A financing dialogue might also be used to raise awareness among donors. In response to a suggestion by one Party, the Head of the Convention Secretariat explained that a distinction should be drawn between an FCTC financing dialogue and the

WHO financing dialogue. The Convention Secretariat had specific needs that would not necessarily be met by joining the WHO financing dialogue, though that option could be explored.

152. While the Secretariat's initiative in developing a draft fundraising strategy was welcomed, Parties noted that the WHO Framework of Engagement with Non-State Actors (FENSA) had now been adopted with the Convention Secretariat (as a hosted entity) being bound to follow the provisions of the latter. Noting, that the draft policy had been drawn up before the FENSA had been approved, Parties called for it to be streamlined in such a way as to include only those elements that were specific to the Convention and not covered by FENSA, and to be referred to as a strategy rather than a policy.

153. Committee B considered and approved a revised draft decision, which was transmitted to the COP for adoption, in the second report of Committee B (document FCTC/COP/7/B/R/2). At its fifth plenary meeting, on 12 November 2016, the COP adopted decision FCTC/COP7(25).

## **7.6 Process and methodology to conduct the performance evaluation for the current and subsequent Head of the Convention Secretariat: report by the Bureau of the Conference of the Parties**

*Document FCTC/COP/7/27*

154. In decision FCTC/COP6(22) at its sixth session, the COP mandated the Bureau to make proposals on the process and methodology for the performance evaluation of the current Head of Secretariat and her successors. The COP was invited to consider the Bureau's draft decision contained in the Annex to document FCTC/COP/7/27.

155. After considering the matter in restricted session at its third meeting, Committee B approved the draft decision, which was transmitted to the COP for adoption, in the first report of Committee B (document FCTC/COP/7/B/R/1). At its fifth plenary meeting, on 12 November 2016, the COP adopted decision FCTC/COP7(15).

## **7.7 Review of accreditation of nongovernmental organizations with the status of observers to the Conference of the Parties**

*Document FCTC/COP/7/28*

156. By decision FCTC/COP5(22), the COP at its fifth session adopted a process described in document FCTC/COP/5/27 for future reviews of the accreditation of nongovernmental organizations (NGOs) with the status of observers, in accordance with Rule 31.3 of its RoP. At its sixth session, by decision FCTC/COP6(23), it agreed on a standard questionnaire to be used during the review.

157. Of the 20 accredited NGOs, 19 responded to the Convention Secretariat's request for reports. That information was reviewed by the Bureau of the COP, which formulated proposals for the consideration of the COP, as contained in document FCTC/COP/7/28, recommending the maintenance of observer status for 17 NGOs and the discontinuation of that status for three others.

158. Committee B approved the draft decision, which was transmitted to the COP for adoption, in the second report of Committee B (document FCTC/COP/7/B/R/2). At its fifth plenary meeting, on 12 November 2016, the COP adopted decision FCTC/COP7(16).

## **7.8 Review of accreditation of intergovernmental organizations with the status of observers to the Conference of the Parties**

*Document FCTC/COP/7/29*

159. The Bureau of the COP and the Convention Secretariat examined issues related to the accreditation of intergovernmental organizations (IGOs) with the status of observers, as explained in document FCTC/7/29, which highlighted potential links and conflicts of interest between some IGOs and the tobacco industry. Twenty-two IGOs were accredited as observers at previous sessions of the COP without an application process, while eight IGOs applied for accreditation. Given the absence of a formal procedure to review the accreditation of IGOs as observers, the COP was invited to adopt the draft decision contained in Annex 1 to that document and the questionnaire contained in Annex 2.

160. Parties agreed that the review process should be carried out on a one-off basis in the first instance. The wording of paragraph 1(a) of the draft decision should be amended accordingly, and a phrase added at the end of paragraph 1(b) whereby the COP would be invited to decide whether to repeat the survey in the future, and at which intervals to conduct it. Paragraph 2 would begin “invite any IGOs ...” and would end “... in accordance with their internal rules and established procedures”. Paragraph 3 should be deleted. The requirements that IGOs would have to meet should not be too stringent and should be reviewed in connection with the survey.

161. A representative of the World Customs Organization (WCO) delivered a brief statement reiterating its position as a partner organization and clarifying the specific nature of the role and responsibilities of customs bodies. The tobacco industry remained part of legitimate trade and could not therefore be excluded from customs procedures. Nonetheless, the highest decision-making bodies of the WCO had decided that the Organization should not accept funding from tobacco companies or engage in operations conducted by other international agencies that might be funded by tobacco companies.

162. Committee B approved the draft decision, which was transmitted to the COP for adoption, in the first report of Committee B (document FCTC/COP/7/B/R/1(Corr.1)). At its fifth plenary meeting, on 12 November 2016, the COP adopted decision FCTC/COP7(17).

## **7.9 Maximizing transparency of Parties’ delegations, intergovernmental organizations, nongovernmental organizations and civil society groups during sessions of the COP and meetings of its subsidiary bodies**

*Document FCTC/COP/7/30*

163. As mandated by the sixth session of the COP, the Bureau discussed, at its second and third meetings, measures to maximize transparency among delegations to the COP and other subsidiary bodies, and presented recommendations for consideration by the COP in document FCTC/COP/7/30. The COP was invited to note the report and give further guidance.

164. One Party presented a draft decision that was circulated on 11 November 2016 and then presented a revised version on the following day when the agenda item had been scheduled for discussion. After having invoked Rule 33 of the ROP of the COP requesting more time to consider an amended draft decision, Parties agreed to consider the first draft issued on 11 November 2016. Several Parties stated that

it was regrettable that a draft decision on such an important issue had been submitted at such a late stage in the proceedings of the COP, thus not allowing adequate time for consultations.

165. While efforts to improve the transparency of the COP were commendable, states had the sovereign right under international law to designate their representatives to international meetings. Several Parties were particularly concerned that a decision to grant the Secretariat, the Bureau or the COP the authority to prohibit delegates from attending meetings of the COP would therefore breach national sovereignty. There was no precedent from other international organizations for requiring States' delegations to submit declarations of interest, and restrictions on participation would be counter not only to the Charter of the United Nations, but also to the spirit of good faith in which states had become Parties to the Convention. The will of states to implement the Convention that they had ratified voluntarily should not be brought into question.

166. That having been said, and in accordance the Guidelines for Article 5.3, some representatives argued that there were irreconcilable differences between the interests of the tobacco industry and public health, and it was therefore crucial that representatives of the tobacco industry were prohibited from participating in WHO FCTC meetings. While indeed there might not be any precedent for declarations of interest as a criterion for the participation of national representatives in meetings, there were no precedents of other international meetings being routinely undermined by a particular industry. Some Parties therefore considered that vetting the credentials of delegates in advance of the COP did not violate Party sovereignty: Parties still had the right to designate their representatives and if they had nothing to hide, there should be no cause for concern. The Secretariat and the Bureau of the COP could reserve the right to ensure that no one attending meetings of the COP had affiliations with the tobacco industry. Four Party delegations (Brazil, Ecuador, Panama and Uruguay) submitted declarations of interest for attendance at COP7. Declarations of interest should not be restricted to Party delegations but should include the public and the media, Observers States that are not Party, observers from IGOs and from NGOs. They should be submitted in good time for the Secretariat to conduct due diligence. Any conflicts of interest should be identified and publicized, and thus exposed and subjected to social sanctions. Parties should be reminded of their obligations in their letters of invitation to the COP, and the declaration of interests should be contained in a separate, formal document.

167. Any changes to the procedure for submission of credentials should be duly incorporated into the RoP of the COP. One Party called for a press conference to be held at the end of the current COP.

168. A drafting group was formed to seek consensus on the matter. After extensive discussion, the Chairperson of the drafting group reported that no consensus had been found in any of the points in the decision.

169. At its fifth plenary meeting on 12 November 2016, the COP agreed to carry the item forward to the agenda of COP8 for further discussion.

170. Uruguay made a statement regretting the fact that no decision had been taken on such an important issue.

## **7.10 Possible amendments to the Rules of Procedure of the Conference of the Parties**

171. The COP at its sixth session had mandated the Bureau to review the RoP with a view to amendment and clarification. The COP was invited to consider adopting the amendments proposed by the Bureau, as contained in the Annex to document FCTC/COP/7/31.

172. When the document was considered in Committee B, one Party expressed reservations with regard to the proposed addition of a new Rule 24 (*quinquies*) concerning committees of the COP, arguing that it would be inadvisable to base rules of procedure on unsatisfactory practices and suggested that they not be modified until discussions took place on how to improve the functioning of the Committees. The current session of the COP had been marked by numerous instances of non-compliance with Rules 33 and 59 and the simultaneous establishment of a large number of drafting groups, with the resulting time constraints compromising efforts to reach consensus. The Senior Legal Adviser explained that the proposed new rule was based on those used for the World Health Assembly, which had also established two committees to assist it in its work, and that it reflected the established practice of the COP to work in two committees

173. On the understanding that the RoP could be amended by the COP at any time, Parties agreed to the addition of a new Rule 24 (*quinquies*), provided its subparagraph 7 was amended to read: “The procedure governing the conduct of business and voting by the committees shall conform, *mutatis mutandis*, to the rules relative to the conduct of business and voting in plenary meetings.” Parties also agreed to amendments to rules 1, 2.10, 4.5, 5, 21, 24.1, 60, 62, 63 and 64, with some revisions.

174. It was suggested that the Bureau should convene an intersessional meeting, possibly in Geneva, to discuss: (a) rationalizing the number of agenda items for sessions of the COP; (b) requiring all draft decisions to be circulated in all languages prior to a session; (c) limiting the number of drafting groups that might be established at any one time; and (d) clarifying the role of chairs of committees in assisting Parties in reaching consensus.

175. Committee B recommended that the COP should adopt the amendments to the RoP proposed by the Bureau, with the revisions as agreed.

176. The COP, at its fifth plenary meeting, on 12 November 2016, adopted decision FCTC/COP7(28).

## **7.11 Strengthening synergy between the Conference of the Parties and the World Health Assembly**

### *Document FCTC/COP/7/32*

177. Document FCTC/COP/7/32 gave an update on the inclusion of WHO FCTC implementation on the agenda of the World Health Assembly, explained the need to strengthen synergies between the COP and the World Health Assembly, and briefed the Parties about the World Health Assembly’s proposals on the exchange of reports. The COP was invited to note FCTC/COP/7/32 and to provide further guidance.

178. Broad support was expressed for measures to strengthen synergy between the COP and the World Health Assembly, which would afford an opportunity to promote high-level political discussion on tobacco control issues. FCTC implementation was key to meeting the targets of the NCD Global Monitoring Framework and the Sustainable Development Goals; support from WHO, particularly at regional level, was key in that regard. Two-way reporting between the COP and the World Health Assembly would increase the visibility of the Convention. There should be due respect given for the

mandates of both the COP and the World Health Assembly, especially the prerogative of the COP to make decisions regarding FCTC implementation.

179. Committee B approved the draft decision, which was transmitted to the COP for adoption, in the first report of Committee B (document FCTC/COP/7/B/R/1). At its fifth plenary meeting, on 12 November 2016, the COP adopted decision FCTC/COP7(18).

## **7.12 Relationship of the Convention Secretariat with other international entities: observer status**

### *Document FCTC/COP/7/33*

180. The Bureau of the COP had concluded that accreditation of the Convention Secretariat to international entities with overlapping areas of work may be a useful means of enhancing cooperation. The COP was invited to take note of document FCTC/COP/7/33, and consider the draft decision contained in Annex 2, which listed 12 international governmental organizations to which the Secretariat could apply, to be granted observer status to their governing bodies.

181. Parties expressed support for the proposal to apply for observer status to the governing bodies of the 12 organizations as an excellent way to promote cooperation and foster a multisectoral approach to tobacco control, provided there would be no financial implications for the Convention Secretariat. Organizations would likely grant observer status to the Convention Secretariat on a reciprocal basis. Due consideration must be given at all times to article 5.3 of the Convention, since some of the international organizations included in the list could have connections with the tobacco industry. One Party inquired as to whether WHO already had observer status to the governing bodies of the organizations concerned, and if so whether that could be leveraged instead. Parties agreed that the Convention Secretariat should be allowed to conclude the applications for observer status, as appropriate and with guidance from the Bureau, rather than simply initiating discussions and returning to the COP for further guidance, which could delay the process. The list should not be exhaustive, since the Secretariat might wish to apply to other organizations for observer status in future.

182. The Head of the Convention Secretariat clarified that the acquisition of observer status and attendance at meetings would not incur any expenses. While WHO was indeed already an observer to the governing bodies of those organizations, it had a very broad mandate and was not always in a position to highlight the issue of tobacco control. Convention Secretariat participation would afford an excellent opportunity to promote the tobacco control agenda and foster cooperation. The purpose of obtaining observer status would be to remain informed about their work and keep up to date with their activities.

183. Committee B approved the draft decision, which was transmitted to the COP for adoption, in the first report of Committee B (document FCTC/COP/7/B/R/1). At its fifth plenary meeting, on 12 November 2016, the COP adopted decision FCTC/COP7(19).

## **7.13 Hosting arrangements between the Convention Secretariat and WHO**

### *Document FCTC/COP/7/34*

184. The report in document FCTC/COP/7/34, prepared at the request of the Bureau of the COP, gave the background to the institutional setting of the Convention Secretariat within WHO headquarters and proposed key elements of a future hosting arrangement. The COP was invited to consider mandating the Bureau to oversee preparation of the draft hosting terms.

185. In response to questions raised by Parties, the Head of the Convention Secretariat clarified that the WHO FCTC had the status of a hosted entity within WHO, and as such the secretariats of the Convention and of WHO were inextricably linked. The WHO FCTC was unique in that it was a treaty organization and that the Head of the Convention Secretariat reported both to the WHO Director-General and to the COP. In accordance with the financial rules of WHO, a charge for programme support costs was levied at a rate of 13% on all funds received by the WHO FCTC, both in the form of VACs and extrabudgetary resources. That levy was used to pay for legal and administrative support in areas such as contract administration, accounting and financial services, human resources, and infrastructure (office premises, utilities, security, etc.).

186. Parties approved the key elements of a future hosting arrangement as set out in the document. They advocated a pragmatic approach, based on the terms for hosted partnerships, to ensure that the arrangement was of benefit to both the Convention Secretariat and WHO more broadly, maximizing the efficiency and effectiveness of efforts to support implementation of the Convention, including through improved technical as well as administrative collaboration. Hosting arrangements were an internal administrative matter not normally referred to organizations' governing bodies. In order to ensure transparency and accountability, Canada requested that the hosting terms with the WHO include a clause on financial management and accountability that established separate financial statements and audit reports are provided to the COP in accordance with WHO's Financial Regulations, Financial Rules and Practices.

187. Committee B recommended that the COP should mandate the Bureau to oversee and guide the preparation of the draft hosting terms between the Convention Secretariat and WHO, and to accompany the process to its conclusion.

188. Committee B approved the draft decision, which was transmitted to the COP for adoption, in the first report of Committee B (document FCTC/COP/7/B/R/1). At its fifth plenary meeting, on 12 November 2016, the COP adopted decision FCTC/COP7(20).

## **8. DATE AND PLACE OF THE EIGHTH REGULAR SESSION OF THE CONFERENCE OF THE PARTIES**

### *Document FCTC/COP/7/35*

189. The COP had before it a proposal (contained in document FCTC/COP/7/35) to hold its eighth session in the last quarter of 2018, at the seat of the Convention Secretariat in Geneva, in line with Rules 3 and 4 of its RoP.

190. At its fifth plenary meeting, on 12 November, the COP adopted decision FCTC/COP7(31), reflecting the above agreement.

## **9. ELECTION OF THE PRESIDENT AND VICE-PRESIDENTS OF THE CONFERENCE OF THE PARTIES**

*Document FCTC/COP/7/36*

191. The COP elected the following officers to constitute the Bureau of the Conference of the Parties for the period between the closure of seventh session and the closure of the eighth session:

President: Mr Chandra Kishore Mishra (India)

Vice-Presidents: Dr Reina Roa (Panama)

Mr Cedric Alependava (Solomon Islands)

Dr Vinyo Kodzo Kumako (Togo)

Dr Jawad Al-Lawati (Oman)

Mr Kari Paaso (Finland)

192. The COP also decided that, of the five Vice-Presidents, Dr Vinyo Kodzo Kumako should act as Rapporteur.

193. In accordance with Rule 24.2 of the RoP of the COP, lots were drawn to determine the order in which the Vice-Presidents would serve in the event that the President was unable to do so. A lot was also drawn to determine which Vice-President would act as Rapporteur. The order presented in the above list is the order in which the lots were drawn.

194. At its fifth plenary meeting, on 12 November, the COP adopted decision FCTC/COP7(30).

## **10. ADOPTION OF THE PROVISIONAL REPORT OF THE SEVENTH SESSION OF THE CONFERENCE OF THE PARTIES**

*Document FCTC/COP/7/37*

195. The provisional report before the Conference contained a summary of the proceedings and conclusions on each agenda item as of the afternoon of Thursday, 10 November 2016. A white paper containing an updated version of the summary of proceedings as of the afternoon of Friday, 11 November, was circulated in the Conference room. The remaining proceedings would be included in a revised final version of the provisional report and all decisions adopted by COP7 would be annexed. The complete provisional report would be made available to the Parties for any corrections, for a period of 15 days, after the COP, in accordance with Rule 62 of the RoP.

196. At its fifth plenary meeting, on 12 November 2016, the COP adopted the report, subject to its finalization by the Convention Secretariat, including the incorporation of any corrections received from the Parties in the 15-day period set aside for that purpose.

## **11. CLOSURE OF THE SESSION**

197. The delegation of India presented a draft Delhi Declaration, which drew particular attention to the need to prevent the interference of the tobacco industry in efforts to implement the WHO FCTC at all levels; this could be accomplished through legislative and regulatory measures to inform non-health government departments of their obligations under article 5.3 of the Convention. The Delhi Declaration also underscored the importance of promoting 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. Furthermore, the declaration calls on Parties to actively pursue the achievement of SDG Target 3.a and strengthen the implementation of the WHO FCTC and requests 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.

198. At its fifth plenary meeting, on 12 November 2016, the COP adopted the Delhi Declaration as decision FCTC/COP7(29).

199. One representative made a final declaration expressing his concerns for the decision of codifying in Article 24 quinquies of the RoP that have been shown to be deficient during this COP, mentioning for example the drafting groups. It would have been better to carry out a more exhaustive review of the RoP before adopting the amendment. However, in order to show a spirit of constructiveness, his country has accepted the amendment.

200. Following the customary exchange of courtesies, the President declared the seventh session of the Conference of the Parties closed.

## **ANNEX 1**

### **AGENDA**

#### **1. Opening of the session**

##### **1.1. Adoption of the agenda and organization of work**

*Documents FCTC/COP/7/1 Rev.1 and FCTC/COP/7/1 Rev.1(annotated)*

##### **1.2. Credentials of participants**

*Document FCTC/COP/7/2*

#### **2. Applications for the status of observer to the Conference of the Parties**

*Document FCTC/COP/7/3*

#### **3. Invited speakers**

#### **4. Global progress report in implementation of the WHO FCTC, followed by a general debate**

*Documents FCTC/COP/7/4 and FCTC/COP/7/DIV/3*

#### **5. Treaty instruments and technical matters**

##### **5.1. Status of the Protocol to Eliminate Illicit Trade in Tobacco Products**

*Document FCTC/COP/7/5*

##### **5.2. Impact assessment of the WHO FCTC: report by the expert group**

*Document FCTC/COP/7/6*

##### **5.3. Implementation of Article 5.3 of the WHO FCTC**

*Document FCTC/COP/7/7*

##### **5.4. Further development of the partial guidelines for implementation of Articles 9 and 10 of the WHO FCTC: “Regulation of the contents of tobacco products” and “Regulation of tobacco product disclosures”: report by the working group and report by WHO**

*Documents FCTC/COP/7/8; FCTC/COP/7/9; FCTC/COP/7/INF.DOC/1*

##### **5.5. Control and prevention of globally emerging products**

###### **5.5.1 Control and prevention of waterpipe tobacco products: report by WHO**

*Document FCTC/COP/7/10*

###### **5.5.2 Electronic nicotine delivery systems and electronic non-nicotine delivery systems: report by WHO**

*Document FCTC/COP/7/11*

##### **5.6. Economically sustainable alternatives to tobacco growing (in relation to Articles 17 and 18 of the WHO FCTC)**

*Document FCTC/COP/7/12*

##### **5.7. Implementation of Article 19 of the WHO FCTC: “Liability”: report by the expert group**

*Document FCTC/COP/7/13*

##### **5.8. Addressing gender-specific risks when developing tobacco control strategies (*item proposed by a Party*)**

*Document FCTC/COP/7/14*

- 5.9. Tobacco advertising, promotion and sponsorship: depiction of tobacco in entertainment media (*item proposed by a Party*)  
*Document FCTC/COP/7/38*

**6. Reporting, implementation assistance and international cooperation**

- 6.1. Reporting arrangements under the WHO FCTC: report by the expert group  
*Document FCTC/COP/7/15*
- 6.2. International cooperation for implementation of the WHO FCTC, including the implementation of the 2030 Agenda for Sustainable Development, the global NCD targets and human rights  
*Document FCTC/COP/7/16*
- 6.3. South–South and Triangular cooperation  
*Document FCTC/COP/7/17*
- 6.4. Sustainable measures to strengthen implementation of the WHO FCTC: report by the working group  
*Document FCTC/COP/7/18*
- 6.5. Financial resources and mechanisms of assistance  
*Document FCTC/COP/7/19*
- 6.6. Issues related to implementation of the WHO FCTC and settlement of disputes concerning the implementation or application of the Convention  
*Document FCTC/COP/7/20*
- 6.7. Trade and investment issues, including agreements, and legal challenges in relation to the implementation of the WHO FCTC  
*Document FCTC/COP/7/21*

**7. Budgetary and institutional matters**

- 7.1. Performance report for the 2014–2015 workplan and budget  
*Document FCTC/COP/7/22*
- 7.2. Interim performance report for the 2016–2017 workplan and budget  
*Document FCTC/COP/7/23*
- 7.3. Payment of the voluntary assessed contributions and measures to reduce Parties in arrears  
*Document FCTC/COP/7/24*
- 7.4. Proposed workplan and budget for the financial period 2018–2019  
*Documents FCTC/COP/7/25; FCTC/COP/7/INF.DOC./2*
- 7.5. Convention Secretariat's fundraising efforts and collaborative work  
*Documents FCTC/COP/7/26*
- 7.6. Process and methodology to conduct the performance evaluation for the current and subsequent Head of the Convention Secretariat: report by the Bureau of the Conference of the Parties  
*Document FCTC/COP/7/27*
- 7.7. Review of accreditation of nongovernmental organizations with the status of observers to the Conference of the Parties  
*Document FCTC/COP/7/28*
- 7.8. Review of accreditation of intergovernmental organizations with the status of observers to the Conference of the Parties  
*Document FCTC/COP/7/29*

- 7.9. Maximizing transparency of Parties' delegations, intergovernmental organizations, nongovernmental organizations and civil society groups during sessions of the COP and meetings of its subsidiary bodies

*Document FCTC/COP/7/30*

- 7.10. Possible amendments to the Rules of Procedure of the Conference of the Parties

*Document FCTC/COP/7/31*

- 7.11. Strengthening synergy between the Conference of the Parties and the World Health Assembly

*Document FCTC/COP/7/32*

- 7.12. Relationship of the Convention Secretariat with other international entities: observer status

*Document FCTC/COP/7/33*

- 7.13. Hosting arrangements between the Convention Secretariat and WHO

*Document FCTC/COP/7/34*

**8. Date and place of the eighth regular session of the Conference of the Parties**

*Document FCTC/COP/7/35*

**9. Election of the President and Vice-Presidents of the Conference of the Parties**

*Document FCTC/COP/7/36*

**10. Adoption of the provisional report of the seventh session of the Conference of the Parties**

*Document FCTC/COP/7/37*

**11. Closure of the session**

**ANNEX 2**  
**LIST OF DOCUMENTS**

FCTC/COP/7/1 Rev.1	Provisional agenda
FCTC/COP/7/1 Rev1 (annotated)	Provisional agenda (annotated)
FCTC/COP/7/2	Report on credentials
FCTC/COP/7/3	Applications for the status of observer to the Conference of the Parties
FCTC/COP/7/4	Global progress in implementation of the WHO FCTC
FCTC/COP/7/5	Status of the Protocol to Eliminate Illicit Trade in Tobacco Products
FCTC/COP/7/6	Impact assessment of the WHO FCTC
FCTC/COP/7/7	Implementation of Article 5.3 of the WHO FCTC
FCTC/COP/7/8	Further development of the partial guidelines for implementation of Articles 9 and 10 of the WHO Framework Convention on Tobacco Control
FCTC/COP/7/9	Further development of the partial guidelines for implementation of Articles 9 and 10 of the WHO FCTC
FCTC/COP/7/10	Control and prevention of waterpipe tobacco products
FCTC/COP/7/11	Electronic Nicotine Delivery Systems and Electronic Non-Nicotine Delivery Systems (ENDS/ENNDS)
FCTC/COP/7/12	Economically sustainable alternatives to tobacco growing (in relation to Articles 17 and 18 of the WHO FCTC)
FCTC/COP/7/13	Implementation of Article 19 of the WHO FCTC: “Liability”
FCTC/COP/7/14	Addressing gender-specific risks when developing tobacco control strategies
FCTC/COP/7/15	Reporting arrangements under the WHO FCTC
FCTC/COP/7/16	International cooperation for implementation of the WHO FCTC, including implementation of the 2030 Agenda for Sustainable Development, the global NCD targets and human rights
FCTC/COP/7/17	South–South and Triangular cooperation
FCTC/COP/7/18	Sustainable measures to strengthen the implementation of the WHO FCTC

FCTC/COP/7/19	Financial resources and mechanisms of assistance
FCTC/COP/7/20	Issues related to implementation of the WHO FCTC and settlement of disputes concerning the implementation or application of the Convention
FCTC/COP/7/21	Trade and investment issues, including agreements, and legal challenges in relation to the implementation of WHO FCTC
FCTC/COP/7/22	Performance report for the 2014–2015 workplan and budget
FCTC/COP/7/23	Interim performance report for the 2016–2017 workplan and budget
FCTC/COP/7/24	Payment of the voluntary assessed contributions and measures to reduce Parties in arrears
FCTC/COP/7/25	Proposed workplan and budget for the financial period 2018–2019
FCTC/COP/7/26	Convention Secretariat's fundraising efforts and collaborative work
FCTC/COP/7/27	Process and methodology to conduct the performance evaluation for the current and subsequent Head of the Convention Secretariat
FCTC/COP/7/28	Review of accreditations of nongovernmental organizations with the status of observer to the Conference of the Parties
FCTC/COP/7/29	Review of accreditation of intergovernmental organizations with the status of observer to the Conference of the Parties
FCTC/COP/7/30	Maximizing transparency of Parties' delegations, intergovernmental organizations, nongovernmental organizations and civil society groups during sessions of the COP and meetings of its subsidiary bodies
FCTC/COP/7/31	Possible amendments to the Rules of Procedure of the Conference of the Parties
FCTC/COP/7/32	Strengthening synergy between the Conference of the Parties and the World Health Assembly
FCTC/COP/7/33	Relationship of the Convention Secretariat with other international entities: observer status
FCTC/COP/7/34	Hosting arrangements between the Convention Secretariat and WHO

FCTC/COP/7/35	Date and place of the eighth regular session of the Conference of the Parties
FCTC/COP/7/36	Election of the President and Vice-Presidents of the Conference of the Parties
FCTC/COP/7/37	Draft report of the seventh session of the Conference of the Parties to the WHO Framework Convention on Tobacco Control
FCTC/COP/7/38	Tobacco advertising, promotion and sponsorship: depiction of tobacco in entertainment media

#### **INFORMATION DOCUMENTS**

FCTC/COP/7/INF.DOC./1	Progress of the validation of analytical chemical methods for testing and measuring cigarette contents and emissions
FCTC/COP/7/INF.DOC./2	Proposed workplan and budget for the financial period 2018–2019
FCTC/COP/7/INF.DOC./3	Status of the Protocol to Eliminate Illicit Trade in Tobacco Products. Possible intergovernmental mechanism to prepare for the first Meeting of Parties

#### **DIVERSE DOCUMENTS**

FCTC/COP/7/DIV/1_Rev.1	List of Participants
FCTC/COP/7/DIV/2_Rev.1	Guide for Participants in the Conference of the Parties
FCTC/COP/7/DIV/3	Address by Dr Vera da Costa e Silva, Head of the Convention Secretariat
FCTC/COP/7/DIV/4	Address by Shri J. P. Nadda, Minister of Health and Family Welfare, Government of India
FCTC/COP/7/DIV/5	Address by President of the Conference of the Parties to the WHO Framework Convention on Tobacco Control, Dr Oleg Salagay
FCTC/COP/7/DIV/6	Address by H.E. Mr Maithripala Sirisena, President of the Democratic Socialist Republic of Sri Lanka
FCTC/COP/7/DIV/7	Statement delivered on behalf of Dr Margaret Chan, Director-General of the World Health Organization by Mr Derek Walton, Legal Counsel

### **ANNEX 3**

#### **ADDRESS BY SHRI J. P. NADDA, MINISTER OF HEALTH AND FAMILY WELFARE, GOVERNMENT OF INDIA**

Dr Oleg Salagay, President of the COP, Dr Vera Luiza da Costa e Silva, Head of the Convention Secretariat, Honourable Ministers, Distinguished Delegates & Participants, Members of the COP Secretariat, officers of WHO, Observers to COP, civil society representatives, ladies and gentlemen.

It gives me immense pleasure to welcome all participants from across the world on behalf of the Government of India to the Seventh Session of the Conference of the Parties of the WHO Framework Convention on Tobacco Control. I am pleased to inform that Hon'ble President of Sri Lanka H.E. Maithripala Sirisena has given his consent to grace this occasion. I believe his participation would certainly enrich the ongoing conference.

It is indeed a historic occasion for India to host this Conference. I am proud to state that India was one of the first countries to ratify the Convention in February 2004. In 2016, we have been bestowed the honour of hosting the seventh session of the Conference of Parties. We thank all of you for giving us this opportunity.

Excellencies, Ladies & Gentlemen.

The challenges faced by India in the realm of tobacco control are formidable, both in their number and in their complexity. However, despite our vast complexity, substantial investments for implementation of WHO FCTC are slowly improving the situation.

This is a landmark year for tobacco control activities in India. We have successfully implemented, from April 2016, the large pictorial health warnings occupying 85% of the principal display area of tobacco packs and on all forms of tobacco.

We continue to take strong steps for regulation of the Smokeless tobacco products and have prohibited the production, sale, transportation and storage of certain forms of smokeless tobacco products under our food safety regulations. There is now a complete ban on the manufacture and sale of Gutkha and Pan Masala containing tobacco or nicotine, a form of chewing tobacco. Recently the Hon'ble Supreme Court of India, has directed all the States and Union Territories in India to file affidavits on compliance of the ban imposed on manufacturing and sale of Gutkha and Pan Masala with tobacco or nicotine. We have, in coordination with the Convention Secretariat, set up the 'Global Knowledge Hub for Smokeless Tobacco' which will act as a global repository of knowledge related to smokeless tobacco. India has successfully launched a toll-free Tobacco Cessation Quitline as well as m-Cessation services under the Be Healthy Be Mobile Initiative.

In a recent landmark development, the Juvenile Justice (Care and Protection of Children) Act, 2015, has imposed a penalty of 7 years' rigorous imprisonment and a fine of one hundred thousand rupees, for selling tobacco products to minors.

The Indian Government has also done pioneering work in regulating promotion of tobacco use through films and TV programmes. Our regulations require display of anti-tobacco health spots, disclaimer and messages, in films depicting tobacco use. We are one of the global leaders in this area, and since Indian films are watched across the globe, this messaging has great significance.

However, we still have a long way to go in India and in many other countries to prevent millions of avoidable deaths resulting from the deadly habit of tobacco use. There are many challenges. New products are emerging. The existing products are proliferating locally and internationally, to newer areas. In this

age, the world is becoming smaller and more integrated due to the advances in technology and transport. Tobacco products, their use and human behaviour are transcending physical boundaries of countries and Parties.

The prevalence of tobacco use, in one form or the other, is still unacceptably high. Morbidity and mortality due to tobacco use is also very high. There is a huge economic burden on people and Governments due to adverse health consequences of tobacco use. Certain parts of the World, including India, have a myriad of tobacco products. In many parts of the world, including in India, tobacco use is part of socio-cultural fabric, and use of certain forms is considered 'normal' in the society. Their control and regulation presents a big challenge.

We cannot do this alone. Along with national will and resources, we also need the strength of international collaboration to mitigate the rising burden of health, social and economic costs of tobacco.

Today, India and other developing countries in the South-East Asian, African and Latin American regions face the dual burden of infectious diseases like malaria and TB, and emergent conditions like Zika and Dengue, along with non-communicable diseases like cancers, cardiovascular diseases, diabetes etc. All countries are gearing up and making efforts to strengthen their health systems to tackle these challenges. For this to happen, we need multi-sectoral action along with integrated approaches to health programmes and health goals.

The WHO Framework Convention on Tobacco Control (FCTC) is our strongest tool to curb the emerging non-communicable diseases. We cannot tackle non-communicable diseases only by making more hospitals, more cancer institutes and producing more doctors and allied health professionals. We need to prevent the risk factors, tobacco being the biggest of them, since today's risk factors are tomorrow's diseases.

The Government of India realizes this more than ever. We are committed to strengthening non-communicable disease programmes and interventions and implementation of the WHO Framework Convention for Tobacco Control (FCTC) as an integral part of the post 2015 sustainable development goals.

In 2013, India became the first country to adopt national voluntary targets for the prevention and control of Non-communicable diseases. Earlier this year, we released a Multi-sectoral Action Plan to attain these targets by 2025. We have also initiated the second round of the Global Adult Tobacco Survey, whose results are expected later this year or early next year.

In India, there are nearly 275 million current users. Close to one million lives are lost every year due to tobacco use, either directly or indirectly. The economic cost to India, i.e. the healthcare costs to treat tobacco related diseases, is a whopping 22 billion US Dollars. As such, the target of achieving relative reduction of tobacco use prevalence by 30% is no longer a choice, it is necessary.

Tobacco use is detrimental to all aspects of life, and grips users in the most productive years. We must reverse this tide. We must, for this purpose, target our young children, catch them young, and sensitize them against the harms of tobacco use.

The Conference of the Parties is a unique platform where countries can demonstrate their collective commitment to reduce the global burden of tobacco use. The Governments, the WHO FCTC, WHO and other UN agencies, the Civil Society as well as the tobacco growers and workers are our partners and stakeholders in framing and implementing effective tobacco control policies at the national and international levels. We can together review implementation of WHO FCTC, to identify and applaud best practices across countries and to chart the way forward. While doing so, we must be guided by the solemn thought of the destitute, the vulnerable and the poor on the streets, in the fields, our children, whose

destiny and future is at stake. We must always keep in mind their interests, above all, while formulating our policies and taking our decisions at the COP platform. Let us take solemn guidance from Helen Keller who said, "It is better to light a candle than to curse the darkness."

I thank the WHO FCTC and the World Health Organization for their commitment to tobacco control and for their valuable technical assistance to member states. I congratulate the Parties to the convention as well as civil society alliances for the steely resolve with which they are advancing the agenda of tobacco control, despite challenges. I would also like to commend the officers of the Government of India for their dedicated efforts to organize this event with meticulous attention to detail.

I wish you the best of success in the deliberations of COP 7. I am confident that we will work together to provide a unified and effective response to the global tobacco epidemic.

I wish you a memorable stay in India and invite you to experience the rich culture, heritage and incredible natural beauty of India. India has something for everyone: golden deserts, serene backwaters, beautiful hill stations, captivating beaches, historical monuments, rich wildlife, and colourful fairs that will capture your heart. I do not know whether you will find time for all of this in this visit. But I invite you to come to India in future as well, as a tourist, to explore the incredible India. I can assure you that the Indian hospitality, with its diverse cuisine and warmth of people will make your experience truly unforgettable.

Thank you for your attention.

#### **ANNEX 4**

### **STATEMENT DELIVERED ON BEHALF OF DR MARGARET CHAN, DIRECTOR-GENERAL OF THE WORLD HEALTH ORGANIZATION BY MR DEREK WALTON, LEGAL COUNSEL**

Excellencies, honourable ministers, distinguished delegates, members of civil society, ladies and gentlemen,

This is the world's most important global anti-tobacco conference. The government of India is to be commended for hosting the event. Doing so sends a strong signal about the life-saving power of tobacco control measures in a large and populous country, as well as worldwide.

The WHO Framework Convention on Tobacco Control was adopted in 2003 and rapidly became one of the most widely embraced treaties in the history of the United Nations.

With its 180 parties committed to implementing the treaty's articles and obligations, we have a united legal way to fight against what is not a matter of personal choice, but a powerful and deadly addiction.

In a world full of so many new and old threats, we turn to tobacco control as unquestionably our biggest, surest, and best opportunity to save many millions of lives.

This is a critical moment in our work.

The tide of tobacco use is beginning to turn. After decades of Big Tobacco targeting low- and middle-income countries and years of steadily increasing profits, tobacco sales are beginning to decline.

Guided by the Framework Convention, countries are passing stronger laws to reduce demand for tobacco products not envisioned even a few years ago.

Countries large and small have stood up to the tobacco industry by implementing plain packaging and large pictorial health warning labels. And tobacco companies are losing the legal challenges they mount against these measures.

This has been a good year for winning in the courts.

The European Court of Justice upheld the 2014 European Union Tobacco Products Directive, which is based on the Framework Convention.

After six years of harassment by the tobacco industry and its army of lawyers, Uruguay, with its population of only 3.5 million people, defeated the world's largest tobacco company.

In July, an arbitration court run by the World Bank ruled that Uruguay had the right to continue its strong anti-tobacco policies, and ordered Philip Morris to reimburse the country for some US\$ 7 million in legal costs.

This is a landmark victory, as it upholds the right of a sovereign government to protect its citizens from a deadly and addictive product. It gives precedence to that right over obligations set out in trade agreements or infringements of intellectual property rights.

So ends a cynical attempt by a rich multinational Goliath to batter a small country with limited resources as a cautionary tale for the rest of the world. This time, the good guys won.

The good guys also won in Australia. A court there dismissed a claim against plain packaging, and found that Philip Morris had engaged in an abuse of process in bringing the claim.

Similarly, the United Kingdom also won the first round of a major fight over its plain “standardized” packaging law, with the High Court of England and Wales dismissing all 17 of the tobacco company’s legal challenges.

WHO stood shoulder-to-shoulder with these countries. In the Uruguay and UK cases, WHO, in partnership with the Convention Secretariat, made submissions that were taken into account by the courts.

However, amid these clear signs of progress, the tobacco industry has made it clear that it has no intention of abandoning a business model that depends on enticing millions of new users, especially women and youth, to become addicted to its lethal products.

WHO works to build the capacity of countries to resist industry’s efforts to interfere with tobacco control and weaken implementation of the Framework Convention.

We help countries collect data on tobacco use and measure the consequences for health. We offer advice on legal issues, including international trade and investment law. We have helped more than 40 countries draft effective tobacco tax policies.

WHO devoted this year’s World No Tobacco Day to plain packaging, a Framework Convention measure pioneered in Australia. France and the United Kingdom have begun implementing plain packaging laws, and New Zealand and Hungary have recently passed laws. Many other countries are close behind.

Following implementation of Australia’s plain packaging law, smoking rates fell to historical lows. The early evidence from Australia shows that plain packaging, as part of a comprehensive approach to tobacco control, is reducing the appeal of tobacco products, increasing the effectiveness of health warnings, and diminishing the ability of the pack to mislead.

This is what the compelling evidence says to ministries of health. But the tobacco industry tells ministers of finance, trade, and foreign affairs a very different story. As industry argues, plain packaging does not work. It contributes to smuggling, fuels the black market, funds organized crime, and supports international terrorism.

This conference has already received a great deal of publicity, using these and many other arguments not supported by a shred of evidence.

For the past six weeks, nearly every day has seen news stories planted by front groups and lobbyists paid for by the tobacco industry, often directly attacking WHO as irrelevant or the Framework Convention as ineffective.

In reality, illicit trade in tobacco undermines government progress in tobacco control by making cheap and unregulated products readily available. It is encouraging to see more and more governments becoming parties to the new protocol to eliminate illicit trade in tobacco products.

Earlier this month, governments were called upon to exclude representatives of the tobacco industry from their delegations to this conference. This is a wise precaution, and not a failure of transparency on the part of WHO.

The battle lines are drawn. Let us use the world's most important global anti-tobacco conference to bend the course of public health history, to return home with a renewed determination to fully implement the WHO Framework Convention.

To our allies in civil society we say this: out-shout the tobacco industry in getting the real facts and evidence to parliamentarians and the public.

Tobacco use kills six million people a year. Every one of these deaths is an entirely avoidable tragedy.

## **ANNEX 5**

### **ADDRESS BY H.E. MR MAITHRIPALA SIRISENA, PRESIDENT OF THE DEMOCRATIC SOCIALIST REPUBLIC OF SRI LANKA**

Good Morning to all you! Ayubowan!!

Dr Salagay, President of the Conference of Parties, Honourable Minister of Health, Shri Jagat Prakash Nadda, Dr Vera da Silva, Head of the FCTC Secretariat.

Excellencies, Distinguished delegates, Officials from the FCTC and other Organizations, Ladies and Gentlemen.

First of all let me thank you, Dr Salagay, and Dr Vera da Costa Silva for the very kind invitation to be the Guest Speaker at this important Conference. I consider it as a great honour and privilege extended to me and to my country. Dr Vera, we deeply appreciate the enormous work that you and your officials have undertaken during the past few months to ensure the success of this meeting. Let me also warmly congratulate you on the FCTC completing ten very productive years and wish your outstanding work all success in the future.

It is with much appreciation that I recognize the kind hospitality of the government of India and the deep interest of Prime Minister Narendra Modi personally. This clearly indicates the deep commitment to the subject of this Conference. We must also appreciate the generosity of the Government of India to host this session of the COP.

I am also happy to see the Deputy Director-General of the WHO, Dr Asamoah Baa and our dear friend, Dr Poonam Singh, the Regional Director of the WHO.

As we open this 7th Session today the Parties of the Convention have grown to over 180 during the past 10 years, representing over 90% of the population of the world. This shows the power and influence of the FCTC and the level of impact you can have on the health of the world. Sri Lanka has benefited immensely by the information and evidence that you have generated over these years in order to frame our own policies and regulations.

I observed that the last Sessions in Moscow were extremely important and helpful. The decisions made helped us to advance the international policies to prevent tobacco harm in very important ways. The agenda for your discussions at this COP is also extremely relevant and important to all of us. Of special interest are subjects like control of new products such as E-cigarettes and waterpipes, economically viable alternatives to tobacco growing, and gender-related risks in tobacco control.

We in Sri Lanka have accepted many of the recommendations of the FCTC from the time we ratified it in 2005. Sri Lanka was one of the first countries in the South East Asia region to sign the FCTC and to later ratify it. Then in line with the FCTC we passed our own Tobacco and Alcohol Act in 2006 and set up the Tobacco and Alcohol Authority, popularly known as the NATA. I believe our NATA is rather unique in the Region and elsewhere because it is perhaps the only such organization that covers both tobacco and alcohol. There are some historical and technical reasons for this.

Since I assumed the Office of President in early 2015, tobacco and alcohol have been on the top of my national agenda. I have set up a Presidential Task Force to monitor the situation with regard to drugs and narcotics. In fact I hold a monthly review meeting to assess the progress of the work in this field where all sectors are represented and we are able to make multisectoral policies and plans.

In line with the recommendations of the FCTC, we have also reviewed the tobacco taxation policies and just a month ago we have been able to increase tobacco taxes by nearly 10%.

My Minister of Health is proposing to introduce Plain Packaging as another important measure in the near future and here we thank the FCTC for the excellent technical support. We are drawing freely from the lessons and experiences of some of the countries that have already introduced plain packaging.

We are also addressing the tobacco issue in numerous other ways, by having adopted very strict air pollution laws, banning smoking in public and closed spaces. Advertising of tobacco is totally prohibited although like in most countries the tobacco industry adopts very shrewd tactics to promote tobacco to vulnerable groups, especially to the school children. In all our work we have found the informed and willing guidance from the FCTC and the WHO extremely helpful.

With support from the WHO and the FCTC we regularly monitor the trends in the prevalence of tobacco among the population. Sri Lanka completed the Global Youth Tobacco Survey earlier this year and we were pleased to learn that the prevalence of tobacco use and smoking among the youth has shown a significant downward trend since the last survey. The WHO STEPS survey that was just concluded showed us that the prevalence of smoking among the adults also has slowed down. Encouraging as these results are, we are not fully satisfied because we believe that far too many people in Sri Lanka still do smoke. We are hoping that together with you Sri Lanka will be able to emerge as one of the developing countries that successfully eliminates tobacco as a public health problem.

I recall Dr Margaret Chan addressing the COP 6, and emphasizing the need to resist the attempts of the tobacco industry to undermine tobacco control through litigation and interference in government policy-making. When I was the Minister of Health until the beginning of 2015 I tried to bring in a number of measures in line with the FCTC guidelines to control the harm from tobacco, particularly among children. I experienced this first-hand when I was the Minister of Health when we tried to bring legislation to include pictorial health warnings covering 75% on cigarette packets. I spent many days and hours in courthouses as the tobacco industry filed a series of cases challenging this move. The Court finally reduced the percentage cover down to a maximum of 60%. The delay was also enormous and ultimately my Minister of Health had to bring in a new Act of Parliament to increase the pictorial warnings to cover 80% of the surface.

As we know from long experience, the tobacco industry often distorts and challenges the best scientific knowledge, promotes dishonest arguments that have nothing to do with truth. We know that the industry will try to influence policymakers in many ways, often support petitioners to challenge government legislation and persuade the mass media. This to me is a direct interference in the internal policy matters of any country. We need not have any compromise of any kind with the tobacco industry.

Another issue that we have to guard against is the illicit trade of tobacco products. This is doubly so when we strengthen or tobacco control legislation and policies, especially our taxation policies. It can pose a serious threat to public health and also seriously upset our national tobacco control policies. It helps to avoid measures, like increases in taxes which we know will reduce demand. All these mean that we will not be able to effectively implement and take full advantage of the provisions in the treaty. Therefore it is very essential that more of the Parties do ratify this protocol quickly so that it can become law.

I need to bring to your attention the growing serious problem of smokeless tobacco in Sri Lanka and in the Region. While a form of betel chewing is a deep - seated lifestyle, commercial preparations are also becoming popular mostly among the younger generation in Sri Lanka and in urban and Semi-urban communities. A large body of scientific evidence shows the strong link between smokeless tobacco use and several serious health outcomes, particularly mouth cancer. I would urge the FCTC to also address the issue of smokeless tobacco very seriously in the years to come. Cost of neglect can be very high.

Finally I wish to place the tobacco menace in the larger perspective. Sri Lankan population is already at an advanced stage of ageing and disease transition. NCDs are now the largest contributor to disease burden in Sri Lanka, accounting for most of ill health, disability, and early death. This makes risk factors such as obesity, smoking, alcoholism and high sugar and salt diets the major health issues to be addressed in Sri Lanka. My Government is leading the nationwide efforts to address the problem of Non Communicable Diseases. The central theme of our NCD programme is health promotion and prevention.

Sri Lanka is also very concerned with the wider issues related to health and we take the SDG agenda very seriously. In addition to health related policies, regulatory frameworks in other domains such as education, trade, food, agriculture and environment also have a major bearing on NCD risk factors. Therefore we have to put in place suitable integrated policy and regulatory measures to reduce the level of exposure to the common modifiable risk factors for NCDs.

While looking at improving the health and wellbeing of our people we are also keeping in mind our wider obligations in the SDG agenda. In this regard two weeks ago we organized an international round table on the role of Sustainable Consumption and Production in climate change mitigation. This is a part of the “Sri Lanka Next – Blue Green Era” to advance progress on SDG 12 in Asia. Sri Lankan Renewable Energy project has contributed to reduction of almost 3,000 tonnes of greenhouse gas emissions annually since 2014, through the dissemination of biogas systems. My government has a target to increase renewable energy up to 20% of the demand by 2020. We will continue to play our role on the global stage and meet our global obligations without any reservations.

Finally, Mr. President, distinguished delegates, I believe that our shared ambition should be to ensure the full implementation of the FCTC, to see its powers tapped fully to eliminate the harm from tobacco, and passive exposure to tobacco smoke, everywhere in the world.

In all of this work the world looks forward to the leadership and guidance of the FCTC, the WHO and the related global institutions.

I thank you very much and wish the Sessions all success.

## **ANNEX 6**

### **ADDRESS BY DR VERA LUIZA DA COSTA E SILVA, HEAD OF THE SECRETARIAT OF THE WHO FRAMEWORK CONVENTION ON TOBACCO CONTROL**

Good morning and may I welcome you all – His Excellency the President of the Democratic Socialist Republic of Sri Lanka, the President of the Conference, Ministers, WHO, delegates, colleagues and friends -- to the seventh session of the Conference of the Parties to the WHO Framework Convention on Tobacco Control. It's a great pleasure to see so many distinguished representatives and experts from our 180 Parties here, courtesy of the generosity and hospitality of the Government of India.

We meet at the end of an extraordinary period since our last gathering in Moscow. The pace of progress at an international level has been breath-taking and we should heartily applaud the world's determination to make sustainable development an ever more important aim.

A successful campaign by Parties, NGOs, IGOs and the Convention Secretariat last year led to the inclusion of Target 3.a within the Sustainable Development Goals, requiring the strengthening of WHO FCTC implementation. And similar advocacy in partnership with WHO at last year's Addis Ababa Financing for Development meeting secured the agreement that tobacco taxation should be a key source of funds for SDG implementation.

These advances place the WHO FCTC and the work of this COP at the heart of the global health and development agenda for the coming decade. It gives us a tremendous opportunity to agree on unified action against the tobacco corporations whose thirst for profit is slaked only by a flood of human illness and misery.

I am delighted to look up and see the representatives of the Parties, the Non-Parties, and those intergovernmental and nongovernmental organizations who are here as observers and who play such an important role implementing the Treaty.

There is another observer here too, although its representatives may not always wear badges. The tobacco industry takes a very keen interest in COP meetings and makes every effort to insinuate itself into delegations and proceedings. If anyone doubts the importance of what we do here, always remember the industry's malevolent presence and the strong need for transparency.

We are also watched by sugar and alcohol products manufacturers, who see the tobacco control movement as a precursor to threats they now face from public health campaigns. These industries fear a united international community acting on behalf of consumers. In the coming days, I hope their fears will be fully justified as we take further steps to end the tobacco epidemic.

This meeting is the culmination of an enormous effort. COP7 will consider the greatest-ever number of documents in our almost 12-year history, the product of subsidiary bodies established under its authority. The lead-up to COP7 has seen preparatory regional meetings organized in close collaboration with WHO. Let me thank the WHO technical team, especially from WHO regional and country offices, for their commendable support. And of course, the intersessional period has also been filled with work by the Bureau to the COP, so I must note the considerable support offered by the Bureau presidency of Dr Oleg Salagay and his excellent vice-presidents and regional co-ordinators.

We must applaud the bold action taken by many Parties during the last two years and it's reassuring that the treaty and the standards adopted by COP have helped you protect your decisions against legal challenges. To name a few examples, Australia, Kenya, Thailand, India, Uruguay, the United Kingdom and France have shown a steady approach to tobacco industry-initiated court cases, showing that

international trade cannot expand at the expense of health and human rights. The European Union has implemented a strong tobacco control directive and sent a message to the world by terminating its agreement with a tobacco company. It is also very pleasing that Ukraine, a Party to the treaty, has ended its plain pack challenge against Australia at WTO, leaving us with almost no WHO FCTC Party opposing legitimate public health measures. It is also pleasing to see Vietnam, Montenegro, Uganda and many others rejecting tobacco industry members in delegations attending COP7. In addition, many of you, starting with Panama, are asking your delegates to sign voluntary disclosure of interest declarations. Congratulations for voluntarily promoting the spirit of your treaty, the treaty you negotiated, the treaty you are implementing, the treaty you protect against all odds.

The past two years have been extraordinarily busy. The Secretariat has worked with numerous others to press forward with the Illicit Trade Protocol. At COP 6, there were four Parties to the Protocol, a number that has now risen to 24. Given this acceleration in adherence, it seems likely that the Protocol will enter into force before we meet again at COP8 in 2018.

The Secretariat has supported a wide range of work, including individually tailored assistance to Parties with more than 40 needs assessment and post-needs assessment missions in the last years, 11 since the last COP.

We have helped, for example, on Article 5.3 dealing with tobacco industry interference. And for the first time, we have issued, under the guidance of the Bureau, notes verbales requesting that Parties exclude representatives of partially or wholly state-owned tobacco companies from their delegations. By doing this, the Secretariat is adhering to the mandate you have given to us to implement article 5.3 and its Guidelines. We do not question the right of sovereign states to choose national representatives but we must be reminded that there is a fundamental and irreconcilable conflict of interests between the tobacco industry and public health policy.

The Convention Secretariat has also made efforts to increase the transparency of COP, by fostering new forms of engagement, providing a Jumbo Twitter wall. Throughout this week we will have regular press releases and media briefings.

We have worked on new ventures, as per your decisions, like the establishment of Knowledge Hubs to provide global expertise. We have also helped establish Observatories to act as global sentinels on tobacco industry behaviour.

We should also acknowledge the digital revolution, which has provided new avenues for tobacco industry advertising and influence across national borders. The industry can't be allowed to get ahead of us and I would ask you to carefully consider proposals to monitor and confront this threat.

The COP will also, I'm sure, applaud the growing area of south-south and triangular cooperation, where Parties are encouraged to pair up and offer support, advice and resources to one another.

The global progress report shows that Parties have improved their treaty compliance in important areas. Implementation rates have increased significantly on matters like price and tax, and liability.

There is much to be proud of. However, there remains so much more to do. Let me touch on some of the issues we will consider at this COP.

We receive implementation reports from around three-quarters of our Parties. However, one quarter of reporting Parties have not yet confirmed implementation of time-bound measures under Article 8, and, 40% of reporting Parties lack a comprehensive advertising ban. We will actively seek to strengthen these Parties' engagement, and are hopeful that the COP will endorse the expert group's recommendation for establishing practical means of reporting review and support mechanisms.

As the tobacco epidemic evolves, males and females are differently targeted and affected by tobacco use. Many Parties have rightly asked that the COP strengthen the response to gender-specific risks in their tobacco control policy.

The tobacco industry has shifted much of its production to the southern hemisphere in recent decades, where it exploits farmers. Please take the opportunity to view the photographic exhibition in this building which shows the harsh reality of their lives. Articles 17 and 18 are among the most poorly implemented of the Convention and require greater efforts from us.

The Convention is maturing, and we have to adjust accordingly. That means renewing old ties and establishing relationships beyond the health sector. Gaining observer status, for example with human rights IGOs, offer an opportunity to extend the tobacco control agenda.

The Convention Secretariat has also extended ties to key partners, including COP observers. We have been an active member to the UN Interagency Task Force on Noncommunicable Diseases and became a participant of the WHO Global Coordination Mechanism on prevention and control of NCDs. And of course, we have broadened our relationship with WHO, the “mother” of the Convention, whose offices at all levels are valued allies in the fight against the tobacco epidemic.

As with any maturing organization, the Secretariat seeks more clarity on scope of work. Our hosting arrangements with WHO would benefit from some clarification on the scope of work of the two entities, ensuring the Convention Secretariat’s authority on treaty matters, guaranteeing our close collaboration, mutual respect and cost-effective use of resources.

This relationship would also be further strengthened, I believe, through better ties between the COP and the World Health Assembly. The effect on people’s health of WHO FCTC implementation should be continuously acknowledged in the political agenda, with COP decisions regularly communicated to decision-makers at WHA and vice-versa.

We will also consider FCTC finances during the coming week and I would ask you to bear in mind key points during this discussion.

The Convention has grown enormously since its birth. The number of Parties has risen from around 100 in COP 1 to 180 in COP 7 while Voluntary Assessed Contributions increased by little more than 10%. Demand for our work has increased and will continue to increase when the Protocol enters into force. You can be assured that we are doing our part to ensure accountability, transparency, responsible expenditure and value for money.

We are mindful of the financial pressures faced by the Parties. We sought to cut costs, working with limited staff while delivering on the requests made to us by Parties. We have successfully raised funds and have been greatly assisted by the generous discretionary contributions of some Parties, to such an extent that extra budgetary income now exceeds VAC income. Nevertheless, one third of Parties are in VAC arrears. We have no option but to ask you to consider sanctions for non-payment, as we have exhausted all other possible avenues.

I would ask that you give positive consideration to our modest proposals on VACs. For many Parties, the increase in the contribution is not big, but taken together it makes a difference. Without this, the Secretariat’s ability to deliver will be reduced and defences to the treaty weakened. We cannot lower our guard or the tobacco industry will quickly gain grounds.

Our future progress will also be helped by the admission of new Parties, so I take this opportunity to reach out to our friends among the Non-Parties, several of which are observers here. I can assure you of

a warm welcome and I can proudly announce that Mozambique is about to become the 181th Party to the treaty.

Let me end by thanking the WHO India country office, the South East Asia regional office and WHO headquarters for their support in the run-up to this COP. I must also mention the extraordinary efforts the Convention Secretariat staff. We work with passion for a great international cause and provide a beacon to other global initiatives. My team has provided wonderful support to the Parties and I would like to praise each one of them for the dedication and patience they have shown me.

It is in your hands, the Parties to the COP, to decide this week which measures to adopt, how quickly to implement them and what reports to commission for COP8. I am certain that COP7 will mark a significant moment in our march towards a tobacco-free world.

Thank you.

**ANNEX 7**

**ADDRESS BY DR OLEG SALAGAY, PRESIDENT OF THE CONFERENCE OF THE PARTIES  
TO THE WHO FRAMEWORK CONVENTION ON TOBACCO CONTROL**

Esteemed Ministers, Ambassadors, Delegates, Ladies and Gentlemen,

Before we continue our business of the meeting please let me say a few words.

First of all, I would like to thank the Conference of the Parties for giving me the honour of chairing this high meeting and superintending the work of the Bureau in the period between sessions. Over the past period the Bureau held four meetings to discuss a wide range of important issues within the context of the policy vectors outlined by the Conference of the Parties. I would like to take the opportunity to thank the members of the Bureau with whom I had the pleasure of working for their energy, constructive dialogue, commitment to the interests of public health and eagerness to seek solutions even when the hour hand has moved far beyond working hours.

I would like to express special thanks to the Convention Secretariat and its Head, Dr Vera Luiza da Costa e Silva, for their invaluable assistance and high competence in all matters.

Esteemed Colleagues,

Last year we were commemorating the tenth anniversary of the Convention's entry into force. It has become the most successful international treaty on public health of all times. Today, 181 countries are Parties to the Convention, and its provisions have not only become an inalienable part of legislation of many countries but also part of the mind-set, values and philosophy.

Taking the opportunity I would like to greet Zimbabwe and Mozambique – the states which have joined the Convention since the sixth session of the COP. Welcome!

However, dear colleagues, the world moves on. During the recent period we have developed best practices, obtained results of evidence-based research, and found solutions to many important anti-tobacco tasks at the national and international levels. At the same time, new threats are emerging and they require resolute and immediate action. Otherwise we risk finding ourselves in a situation where new types of tobacco products and new forms of nicotine delivery systems will make the world even more dependent.

The future of public health should be tailored already today, and not tomorrow. This is exactly why we must work persistently to improve step by step the ways to protect people against tobacco smoke, taking into consideration new challenges and threats, leaving no chance to decrease in performance of public health diplomacy. I am convinced that persistency and commitment will produce good results even though today many things may seem elusive and even incredible. The great Indian poet Rabindranath Tagore has justly noted that “Not hammer-strokes, but dance of the water, sings the pebbles into perfection.” Let us do everything within our power to achieve this perfection.

Thank you.

## **ANNEX 8 DECISIONS**

**The following decisions were adopted by the Conference of the Parties. The complete decisions follow this list.**

FCTC/COP7(1)	Applications for the status of observer to the Conference of the Parties
FCTC/COP7(2)	Election of the officers of Committees A and B
FCTC/COP7(3)	Credentials of Participants
FCTC/COP7(4)	Control and prevention of waterpipe tobacco products
FCTC/COP7(5)	Tobacco advertising, promotion and sponsorship: depiction of tobacco in entertainment media
FCTC/COP7(6)	Status of the Protocol to Eliminate Illicit Trade in Tobacco Products (ITP)
FCTC/COP7(7)	Impact assessment of the WHO FCTC
FCTC/COP7(8)	Protection of public health policies with respect to tobacco control from commercial and other vested interests of the tobacco industry
FCTC/COP7(9)	Electronic nicotine delivery systems and electronic non-nicotine delivery systems
FCTC/COP7(10)	Economically sustainable alternatives to tobacco growing (in relation to Articles 17 and 18 of the WHO FCTC)
FCTC/COP7(11)	Implementation of Article 19 of the WHO FCTC: “Liability”
FCTC/COP7(12)	Addressing gender-specific risks when developing tobacco control strategies
FCTC/COP7(13)	Measures to strengthen implementation of the Convention through coordination and cooperation
FCTC/COP7(14)	Further development of the partial guidelines for implementation of Articles 9 and 10 of the WHO FCTC (Regulation of the contents of tobacco products and Regulation of tobacco product disclosures)
FCTC/COP7(15)	Process and methodology to conduct the performance evaluation for the current and subsequent Head of the Convention Secretariat
FCTC/COP7(16)	Review of accreditation of nongovernmental organizations with the status of observer to the Conference of the Parties
FCTC/COP7(17)	Review of accreditation of intergovernmental organizations with the status of observer to the Conference of the Parties

FCTC/COP7(18)	Strengthening synergy between the Conference of the Parties and the World Health Assembly
FCTC/COP7(19)	Relationship of the Convention Secretariat with other international entities: observer status
FCTC/COP7(20)	Hosting arrangements between the Convention Secretariat and WHO
FCTC/COP7(21)	Trade and investment issues, including agreements, and legal challenges in relation to the implementation of the WHO FCTC
FCTC/COP7(22)	Amendment to the workplan and budget for the financial period 2016-2017
FCTC/COP7(23)	Payment of the voluntary assessed contributions and measures to reduce Parties in arrears
FCTC/COP7(24)	Workplan and budget for the financial period 2018–2019
FCTC/COP7(25)	Convention Secretariat's fundraising efforts and collaborative work
FCTC/COP7(26)	International cooperation for implementation of the WHO FCTC, including human rights
FCTC/COP7(27)	Contribution of the Conference of the Parties to achieving the noncommunicable disease global target on the reduction of tobacco use.
FCTC/COP7(28)	Amendments to the Rules of Procedure of the Conference of the Parties to the WHO FCTC
FCTC/COP7(29)	Delhi Declaration
FCTC/COP7(30)	Election of the President and the five Vice-Presidents of the Conference of the Parties to the WHO FCTC
FCTC/COP7(31)	Date and place of the eighth regular session of the Conference of the Parties to the WHO FCTC

**FCTC/COP7(1)      Applications for the status of observer to the Conference of the Parties**

The Conference of the Parties (COP),

Having considered the applications for observer status submitted by one intergovernmental organization and 16 nongovernmental organizations contained in document FCTC/COP/7/3, including a new application from the World Farmers' Organization, which was not granted observer status at the sixth session of the Conference of the Parties;

Recalling decision FCTC/COP6(2) point (b), which deferred consideration of the application for observer status submitted by the East African Community until the seventh session of the COP;

DECIDES, in accordance with Rules 30 and 31 of its Rules of Procedure:

- (a) to grant the status of observer to:
  - American Cancer Society
  - InterAmerican Heart Foundation
  - Vision mondiale de la santé (World Health Vision)
- (b) to defer consideration of the application for observer status submitted by the East African Community until the eighth session of the COP to allow the East African Community to submit additional information;
- (c) to reject the status of observer to the following 13 organizations:
  - All India Bidi Industry Federation
  - Aman-Saulyk
  - Childlink Foundation
  - Consumer Packaging Manufacturers Alliance
  - Federation of All India Farmer Associations
  - Kelab Integrasi Komuniti dan Sosial
  - Lega Italiana Anti Fumo
  - Philippine Tobacco Institute Inc.
  - Polish Cancer Patient Coalition
  - Sarhad Chamber of Agriculture
  - Tobacco Vapor Electronic Cigarette Association
  - Virginia Tobacco Farmers Associations
  - World Farmers' Organization

(First plenary meeting, 7 November 2016)

**FCTC/COP7(2) Election of the officers of Committees A and B**

The following officers were elected to Committees A and B, pursuant to Rule 28 of the Rules of Procedure of the Conference of the Parties:

<b>Committee A:</b>	<b>Chairperson</b>	Mr Caxton Masudi Ngeywo (Kenya)
	<b>Vice-Chairpersons</b>	Dr Pekka Puska (Finland) Mr Behzad Valizadeh (Islamic Republic of Iran)
<b>Committee B:</b>	<b>Chairperson</b>	Dr Nuntavarn Vichit-Vadakan (Thailand)
	<b>Vice-Chairpersons</b>	Ms Suzy McDonald (Canada) Dr Nestor Santiago (Philippines)

(First plenary meeting, 7 November 2016)

**FCTC/COP7(3) Credentials of participants**

The Conference of the Parties,

RECOGNIZES the validity of the credentials of the representatives of the following Parties:

Afghanistan, Algeria, Angola, Armenia, Australia, Austria, Bahrain, Bangladesh, Belarus, Belgium, Benin, Bhutan, Bolivia, Botswana, Brazil, Bulgaria, Burkina Faso, Cabo Verde, Cambodia, Canada, Chad, China, Colombia, Comoros, Cook Islands, Costa Rica, Côte d'Ivoire, Croatia, Cyprus, Czech Republic, Democratic People's Republic of Korea, Democratic Republic of the Congo, Denmark, Ecuador, Egypt, El Salvador, Equatorial Guinea, Estonia, Ethiopia, European Union, Fiji, Finland, France, Gabon, Gambia, Georgia, Germany, Ghana, Guatemala, Guinea, Guinea-Bissau, Guyana, Honduras, Hungary, India, Iran (Islamic Republic of), Iraq, Ireland, Italy, Jamaica, Japan, Jordan, Kazakhstan, Kenya, Kyrgyzstan, Lao People's Democratic Republic, Lebanon, Lesotho, Liberia, Lithuania, Luxembourg, Madagascar, Malaysia, Maldives, Mali, Mauritania, Mexico, Micronesia (Federated States of), Mongolia, Montenegro, Myanmar, Netherlands, New Zealand, Nicaragua, Niger, Nigeria, Norway, Oman, Palau, Panama, Peru, Philippines, Poland, Portugal, Qatar, Republic of Korea, Republic of Moldova, Russian Federation, Saudi Arabia, Samoa, Senegal, Seychelles, Singapore, Slovakia, Solomon Islands, South Africa, Spain, Sri Lanka, Sudan, Suriname, Swaziland, Sweden, Syrian Arab Republic, Tajikistan, Thailand, the former Yugoslav Republic of Macedonia, Togo, Tunisia, Turkey, Tuvalu, Uganda, United Arab Emirates, United Kingdom of Great Britain and Northern Ireland, United Republic of Tanzania, Uruguay, Vanuatu, Venezuela, Viet Nam, Yemen, Zambia and Zimbabwe.

(Third plenary meeting, 9 November 2016)

## **FCTC/COP7(4)      Control and prevention of waterpipe tobacco products**

The Conference of the Parties (COP),

Noting the report of the Convention Secretariat on the Control and prevention of waterpipe tobacco products (document FCTC/COP/7/10);

Recalling decision FCTC/COP6(10) on the Control and prevention of waterpipe tobacco products;

Recognizing the need for fully implementing the WHO Framework Convention on Tobacco Control (WHO FCTC) in relation to all aspects of waterpipe tobacco control;

Mindful of the challenges faced by Parties in controlling and regulating waterpipe tobacco use, especially in public places;

Aware that Parties need additional technical and political support in controlling waterpipe tobacco use and addressing its related challenges;

Concerned about the growing use of flavoured waterpipe tobacco among youth and the increasing influence of the tobacco industry over waterpipe regulation, production and growing use;

Stressing the need for intercountry and regional coordination in sharing of experiences and knowledge to prevent and control waterpipe tobacco use;

### **1. INVITES Parties:**

- (a) to consider the full application of the WHO FCTC articles in all aspects of waterpipe use, including tobacco used in the waterpipes and accessories, as indicated in document FCTC/COP/7/10;
- (b) to continue to monitor waterpipe tobacco use through national surveillance systems to cover all age groups and all policy aspects in an integrated approach and report findings to the COP through the reporting instrument of the WHO FCTC;
- (c) to comply with Article 5.3 and its Guidelines in relation to waterpipe tobacco policies and control;
- (d) to consider the inclusion of waterpipe tobacco use in all national awareness campaigns and activities;
- (e) to strictly include waterpipe use in the ban of tobacco use in public places as per Article 8 of the Convention and its Guidelines;
- (f) to ban the use of flavourings in waterpipe tobacco products as recommended in partial Guidelines on Articles 9 and 10;
- (g) to increase regularly taxes applicable on waterpipe tobacco and apply rates and schedules similar to other combustible tobacco products, especially cigarettes;
- (h) to consider a ban or restriction on the sale and/or trade of waterpipe tobacco products;
- (i) to promote research on waterpipe-specific culturally relevant interventions to prevent the uptake of waterpipe tobacco smoking, as well as to promote quitting (cessation); the epidemiology of use and acute and chronic health risks; cultural practices and initiation and

maintenance of use; the influence of flavourings on initiation, maintenance of use and increasing use; dependence liability with low- nicotine tobacco products; and effective policies using conceptual frameworks such as information technology and communications;

2. REQUESTS the Convention Secretariat:

- (a) to document and provide to countries evidence-based regulatory experiences and country successful practices in regulating waterpipe use in coordination with the relevant WHO FCTC Knowledge Hub, the World Health Organization (WHO) and other United Nations partners;
- (b) to establish a data repository and platform for sharing of information and coordination among Parties in this regard;
- (c) to further strengthen the reporting instrument of the WHO FCTC to comprehensively cover all aspects, including waterpipe tobacco use, trends and policies;
- (d) to prepare, in coordination with WHO and the engagement of relevant experts, a report to the eighth session of the COP including situation analyses, challenges and recommendations for improving the prevention and control of waterpipe tobacco use.

(Fifth plenary meeting, 12 November 2016)

**FCTC/COP7(5) Tobacco advertising, promotion and sponsorship: depiction of tobacco in entertainment media**

The Conference of the Parties (COP),

Mindful of the Report by the Convention Secretariat on Tobacco advertising, promotion and sponsorship: depiction of tobacco in entertainment media (document FCTC/COP/7/38);

Recognizing the challenge Parties face in addressing and controlling cross-border advertising, including tobacco advertising, promotion and sponsorship (TAPS) in entertainment media;

Acknowledging the need for further technical guidance to parties on how Article 13 of the World Health Organization Framework Convention on Tobacco Control (WHO FCTC) and the Article 13 Guidelines can be comprehensively implemented on both cross-border advertising and TAPS in entertainment media to bridge existing implementation gaps;

Reaffirming the need for international coordination and collaboration to successfully address and control cross-border advertising and TAPS in entertainment media;

Recognizing the importance of addressing cross-border advertising in a comprehensive manner that bridges all existing implementation gaps at the national, regional and global levels;

Mindful that there is a variation among Parties in terms of the existence of cross-border advertising and TAPS in entertainment media;

Recognizing that there are successful national experiences in prohibiting cross-border advertising and TAPS in entertainment media;

1. CALLS ON Parties to consider:
  - (a) scaling up the implementation of WHO FCTC Article 13 and its Guidelines to achieve comprehensive coverage on both cross-border advertising and TAPS in entertainment media;
  - (b) monitoring the use of TAPS in entertainment media and cross-border advertising in accordance with national legislation and priorities;
2. REQUESTS the Convention Secretariat:
  - (a) to establish an expert group with regional representation, in collaboration with the World Health Organization (WHO), to provide recommendations on operationalizing the implementation of Article 13 and its Guidelines on cross-border advertising and TAPS in entertainment media, collect successful national and regional experiences in this regard, and develop a report to be submitted to next COP on suggestions and the way forward, with the Convention Secretariat to coordinate the establishment of the group and its terms of reference with the Bureau guidance;
  - (b) to report to the eighth session of the COP on progress towards combatting cross-border advertising and TAPS in entertainment media.

(Fifth plenary meeting, 12 November 2016)

## **FCTC/COP7(6)      Status of the Protocol to Eliminate Illicit Trade in Tobacco Products (ITP)**

The Conference of the Parties (COP),

Acknowledging the work carried out by the Convention Secretariat in the follow-up to the sixth session of the COP;

Recalling Articles 8.2, 8.12 and 8.13 of the Protocol, which provide that obligations assigned to a Party shall not be performed or delegated to the tobacco industry;

Recalling the establishment of a Panel of Experts on the Protocol to Eliminate Illicit Trade in Tobacco Products (Panel of Experts);

1. DECIDES to intensify the work of the Panel of Experts, which should meet at least every six months and continue its work between meetings by electronic means;
2. REQUESTS the Panel of Experts:
  - (a) to report to the eighth session of the COP, and if applicable to the first Meeting of the Parties (MOP1) to the Protocol, on the progress of its work and any findings;
  - (b) to establish the following priorities as guidance for its work:

- i. assistance to the Convention Secretariat with the preparation of a draft agenda and, as appropriate, relevant documents for MOP1;
  - ii. development of a forum for the exchange of best practices among Parties;
  - iii. provision of technical assistance to Parties by: a) documenting exchanges of best practices; and b) mapping of the emerging traceability systems;
  - iv. support to Parties with free-trade zones in implementing the Protocol;
  - v. advice to Parties on experiences with licensing regimes;
  - vi. development of proposals for consideration at MOP1 as to the future work in the area of fighting illicit trade, including the initial thoughts on the structure of a global information-sharing focal point.
3. MANDATES the Panel of Experts to draw, as necessary, on the expertise of intergovernmental, governmental and nongovernmental experts in fulfilling its mission;
4. DECIDES that the draft agenda and relevant preparations for the first Meeting of the Parties to the Protocol shall be discussed and agreed at a preparatory meeting where each region shall be represented by up to two Parties that have ratified or acceded to the Protocol. For travel, the COP travel policy shall apply. In addition, other Parties that have ratified or acceded to the Protocol may attend the meeting at their own cost. This preparatory meeting should be preceded and supported by regional consultations that may be conducted through electronic means of communication and have no cost implications to the Secretariat;
5. FURTHER DECIDES that except interactions to the extent strictly necessary, Parties to the Convention are urged not to consider any proposal or assistance related to tracking and tracing from the tobacco industry, or submitted on their behalf, including in the course of the preparatory activities for MOP1, in accordance with their obligations under the WHO FCTC.

(Fifth plenary meeting, 12 November 2016)

## **FCTC/COP7(7)      Impact assessment of the WHO FCTC**

The Conference of the Parties (COP),

Recalling decision FCTC/COP6(13) that requested an impact assessment of the WHO Framework Convention on Tobacco Control (WHO FCTC) and called for the establishment of an independent expert group to conduct the assessment;

Noting with satisfaction the outcome of the work of the expert group contained in document FCTC/COP/7/6 and thankful for the work carried out by the expert group and for the cooperation of the 12 Parties that participated in the assessment;

Recognizing that impact assessments can be an important component of the work of the Parties at any stage in their implementation of the Convention in promoting strong measures and full and comprehensive implementation of the Convention at the national level;

Recalling other activities implemented under the COP work plan that also contribute to and assist Parties in their implementation of the Convention, and the possible linkages between an impact assessment and the country assistance framework developed by the COP;

1. INVITES Parties:
  - (a) to consider evaluating on a regular basis the impact of WHO FCTC implementation in their jurisdictions as part of their overall implementation of the Convention;
  - (b) to assess their progress towards fully implementing the provisions of the WHO FCTC, when evaluating the impact of their tobacco control measures;
  - (c) to consider the need to conduct another impact assessment of the WHO FCTC in 5 to 10 years, and regional assessments, as necessary;
2. REQUESTS the Convention Secretariat:
  - (a) to disseminate further the findings of the impact assessment by promoting the preparation of scientific papers and publications, as appropriate;
  - (b) to publish a series of fact sheets summarizing the lessons learnt during the 12 country visits carried out by the expert group during the development of the impact assessment;
  - (c) to make the details of the methodology used in the impact assessment study available in order to support Parties in undertaking their own national impact assessments and to make available, upon the request of Parties, technical assistance to conduct such national impact assessments;
  - (d) to assess the impact of the WHO FCTC in the Parties' comprehensive tobacco control efforts during any needs assessment exercise.

(Fifth plenary meeting, 12 November 2016)

## **FCTC/COP7(8)      Protection of public health policies with respect to tobacco control from commercial and other vested interests of the tobacco industry**

The Conference of the Parties (COP),

Recalling its decision FCTC/COP6(14) entitled Protection of public health policies with respect to tobacco control from commercial and other vested interests of the tobacco industry, and recognizing the importance of implementing Article 5.3 of the WHO Framework Convention on Tobacco Control (WHO FCTC) on both the global and local levels;

Recognizing that the tobacco industry continues to be an important barrier to implementation of the Convention, as noted in the 2016 global progress report on implementation of the WHO FCTC;

Noting with concern that the tobacco industry's tactics at the international level affects implementation of Article 5.3 at the country level;

Acknowledging that countering tobacco industry interference at the international level raises awareness of the tobacco industry's tactics globally, increases prominence of the WHO FCTC, and consequently aids in country-level implementation of the Convention;

Acknowledging also that Guidelines for implementation of Article 5.3 were adopted at the third

session of the COP in its decision FCTC/COP3(7);

Reaffirming the obligations that Parties have to implement Article 5.3 of the WHO FCTC;

Recognizing the work of the Convention Secretariat in establishing tobacco industry monitoring centres (Observatories) and Knowledge Hubs in several content areas to facilitate the implementation of the WHO FCTC;

1. URGES Parties to intensify multisectoral actions and cooperation to address efforts by the tobacco industry to undermine or subvert tobacco control efforts, and the need to be informed of the tobacco industry actions that have a negative impact on tobacco control efforts;
2. CALLS ON Parties to use the Guidelines of Article 5.3 where appropriate and other available resources to strengthen the implementation of Article 5.3, and to remain vigilant of tobacco industry efforts to undermine the implementation of the WHO FCTC;
3. REQUESTS the Convention Secretariat to establish a Knowledge Hub for Article 5.3 that:
  - (a) coordinates the work of experts on Article 5.3 to develop international cooperation, including cooperation with other Knowledge Hubs, as appropriate, and with the Observatories;
  - (b) is responsive to regional economic groupings in the development of innovative ways to engage non-health sectors nationally, regionally and globally;
  - (c) assists Parties upon request in developing strategies to counter tobacco industry interference in bilateral, regional and global relations to promote global awareness of Article 5.3;
  - (d) supports Parties in developing strategies to counter the tobacco industry's misleading information related to the WHO FCTC and tobacco control;
  - (e) promotes mechanisms, including technical assistance and tools, to assist country-level implementation of Article 5.3;
4. REQUESTS the Convention Secretariat:
  - (a) to produce and disseminate best practices in the adoption and implementation of Article 5.3 and its Guidelines, including but not limited to, Article 5.3-specific codes of conduct;
  - (b) to continue to promote the use of the Model policy for agencies of the United Nations system on preventing tobacco industry interference, developed by members of the United Nations Interagency Task Force on the Prevention and Control of NCDs, in accordance with Article 5.3;
  - (c) to include media strategies to raise awareness about tobacco industry interference in the global communication strategy;
  - (d) to study the Guidelines on cooperation between the United Nations and the business sector, for their compatibility with Article 5.3 of the WHO FCTC, and report to COP8;
  - (e) to increase awareness of existing tools to implement Article 5.3 of the WHO FCTC.

(Fifth plenary meeting, 12 November 2016)

**FCTC/COP7(9)      Electronic nicotine delivery systems and electronic non-nicotine delivery systems**

The Conference of the Parties (COP),

Recalling its decision FCTC/COP4(14) to request the Convention Secretariat to prepare jointly with WHO's Tobacco Free Initiative a comprehensive report based on the experience of Parties on the matter of electronic nicotine delivery systems (ENDS) for consideration at the fifth session of the COP;

Recalling its decision FCTC/COP5(10) to request the Convention Secretariat to invite WHO to identify options for the prevention and control of ENDS and examine emerging evidence on the health impacts of the use of such electronic systems; and report on the outcome to the sixth session of the COP;

Recalling its decision FCTC/COP6(9) to request the Convention Secretariat to invite WHO to prepare an expert report for the seventh session of the COP with an update on the evidence of the health impacts of ENDS/ENNDS;

Noting that the report by WHO to the COP at its seventh session (document FCTC/COP/7/11) covers updates on the evidence of the health impact of ENDS/ENNDS, their potential role in tobacco cessation and impact on tobacco control efforts, and assesses policy options (i.e. preventing the initiation of ENDS/ENNDS by non-smokers and youth, minimizing as far as possible potential health risks to ENDS/ENNDS users and protect non-users from exposure to their emissions, preventing unproven health claims from being made, and protecting tobacco-control activities from all commercial and other vested interests related to ENDS/ENNDS, including interests of the tobacco industry);

Noting that regional and international standards-development organizations have begun work on methods for the testing and measuring of contents and emissions of ENDS/ENNDS with an expected completion over the next three to five years;

Recognizing that some Parties have adopted various regulatory strategies with respect to ENDS/ENNDS, such as an outright ban on their manufacturing, importation, distribution and sale, the adoption of regulation similar to that applicable to medicines, their control as tobacco products, or their control as consumer products with tobacco control-like measures, while other Parties have adopted no control at all,

1. WELCOMES the report contained in document FCTC/COP/7/11;
2. INVITES Parties to consider applying regulatory measures such as those referred to in document FCTC/COP/7/11 to prohibit or restrict the manufacture, importation, distribution, presentation, sale and use of ENDS/ENNDS, as appropriate to their national laws and public health objectives;
3. REQUESTS the Convention Secretariat to invite Parties to monitor and report on scientific, regulatory and market developments such as initiation, cessation, advertising and promotion and WHO to report on the development of methods by regional and international standards-development organizations for the testing and measuring of contents and emissions of these products, at either the eighth or the ninth session of the COP, as applicable;

4. FURTHER REQUESTS the Convention Secretariat to invite WHO to continue to provide technical and scientific assistance on ENDS/ENNDS upon request by the Parties or the Convention Secretariat.

(Fifth plenary meeting, 12 November 2016)

**FCTC/COP7(10) Economically sustainable alternatives to tobacco growing (in relation to Articles 17 and 18 of the WHO FCTC)**

The Conference of the Parties (COP),

Taking into account Article 17 (Provision of support for economically viable alternative activities) and Article 18 (Protection of the environment and health of persons) of the WHO Framework Convention on Tobacco Control (WHO FCTC);

Reaffirming the FCTC/COP6(11) decision to adopt the policy options and recommendations on economically sustainable alternatives to tobacco growing;

Reiterating that the WHO FCTC requires Parties to promote economically viable alternatives for tobacco workers, growers and, as the case may be, individual sellers;

Recalling that the WHO FCTC urges the Parties to have due regard to the protection of the environment and the health of persons in relation to the environment in respect of tobacco cultivation and manufacture within their respective territories;

Considering that policies focused on economically, socially and environmentally sustainable alternatives to tobacco growing have a multilevel and crosscutting impact on the 2030 Agenda for Sustainable Development;

Bearing in mind that Articles 17 of the WHO FCTC is aimed at promoting alternative livelihood options;

Considering that the progressive reduction in tobacco consumption from the effective implementation of the WHO FCTC allows time for implementing policies that assist tobacco growers and workers to transition to alternative farming and occupations;

Recalling that the FCTC/COP6(11) decision requested the Convention Secretariat to support the development of pilot projects and other initiatives that aim to implement policy options and recommendations on FCTC Articles 17 and 18 and, since then, there has been limited progress on the issue;

Noting, as contained in document FCTC/COP/7/4, that Articles 17 and 18 are among the least implemented Articles of the FCTC;

1. DECIDES:
  - (a) to encourage Parties not growing tobacco to not introduce tobacco growing;

- (b) to urge Parties, when implementing Articles 17 and 18, to adopt a whole-of-government and stakeholder participatory approaches keeping in mind Article 5.3 in promoting alternatives to tobacco growing, and avoid tobacco industry obstruction in programmes meant for the welfare and diversification of tobacco growers and workers and the protection of the environment, as appropriate in the national context;
- (c) to urge parties to call for policy coherence in the mandates of the governing bodies of relevant intergovernmental organizations;
- (d) to urge the international community to support mobilization of resources to promote economically viable alternatives to tobacco growers and workers;

2. REQUESTS the Convention Secretariat:

- (a) to coordinate with civil society and intergovernmental organizations with relevant expertise to support interested parties in developing pilot projects, with emphasis on whole-of-government approach policies or initiatives;
- (b) to develop, in cooperation with the parties, a toolkit to guide the implementation of the Livelihoods Methodology;
- (c) to invite the Food and Agriculture Organization of the United Nations (FAO) to include the promotion of economically sustainable alternatives to tobacco growing as part of its sustainable rural development agenda;
- (d) to establish or strengthen collaboration with UNWOMEN, the United Nations Children's Fund (UNICEF), the World Health Organization (WHO) and nongovernmental organizations, such as the International Network of Women Against Tobacco (INWAT), to develop strategies to protect women, girls and boys from the negative effects of tobacco farming;
- (e) to establish collaboration with the United Nations Framework Convention on Climate Change (UNFCCC) and the United Nations Environment Programme (UNEP) to conduct studies to estimate the environmental effects of tobacco growing and production;
- (f) to promote international cooperation and exchange of information among interested Parties, including south-south and triangular cooperation;
- (g) to continue to document experiences and lessons learnt concerning alternative livelihoods, organize and periodically update international database of resources, within the WHO FCTC coordination platform, of best practices, instruments and measures to support the implementation of the policy options and recommendations;
- (h) to improve the accessibility of the international database and its tools, within the WHO FCTC information platform of good practices;
- (i) to renew the request for the WHO to support interested Parties to develop guidelines for surveillance, prevention and early diagnosis of occupational harms and risks specific to tobacco cultivation and manufacture;
- (j) to invite WHO, as well as other relevant international organizations including UNEP, to prepare a report for COP8 on the environmental impact of tobacco lifecycle which collects technical knowledge on strategies to avoid and mitigate this impact, as well as recommend policy options and practical orientations to address it, identifying interventions that benefits public health and environment;

- (k) to support Parties to advance initiatives as appropriate, aimed at raising awareness about the occupational and environmental risks related to tobacco growing, in light of the 2030 Agenda for Sustainable Development;
  - (l) to make the necessary arrangements, including budgetary arrangements, for developing the items 2(a), 2(b), 2(f), 2(i) and 2(k) of this decision;
3. FURTHER REQUESTS the Convention Secretariat:
- (a) to monitor progress on Parties' implementation of Articles 17 and 18;
  - (b) to report on progress at COP8.

(Fifth plenary meeting, 12 November 2016)

### **FCTC/COP7(11) Implementation of Article 19 of the WHO FCTC: “Liability”**

The Conference of the Parties (COP),

Recalling the report by the Convention Secretariat on liability contained in document FCTC/COP/5/11;

Welcoming the final report by the expert group on liability that was established pursuant to the decision contained in document FCTC/COP/7/13;

Recognizing that scientific evidence has established that tobacco consumption and exposure to tobacco smoke causes death, disease and disability, and noting that Article 19 recognizes the possibility of Parties taking various types of action to promote tobacco control and international cooperation;

Recognizing that, as highlighted in the guiding principles of the WHO Framework Convention on Tobacco Control (WHO FCTC) (Article 4.5), “issues relating to liability as determined by each Party within its jurisdiction are an important part of comprehensive tobacco control” and that Article 19 presents the Parties with an option to hold the tobacco industry legally liable for the harm that is caused by the use of their products;

Recognizing also that legal systems may need to be adapted in order to enable tobacco industry liability to be pursued;

Recalling the expert group's report contained in document FCTC/COP/6/8, which noted that few Parties have taken any legal measures against the tobacco industry for full or partial reimbursement of medical, social and other relevant costs related to tobacco use in their jurisdiction, and that Parties require additional guidance to advance implementation;

Noting that, as reported by the Convention Secretariat on the implementation of the WHO FCTC contained in document FCTC/COP/7/4, Article 19 is among the least implemented Articles of the WHO FCTC;

Noting also the “lack of clear information on the differing mechanisms of assistance and resources available and on how to access them as described by the working group on Sustainable measures to strengthen the implementation of the WHO FCTC contained in document FCTC/COP/7/18,

1. ADOPTS the report of the expert group, including the toolkit, as a mechanism of assistance for those Parties that may require assistance in their implementation of Article 19;
2. ENCOURAGES Parties to consider options, including developing their legislation or liability procedures, as appropriate, and increasing their international cooperation in order to strengthen their implementation of Article 19;
3. REQUESTS the Convention Secretariat, in accordance with its mandate as described in FCTC/COP6(7):
  - (a) to make the toolkit available on the WHO FCTC information platform and keep it updated by incorporating relevant information and material, including information received from the Parties pursuant to their reporting obligations under the Convention;
  - (b) to develop a database of experts and institutions that can provide Parties, upon request, with technical assistance related to tobacco industry liability, create a digital platform for international cooperation, and make available and regularly update related resources;
  - (c) to prepare, maintain and make available to Parties a comprehensive list of the existing legal resources that may assist Parties in dealing with all forms of liability and other legal challenges where necessary;
4. FURTHER REQUESTS the Convention Secretariat:
  - (a) to explore options to mobilize resources, mechanisms of assistance and other forms of cooperation to ensure Parties have sufficient access to the information and expertise necessary to implement Article 19;
  - (b) monitor progress on Parties’ implementation of Article 19 through existing WHO FCTC reporting mechanisms;
  - (c) report on progress at the eighth session of the COP.

(Fifth plenary meeting, 12 November 2016)

## **FCTC/COP7(12)      Addressing gender-specific risks when developing tobacco control strategies**

The Conference of the Parties (COP),

Recalling that the Preamble of the WHO Framework Convention on Tobacco Control (WHO FCTC) recognizes the increase in tobacco use by women and young girls worldwide, the need for full participation of women at all levels of policy-making and implementation, and the need for gender-specific tobacco control strategies;

Recalling also that the Guiding Principles of the WHO FCTC (Article 4) emphasize the need to address gender-specific risks when developing tobacco control strategies;

Noting that some tobacco-related health problems are unique to women or more prevalent among women;

Considering the harmful effects of tobacco use in pregnancy, and the importance of informing and protecting pregnant women against the harmful effects of tobacco consumption and environmental tobacco smoke;

Considering also that girls and women in low- and middle-income countries (LMICs) face specific risks to working in tobacco cultivation and manufacture;

Taking into account that gender-specific strategies need to reach all segments of the population;

Taking into account also that tobacco industry tactics may specifically target girls and women, especially those of lower social and economic status;

Concerned that the lack of evidence on the gender-specific effect of tobacco control policies challenges Parties' full implementation of the WHO FCTC and the Sustainable Development Goals (SDGs), specifically regarding maternal health improvement;

1. WELCOMES the report of the Convention Secretariat (document FCTC/COP/7/14) that addresses potential areas of gender-specific tobacco control measures and policies;
2. REQUESTS the Convention Secretariat to invite the World Health Organization (WHO) to prepare and submit a paper to the eighth session of the COP that includes:
  - (a) further updates on the evidence on tobacco use and its consequences among girls and women, as well as boys and men, and with special attention to vulnerable groups, in respect to social determinants of health;
  - (b) experiences from the Parties including opportunities and challenges in implementing gender-specific tobacco control policies;
  - (c) policy options to be considered by the Parties when developing and promoting gender-specific tobacco control policies, in line with WHO FCTC provisions, at the national level.

(Fifth plenary meeting, 12 November 2016)

**FCTC/COP7(13) Measures to strengthen implementation of the Convention through coordination and cooperation**

The Conference of the Parties (COP),

Recalling Article 23.5 of the WHO Framework Convention on Tobacco Control (WHO FCTC), which stipulates that the COP shall keep under regular review the implementation of the Convention and take the decisions necessary to promote its effective implementation;

Recalling also decisions FCTC/COP1(13), FCTC/COP2(10), FCTC/COP4(17) and FCTC/COP5(14) on financial resources, mechanisms of assistance and international cooperation;

Recalling further that decision FCTC/COP5(14) established a working group on sustainable measures to strengthen implementation of the WHO FCTC and that decision FCTC/COP6(17) decided to extend its mandate;

Having considered the reports of the working group presented to the sixth session of the COP (document FCTC/COP/6/19) and to the seventh session of the COP (document FCTC/COP7/18), which recommended, among other things, to develop a detailed action plan for assistance implementation for consideration at COP8;

Noting the report of the Convention Secretariat on global progress in the implementation of the WHO FCTC, international cooperation for implementation of the WHO FCTC, south–south and triangular cooperation, information sharing, and financial resources and mechanisms of assistance, as submitted to the seventh session of the COP (document FCTC/COP/7/4);

Noting also the report of the Expert Working Group on Reporting Arrangements under the WHO FCTC, as submitted to the seventh session of the COP (document FCTC/COP/7/15); which recommended the establishment of an implementation review committee for the WHO FCTC;

Welcoming the progress made, yet concerned that Parties continue to confront multiple challenges in implementing the WHO FCTC, including in accessing and adapting existing mechanisms of assistance to their specific needs and in obtaining resources to support implementation of the treaty by Parties that are low and middle income countries;

Recognizing that international cooperation and south–south and triangular cooperation are key to advancing the implementation of the WHO FCTC worldwide;

Recognizing also the role of relevant Knowledge Hubs in facilitating exchange of information and cooperation between Parties and providing technical assistance;

Encouraging accelerated implementation of the WHO FCTC;

Ensuring that support for Parties` full implementation of the Convention responds directly to the needs of the Parties;

1. URGES Parties and the Convention Secretariat, and also invites the World Health Organization (WHO) and the United Nations Development Programme (UNDP) to take action in line with the suggested actions and recommendations set out in the report of the working group on sustainable measures to strengthen implementation of the WHO FCTC;

2. DECIDES:

- (a) to establish a working group to develop a draft medium-term strategic framework (MTSF) to guide the development of biennial workplans, budgets and implementation support for consideration by the COP that should:
  - i. include a vision, goals and objectives;
  - ii. identify gaps, limitations and needs of Parties at the global, regional and national levels, drawing on work to date to review through a mechanism for systematic review of Parties reports, needs assessments, and the recent WHO FCTC Impact assessment (consideration could be given to whether this mechanism could be an implementation review committee, drawing on the report of the expert group on reporting under the WHO FCTC as per document FCTC/COP7/15);
  - iii. provide guidance on priorities for implementation support for the WHO FCTC, drawing on a review of gaps, limitations, and needs of Parties and the report on strategic directions given by the working group on sustainable measures, to strengthen implementation of the WHO FCTC. This should include:
    - (i) all assistance activities to be carried out by the Secretariat;
    - (ii) South–south and triangular cooperation projects and activities;
    - (iii) international cooperation projects and activities;
    - (iv) financial resources;
    - (v) mechanisms of assistance;
  - iv. consider input provided by Parties through an online consultation or any other means deemed appropriate and cost-effective, and any research or wider engagement by the working group that is considered necessary to inform its work;
  - v. take into consideration monitoring and evaluation activities in relation to the implementation of the Convention;
  - vi. ensure complementarity of the Secretariats' different assistance activities, and identify opportunities for synergies between the work of the Convention Secretariat, WHO and other United Nations entities to maximize support for the implementation of the WHO FCTC;
  - vii. take into account the need to ensure coherence and continuity among the successive workplans and budgets of the Convention Secretariat;
  - viii. include a results-oriented monitoring and evaluation plan, within the MTSF with clear, time-bound indicators with respect to the goals and objectives;
  - ix. review the recommendations of the Expert Group on reporting arrangements under the WHO FCTC and the proposed Terms of Reference to establish an Implementation Review Committee (document FCTC/COP7/15) in order to make recommendations on an ongoing mechanism for the systematic review of Parties' support and assistance needs for consideration of COP;
- (b) that the composition of the Working Group:
  - i. be limited to 18 members. Regions can nominate up to two members representing Parties through regional coordinators to ensure equal regional participation. The Convention Secretariat should invite up to three additional members of the group representing nongovernmental organizations that are observers to the COP, and up to three additional members of the group representing intergovernmental organizations

that are observers to the COP, based on their relevant expertise and sound knowledge of matters related to the implementation of the WHO FCTC;

- ii. that the Convention Secretariat should make the necessary arrangements, including budgetary arrangements, for the performance of the work of the working group, in line with the COP travel policy applicable to working groups. There should be at least one face-to-face meeting of the working group; additionally, the work of the working group may be conducted through electronic means of communication, in order to promote cost-efficiency;

(c) the working group shall report the outcome of its work to the eighth session of the COP;

3. REQUESTS the Convention Secretariat:

- (a) to undertake the actions set out in the report of the working group of sustainable measures (FCTC/COP/7/18), including the Terms of Reference for the Coordination Platform recommended by the working group;
- (b) to provide support and make the necessary arrangements for the functioning of the working group, including budgetary arrangements.

(Fifth plenary meeting, 12 November 2016)

**FCTC/COP7(14) Further development of the partial guidelines for implementation of Articles 9 and 10 of the WHO FCTC (Regulation of the contents of tobacco products and Regulation of tobacco product disclosures)**

The Conference of the Parties (COP),

Taking into account Article 7 (Non-price measures to reduce the demand for tobacco), Article 9 (Regulation of the contents of tobacco products) and Article 10 (Regulation of tobacco product disclosures) of the WHO Framework Convention on Tobacco Control (WHO FCTC);

Recalling its decision FCTC/COP1(15) to establish a working group to elaborate guidelines for implementation of Article 9 and Article 10 of the WHO FCTC, and its decision FCTC/COP2(14) to extend the work of the working group to include product characteristics, such as design features, to the extent that they affect the objectives of the WHO FCTC;

Recalling also its decision FCTC/COP4(10) to adopt partial guidelines for implementation of Article 9 and Article 10 of the WHO FCTC and to mandate the working group to continue its work in elaborating guidelines in a step-by-step process, and to submit draft guidelines on addictiveness and toxicity to future sessions of the COP for consideration;

Recalling further its decision FCTC/COP5(6) to adopt further partial guidelines;

Noting its decision FCTC/COP6(12) to mandate the working group to continue its work in elaborating guidelines in a step-by-step process; to submit draft partial guidelines or a progress report on the disclosure, testing and measuring of contents and emissions, and on specific cigarette characteristics

including slim/super-slim designs, filter ventilation and innovative filter design features, to the next session of the COP; to explore possibilities for defining “constituents”; and to continue to monitor areas such as dependence, liability and toxicology, including for smokeless tobacco products and waterpipe tobacco products;

Noting also the report of the working group to the seventh session of the COP (FCTC/COP/7/8) which presents three annexes that the COP is invited to consider for adoption;

Noting further the lack of consensus within the working group in defining constituents as reported at the sixth session of the COP;

Noting also that the working group, as it has done previously, wishes to invite all Parties, the tobacco-related Knowledge Hubs and the World Health Organization (WHO) to continue building capacity to require the tobacco industry to test and disclose the contents and emissions of tobacco products to regulatory authorities, as well as to share their newly acquired knowledge and technical expertise with other Parties; taking note of the publication in 2015 of an *Advisory note: global nicotine reduction strategy*, prepared by the WHO Study Group on Tobacco Product Regulation<sup>1</sup>;

1. ADOPTS the further partial guidelines for implementation of Articles 9 and 10 of the WHO FCTC as contained in the Annex 2 and 3 of the present decision;
2. TAKES NOTE WITH APPRECIATION of Annex 1 to the present decision as an important contribution of the working group, as part of work in a step-by-step process;
3. WELCOMES the report of WHO to the COP on the work in progress in relation to Articles 9 and 10 of the WHO FCTC (document FCTC/COP/7/9) and thanks both WHO and the participating laboratories for making such significant progress in the validation of analytical chemical methods for testing and measuring cigarette contents and emissions (document FCTC/COP/7/INF.DOC./1);
4. REQUESTS the Convention Secretariat in cooperation with the WHO to hold a face-to-face meeting with a range of experts and relevant stakeholders from various regions with expertise in different areas, for example experts on addictiveness and dependence, social workers, physicians, public health experts, regulation experts, plant technology experts, agriculture scientists, experts in illicit trade, marketing experts, experts in ethics, scientists from other relevant disciplines and Party representatives and relevant nongovernmental organizations to study/examine and discuss taking into account the current and emerging knowledge base, including scientific and empirical evidence, on addictiveness reduction measures and report back to the eighth session of the COP on:
  - (a) the potential positive and negative individual and societal consequences of implementing tobacco addictiveness reduction measures as well as the conditions that would support successful implementation of tobacco addictiveness reduction measures;
  - (b) the barriers to implementation of tobacco addictiveness reduction measures;
  - (c) any relevant country experiences;
  - (d) any other related matter that, in the opinion of this diverse group, should be brought to the attention of the COP;
5. REQUESTS the Convention Secretariat to invite WHO to undertake the following work:

---

<sup>1</sup> [http://www.who.int/tobacco/publications/prod\\_regulation/nicotine-reduction/en/](http://www.who.int/tobacco/publications/prod_regulation/nicotine-reduction/en/)

- (a) to continue to monitor and examine market developments and usage of novel and emerging tobacco products, such as “heat-not-burn” tobacco products. This might cover available scientific data on attractiveness, addictiveness and toxicity; health risk impact analysis of the products; their potential role in initiation and cessation of tobacco consumption; and to collect further scientific information, especially in relation to nicotine and other toxicants, including those arising from emissions; and to report progress to the future sessions of the COP;
- (b) to collaborate with the Knowledge Hub on smokeless tobacco by assisting tobacco testing laboratories:
  - i. to collect scientific information on the chemicals in contents and emissions in smokeless tobacco products that contribute to the toxicity, addictiveness and attractiveness and analytical methods used to measure them, and the levels found in products on the market;
  - ii. to finalize the standard operating procedures for measuring nicotine, tobacco specific nitrosamines (TSNAs) as requested by decision FCTC/COP6(12) 2b.ii;
  - iii. to advise on the applicability of WHO Tobacco Laboratory Network (TobLabNet) standard operating procedures to measure humectants and ammonia in smokeless tobacco products;
  - iv. to identify any available technical approaches to reduce toxicants in smokeless tobacco;
  - v. to report progress at the future sessions of the COP.
- (c) to finalize the validation of the analytical chemical methods for aldehydes and volatile organic compounds in cigarette emissions in accordance with the progress report presented by WHO to COP at its seventh session (FCTC/COP/7INF.DOC.1);
- (d) to support, in synergy with other WHO FCTC work on implementation/capacity-building, and upon the request of Parties, to strengthen their capacity in testing of tobacco products including through the WHO TobLabNet;
- (e) to identify, in synergy with other WHO FCTC work on implementation/capacity-building, approaches and strategies to build capacity for Parties wishing to monitor market characteristics and trends through registration, licensing or notification, as well as reporting on tobacco products in order to inform policy-making;
- (f) to assess the applicability of WHO TobLabNet standard operating procedures to the testing of nicotine and humectants in waterpipe tobacco products;
- (g) to assess the availability of validated analytical methods on the expanded list of toxicants in contents and emissions of tobacco products, as reported in Table 4 of document FCTC/COP/6/14.

6. DECIDES to mandate the working group:

- (a) to continue its work in elaborating guidelines in a step-by-step process and submit draft partial guidelines or a progress report in accordance with past decisions;
- (b) to examine the information delivered by the consultation of the range of experts and relevant stakeholders on paragraph 4 and the WHO on paragraph 5 at a future meeting after the eighth session of the COP and submit draft partial guidelines or a progress report to a future session of the COP.

7. DECIDES that within the context of Articles 9 and 10:

- (a) the definition of waterpipe tobacco does not include tobacco-free waterpipe products;

- (b) future work on “contents and emissions” should take into consideration the characteristics, including the design features, of the waterpipe apparatus and all its components when assessing the emissions from these products;
  - (c) future recommendations should address, where relevant, the impact of the availability and uptake of tobacco-free waterpipe products.
8. INVITES Parties, after notification by the Convention Secretariat, to confirm to the Convention Secretariat their intention to continue as members of the working group or their intention to join the working group by 31 January 2017;
9. DECIDES, in accordance with decision FCTC/COP4(10):
- (a) to request the Convention Secretariat to provide assistance and make the necessary arrangements, including budgetary arrangements, for the working group to continue its work, and to ensure, in consultation with the Bureau of the COP, that Parties have access to the draft text (for example, via a protected website) and can provide comments before the circulation of the draft guidelines to the COP;
  - (b) to adopt the timeline set out below:

Draft guidelines, if any, made available by the Secretariat for comments by the Parties	At least six months before the opening day of a future session of the COP
Submission of the final report by the working group to the Secretariat	At least three months before the opening day of a future session of the COP
Circulation to the COP	At least 60 days before the opening day of a future session of the COP in accordance with Rule 8 of the Rules of Procedure of the COP

## ANNEX 1

### OBJECTIVES – ADDICTIVENESS

REPLACE 1.2.1.2 Addictiveness (dependence liability) with the following

#### 1.2.1.2 Addictiveness

The addictive nature of tobacco products is well established. This is recognized in the WHO FCTC which, in its preamble, clearly states that tobacco products create and maintain dependence. Further, Article 5.2 of the WHO FCTC stipulates that Parties shall “adopt and implement effective legislative, executive, administrative and/or other measures and cooperate, as appropriate, with other Parties in developing appropriate policies for preventing and reducing tobacco consumption, nicotine addiction and exposure to tobacco smoke”.

Modifying tobacco products by regulating their contents alone, or both their contents and emissions, may help prevent nicotine addiction/tobacco dependence. Such modifications may also help addicted tobacco users in their cessation efforts.

Any reduction of the addictiveness of tobacco products resulting from the regulation of their contents, or both their contents and emissions, in no way suggests that those tobacco products are less dangerous for human health.

### USE OF TERMS – ADDICTIVENESS

INSERT at “1.3 Use of Terms”

“Addictiveness”, sometimes referred to as dependence liability or addiction potential, means the pharmacological potential of a substance or product to cause dependence. Addictiveness is a complex process that varies with the chemical characteristics of the tobacco product’s emissions, with key elements including the dose, speed of absorption, metabolism, and physical and chemical features of the product. Although the concepts of “addictiveness” and “nicotine addiction/tobacco dependence” are linked, they have different meanings<sup>1</sup>.”

---

<sup>1</sup> “Nicotine addiction” is used in Articles 5 and 22 of the FCTC, whereas “tobacco dependence” is used in Article 14. The *Guidelines for implementation of Article 14 of the WHO Framework Convention on Tobacco Control* offer a definition of “tobacco addiction/dependence” which is found in the section entitled “Use of terms.”

## ANNEX 2

### PRODUCT CHARACTERISTICS – DISCLOSURE

*ADD at 3.3.1.1 “Background” after first paragraph*

Furthermore, when combined with sales figures, such data will help Parties analyse market trends.

*ADD at “APPENDIX 2 Design features of cigarettes”*

(n) Description and explanation of function of all innovative components added to the cigarette, such as capsules.

### PRODUCT CHARACTERISTICS – REGULATION

*INSERT 3.3.2.2 Tobacco Products – Regulation in relation to attractiveness*

#### i. Background

The tobacco industry is continuously aiming at making tobacco products more attractive by modifying existing product design features or introducing new ones. An example is the industry’s manufacture of cigarettes with an ever-smaller circumference (slim, superslim, ultraslim). Another example is the placement of capsules in cigarette filters that release flavour when crushed.

Product design features are used by the tobacco industry to develop strategies making products more attractive to different segments of society, an approach known as market segmentation. These segments can be based for example on age, gender, ethnic or cultural background, socioeconomic status and health concerns. The tobacco industry then targets these segments by developing product design features that meet their expectations and interests with regard to health, glamour, novelty, self-image, weight loss, convenience/ease of use, sensory experience and others.

Regulating product design characteristics to decrease tobacco product attractiveness can contribute to reducing the prevalence of tobacco use.

#### ii. Recommendations

Consistent with 3.1.2.2., Parties should regulate all tobacco product design features that increase the attractiveness of tobacco products, in order to decrease the attractiveness of tobacco products.

## ANNEX 3

### CONTENTS – DISCLOSURE

REPLACE 3.1.3 Constituents (Disclosure) WITH the following

#### *3.1.3 Contents (Disclosure to governmental authorities)*

This section outlines requirements which Parties could introduce for the disclosure by manufacturers and importers of tobacco products of information on the contents of these products to governmental authorities

##### *3.1.3.1. Background*

Given the numerous toxic and addictive substances contained in tobacco products, governmental authorities with access to information on tobacco contents are in a better position to understand the nature of their tobacco product market. Such information can then be used by governmental authorities to inform the development of policies and regulations respecting the attractiveness, addictiveness or toxicity of tobacco products. For example, given that nicotine is the main substance in tobacco involved in the addictive process, Parties may wish to obtain information on the amount of nicotine present in the various tobacco products available in their domestic market.

To help collect such information, governmental authorities can mandate the use of analytical laboratory methods for the testing and measuring of contents of tobacco products developed under the auspices of WHO<sup>1</sup>. The WHO Study Group on Tobacco Product Regulation identified a non-exhaustive list of priority toxic contents and emissions of tobacco products for regulation under Articles 9 and 10 of the WHO FCTC<sup>2</sup>. These methods can be easily performed by a wide spectrum of laboratories. Methods have also been developed by various governmental authorities and international organizations.

##### *3.1.3.2 Recommendations*

i. Parties should consider requiring manufacturers and importers of tobacco products to disclose to governmental authorities at specified intervals, information about the contents of their tobacco products by product type, and for each brand within a brand family.

ii. When requiring the testing and measuring of contents, Parties should consider where it is appropriate specifying that standards agreed by the Parties to the Convention or recommendations by the WHO Tobacco Laboratory Network could be used by the laboratories performing the test on behalf of the manufacturers and importers of tobacco products. On nicotine, Parties should consider specifying that the Tobacco Laboratory Network Official Method SOP 04, entitled *Standard operating procedure for determination of nicotine in cigarette tobacco filler*, World Health Organization<sup>3</sup>, be used by the laboratories performing the test on behalf of the manufacturers and importers of tobacco products.

---

<sup>1</sup> See the list of available WHO methods at [http://who.int/tobacco/publications/prod\\_regulation/en/](http://who.int/tobacco/publications/prod_regulation/en/)

<sup>2</sup> For the full list, see WHO Technical Report Series, n. 989, WHO Study Group on Tobacco Product Regulation: report on the scientific basis of tobacco product regulation, available at: <http://apps.who.int/iris/bitstream/10665/161512/1/9789241209892.pdf?ua=1&ua=1>

<sup>3</sup> See <http://apps.who.int/fctc/implementation/database/article/article-10/resources>

iii. Parties should consider requiring that every manufacturer and importer provides to governmental authorities a copy of the laboratory report that shows the product tested and the results of the testing and measuring conducted on that product. Parties should also consider asking for proof of accreditation or membership in the WHO Tobacco Laboratory Network or be approved by competent authorities of the Parties in question of the laboratory that performed the testing and measuring.

(Fifth plenary meeting, 12 November 2016)

**FCTC/COP7(15)      Process and methodology to conduct the performance evaluation for the current and subsequent Head of the Convention Secretariat**

The Conference of the Parties (COP),

Recalling decisions FCTC/COP4(6), FCTC/COP5(20), FCTC/COP5(21), and FCTC/COP6(22);

Taking note of the recommendations of the sixth Bureau of the COP contained in document FCTC/COP7(27);

DECIDES to establish the following process and methodology for the evaluation of the Head of the Convention Secretariat:

- (a) Taking into account the dual accountability of the Head of the Secretariat as set out in decision FCTC/COP1(10), the performance of the Head of the Convention Secretariat shall be evaluated by a panel composed of the members of the Bureau in office and the immediately preceding Bureau, concerning the delivery of treaty and technical activities, and by the Director-General of WHO concerning administrative and staff management matters, and technical activities as appropriate, as set out in paragraphs (2), (3) and (4) of this decision.
- (b) The performance evaluation by the panel shall comprise:
  - a matrix to be completed by all members of the panel, which takes into account the responsibilities of the Head of the Convention Secretariat related to delivery of treaty and technical activities. The matrix shall be based on Article 24.3 of the Convention and other relevant provisions; Rule 15 of the Rules of Procedure; the post description of the Head of the Convention Secretariat; and the work plan and performance report submitted by the Head of the Convention Secretariat to the Conference of the Parties that precedes the performance evaluation;
  - an interview of the Head of the Convention Secretariat, to be conducted by the panel or designated members thereof as decided by the panel.
- (c) The work of the evaluation panel shall be conducted within the existing budgetary resources of the Convention Secretariat and shall, to the extent possible, employ electronic means of communication in order to reduce costs.
- (d) A template matrix that includes qualitative and quantitative metrics reflecting the elements in paragraph 2 shall be developed by the Bureau to be used for the performance evaluation of the current and subsequent Heads of the Convention Secretariat.
- (e) The template matrix and any other elements of the evaluation process both by the Bureau and the Director-General shall be made available to the Conference of the Parties. A complete record of each evaluation shall be kept by the Convention Secretariat.
- (f) The performance evaluation by the Director-General shall be conducted in a manner that includes the essential elements of a performance evaluation of WHO staff as set out in the applicable rules, taking into account the dual accountability of the Head of the Convention Secretariat and the resultant special nature of the evaluation.
- (g) The Director-General shall submit to the Bureau, at the latest 12 months before the expiry of the contract of the Head of the Convention Secretariat, copies of the regular performance evaluations. The Bureau shall subsequently submit to the Director-General, at the latest six months before the expiry of the contract, a copy of the evaluation report of the panel.

(Fifth plenary meeting, 12 November 2016)

**FCTC/COP7(16)      Review of accreditation of nongovernmental organizations with the status of observer to the Conference of the Parties**

The Conference of the Parties,

Recalling 17th and 18th preambular paragraphs and Article 5.3 of the Convention;

Recalling decisions FCTC/COP2(6), FCTC/COP4(23), FCTC/COP5(22) and FCTC/COP/6/26;

Having considered the proposals contained in document FCTC/COP/7/28;

DECIDES, in accordance with Rule 31.3 of its Rules of Procedure:

- (a) to maintain the observer status of the following 17 nongovernmental organizations (NGOs) that submitted a report:

Campaign for Tobacco-Free Kids; Corporate Accountability International; European Network for Smoking and Tobacco Prevention; FDI World Dental Federation; Framework Convention Alliance on Tobacco Control; International Alliance of Women; International Council of Nurses; International Network of Women Against Tobacco; International Pharmaceutical Federation; International Pharmaceutical Students' Federation; International Union Against Tuberculosis and Lung Disease (the Union); Southeast Asia Tobacco Control Alliance; Union for International Cancer Control; World Federation of Public Health Associations; World Heart Federation; World Medical Association; World Self-Medication Industry;

- (b) to discontinue the observer status of two NGOs (International Federation of Pharmaceutical Manufacturers and Associations and Medical Women's International Association), since their WHO FCTC-related activities are minimal. In addition, the International Federation of Pharmaceutical Manufacturers and Associations reported a conflict of interest;

- (c) to discontinue the observer status of Consumers International, for the reasons outlined in paragraph 5 of FCTC/COP/7/28. The organization explained in a letter addressed to the Head of the Convention Secretariat that it no longer conducts work on this matter and therefore wishes to relinquish observer status.

(Fifth plenary meeting, 12 November 2016)

**FCTC/COP7(17)      Review of accreditation of intergovernmental organizations with the status of observer to the Conference of the Parties**

The Conference of the Parties (COP),

Taking into account 16th and 18th preambular paragraphs, Articles 5.3 and 22 of the WHO Framework Convention on Tobacco Control (WHO FCTC);

Recognizing the important contribution of intergovernmental organizations with the status of observer to the Conference of the Parties to support the implementation of the WHO FCTC at global, regional and national levels;

Acknowledging the participation and contribution of intergovernmental organizations with the status of observer to the Conference of the Parties to the proceedings and outcome of the COP;

Recalling the resolution of the United Nations General Assembly in A/RES/66/2, which recognizes the fundamental conflict of interest between the tobacco industry and public health;

Emphasizing the need for the COP to be informed on the activities that intergovernmental organization observers to the COP are undertaking;

Having considered the report FCTC/COP/7/29 submitted by the Convention Secretariat;

**DECIDES:**

1. to request the Convention Secretariat:
  - (a) to survey intergovernmental organizations with observer status to the COP, using the questionnaire in Annex 2 of document FCTC/COP/7/29 to identify governing body endorsements, relevant action in supporting the implementation of the treaty, unresolved, real or perceived conflicts of interests with the tobacco industry, and direct or indirect involvement with the tobacco industry, which could lead to potential interference from the tobacco industry in the implementation of the Convention;
  - (b) to report back to COP8 on their activities to support the implementation of the treaty and on any concerns raised in regard to conflicts of interest, so that COP8 may consider whether further action is required;
2. to invite any intergovernmental organizations that have been identified by the survey as having no formal endorsement from their governing bodies to seek an endorsement and to resubmit their application in accordance with their internal rules and established procedures;
3. to invite intergovernmental organizations with the status of observer to the Conference of the Parties to support the implementation of the WHO FCTC and consider adopting their own policies to prevent tobacco industry interference;
4. to encourage intergovernmental organizations with the status of observer to the Conference of the Parties to participate in the sessions of the COP as a key means of exercising their rights as observers.

(Fifth plenary meeting, 12 November 2016)

**FCTC/COP7(18)      Strengthening synergy between the Conference of the Parties and the World Health Assembly**

The Conference of the Parties (COP),

Having considered decision WHA69(13) on Strengthening synergies between the World Health Assembly and the Conference of the Parties to the WHO Framework Convention on Tobacco Control (WHO FCTC);

Having also considered document FCTC/COP/7/32 on Strengthening synergy between the Conference of the Parties and the World Health Assembly;

Committed to actively promote accelerated implementation and universal adherence to the Convention, including in all relevant multilateral forums, and in particular in the World Health Assembly;

1. REQUESTS the President of the COP:

- (a) to report for information purposes on the outcomes of the seventh session of the COP to the Seventieth World Health Assembly under the World Health Assembly's provisional agenda item that follows up on decision WHA69(13) to promote a high-level political discussion;
- (b) to provide, in his report to the World Health Assembly, an overview of global progress in implementation of the Convention and of its impact as a tool for reducing tobacco consumption and prevalence, to promote accelerated implementation of the Convention by Parties and encourage those Member States of the World Health Organization (WHO) that have not yet done so to accede to the Convention as soon as possible, and to encourage all appropriate non-State actors to continue promoting universal observance of the Convention's norms;

2. INVITES the World Health Assembly:

- (a) to consider requesting the COP to direct its Secretariat to provide a report on the outcomes of each future session of the COP to the following session of the World Health Assembly, for information purposes and as part of the documentation provided to the World Health Assembly under the agenda item on the prevention and control of noncommunicable diseases;
- (b) to request the WHO Director-General, pursuant to decision WHA69(13), to continue to regularly provide reports for information purposes to the COP on resolutions and decisions of the World Health Assembly relevant to the implementation of the WHO FCTC.

(Fifth plenary meeting, 12 November 2016)

**FCTC/COP7(19)      Relationship of the Convention Secretariat with other international entities: observer status**

The Conference of the Parties (COP),

Recalling Article 24.3(e) of the Convention and Article 34.2(e) of the Protocol, which define coordination with competent international and regional intergovernmental organizations (IGOs) and other bodies as a function of the Convention Secretariat,

Recognizing that accreditation of the Convention Secretariat as an observer to the governing bodies of relevant organizations may be an effective means of furthering such coordination,

1. REQUESTS the Convention Secretariat to initiate discussions with the secretariats of the following organizations, with a view to considering application for observer status to their governing bodies, subject to the applicable Rules of Procedure, and taking into account Article 5.3:
  - (a) United Nations Development Programme (UNDP);
  - (b) The World Bank;
  - (c) United Nations Children's Fund (UNICEF);
  - (d) United Nations Population Fund (UNFPA);
  - (e) United Nations Conference of Trade and Development (UNCTAD);
  - (f) World Customs Organization (WCO);
  - (g) Food and Agriculture Organization of the United Nations (FAO);
  - (h) International Labour Organization (ILO);
  - (i) United Nations University (UNU);
  - (j) World Trade Organization (WTO);
  - (k) Office of the United Nations High Commissioner for Human Rights (OHCHR);
  - (l) UN Women
  - (m) other IGOs as appropriate;
2. REQUESTS the Convention Secretariat in consultation with the Bureau to initiate applications as appropriate and to report its progress to the COP, at its eighth session, on the outcome of these discussions.

(Fifth plenary meeting, 12 November 2016)

**FCTC/COP7(20)      Hosting arrangements between the Convention Secretariat and WHO**

The Conference of the Parties (COP),

Taking note of the report of the Convention Secretariat contained in document FCTC/COP7/34,

REQUESTS the Bureau of the Conference of the Parties to oversee and guide the preparation of the draft hosting terms between the Convention Secretariat and World Health Organization (WHO), as well as their subsequent conclusion.

(Fifth plenary meeting, 12 November 2016)

**FCTC/COP7(21)      Trade and investment issues, including agreements, and legal challenges in relation to the implementation of the WHO FCTC**

The Conference of the Parties (COP),

Reiterating its determination to give priority to the right of Parties to protect public health;

Reaffirming the right of everyone to enjoy the highest attainable standard of physical and mental health;

Recalling the Punta del Este Declaration on the Implementation of the WHO Framework Convention on Tobacco Control adopted by the fourth session of the COP and Seoul Declaration adopted by the fifth session of the COP in which the Parties expressed their commitment to measures designed to control tobacco consumption in their respective jurisdictions and to prevent tobacco industry interference from hindering implementation of the WHO Framework Convention on Tobacco Control (WHO FCTC):

Recalling that the WHO FCTC is the first international and multilateral instrument on tobacco control that is legally binding for all Parties;

Recognizing that tobacco products are the only consumer products that kill up to half of its users when used as intended, and that they are different from other consumer products in light of scientific evidence that has unequivocally established that tobacco consumption and exposure to tobacco smoke cause deaths, disease and disability;

Recognizing also the need to be alert to any efforts by the tobacco industry to undermine or subvert tobacco control efforts and the need to be informed of activities of the tobacco industry that have a negative impact on tobacco control efforts;

Recalling that Article 2 of the Convention provides, inter alia, that the provisions of the Convention and its Protocols shall in no way affect the right of Parties to enter into bilateral or multilateral agreements, including regional or subregional agreements, on issues relevant or additional to the Convention and its Protocols, provided that such agreements are compatible with the obligations under the Convention and its Protocols;

Taking note with interest of recent developments and decisions of international tribunals that affirm the sovereign right of States to adopt public health measures on tobacco control;

Recognizing that measures to protect public health, including measures implementing the WHO FCTC and its guidelines, fall within the power of sovereign States;

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

Taking note of the report on “Trade and investment issues, including agreements, and legal challenges in relation to the implementation of WHO FCTC” (document FCTC/COP/7/21);

1. CALLS on Parties to increase, as appropriate, coordination and cooperation between health and trade/investment departments, including in the context of negotiations of trade and investment agreements;
2. REQUESTS the Convention Secretariat, in cooperation with the World Health Organization (WHO) and the relevant Knowledge Hubs:
  - (a) to collect, document and inform Parties as appropriate on practices in promoting and safeguarding public health measures, including tobacco control measures, under trade and investment agreements and in compliance with international commitments;
  - (b) to document recent developments and decisions of international forums and tribunals regarding tobacco control measures implemented by Parties in compliance with the WHO FCTC and its guidelines with the objective of protecting public health;
  - (c) to document the tobacco control measures most frequently targeted by the tobacco industry, and inform Parties, as appropriate, on how to protect their regulatory capacity in this regard;
  - (d) to report back to the eighth session of the COP on this regard.

(Fifth plenary meeting, 12 November 2016)

**FCTC/COP7(22)      Amendment to the Workplan and Budget for the Financial Period 2016–2017**

The Conference of the Parties (COP),

Recalling the workplan and budget for the financial period 2016–2017 adopted by the COP at its sixth session in decision FCTC/COP6(27);

Recognizing that the Protocol to Eliminate Illicit Trade in Tobacco Products requires 40 Parties to enter into force and that, as of the close of the seventh session of COP, there are 24 Parties to the Protocol;

Acknowledging, therefore, that the first session of the Meeting of the Parties (MOP1) to the Protocol to Eliminate Illicit Trade in Tobacco Products will not take place during the current budget cycle;

DECIDES:

- (a) to amend Part II section 2.1 of the workplan and budget for the financial period 2016–2017 to reflect no allocation of funds to the first session of the MOP1;
- (b) to add a new section in Part II, section 2, 2.1 that reflects the following distribution of funds in the amount of US\$ 300 000 received through Voluntary Assessed Contributions:

Area of work*		Activity cost (in US\$ thousand)  Staff cost (in Full Time Equivalent)		Main components/activities	Expected results and indicators
		Covered by voluntary assessed contributions	Covered by extrabudgetary funds		
2.	Protocols, guidelines and other possible instruments for implementation of the Convention <sup>1</sup>				
2.1	(iii) Promoting entry into force of the Protocol	300 000		Activities related the entry into force and implementation of the protocol	

(Fifth plenary meeting, 12 November 2016)

<sup>1</sup> In line with Article 7, Article 23.5(f) and (h), Article 24.3(a) and (g) and Article 33, and relevant decisions of the COP.

**FCTC/COP7(23)      Payment of the voluntary assessed contributions and measures to reduce Parties in arrears**

The Conference of the Parties (COP),

Recalling decisions FCTC/COP4(22), FCTC/COP5(17) and FCTC/COP6(21) and report by the Convention Secretariat FCTC/COP/7/24;

Noting with concern that 87 Parties are in arrears, including some registering arrears for one or more biennium;

Welcoming with appreciation the overall spirit of commitment by Parties to meet their financial obligations to support the implementation of the WHO Framework Convention on Tobacco Control (WHO FCTC);

1. URGES the Parties in arrears of their contributions to make full payment before 31 December 2017;
2. DECIDES that for future years, Parties' contributions shall be designated as Assessed Contributions, and that references to Voluntary Assessed Contributions shall include Assessed Contributions and vice versa;
3. DECIDES to establish the following process and methodology in respect of any Party that is in arrears in the payment of its Assessed Contributions in an amount that equals or exceeds the amount of the contributions due from it for the preceding two full calendar years at the time of the opening of the COP in any future year:
  - (a) Towards the end of the year preceding each COP, the Head of the Secretariat shall invite each Party that will, unless corrective action is taken, be in arrears to the extent set out above, to submit to the Bureau a plan for making payments to clear the arrears;
  - (b) The Bureau will consider the plan submitted by each such Party and make a recommendation to the COP. The Bureau may recommend the following measures if it is not satisfied with the plan or if no plan is submitted by the Party by the deadline set by the Head of the Secretariat: the Party will not be eligible to become or nominate a member of any Bureau of the COP; or to chair any subsidiary body or working group;
  - (c) The COP will consider the Bureau's recommendation and, unless there are exceptional circumstances justifying different measures, will take the measures recommended;
  - (d) The Secretariat shall report through the Bureau to the COP on the implementation of the Plan of each such Party in future years. If the Plan is not being implemented fully, or if no plan been established, the COP will, unless there are exceptional circumstances justifying different measures, take the following measure: suspension of the right to vote of the Party;
  - (e) If the Party is no longer in arrears to the extent set out above any measures imposed under paragraph C and D shall lapse;
4. DECIDES to review the process and methodology set out in paragraph 3 above at its 10th session;
5. REQUESTS the Convention Secretariat:
  - (a) to invite the Secretariat of the World Health Organization (WHO), in particular through its established regional and country representative office structure, to support the Convention Secretariat in following up with Parties to collect Assessed Contributions;

- (b) to invite the intergovernmental organization observers to the COP, in particular the United Nations Development Programme (UNDP) through its United Nations Resident Coordinators, to support the Convention Secretariat in following up with Parties to collect Assessed Contributions in countries where there is no WHO country representative office;
6. REQUESTS the Convention Secretariat:
- (a) to communicate this decision to all Parties in arrears of payment of Assessed Contributions;
  - (b) to report at each session of the COP the status of Assessed Contributions.

(Fifth plenary meeting, 12 November 2016)

**FCTC/COP7(24) Workplan and budget for the financial period 2018–2019**

The Conference of the Parties (COP),

Reaffirming its decision FCTC/COP1(9) on the adoption of the Financial Rules of the Conference of the Parties to the WHO Framework Convention on Tobacco Control (WHO FCTC);

Recalling its decision FCTC/COP6(27) on the workplan and budget for the financial period 2016–2017;

Having considered the workplan and budget for the financial period 2018–2019 submitted by the Convention Secretariat contained in document FCTC/COP/7/25;

DECIDES:

- (a) to adopt the budget for the financial period 2018–2019 as follows:

<b>Part I – WHO FCTC: Activity costs:</b>	<b>US\$</b>
1. Conference of the Parties	2 113 900
2. Protocols, guidelines and other possible instruments for the implementation of the Convention	234 800
3. Reporting arrangements under the Convention	1 019 000
4. Assistance to Parties in implementation of the Convention, with particular focus on developing country Parties and Parties with economies in transition	1 602 050
5. Coordination with international and regional intergovernmental organizations and bodies	660 000
6. Administration and management, and other arrangements and activities	684 800
<b>Subtotal Part I</b>	<b>6 314 550</b>

<b>Part II – Protocol to Eliminate Illicit Trade in Tobacco Products: Activity costs</b>	<b>US\$</b>
1. Preparing entry into force of the Protocol	688 100
2. Meeting of the Parties to the Protocol	894 700

3. Administration and management, and other arrangements and activities	82 800
<b>Subtotal Part II</b>	<b>1 665 600</b>
Staff costs	9 356 201
Programme support costs (13%)	2 253 725
<b>Total</b>	<b>19 590 076</b>

- (b) to adopt the workplan for the financial period 2018–2019, as indicated in the Annex 1 to this decision, taking into account the decisions taken by the COP at its seventh session;
- (c) to establish the total amount of voluntary assessed contributions of Parties for the financial period 2018–2019 at the level of US\$ 8 800 522;
- (d) to request the Convention Secretariat, in coordination with the Bureau, to communicate the scale of assessment of voluntary assessed contributions for 2018–2019 to Parties following adoption of the scale of assessment by the United Nations General Assembly in late 2017<sup>1</sup>;
- (e) to finance the travel and per diem of least-developed countries from voluntary assessed contributions until and including the eight session of the COP;
- (f) to finance, moreover, travel for low- and lower-middle income countries from voluntary assessed contributions and to cover the cost of the corresponding per diem with resources available in the extrabudgetary funds until and including the eight session of the COP;
- (g) to authorize the Convention Secretariat to request the payment of voluntary assessed contributions, including from countries that may become a Party to the Convention between the seventh and eighth sessions of the COP, in line with the scale of assessment as indicated in paragraph 4 of the present decision;
- (h) to request the Head of the Secretariat to implement the budget and workplan adopted by the COP, and to submit to the COP:
  - i. an interim performance report on the workplan and budget for the financial period 2018–2019, along with a final performance report on the workplan and budget for the financial period 2016–2017, at its eighth session; and
  - ii. a final performance report on the workplan and budget for the financial period 2018–2019 at its ninth session;
- (i) to authorize the Convention Secretariat to seek and receive voluntary extrabudgetary contributions for activities in line with the workplan;
- (j) to encourage Parties to the Convention to provide extrabudgetary contributions for meeting the objectives of the workplan;
- (k) to call on the Head of the Secretariat to keep the Bureau regularly updated on the status of budgets and workplans agreed by the Conference of the Parties;
- (l) to informally consult Parties prior to presenting the budget and workplan to the next COP.

---

<sup>1</sup> Based on the corresponding WHO scale of assessment for 2018–2019 and taking into account the difference of membership of WHO and that of the Convention.

ANNEX 1

WORKPLAN AND BUDGET FOR THE FINANCIAL PERIOD 2018–2019

Part I: WHO FRAMEWORK CONVENTION ON TOBACCO CONTROL					
1.	Conference of the Parties				
	Main Components/Activities	Expected results and indicators	Activity cost (in US\$)		
			VAC	Extra- B	Total
1.1	Conference of the Parties				
	(a) Prepare, convene and support the eighth session of the COP (COP8) including support to Parties, as appropriate.	(a) COP8 prepared and convened on time.	1 675 000	231 500	1 906 500
	(b) Prepare, edit, translate and disseminate COP documentation.	(b) Official documentation available to Parties in the six languages no later than 60 days before the opening of the session. Timely assistance provided to Parties as requested.			
	(c) Prepare, edit, translate and disseminate report, decisions and other documentation.	(c) Report, decisions and official records made available to Parties no later than four months after closure of the session.			
	(d) Prepare and disseminate official records.	(d) Official records made available to Parties no later than four months after closure of the session.			
	(e) Review applications for observer status and prepare reports for consideration by the Bureau and the COP.	(e) Reports submitted on time to the Bureau and to COP8.			
	(f) Conduct review of accreditation of intergovernmental organizations (IGOs) and nongovernmental organizations (NGOs) in consultation with the Bureau.	(f) Report on the review of accreditation of IGOs and NGOs submitted to the Bureau and to COP8.			
	(g) Raise awareness and assist Parties and observers in their participation at the COP.	(g) Raise the profile of the COP, increase participation through the Secretariat website and social media. Develop and make available COP8 app (application).			

*Report of the seventh session of the Conference of the Parties to the WHO FCTC*

	(h) Use COP as an opportunity to build capacity and create awareness about WHO FCTC technical and implementation issues with due regard to Articles 4.2 and 5.3.	(h) Organize at least five side events during COP8 involving Parties and observers (including WHO).			
	(i) Promote communication and media coverage of the COP.	(i) Profile of the COP raised and media coverage promoted.			
<b>1.2</b>	<b>Bureau of the COP including Regional Coordinators where appropriate</b>				
	(a) Prepare, convene and support the work of the Bureau.	(a) Three intersessional meetings of the Bureau convened, including through videoconferences/teleconferences. Bureau meetings convened immediately before and during COP8.	167 400	0	167 400
	(b) Prepare documents for the meetings of the Bureau and make them available to the Parties.	(b) Documents made available to the Bureau at least two weeks before the meetings and also made available on a protected website for the Parties.			
	(c) Provide regular updates to the Bureau and Regional Coordinators on the status of implementation of the workplan and budget for the biennium as requested by the COP, and on ad hoc issues.	(c) Reports submitted to the Bureau at each intersessional meeting of the Bureau and timely information provided.			
	(d) Prepare summary records of the intersessional meetings of the Bureau.	(d) Summary records of the intersessional meetings of the Bureau made available to Parties.			
	(e) Implement COP7 decisions that require consultation with the Bureau outside the regular meetings.	(e) COP7 decisions implemented with Bureau's input.			
	(f) Involve the Bureau and Regional Coordinators in celebrations of the 15 <sup>th</sup> anniversary of the WHO FCTC and all other relevant events where appropriate.	(f) Bureau involvement in the 15 <sup>th</sup> anniversary celebrations and other events.			
	(g) Evaluation of the Head of the Secretariat.	(g) Face-to-face interviews by current and previous Bureau members.	40 000	0	40 000

Subtotal of Area of Work 1			1 882 400	231 500	2 113 900
2.	Protocols <sup>1</sup> , guidelines and other possible instruments for implementation of the Convention <sup>2</sup>				
	Main Components/Activities	Expected results and indicators	Activity cost (in US\$)**		
			VAC	Extra- B	Total
2.1	Intergovernmental working/expert groups				
	(a) Working group Articles 9 and 10: one meeting of the working group after COP8 and intersessional work of the Key Facilitators and the Convention Secretariat.	(a) Progress report submitted to COP.	0	84 900	84 900
	(b) Working group on Strengthening the implementation of the Convention.	(b) One meeting of the working group on Strengthening the implementation of the Convention Report of the working group to COP8.	0	79 800	79 800
	(c) Expert group on Article 13, cross-border advertising and tobacco advertising, promotion and sponsorship in entertainment media.	(c) One meeting of the expert group, in combination with intersessional work of Key Facilitators, experts and the Convention Secretariat. Report of the expert group submitted to COP8.	0	70 100	70 100
Subtotal Area of Work 2			0	234 800	234 800
3.	Reporting and exchange of information <sup>3</sup>				
	Main Components/Activities	Expected results and indicators	Activity cost (in US\$)		
			VAC	Extra- B	Total

<sup>1</sup> The reference to protocols is of a general nature; the Protocol to Eliminate Illicit Trade in Tobacco Products is addressed in Part II of this Annex.

<sup>2</sup> In line with Article 7, Article 23.5(f) and (h), Article 24.3(a) and (g) and Article 33, and relevant decisions of the COP.

<sup>3</sup> In line with Article 20.5, Article 21, Article 23.5 (a), (b) and (d), and Article 24.3(b) and (c), and relevant decisions of the COP.

<b>3.1</b>	<b>Support for Parties in fulfilling their reporting obligations and global progress reports on implementation of the Convention</b>				
	(a) Conduct the biennial reporting cycle in 2018.	(a) Reports received, confirmed and feedback provided to Parties. Web-based database of reports maintained and updated. Online self-learning interactive tool with instructions on the fulfilment of report obligations by Parties.	0	100 000	100 000
	(b) Analyse Parties' reports and develop the 2018 Global Progress Report (identify trends, areas of progress, challenges in implementation and areas/articles of the Convention proposed for further exploration).	(b) 2018 Global Progress Report published online and disseminated to stakeholders.	0	50 000	50 000
	(c) Dissemination of findings from the impact assessment.	(c) Prepare scientific papers, publish a series of fact sheets summarizing lessons learnt, and publish methodology used in impact assessment exercise.	0	15 000	15 000
	(d) Strengthen capacity of Parties to report.	(d) Take advantage of regional and subregional workshops held prior to the 2020 reporting period to build capacity. Advice and assistance to individual Parties provided as requested, mostly through electronic means of communication. Use of the web-based reporting platform and other tools (including the WHO FCTC Indicator Compendium, e-learning tool on reporting) promoted.	0	186 000	186 000
<b>3.2</b>	<b>Exchange of information, including transfer of expertise and technology</b>				
	(a) Promote, maintain and upgrade the WHO FCTC coordination platform including	(a) Platform maintained and upgraded, as necessary. New content published, as appropriate.	0	31 500	31 500

	1. Implementation Database 2. Networking platform 3. Knowledge Hub platform 4. E-learning tools 5. Assistance to Parties.	Develop one e-learning tool on the Protocol and one on preventing tobacco industry interference.			
	(b) Explore existing knowledge on addictiveness reduction measures.	(b) Face-to-face meeting with experts and relevant stakeholders in cooperation with WHO and report to COP8.	0	66 500	66 500
	(c) Provide evidence-based regulatory experiences and country successful practices in regulating waterpipes, share the existing evidence, and prepare a report for COP8.	(c) Study conducted in coordination with the relevant WHO FCTC Knowledge Hub and other partners; a data repository and platform for sharing of information is established and a report prepared for COP8.	0	20 000	20 000
<b>3.3</b>	<b>Knowledge management</b>				
	(a) Knowledge Hubs (KHs): Coordinate and support the existing KHs and establish up to six new KHs, (one on Article 5.3) agree on workplans in line with COP decisions and ensure webpage update.	(a) Support provided to the existing knowledge Hubs and up to six new KHs established according to needs identified by Parties, workplan agreed and activities performed according to workplan, with annual reports provided to the Convention Secretariat.	0	300 000	300 000
	(b) Observatories on Article 5.3: Coordinate and support the work of the Observatories, agree on workplans in line with COP decisions, identify new ones and ensure webpage update.	(b) Five Article 5.3 monitoring centres fully operational, workplan agreed and activities performed according to workplan, with annual reports provided to the Convention Secretariat.	0	250 000	250 000
<b>Subtotal Area of Work 3</b>			<b>0</b>	<b>1 019 000</b>	<b>1 019 000</b>
<b>4.</b>	<b>Assistance to Parties in implementing specific provisions of the Convention, with particular focus on developing country Parties and Parties with economies in transition</b>				

	Main Components/Activities	Expected results and indicators	Activity cost (in US\$)		
			VAC	Extra- B	Total
4.1	Assistance to Parties				
	(a) Promote the establishment of coordination mechanisms.	(a) Update and disseminate Toolkit for the implementation of article 5	0	30 000	30 000
	(b) Identify achievements, challenges and best practice to enhance global and regional cooperation, and provide assistance in implementation of the WHO FCTC within and between regions.	(b) At least three regional WHO FCTC implementation workshops organized by the Secretariat or co-organized with WHO regional offices or other UN agencies. Portfolio of experts on WHO FCTC specific provisions updated, individual assistance provided to Parties upon request.	0	249 950	249 950
4.2	Needs assessments and promotion of access to available resources and mechanisms of assistance				
	(a) Carry out needs assessments, including assessment of the impact of WHO FCTC, and other forms of targeted assistance upon request to strengthen implementation of the Convention at the national level.	(a) Needs assessment missions or other forms of technical support carried out upon request in at least 10 Parties. Needs assessment toolkit for use by Parties promoted and evaluated.	0	319 000	319 000
	(b) Provide support to Parties in identified areas of need upon request	(b) Up to 10 Parties assisted in implementation of selected WHO FCTC provisions, with emphasis on obligations under Articles 4.2, 5.1, 5.2 and 5.3, and alignment of WHO FCTC implementation with national development and health strategies/policies and its inclusion in United Nations Development Assistance Frameworks.	0	300 000	300 000
4.3	Support for Parties engaged in legal action, including in line with Article 19, and trade, investment and other legal challenges to implementation of the Convention				
	(a) Provide direct assistance to Parties	(a) Support provided to at least five Parties	0	36 000	36 000

	upon request and maintain a list of experts on trade, criminal liability and other legal challenges, who could be deployed to assist Parties in collaboration with the relevant Knowledge Hubs.	upon request. Updated list of existing resources on Information Platform. Update the toolkit on Article 19. Report to COP8.			
	(b) Monitor trade and investment issues relevant to implementation of the Convention.	(b) Annual report published on web and disseminated.	0	20 000	20 000
	(c) Training on legal issues in collaboration with KH	(c) Contribute to three to five training sessions on legal issues.	0	24 000	24 000
<b>4.4</b>	<b>Supporting Parties to pursue economically sustainable alternatives to tobacco growing (in relation to Articles 17 and 18 of the WHO FCTC)</b>				
	(a) Support interested Parties in developing pilot projects and other initiatives that aim to implement Article 17 and 18 policy options and recommendations.	(a) At least four countries supported to develop pilot projects.	0	120 000	120 000
	(b) One global workshop organized on Article 17 and 18.	(b) One global workshop organized to prepare a report on environmental impact of tobacco life cycle.	0	81 500	81 500
	(c) Develop a toolkit to guide the implementation of Article 17.	(c) Toolkit developed in consultation with Parties.	0	50 000	50 000
	(d) Sharing of experience and good practice.	(d) A progress report on implementation, making use of experience and case studies from before and after COP7, submitted to COP8.	0	20 000	20 000
<b>4.5</b>	<b>Support to Parties in implementing Article 5.3</b>				
	(a) Monitor Article 5.3 implementation in collaboration with the Article 5.3 Observatories.	(a) Quarterly report on tobacco industry interference published on the web and disseminated to Parties.	0	24 000	24 000
	(b) Provide training in coordination with	(b) Contribute to three to five training sessions	0	20 800	20 800

*Report of the seventh session of the Conference of the Parties to the WHO FCTC*

	Observatories to Parties' designated experts on Article 5.3.	on Article 5.3.			
	(c) Informal consultation to support the work of the Convention Secretariat and the establishment of the knowledge hub on Article 5.3	(c) One informal consultation organized to discuss emerging issues related to tobacco industry interference and support the establishment of the knowledge hub on Article 5.3.	0	49 000	49 000
	(d) Maintaining a list of experts on Article 5.3, who could be deployed to assist Parties, at their request.	(d) List updated and on-site and remote support provided to Parties, upon request.	0	18 800	18 800
	(e) Produce and disseminate best practices in implementation of Article 5.3.	(e) Study on but not limited to Article 5.3 specific codes of conduct conducted and published.	0	10 000	10 000
	(f) Conduct a study and prepare a report on guidelines for cooperation between UN and private sector.	(f) Study on guidelines on cooperation between UN and private sector and report prepared.	0	5 000	5 000
	(g) Increase awareness on existing tools for the implementation of Article 5.3.	(g) Brochure on existing tools produced and published.	0	10 000	10 000
<b>4.6</b>	<b>Support to Parties in Implementing Article 4.2 (c) and (d)</b>				
	(a) Provide training to Parties to strengthen Article 4.2 implementation.	(a) Include a session on gender in regional workshops.	0	15 600	15 600
	(b) Organize one global expert workshop and develop a toolkit on gender sensitive policies in the implementation of the WHO FCTC.	(b) One global expert workshop on gender and a toolkit developed, in relation to decision FCTC/COP7(12).	0	99 200	99 200
	(c) Organize one global expert workshop and develop a toolkit with the participation of indigenous individuals and communities to promote the implementation of the treaty with culturally appropriate perspectives.	(c) One global expert workshop on indigenous populations and a toolkit developed.	0	99 200	99 200

Subtotal Area of Work 4			0	1 602 050	1 602 050
5.	Coordination with international and regional intergovernmental organizations and other bodies				
	Main Components/Activities	Expected results and indicators	Activity cost (in US\$)		
			VAC	Extra- B	Total
5.1	Promoting international cooperation with emphasis on Observers (IGOs & NGOs) to COP				
	(a) Enhanced cooperation and communication with IGOs, including awareness raising, dissemination of information about WHO FCTC-related activities of IGO observers to COP through a designated space on the Information Platform.	(a) IGOs invited to participate in relevant Convention Secretariat activities; Convention Secretariat participation in at least three major global and regional meetings organized by IGOs. Collaboration with IGOs strengthened Report to COP8.	0	31 200	31 200
	(b) Review and promote cooperation with relevant departments of WHO.	(b) One annual retreat with all regional advisers and WHO relevant departments to identify mechanisms to support implementation of the WHO FCTC. Collaboration with various WHO departments on specific topics.	0	66 400	66 400
	(c) Enhanced cooperation and communication with civil society organizations (especially observers to the COP) in relevant activities to reach national, regional and global organizations.	(c) Civil society groups invited to participate in relevant Convention Secretariat activities. Informal briefing for civil society organizations accredited to the COP convened annually as a global event. Convention Secretariat participation in at least six major global and regional tobacco-control meetings organized by civil society.	0	62 400	62 400
	(d) Conducting the biennial reporting cycle for NGO observers.	(d) Promoting the reporting cycle, analysing submissions of NGOs and disseminate COP7 report.	0	30 000	30 000

	(e) Disseminate information about WHO FCTC-related activities of NGOs accredited to COP including through designated space on Information Platform.	(e) Information disseminated through the platform	0	10 000	10 000
<b>5.2</b>	<b>Promotion of South–South cooperation in the exchange of scientific, technical and legal expertise as relevant to the implementation of the Convention</b>				
	(a) Assist and facilitate interested partners in south–south and triangular collaboration.	(a) One south–south and triangular cooperation meeting conducted.	0	105 900	105 900
	(b) Review experiences with demonstration projects and identify further projects.	(b) At least three further projects identified and implemented.	0	120 000	120 000
	(c) Encourage the use of the South–South networking platform on the WHO FCTC Coordination Platform.	(c) Number of visitors and collaborative work initiated. Progress report submitted to COP8.	0	10 000	10 000
<b>5.3</b>	<b>NCDs Global Monitoring Framework of the Tobacco Target - Coordination with UNITAF</b>				
	(a) Continue to implement multisectoral assistance activities to Parties in cooperation with members of the UN Interagency Task Force on the Prevention and Control of Noncommunicable Diseases (UNIATF) and the Global Coordinating Mechanism on NCDs (GCM/NCD).	(a) Participation in at least four meetings of the Task Force and GCM/NCD and coordination of two WHO FCTC specific annual sessions, and contribution to the Secretary-General's report to the United Nations Economic and Social Council and GCM/NCD products.	0	20 800	20 800
	(b) Contribute to the action plan of UNIATF and GCM/NCD.	(b) A joint work plan for UNIATF developed and inputs to relevant aspects of the GCM/NCD. At least two informal UNITAF and GCM/NCD meetings to follow up activities on implementation of WHO FCTC.	0	10 400	10 400
	(c) Maintain working relationships	(c) At least three agreements for regular	0	10 000	10 000

	concerning tobacco-related data exchange with UN agencies to assist with the monitoring and evaluation of progress made in WHO FCTC implementation.	exchange of tobacco-related data concluded between the Convention Secretariat, WHO, and other UN agencies and partners.			
	(d) Cooperate with IGOs and bodies with technical expertise, including UN treaty bodies, to strengthen implementation of the WHO FCTC.	(d) At least two new collaborative projects implemented. Regular exchange of information between relevant organizations.	0	30 000	30 000
<b>5.4</b>	<b>Human Rights Coordination with OHCHR</b>				
	(a) Enhanced cooperation and communication with UN Treaty Bodies, including human rights treaties.	(a) Collaboration with UN Treaty Bodies strengthened.	0	20 000	20 000
<b>5.5</b>	<b>Action in support of SDG target 3.a</b>				
	(a) Awareness raising and resource mobilisation for Sustainable Development Goal (SDG) target 3.a and Financing for Development action agenda.	(a) Communication material on investment cases in tobacco control.	0	30 000	30 000
	(b) Monitoring SDGs.	(b) Conduct an annual expert meeting to follow up and promote progress in meeting SDG target 3.a.	0	102 900	102 900
<b>Subtotal for Area of work 5</b>			<b>0</b>	<b>660 000</b>	<b>660 000</b>

6	Administration and management, and other arrangements and activities <sup>1</sup>				
	Main Components/Activities	Expected results and indicators	Activity cost (in US\$)		
			VAC	Extra- B	Total
6.1	General administration and management				
	(a) General administration, staff and finance management.	(a) Workplans and administrative arrangements customized within WHO's global management system (GSM). Collection of voluntary assessed contributions close to 100% by the end of the biennium.	60 000	0	60 000
	(b) Resource mobilization.	(b) 30–40% of extrabudgetary funds raised. Portfolio of grant proposals prepared, incorporating a range of subjects, values and geographical distribution.	14 000	0	14 000
6.2	Awareness raising, publications, website and web applications and implementation of communications plan <sup>2</sup>				
	(a) Disseminate information to the WHO FCTC technical and official focal points and to Observers to COP focal points.	(a) On average two meetings per year held with permanent missions of Parties in Geneva. Newsletters and publications disseminated to Parties' focal points and observers to COP and website regularly updated.	0	15 200	15 200
	(b) Updating WHO FCTC website in the six WHO official languages.	(b) Web information in six languages.	0	50 000	50 000
	(c) Redesigning and producing new issues of the FCTC Bulletin (newsletter in a printable version).	(c) Bulletin published.	0	40 000	40 000
	(d) Feeding WHO FCTC social media	(d) WHO FCTC in social media.	0	50 000	50 000

<sup>1</sup> In line with Article 24.3(d), (f) and (g), and relevant decisions of the COP.

<sup>2</sup> Activities under this section will be subject to consideration of a communication plan that will be presented to COP8 for consideration.

	channels on Facebook, Twitter and YouTube.				
	(e) Printing and disseminating technical WHO FCTC basic and technical publications.	(e) Documents printed and disseminated.	0	40 000	40 000
	(f) Increase profile and visibility of the Convention internationally at conferences and other events.	(f) Participating and including a booth at the World Conference on Tobacco or Health (WCTOH) and in another meeting.	0	84 000	84 000
	(g) World No Tobacco Day (WNTD)	(g) Support World No Tobacco Day (WNTD) campaign	0	47 600	47 600
	(h) Organizing the WHO FCTC 15 <sup>th</sup> anniversary.	(h) Events organized around the 15th anniversary of the treaty.	0	64 000	64 000
	(i) Printing and disseminating rules of procedure if amended by COP.	(i) Rules of procedure printed.	0	20 000	20 000
	(j) UN tobacco control newsroom.	(j) Regular update of newsroom in English (only).	0	200 000	200 000
<b>Subtotal for Area of work 6</b>			<b>74 000</b>	<b>610 800</b>	<b>684 800</b>
<b>Total activity cost for all areas of work – Part I</b>			<b>1 956 400</b>	<b>4 358 150</b>	<b>6 314 550</b>

Part II: PROTOCOL TO ELIMINATE ILLICIT TRADE IN TOBACCO PRODUCTS					
1	Preparing for the entry into force of the Protocol to Eliminate Illicit Trade in Tobacco Products				
	Main Components/Activities	Expected results and indicators	Activity cost (in US\$)		
			VAC	Extra- B	Total
1.1	Promoting the entry into force of the Protocol				
	(a) Hold six multisectoral, subregional, Protocol-specific workshops.	(a) Participation of at least 48 WHO FCTC Parties in subregional workshops.	0	297 600	297 600
	(b) Monitor and evaluate the dedicated Protocol webpage and redesign accordingly.	(b) Increased number of hits on the Protocol webpage.	0	20 000	20 000
	(c) Engage the potential of relevant international organizations.	(c) Cooperation with international organizations with specific expertise in Protocol-related matters established and maintained.	0	68 000	68 000
	(d) Promote the use of the self-assessment checklist.	(d) Self-assessment checklist evaluated and its use promoted.	0	20 000	20 000
1.2	Technical assistance in preparation for entry into force				
	(a) Conduct and disseminate studies and best practices on Protocol-specific topics.	(a) Up to five studies conducted and at least six best practices identified and disseminated.	0	160 000	160 000
	(b) Provide technical assistance on Protocol-specific topics.	(b) Assistance provided through meetings and online communication.	0	19 200	19 200
	(c) Facilitate and support the work of the panel of experts in accordance with the decisions of COP6 and COP7.	(c) Technical and legal assistance provided as requested by Parties. One meeting of the panel of experts. Assistance provided to the Secretariat with preparation of the draft agenda and other documentation for the first session of the Meeting of the Parties.	0	103 300	103 300
Subtotal for Area of work 1			0	688 100	688 100

2	Meeting of the Parties (MOP)				
	Main Components/Activities	Expected results and indicators	Activity cost (in US\$)		
			VAC	Extra- B	Total
2.1	First Session of the Meeting of the Parties				
	(a) Prepare and convene a preparatory meeting for MOP1 with each region to be represented by up to two Protocol Parties.	(a) Preparatory meeting for MOP1 convened and draft agenda and relevant preparations for the first Meeting of the Parties to the Protocol discussed.	0	98 200	98 200
	(b) Prepare, convene (immediately before or after COP8, pending entry into force) and disseminate the official records of MOP1.	b) MOP1 convened, official documentation and official records made available to Parties in a timely manner	306 000	490 500	796 500
Subtotal for Area of work 2			306 000	588 700	894 700
3	Administration and management and other arrangements and activities				
	Main Components/Activities	Expected results and indicators	Activity cost (in US\$)		
			VAC	Extra- B	Total
3.1	General administration and management				
	(a) Resource mobilization.	(a) 60% of extrabudgetary funds raised.	0	14 000	14 000
	(b) General administration, staff and finance management.	(b) Workplans and administrative arrangements customized within WHO's global management system (GSM).	0	30 000	30 000
3.2	Advocacy, publications and website				
	(a) Prepare and implement a communications plan for promoting entry into force of the Protocol.	(a) At least one meeting per year held with permanent missions of prospective Parties in Geneva, publications disseminated and presentations in at least six international meetings during the biennium.	0	38 800	38 800
Subtotal for Area of work 3			0	82 800	82 800
Total activity cost for all areas of work – Part II			306 000	1 359 600	1 665 600

**ANNEX 2 – GROSS STAFF COSTS BREAKDOWN (US\$)<sup>1</sup>**

<u>Professional staff</u>	<u>Biennial cost</u>
1. D2 (one post)	820 000
2. P5 (two posts at 80% + one post at 25%)	1 240 148
3. P4 (two posts)	1 102 900
4. P3 (two posts)	906 100
Subtotal (eight posts)	4 504 875
<u>General category staff</u>	
1. G6 (one post)	398 725
2. G5 (three posts)	1 057 800
Subtotal (four posts)	1 456 525
Total (12 posts, with two core posts at 80% + one core post at 25% from extrabudgetary sources)	<b>5 525 673</b>
<b>Additional staff costs</b> (pending extrabudgetary funding, secondments and entry into force of the Protocol to Eliminate Illicit Trade in Tobacco Products)	
<u>Professional staff</u>	
1. P5 (costs of two posts at 20% + costs of one post at 75%)	770 903
2. P3 (four posts)	1 812 200
3. P2 (two posts)	717 500
Subtotal (six posts costs of two posts at 20% + costs of one post at 75%)	2 864 875
<u>General category staff</u>	
1. G4 (one post)	308 525
2. G2 (one post)	221 400
Subtotal (two posts)	529 925
Total (8 posts, including costs of two core posts at 20% + one core post at 75%)	<b>3 830 528</b>
<b>Total</b>	<b>9 356 201</b>

<sup>1</sup> Indicative costs for core Convention Secretariat staff based on WHO's latest available standard gross salary costs for 2016–2017; possible changes in 2018–2019 will be reflected once they become available in a revised staff cost breakdown to be communicated to the Parties by note verbale. As indicated above, current staff contracts are funded through voluntary assessed contributions; costs for additional proposed staff positions would be financed through extrabudgetary contributions. The fulfilment of the staff plan, and possible adjustments, will depend on the actual availability of funds and the evolving workload. The staff plan does not include possible short-term assignments and secondments that would be based on actual needs and resources available.

**ANNEX 3 – Comparison of budget lines between adopted Workplan and Budget 2016–2017 and proposed Workplan and Budget 2018–2019 (US\$)**

	Covered by VAC		Covered by extra-budgetary funds		Total	
	2016–2017	2018–2019	2016–2017	2018–2019	2016–2017	2018–2019
<b>1 Activity cost</b>	<b>2 768 000</b>	<b>2 262 400</b>	<b>3 429 000</b>	<b>5 717 750</b>	<b>6 197 000</b>	<b>7 980 150</b>
<i>WHO FCTC</i>	<i>2 292 000</i>	<i>1 956 400</i>	<i>2 635 000</i>	<i>4 358 150</i>	<i>4 927 000</i>	<i>6 314 550</i>
<i>Protocol related</i>	<i>476 000</i>	<i>306 000</i>	<i>794 000</i>	<i>1 359 600</i>	<i>1 270 000</i>	<i>1 665 600</i>
<b>2. Staff costs</b>	<b>5 285 000</b>	<b>5 525 673</b>	<b>5 088 000</b>	<b>3 830 528</b>	<b>10 373 000</b>	<b>9 356 201</b>
<i>WHO FCTC</i>	<i>5 285 000</i>	<i>5 525 673</i>	<i>4 563 000</i>	<i>3 830 528</i>	<i>9 848 000</i>	<i>9 356 201</i>
<i>Protocol related</i>	<i>0</i>	<i>0</i>	<i>525 000</i>	<i>0</i>	<i>525 000</i>	<i>0</i>
<b>3. Total direct costs</b>	<b>8 053 000</b>	<b>7 788 073</b>	<b>8 517 000</b>	<b>9 548 278</b>	<b>16 570 000</b>	<b>17 336 351</b>
<i>WHO FCTC</i>	<i>7 577 000</i>	<i>7 482 073</i>	<i>7 198 000</i>	<i>8 188 678</i>	<i>14 775 000</i>	<i>15 670 751</i>
<i>Protocol related</i>	<i>476 000</i>	<i>306 000</i>	<i>1 319 000</i>	<i>1 359 600</i>	<i>1 795 000</i>	<i>1 665 600</i>
<b>4. Programme support costs</b>	<b>1 047 000</b>	<b>1 012 449</b>	<b>1 107 000</b>	<b>1 241 276</b>	<b>2 154 000</b>	<b>2 253 725</b>
<i>WHO FCTC</i>	<i>985 000</i>	<i>972 669</i>	<i>936 000</i>	<i>1 064 528</i>	<i>1 921 000</i>	<i>2 037 197</i>
<i>Protocol related</i>	<i>62 000</i>	<i>39 780</i>	<i>171 000</i>	<i>176 748</i>	<i>233 000</i>	<i>216 528</i>
<b>5. Grand total (3+4)</b>	<b>9 100 000</b>	<b>8 800 522</b>	<b>9 624 000</b>	<b>10 789 554</b>	<b>18 724 000</b>	<b>19 590 076</b>
<i>WHO FCTC</i>	<i>8 562 000</i>	<i>8 454 742</i>	<i>8 134 000</i>	<i>9 253 206</i>	<i>16 696 000</i>	<i>17 707 948</i>
<i>Protocol related</i>	<i>538 000</i>	<i>345 780</i>	<i>1 490 000</i>	<i>1 536 348</i>	<i>2 028 000</i>	<i>1 882 128</i>

(Fifth plenary meeting, 12 November 2016)

**FCTC/COP7(25) Convention Secretariat's fundraising efforts and collaborative work**

The Conference of the Parties (COP),

Emphasizing the need for the Convention Secretariat to raise funds, given that more than half of activity costs in workplans and budgets adopted by the COP, including assistance to Parties and intercountry collaborative work, are dependent on extrabudgetary funds;

Acknowledging that the Convention Secretariat has allocated significant time and effort to raise funds for such activities;

Noting that the COP has not provided guidance on how the Convention Secretariat's fundraising activities should be structured, nor has it adopted clear guidance for this work;

Acknowledging Convention Secretariat's report on its fundraising efforts and collaborative work (document FCTC/COP/7/26), which has been reviewed by the Bureau;

Recognizing the sovereign right of the Parties to determine and establish their taxation policies;

1. REQUESTS the Convention Secretariat:

- (a) to further consider various funding options, on the basis of viability, sustainability and cost-effectiveness, including the possibility of an international fund for tobacco control;
- (b) to explore the possibility of a financing dialogue, if possible held immediately following the World Health Organization (WHO) financing dialogue, to facilitate collection of extrabudgetary funds for the COP workplan and budget, and to raise awareness of Parties' implementation needs in order to mobilize resources for WHO Framework Convention on Tobacco Control (WHO FCTC) implementation at the country level;
- (c) to base the fundraising strategy of the Convention Secretariat on the WHO Framework of Engagement with Non-State Actors (FENSA), to be supplemented by a number of further provisions that reflect the specificities of the Convention Secretariat. Accordingly, the following paragraphs in document FCTC/COP/7/26 are proposed to be implemented for the Convention Secretariat in addition to and consistent with the FENSA. In the case of conflict, the provisions of FENSA shall prevail:

1.	This strategy is intended primarily to assist the Convention Secretariat, WHO Framework Convention on Tobacco Control (WHO FCTC), in ensuring full and timely implementation of the work plan adopted by the Conference of the Parties (COP) by mobilizing the necessary funds while protecting its reputation and credibility.
2.	This strategy applies in its entirety to all staff of the Convention Secretariat, regardless of the type or duration of appointment, hereinafter referred to as "staff members".
3.	This policy applies to donations dedicated to the implementation of the work plans adopted by the COP, especially those dependent on extrabudgetary contributions, including to donations that are not earmarked for specific activities and thus could be used by the Convention Secretariat to carry out its general functions (such as communications, advocacy, promoting Convention ratification among non-Parties, technical work for which the need emerges during the implementation of particular decisions of the COP, etc.).

4.	<p>The types of contributions that could be mobilized are as follows:</p> <ul style="list-style-type: none"> <li>– Flexible: Funds that are not dedicated for a specific activity of the work plan adopted by the COP;</li> <li>– Designated: Funds that are donated to be used in a specific area of work or component/activity in the work plan.</li> </ul>
5.	<p>The list of potential donors may include the following groups:</p> <ul style="list-style-type: none"> <li>– Parties;</li> <li>– United Nations organizations;</li> <li>– Nongovernmental organizations (NGOs), including but not limited to those that are accredited as observers to the COP;</li> <li>– Philanthropic foundations;</li> <li>– Private sector entities;</li> <li>– Academic institutions;</li> <li>– Intergovernmental organizations (IGOs) outside the UN system; and</li> <li>– Individuals.</li> </ul>
6	<p>The Convention Secretariat must act in the spirit of Article 5.3 of the Convention and its Guidelines for implementation.</p>
16.	<p>In the absence of specific requirements from the donors for acknowledging contributions, contributions for outputs, outcomes and activities shall usually be acknowledged as follows:</p> <p>“The Secretariat of the WHO Framework Convention on Tobacco Control gratefully acknowledges the financial contribution of [donor’s name] towards [description of the outcome or activity].”</p>
18.	<p>In case of specific requirements from donors for acknowledging donations, the Convention Secretariat should apply those requirements, provided they are in line with internal policies. Should that not be the case, the Convention Secretariat shall approach the donors and agree a mutually agreeable wording of acknowledgment.</p>
23.	<p>The Convention Secretariat will encourage WHO and other IGOs, as well as NGOs and philanthropic foundations, to support Parties in meeting the needs identified through joint needs assessments that are led by the Convention Secretariat, and in other ad-hoc technical assistance that Parties may request.</p>
24.	<p>In addition to resources from non-State actors as outlined in FENSA, extrabudgetary contributions from IGOs (United Nations and non-United Nations) should be considered for activities adopted by the COP in the relevant work plan and budget.</p>
36.	<p>To ensure compliance with the above and applicable WHO policies and rules, letters requesting funds or accepting donations from private sector entities should always be drafted in consultation with the WHO Office of the Legal Counsel.</p>
37.	<p>This strategy is aligned with the Guidelines for implementation of Article 5.3 of the WHO FCTC and WHO guidelines for responding to requests made by the tobacco industry to meet with staff.</p>

38.	The Bureau oversees the implementation of this fundraising strategy and proposes revisions to it. Any future revisions made to FENSA or other relevant WHO policies and procedures shall also be reported to the Bureau for information and consideration of any action that may be needed.
-----	---

(Fifth plenary meeting, 12 November 2016)

**FCTC/COP7(26)      International cooperation for implementation of the WHO FCTC,  
including on human rights**

The Conference of the Parties (COP),

Recognizing the persistent interference by the tobacco industry with implementation of the WHO Framework Convention on Tobacco Control (WHO FCTC) and the entry into force of the Protocol to Eliminate Illicit Trade in Tobacco Products;

Emphasizing the WHO FCTC as an evidence-based treaty that reaffirms the right of all people to the highest attainable standard of health, as well as international precedents for holding transnational corporations accountable for wrongdoing;

Recalling the human rights reflected in the WHO FCTC and acknowledging the relationship between tobacco use and human rights;

Noting the work of the United Nations Human Rights Council's Open-ended Intergovernmental Working Group on Transnational Corporations and Business Enterprises with Respect to Human Rights established by resolution A/HRC/RES/26/9, and the overlap of the Council's work with the spirit of the WHO FCTC;

1. ENCOURAGES Parties to cooperate internationally to address the issue of increased tobacco consumption that is exacerbated by transnational tobacco companies' strategies to enter emerging-market economies, particularly in lower-income countries, by linking the human rights framework and development to tackling the global tobacco epidemic;
2. INVITES the Convention Secretariat to collaborate with existing United Nations mechanisms and processes working on issues of business and human rights in order to protect public health interests from the commercial and other vested interests of the tobacco industry.

(Fifth plenary meeting, 12 November 2016)

**FCTC/COP7(27) Contribution of the Conference of the Parties to achieving the noncommunicable disease global target on the reduction of tobacco use**

The Conference of the Parties (COP),

Recalling its decision FCTC/COP6(16) towards a stronger contribution of the Conference of the Parties to achieving the noncommunicable disease (NCD) global target on the reduction of tobacco use;

Mindful of the various international developments in addressing the global NCD voluntary targets and the implementation of the Political Declaration of the High-level Meeting of the General Assembly on the Prevention and Control of Noncommunicable Diseases;

Welcoming the 2030 Agenda for Sustainable Development, including inter alia, Sustainable Development Goal (SDG) 3 (Ensure Healthy Lives and Promote Well-being for All at All Ages), and reaffirming its specific and interlinked targets, including SDG target 3.4 and SDG target 3.a;

Concerned about the slow progress at the national level in achieving the NCD tobacco use reduction target;

Acknowledging these developments and commitments and recognizing the mandate of the COP as the global governing body that addresses tobacco control within the mandate of the WHO Framework Convention on Tobacco Control (WHO FCTC);

Aware of the United Nations General Assembly high-level review scheduled for 2018 to review progress of implementation of the United Nations Political Declaration on NCDs, and the need for countries to achieve and demonstrate progress in this area;

Stressing the need for close follow-up by COP with its Parties on achieving the global voluntary target of a 30% relative reduction in the prevalence of current tobacco use in people aged 15 years and over, which is in line with the objectives and aims of the WHO FCTC ;

Recalling that the Global Action Plan for Prevention and Control of Noncommunicable Diseases (2013–2020) proposes that WHO Member States may, as appropriate to national contexts, develop and implement a national multisectoral NCD policy and plan taking into account national priorities and domestic circumstances;

**1. CALLS ON Parties,**

- (a) to develop WHO FCTC implementation plans or highlight WHO FCTC implementation within national multisectoral NCD policies and plans as appropriate to Parties national contexts;
- (b) to report, through the Convention Secretariat working in conjunction with the World Health Organization (WHO), to the next COP on efforts to set national tobacco use reduction targets in line with the global voluntary NCD targets and to report on their progress in tobacco use reduction;

**2. REQUESTS the Convention Secretariat:**

- (a) to promote WHO FCTC implementation as an essential and high-impact strategy for achieving SDG target 3.4;

- (b) to follow up on the technical paper, jointly developed with WHO, on the contribution and impact of WHO FCTC implementation on achieving a reduction in the prevalence of current tobacco use, and submit to the eighth session of the COP a report to Parties on developments in this regard;
- (c) to leverage opportunities as a member of the WHO Global Coordination Mechanism on the Prevention and Control of NCDs and the United Nations Interagency Task Force on the Prevention and Control of NCDs, to identify needed actions from COP and from the Convention Secretariat to strengthen efforts towards achieving of the NCD tobacco use reduction target;
- (d) to report to eighth session of the COP on the progress of the work;
- (e) to explore possible engagement with regional intergovernmental organizations;
- (f) to work with the United Nations Development Programme (UNDP), WHO and other partners in the United Nations Development Group (UNDG) to embed support of the implementation of the WHO FCTC throughout Parties' national efforts to achieve the SDGs, including by integrating WHO FCTC implementation in national priorities in the development of the United Nations Development Assistance Frameworks.

(Fifth plenary meeting, 12 November 2016)

**FCTC/COP7(28)      Amendments to the Rules of Procedure of the Conference of the Parties to the WHO FCTC**

The Conference of the Parties (COP),

Recalling that its Rules of Procedure had been adopted at its first session held in 2006 and had been amended during its sixth session held in 2014;

Having considered the proposals contained in document FCTC/COP/7/31;

ADOPTS the proposals for amendments to the Rules of Procedure of the COP contained in the Annex 1 of the present decision.

ANNEX 1

Proposed amendments to the Rules of Procedure

Rule / Issue	Proposed amendment	Rationale
<b>Rule 1</b> Applicability	<u>Insert at the end of the paragraph:</u> “These Rules of Procedure shall apply mutatis mutandis to the Meetings of the Parties of any Protocol if so provided in that Protocol, or if the Meeting of the Parties to that Protocol so decides.”	To align the RoP with Article 33.4 of the Protocol to Eliminate Illicit Trade in Tobacco Products, and to provide a legal basis for application of the RoP to Meetings of the Parties (MoPs) of future Protocols to the WHO FCTC.
<b>Rule 2.10</b> Definition of “public sessions or meetings”	<u>Amend as follows (new language in bold print):</u> “public” sessions or meetings means sessions or meetings that are open to attendance by Parties, States and regional economic integration organizations that are not Parties, the Secretariat, intergovernmental and nongovernmental organizations accredited by the Conference of the Parties pursuant to <b>Rules 30 and 31, respectively</b> , and members of the public;”	To provide a legal basis for attendance at public sessions by IGOs (Rule 30) as well as NGOs (Rule 31), thus aligning this Rule with Rule 2.11 on “open” sessions or meetings. The current wording refers only to Rule 31.
<b>Rule 4.5</b> Timing of extraordinary sessions of the COP	<u>Amend as follows (new language in bold print):</u> “Extraordinary sessions held at the written request of a Party shall take place not more than <b>ninety</b> days after the date at which the request is supported by at least one third of the Parties in accordance with paragraph 3 above.”	To stipulate the same time line for extraordinary as for regular sessions, in accordance with a common approach in treaties and international organizations (also followed by the World Health Assembly (WHA), Rule 2 of the RoP).
<b>Rule 5</b> Deadline for notification of the date and venue of COP sessions	<u>Amend as follows (new language in bold print):</u> “The Secretariat shall notify all Parties of the dates and venue of <b>regular and extraordinary sessions at least sixty days in advance.</b> ”	To stipulate the same deadline for regular and extraordinary sessions, in accordance with a common approach in treaties and international organizations.
<b>Rule 21</b> Terms of office	<u>New paragraph 3bis:</u> “No Party shall be represented on the Bureau for more than two consecutive terms, unless the Parties of the relevant WHO Region decide otherwise.”	To encourage rotation within each Region while providing flexibility in this respect, also ensuring consistency with Rule 28.1 on terms of office

		for members of subsidiary bodies.
<b>Rule 24.1</b> Officers unable to complete their term	<u>Insert at the end of the paragraph:</u> “If no representative from the same Party can be identified, a representative of a Party from the same WHO Region shall be designated.”	To provide increased flexibility through the option of designating a representative of the same region rather than the same Party to replace a member of the Bureau who is unable to complete his/her term of office.
<b>Rule 24 quinquies (new)</b> Committees of the COP	<p><u>Insert after Rule 24 quater:</u></p> <p>“COMMITTEES OF THE CONFERENCE OF THE PARTIES</p> <p>Rule 24 quinquies</p> <ol style="list-style-type: none"> <li>The committees of the Conference of the Parties shall be: <ol style="list-style-type: none"> <li>Committee A, generally entrusted with work on treaty instruments and technical matters</li> <li>Committee B, generally entrusted with work on reporting, implementation assistance, international cooperation, and institutional and budgetary matters</li> </ol> <p>In addition to these two committees, the Conference of the Parties may establish other committees as it may consider necessary.</p> </li> <li>Each delegation shall be entitled to be represented on each committee by one or more of its representatives and advisers.</li> <li>At the beginning of each session, the plenary, at the recommendation of the Bureau, shall allocate items of the agenda to the two committees in such a way that they thematically group the issues and ensuring a proper balance in the work.</li> </ol>	<p>The negotiating history of the RoP of the COP to the WHO FCTC shows that the section on subsidiary bodies (Rules 25–28) is based on the corresponding sections of the RoP of a number of treaties addressing subsidiary bodies that are separate from the COP, established by the COP to develop a particular aspect of its work through dedicated meetings, with their own mandate, budget, work plan, and Bureau. This interpretation is supported by the wording of Rules 25–28<sup>1</sup>.</p> <p>The COP to the WHO FCTC has from the outset conducted its work in two committees. Unlike subsidiary bodies, these are part of the working arrangements of the COP. The committees are not currently addressed in the RoP.</p> <p>The purpose of the proposed amendment is to introduce a set of rules adapted to and applying explicitly to the committees of the COP. The proposed language takes into account the relevant sections of the RoPs of the WHA</p>

<sup>1</sup> For example, Rule 25.2 addresses the “mandate, objectives, duration and budget” of subsidiary bodies, and thus clearly refers to bodies separate from the COP. Rule 27.1 provides that the COP “shall decide on the dates and venue of the sessions of the subsidiary bodies”, with the option of holding them “in parallel with” the sessions of the COP.

	<p>Thereafter, the Bureau, at the recommendation of the chairpersons of the committees, may make adjustments as required.</p> <p>4. Each committee shall elect a chairperson and two vice-chairpersons, with due regard to representation of each WHO region. The Bureau shall facilitate the process for nominations in this respect.</p> <p>5. The chairpersons shall have, in relation to the meetings of the committee concerned, the same powers and duties as the President of the Conference of the Parties in relation to plenary meetings.</p> <p>6. The meetings of the committees shall be held in public unless the committee concerned decides that they shall be open or restricted. This rule shall be implemented in accordance with Article 5.3 of the Convention.</p> <p>7. <b>Subject to any decision of the Conference of the Parties</b></p> <p>The procedure governing the conduct of business and voting by the committees shall conform mutatis mutandis to the rules relative to the conduct of business and voting in plenary meetings.</p> <p>8. Each committee may establish such drafting groups as it considers necessary. The Chairperson of each drafting group shall apply the rules applicable to committees to the work of such drafting groups only insofar as he or she considers it advisable with a view to expediting the dispatch of business.”</p>	<p>(Rules 32–39; 83–84), as well as the existing practice of the COP with regards to its committees.</p>
<b>Rule 60</b>	<p><u>Replace the current language with the following:</u> “Verbatim records of plenary meetings of the Conference of the Parties and reports of each session of the Conference of the Parties and each session of its subsidiary bodies shall be made in the six working languages. Reports shall reflect the proceedings</p>	<p>As part of the efficiency measures adopted by decision FCTC/COP 5(19), the summary records of the committees were replaced, starting at COP 6, by a meeting report adopted at the end of the sessions of the</p>

	and incorporate any decisions and resolutions and shall be prepared by the Rapporteur with the support of the Secretariat, and provisionally adopted before the close of the session.”	COP and its subsidiary bodies, while the verbatim report of the plenary session was retained. Rules 60 and 62–64 do not currently reflect this change of practice, nor do they reflect the difference between public, open and restricted sessions as defined in Rules 2.10–2.12. They also fail to define the function of the Rapporteur.  The proposed amendments are intended to rectify these inconsistencies.
<b>Rule 62</b>	<u>Replace the current language with the following:</u> The provisional version of the reports referred to in rule 60 shall be sent as soon as possible to delegations, who shall inform the Secretariat in writing not later than fifteen days after the date of receipt of any corrections they wish to have made.	
<b>Rule 63</b>	<u>Replace the current language with the following:</u> “As soon as possible after the close of a public or open session or meeting, the Secretariat shall transmit the report to all Parties and observers. The reports of restricted meetings shall be transmitted to the participants only.”	
<b>Rule 64</b>	<u>Replace current language with the following:</u> “The reports of all public and open sessions or meetings and verbatim records of plenary meetings of the Conference of the Parties shall be published.”	

(Fifth plenary meeting, 12 November 2016)

## **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<sup>1</sup>, 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 the framework for post-2015 development financing<sup>2</sup>, 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 Noncommunicable Diseases<sup>3</sup>, 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;

---

<sup>1</sup> Resolution A/RES/70/1, 2015.

<sup>2</sup> Resolution A/RES/69/313, 2015, paragraph 32 .

<sup>3</sup> Resolution A/RES/66/2, 2014.

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;
  - (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)

**FCTC/COP7(30)      Election of the President and the five Vice-Presidents of the Conference of the Parties to the WHO FCTC**

The Conference of the Parties (COP), pursuant to Rule 21 of its Rules of Procedure,

1. ELECTS the following officers to constitute the Bureau of the COP:

President:	Mr Chandra Kishore Mishra (India)
Vice-Presidents <sup>1</sup> :	Dr Reina Roa (Panama)
	Mr Cedric Alependava (Solomon Islands)
	Dr Vinyo Kodzo Kumako (Togo)
	Dr Jawad Al-Lawati (Oman)

---

<sup>1</sup> In accordance with Rule 24 of the Rules of Procedure of the Conference of the Parties to the WHO Framework Convention on Tobacco Control, lots were drawn to determine the order in which the Vice-Presidents would serve in the place of the President. The order presented in this list is the order in which the lots were drawn.

Mr Kari Paaso (Finland)

2. DECIDES that, of the five Vice-Presidents, the following should act as Rapporteur<sup>1</sup>:

Rapporteur: Dr Vinyo Kodzo Kumako (Togo)

(Fifth plenary meeting, 12 November 2016)

**FCTC/COP7(31)      Date and place of the eighth regular session of the Conference of the Parties to the WHO FCTC**

The Conference of the Parties (COP),

Taking into account Article Rule 3 of the Rules of Procedure, which provides that the sessions of the Conference of the Parties shall be held at the seat of the Secretariat, unless the Conference of the Parties decides otherwise;

Considering also that the first session of the Meeting of the Parties (MOP1) to the Protocol to Eliminate Illicit Trade in Tobacco Products (the Protocol) shall be held immediately before or immediately after the next regular session of the Conference of the Parties following the entry into force of the Protocol, in accordance with Article 33.1 of the Protocol;

Considering that the following options for possible dates have been proposed for the convening of the eighth session of the Conference of the Parties (COP8):

Option A: 26 November–1 December 2018

Option B: 1–6 October 2018

1. DECIDES that COP8 will be held at the seat of the Secretariat in Geneva;
2. REQUESTS the Bureau, in consultation with the Secretariat, to determine the dates of COP8;
3. ALSO REQUESTS the Bureau, in consultation with the Secretariat, to determine the dates of MOP1 to be held either immediately before or immediately after COP8, subject to entry into force of the Protocol in accordance with its Article 45.

(Fifth plenary meeting, 12 November 2016)

---

<sup>1</sup> A lot was also drawn to determine which Vice-President would act as Rapporteur.