Reports of NGO observers to COP 2018 ====================================
Section: Contact Details
* Name of organization  * World Federation of Public Health Associations (WFPHA)
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* Email:  * communications@wfpha.org
Section: General Information
* Please indicate if your organization would like to retain it's status as observer to the Conference of the Parties  * Yes
* Does your organizations mission statement specifically refer to tobacco control?  * No
* If yes, please specify:  *
* Does your organization have regional branches to enhance activities in different regions or groups of countries?  * Yes
* If yes, please provide details:  * The M/ERHA's membership includes over 100 national public health associations (NRHA), as well as

<sup>\*</sup> The WFPHA's membership includes over 100 national public health associations (NPHA), as well as regional and national associations of Schools of Public Health, regional public health association alliances and networks (such as the European Public Health Association and the Alliance of Public Health

Associations in the Americas), and also non-governmental institutions and organizations with an interest in or which are active in the field of public health.

Many NPHAs have groups or branches specifically addressing tobacco control or collaborate with branches to support tobacco control activities and the adoption/application of the FCTC Articles. As one example, the Indonesian PHA has four branches that have special boards to address tobacco control (Tobacco Control Support Centre Outpost in Semarang, Pomtianak, Surabaya, and the Bali Tobacco Control Initiative). Other NPHAS have committees, special interest groups, working groups and other similar organisational arrangements to ensure a continuing focus on tobacco control. Many NPHAs are also members of larger tobacco control coalitions or consortiums. For example, the Canadian Public Health Association (CPHA) houses since mid-2017 the Canadian Coalition on Tobacco Control. The CPHA liaises closely with the Provincial and Territorial PHAs in Canada (all of which are independent associations in their own right) and supports their respective efforts in tobacco control. For example, the Association pour la sant? publique du Qu?bec, which houses the Coalition qu?b?coise pour le contr?le du tabac (CQCT), has lead in Qu?bec in that province's litigation against tobacco companies. The Vietnam PHA has 10 provincial PHAs, which the VPHA works in collaboration to support tobacco control laws and activities.

The American PHA has 54 state affiliates that are independently established organizations with their own infrastructure, policies, processes and procedures. Most if not all affiliates have tobacco as a legislative priority and have engaged in advocacy efforts either directly or indirectly (i.e. under health promotion and disease prevention). Many of its state-level affiliates engage members on tobacco related issues through their own annual meetings, programs, and webinars Similarly, the Public Health Association of Australia is very active on tobacco control nationally, and also has branches in each of the eight states and territories that play an active role in tobacco control at the jurisdictional level as well as contributing to the national effort. The PHAA is further a leading member of coalitions at both national and state/territory levels.

It should be stressed that the above are examples only to illustrate the nature of the work undertaken by many NPHAs.

Several of the regional alliances of public health associations include tobacco control as an area of interest and/or are involved in tobacco control efforts on a continental basis. For example, the Sociedad Cubana de salud publica not only houses the secretariat for the Alliance of Public Health Associations in the Americas; it also is very active in tobacco control in Cuba, and works closely with NPHAs in several countries of the Americas to advocate for the application of the FCTC Articles.

\* Does your organization regularly convene meetings or conferences for its membership?

\* Yes

\* If yes, is tobacco control covered in these meetings?

\* Yes

- \* If yes, please provide details:
- \* The WFPHA convenes every three years the World Congress on Public Health (WCPH), where health researchers and practitioners from the around the world gather to share ideas and experiences. The goal is to facilitate and promote and generate knowledge and skills exchange as a means to improve public health policy and practice nationally, regionally and globally. The 15th WCPH, held in Melbourne

(Australia) in April 2017, was hosted by the Public Health Association of Australia, in cooperation with several Australian health sector organizations and government agencies. The Congress provided space for several concurrent oral sessions and poster presentations on various aspects of tobacco control. Dr. Bronwyn King, CEO of Tobacco Free Portfolios, was a keynote speaker at the Congress, and Prof Mike Daube, a leading tobacco control researcher and advocate in Australia and globally (and co-chair of the WFPHA's Tobacco Control Working Group) received the prestigious Hugh Leavell Award for Outstanding Global Health Leadership, the WFPHA's highest distinction, in recognition of his contribution to global tobacco control.

As well, the WFPHA Tobacco Control Working Group (TCWG), which exists since 1998, held a meeting during the 15th WCPH. The TCWG is in the process of developing a program of action for he coming years. During the 2017 meeting, the participants identified several possible future activities for the TCWG. As part of the program, in October 2017, the TCWG, through the WFPHA's Geneva office, sent out a questionnaire to all Full Member NPHAs in good standing, asking them to identify tobacco control contacts and possible members of the WFPHA TCWG. This information was collated in November 2017, and the new TCWG was launched in January 2018, comprising representatives from 16 national public health associations, regional public health alliances and other WFPHA member organizations, with tasks including (1) prepare a full report to the FCTC Secretariat for COP7 (Geneva 2018); (2) strengthen organizational linkages with the FCTC Alliance (both at the global and national levels), and (3) plan for a significant focus on tobacco control both overall and within the program of the 16th World Congress (Rome, 12-17 October, 2020).

The Public Health Association of South Africa was a member of the national consortium that bid successfully and hosted the 17th World Conference on Tobacco or Health (7 - 9 March 2018: Capetown, SA). Dr. Flavia Senkubuge, one of this conferences lead organizers and hosts, is a member of the WFPHA Tobacco Control Working Group. The national PHAs in Canada, Australia, Uganda, Ethiopia, Vietnam, Indonesia, the United States of America, and the European Public Health Association regularly provide space for and host oral presentations and keynote speakers on various aspects of tobacco control.

Many WFPHA member organisations (NPHAs and others organise national conferences which include a specific focus on tobacco - there are examples from many countries.

Section: Participation in WHO FCTC meetings and contributions to other tobacco control related events

In May 2016, James Chauvin, Co-chair of the WFPHA Tobacco Control Working Group, met with Dr. Vera da Costa y Silva, Head, WHO FCTC Secretariat, to identify how the WFPHA and public health associations could support the efforts of the WHO FCTC Secretariat and the implementation of the FCTC, and as well to seek a close collaborative effort between WFPHA and the WHO FCTC Secretariat.

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<sup>\*</sup> Please indicate the meetings organized by the Convention Secretariat at which your organization was represented (sessions of the Conference of the Parties, meetings of intersessional groups, NGO meetings, etc.):

<sup>\*</sup> In November 2016 the WFPHA was represented at the COP7 by 2 representatives from ABRASCO, Brazil's national PHA. In addition to participating at the COP7, the Brazilian members attended two side events to present: 1) a proposal to develop a protocol to monitor tobacco famers' health and the environmental consequences of tobacco (Nov 9) and 2) the Brazilian Observatory on Tobacco Industry Strategies as a model of a knowledge hub on preventing tobacco industry interference.

- \* Please list any other meetings or conferences with a focus on tobacco control attended by your organization:
- \* Representatives of WFPHA and member PHAs and organizations have attended many tobacco control meetings and conferences, including the 17th World Conference on Tobacco or Health in Cape Town. The WFPHA President, Michael Moore, has been an active participant in many conferences events and meetings around the world that have enabled him to support and ensure a strong continuing focus on tobacco control, as have the TWG co-chairs, James Chauvin and Professor Mike Daube, and other WFPHA members. Involvement in such events is a regular and continuing component of the WFPHA's work.

Section: Your organization's activities to support implementation of the WHO FCTC:

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- \* Article 5 (General obligations)?
- \* Yes

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- \* If yes, please provide details:
- \* Both the WFPHA and its member organizations, particularly NPHAs in many countries, have advocated very strongly over several years for implementation of the WHO FCTC. This work has entailed activity by the WFPHA and NPHAs in relation to:
- Overall support and implementation
- Action at different times on many specific Articles (including 5, 6, 8, 9, 11, 12, 13, 14, 15, 16, 17, 19, 20, 22.
- Specific action also through both WFPHA and NPHAs on Article 5.3
- Action on new and emerging threats to the Convention, for example e-cigarettes and other novel tobacco and related products, "corporate social responsibility" activities, expansion of marketing and sales in LMICs, establishment of new industry-funded, and others.

In accordance with their roles, WFPHA, NPHAs and other member organisations have further been active in relation to Articles 20 and 22. The work of WFPHA and its member organisations is particularly well suited to facilitating and leading research, surveillance and exchange of information in tobacco control through mechanisms such as hosting, sponsoring, and organizing annual public health conferences; operating scientific and peer-reviewed public health journals, which often include articles on tobacco control and smoking; health digest bulletins or publications; publishing media releases or providing comments and expertise as part of media or news announcements and coverage on tobacco control, good exchange of information among practitioners and researchers, and ensuring that decision-makers are kept well informed on key issues in tobacco control.

It should further be noted that the work of both WFPHA and NHPAs has taken place both by the organisations themselves and in collaboration and coalitions with other relevant health organizations. For example, with respect to Article 11, The Canadian Public Health Association (CPHA) continued its advocacy to the federal government to strengthen legal measures related to plain packaging and labelling of tobacco products. It as well used its long-standing experience with the development of policies and best practice related to the FCTC, using lessons learned from this experience to advocate on policy matters relating to the proposed legalization of cannabis in Canada. For Article 12, Indian Public

Health Association conducted a survey among the medical students on smoking and as well instituted a no-smoking policy for all of the association's meetings and offices (national and sub-national). The Vietnam Public Health Association contributed to build up a smoke-free generation. The VPHA, through a grant from the International Union Against Tuberculosis and Lung Disease, is conducting a study to demonstrate the effectiveness and efficiency of replicating its pilot initiative to all VPHA provincial chapters and share its experiences internationally. The initiative focused on capacity strengthening at the provincial level's highest leadership including parliamentary delegates.

One of the most important functions of a public health association is to facilitate and lead research, surveillance and exchange of information in tobacco control. This is done through three mechanisms: hosting, sponsoring, and organizing annual public health conferences; operating a scientific and peerreviewed public health journal, which often includes articles on tobacco control and smoking; health digest bulletins or publications; and publishing press releases or providing comments and expertise as part of media or news announcements and coverage on tobacco control. For example, at the 28th annual scientific conference of the Ethiopian Public Health Association held 19-22 February 2017, one of the panel sessions addressed was the public health readiness to contain NCDs and the magnitude of risk factors for Non-communicable diseases. As part of this session, tobacco control related matters have been widely discussed. There were also research findings disseminated including on tobacco use and its determinants in Ethiopia both at the 28th (19-22 February 2017) and 29th (26-28 March 2018) EPHA annual conferences. SESPAS, the national public health association of Spain, organizes its national conference every 2 years in cooperation with the Spanish Epidemiological Society (SEE). In the most recent conference, that took place in Barcelona in September 2017, a spontaneous table and 28 oral presentations focusing on tobacco where selected by the Scientific Committee. SESPAS is also a member of CNPT - Comit? Nacional para la Prevenci?n del Tabaquismo (Spanish Committee on Tobacco Control). CNPT organizes a national conference every year.

\* Article 6 (Price and tax measures to reduce demand for tobacco)? \* Yes \* If yes, please provide details: \* See above \* Article 8 (Protection from exposure to tobacco smoke)? \* Yes -----\* If yes, please provide details: \* See above \* Article 9 (Regulation of the contents of tobacco product) and/or Article 10 (Regulation of tobacco product disclosures)? \* Yes \* If yes, please provide details: \* See above \* Article 11 (Packaging and labelling of tobacco products)? \* Yes

* If yes, please provide details:  * See above
* Article 12 (Education, communication, training and public awareness)?  * Yes
* If yes, please provide details:  * See above
* Article 13 (Tobacco advertising, promotion and sponsorship)?  * Yes
* If yes, please provide details:  * See above
* Article 14 (Demand reduction measures concerning tobacco dependence and cessation)?  * Yes
* If yes, please provide details:  * See above
* Article 15 (Illicit trade in tobacco products)?  * Yes
* If yes, please provide details:  * See above
* Article 16 (Sales to and by minors)?  * Yes
* If yes, please provide details:  * See above
* Article 17 (Provision of support for economically viable alternative activities) and/or Article 18 (Protection of the environment and the health of persons)?  * Yes
* If yes, please provide details:  * See above
* Article 19 (Liability)?  * Yes
* If yes, please provide details:  * See above
* Article 20 (Research, surveillance and exchange of information)?  * Yes

* If yes, please provide details:  * See above
* Article 22 (Cooperation in the scientific, technical and legal fields and provision of related expertise)?  * Yes
* If yes, please provide details:  * See above
Section: Other relevant activities to support the work of the WHO FCTC
* Please provide any other relevant information:  * WFPHA remains very strongly committed to supporting the WHO FCTC at all levels, and views this as a core part of its activities.
James Chauvin, one of the WFPHA TCWG co-chairs, sits on the 16th WCPH International Organizing Committee, will ensure that tobacco control is included as a theme within the Congress' scientific program and will link with the FCTC Secretariat to encourage it to participate in the planning of tobacco control-related events at the next World Congress.
As mentioned earlier in this report, the WFPHA is in the process of re-invigorating its Tobacco Control Working Group. This WG now has membership from representatives of 16 national and regional public health associations. This year, 2018, will be a critical one in which it defines a new multi-year work plan. Being accredited to and participating in the COP 2018 will be an important element in this work plan.
* Please attach any other relevant file(s)
Section: Declarations
* Please confirm that your organization does not receive, has not received and will not receive in the future, either directly or indirectly, any financial or other contributions or assistance from the tobacco industry or its affiliates. Please also confirm that neither your members nor your partners are affiliated.

future, either directly or indirectly, any financial or other contributions or assistance from the tobacco industry or its affiliates. Please also confirm that neither your members nor your partners are affiliated directly or indirectly with the tobacco industry or its affiliates or those furthering the interests of the tobacco industry.

\* Yes

\* By electronic signature I confirm that the above information is accurate and completed to the best of our abilities.

\* Michael Moore, WFPHA President

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\* Please confirm that the activities of your organization are in conformity with the 17th and 18th preambular paragraphs and Article 5.3 of the WHO FCTC.

\* Yes

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