WHO FRAMEWORK CONVENTION ON TOBACCO CONTROL

SECRETARIAT

Needs assessment for the implementation of the WHO Framework Convention on Tobacco Control in Armenia

Participants at the virtual stakeholders' meeting

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Table of abbreviations and acronyms

COP	Conference of Parties
EAEU	Eurasian Economic Union
EEC	Eurasian Economic Commission
DHS	Demographic and Health Survey
GSHS	Global School-based Student Health Survey
GHPSS	Global Health Professions Student Survey
GSPS	Global School Personnel Survey
GYTS	Global Youth Tobacco Survey
MOF	Ministry of Finance
MOH	Ministry of Health
NCD	Non-Communicable Diseases
NIH	National Institute of Health
NGO	Non-Governmental Organization
RA	Republic of Armenia
STEPS	WHO STEPwise Approach to Surveillance
SDG	Sustainable Development Goal
TC	Tobacco Control
TQS	The Tobacco Questions for Surveys
UK	United Kingdom
UN	United Nations
UNDAF	United Nations Development Assistance Framework
UNDP	United Nations Development Programme
UNFPA	United Nations Population Fund
VAT	Value Added Tax
WHO	World Health Organization
WHO FCTC	WHO Framework Convention on Tobacco Control

The WHO FCTC

- The WHO Framework Convention on Tobacco Control (WHO FCTC) was developed in response to the globalization of the tobacco epidemic and is an evidence-based treaty that reaffirms the right of all people to the highest standard of health.
- The objective of the Convention is "to protect present and future generations from the devastating health, social, environmental and economic consequences of tobacco consumption and exposure to tobacco smoke", by implementing demand-reduction measures as well as supply-side strategies to achieve this end.
- The Conference of the Parties (COP) is the decision-making body of the Convention.
- The Secretariat of the WHO FCTC (Convention Secretariat) was established to support the implementation of the Convention in accordance with Article 24 of the WHO FCTC.

The needs assessment exercise

- The first session of the COP (COP 1) in February 2006, called upon developing country Parties and Parties with economies in transition to conduct needs assessments in light of their total obligations related to the implementation of all provisions of the Convention and to communicate their prioritized needs to development partners (decision FCTC/COP1(13)).[1]
- The needs assessment is an exercise undertaken jointly with a government to identify gaps in the objectives to be accomplished under the WHO FCTC and the resources available to accomplish them.
- A WHO FCTC needs assessment was requested by the Government of the Republic of Armenia, through the Ministry of Health.
- The Convention Secretariat led an international team to conduct a joint needs assessment with the host government from 13 to 21 July 2020. Virtual meetings with local stakeholders took place to jointly review the status of implementation of the Convention. The needs assessment team had virtual meetings with representatives of the government agencies, representatives of legislative bodies, members of the international team and non-governmental organizations to identify the main challenges in implementation of the national tobacco control action plan.
- Post-needs assessment assistance can be provided to the Parties that have conducted needs assessments, based on the reports and priorities identified. For Armenia, post-needs assessment support is being provided by the Convention Secretariat through the FCTC 2030 project. The FCTC 2030 project is generously funded by the Governments of Australia, Norway and the United Kingdom.

[1]See COP/1/2006/CD, *Decisions and ancillary documents*, available at: https://apps.who.int/gb/fctc/PDF/cop1/cop1_06_cd_decisionsdocumentsauxiliaires-en.pdf

Armenia: key data

Adult tobacco use

STEPS Armenia 2016

- Among daily cigarette smokers, men smoked an average of 24.6 sticks a day and women an average of 17.4 sticks.

Tobacco use	Both sexes (18-69 years)	Men (18-69 years)	Women (18-69 years)
Current tobacco smokers	27.9	51.5	1.8
Daily tobacco smokers	26.9	49.9	1.6
Current smokeless tobacco users	0.3	0.5	-
Daily smokeless tobacco users	0.1	0.3	0.1
Former tobacco users (smoked and /or smokeless)	7.9	14.2	0.9
Never tobacco user (smoked and/or smokeless)	64.2	34.1	97.3

2015-2016 Health System Performance Assessment (HSPA)

- Prevalence of daily smoking in 15 and older population of Armenia was 26.2% (53.4% for men and 2.3% for women)

Armenia Demographic and Health Survey 2015-16

- Current cigarette smoking in men aged 15-49 – 61.4%
- Current cigarette smoking in women aged 15-49 – 1.2%

Youth tobacco use

Health behavior in school aged children in Armenia 2017/2018

- Within last 30 days, cigarette smoking was reported by 1.3% of 11-year-old boys, 3.5% of 13-year old boys, 4.4% of 15-year-old boys, 5% of 17-year-old boys and only by 6 girls.
- 8% of 17-year-boys and 3.5% of girls smoked at least once in their lives.

Armenia Demographic and Health Survey 2015-16

- Percentage of girls aged 15-19 who smoke cigarettes – 0.1%
- Percentage of boys aged 15-19 who smoke cigarettes – 15.5%

GYTS 2009

- 19.1% of students surveyed had ever smoked cigarettes (Boys = 30.0%, Girls = 9.9%)
- 7.3% of students surveyed currently use any tobacco product (Boys = 10.9%, Girls = 4.3%)
- 3.3% of students surveyed currently smoke cigarettes (Boys = 6.1%, Girls = 1.0%)

Exposure to tobacco smoke

STEPS Armenia 2016

- 26.6% of adults were exposed to tobacco smoke at the workplace (31.8% of men and 20.6% of women)
- 56.4% of adults were exposed to tobacco smoke at home (58.4% of men and 54.1% of women)

Reece S, Morgan C, Parascandola M, Siddiqi K. Secondhand smoke exposure during pregnancy: a cross-sectional analysis of data from Demographic and Health Survey from 30 low-income and middle-income countries. Tob Control. 2019 Jul;28(4):420-426.

- An estimated 73% of pregnant women in Armenia are exposed to daily second-hand smoke.

GYTS 2009

- 70.6% of students surveyed live in homes where others smoke in their presence
- 78.3% have been exposed to smoke in places outside their home
- 86.0% think smoking should be banned from public places
- 64.1% have one or more parents who smoke
- 7.2% have most or all friends who smoke

Tobacco initiation and susceptibility

STEPS Armenia 2016

- Among smokers, the mean age of initiation was 18.1 years (17.9 years for men and 26.2 years for women).

GYTS 2009

- 44.9% of ever smokers initiated smoking before the age of 10 (Boys = 40.4%, Girls = 57.3%)

Sale to minors

GYTS 2009

- 61.7% of current youth smokers bought cigarettes in a store
- 75.2% who bought cigarettes in a store were not refused purchase because of their age

Education, communication and awareness

STEPS Armenia 2016

- 42.7% of adults noticed anti-cigarette smoking information on television in the past 30 days (41.5% of men and 43.9% of women)
- 24.9% of adults noticed anti-cigarette smoking information in newspapers or magazines in the past 30 days (23.8% of men and 26.0% of women)
- 8.9% of adults noticed anti-cigarette smoking information on radio in the past 30 days (10.6% of men and 6.9% of women)

GYTS 2009

- 99.5% of students surveyed saw anti-smoking media messages in the past 30 days
- 64.1% had been taught in class about the dangers of smoking in the past year
- 71.5% think smoke from others Is harmful to them

Tobacco advertising, promotion and sponsorship

STEPS Armenia 2016

- 16.0% of adults noticed cigarette marketing in retail outlets in the past 30 days (18.4% of men and 13.3% of women)
- 14.0% of adults noticed any cigarette promotions in the past 30 days (20.0% of men and 7.1% of women)

GYTS 2009

- 74.6% of students surveyed saw pro-cigarette ads at point of sale in the past 30 days
- 50.2% of students surveyed saw pro-cigarette ads in newspapers or magazines in the past 30 days

Desire to stop smoking

STEPS Armenia 2016

- 34.5% of current smokers tried to stop smoking in the last 12 months (34.0% of men and 47.8% of women)
- 29.5% of current smokers were advised by a healthcare provider to stop smoking in the last 12 months (29.2% of men and 39.0% of women)
- 28.3% of current smokers thought about quitting because of a warning label (28.4% of men and 22.1% of women)

GYTS 2009

- 57.7% of current smokers want to stop smoking
- 78.7% tried to stop smoking during the past year
- 82.0% have ever received help to stop smoking
- 22.7% always have or feel like having a cigarette first thing in the morning

Tobacco control milestones in Armenia (1996 – 2020)

1996	30 April 1996: Law of the Republic of Armenia "On Advertising"
2000	24 March 2000: Law of the Republic of Armenia "On Fixed Payments for Tobacco Products." (No longer in effect.)
2004	29 November 2004: Armenia acceded to the WHO FCTC 24 December 2004: Law of the Republic of Armenia "On Restrictions on the Sale, Consumption and Use of Tobacco" (No longer in effect.)
2005	27 February 2005: The WHO FCTC entered into force in Armenia
2007	18 August 2007: Decision No. 843-N by the Government of the Republic of Armenia on the License Requirements to Sell Alcohol and Cigarettes in Public Catering Facilities
2015	5 March 2015: Decision No. 219 by the Government of the Republic of Armenia on the Approval of the Technical Regulations on Tobacco Safety and Declaring Ineffective Decision No. 540 of the Government of the Republic of Armenia dated 28 April 2005
2016	15 May 2016: Eurasian Economic Commission Technical Regulations for Tobacco Products (CU TR 035/2014) entered into force [1]
2017	Tobacco Control Strategy for the years 2017–2020 and the related Action Plan
2020	13 February 2020: Law on Reduction and Prevention of the Damage Caused to Health by the Use of Tobacco Products and Substitutions for Them Law on Making Amendments and Supplements to the Code on Administrative Offences of the Republic of Armenia Law on Making Amendments in the Law "On Local Duties and Payments" Law on Making Amendments in the Law "On Advertising" Law of the Republic of Armenia on Making Amendments and Supplements in the Law of the Republic of Armenia "On the Local Self-Government" Tobacco Control Unit was created at the National Institute of Public Health

[1] Decision No. 107 of the Council of the Eurasian Economic Commission dated 12 November 2014 adopted the "Technical Regulations for Tobacco Products". Decision No. 18 of the Eurasian Economic Commission dated 17 March 2016 implements paragraph 27 of the "Technical Regulations for Tobacco Products" and regulates the format and position of picture and text warnings, as well as the images to be used, on tobacco product packaging. Pursuant to EEC Council Decision No. 209 of 18 December 2018, the effective date of the Technical Regulations has been delayed to 1 January 2024 for Armenia.

Executive summary
including key findings & recommendations

The WHO Framework Convention on Tobacco Control (WHO FCTC) is the first international health treaty negotiated under the auspices of WHO and was adopted in 2003. It has since become one of the most widely and rapidly embraced treaties in the history of the United Nations, with 182 Parties to date[1].

Armenia acceded to the WHO FCTC on 29 November 2004 and the Convention entered into force for Armenia on 27 February 2005. A needs assessment exercise for implementation of the WHO FCTC was conducted jointly by the Government of Armenia, the Secretariat of the WHO FCTC (Convention Secretariat), the World Health Organization (WHO) and the United Nations Development Programme (UNDP) virtually from 13 to 21 July 2020. The assessment involved relevant ministries and agencies of the Government of Armenia, as well as representatives of civil society and academia (see Annex 1).

This needs assessment report presents an article by article analysis of the progress the country has made in implementation of the WHO FCTC; the gaps that may exist and the possible actions that can be taken to fill those gaps. The key elements that need to be put in place to enable Armenia to fully meet its obligations under the Convention are summarized below. Further details are contained in the report itself.

First, the WHO FCTC is an international treaty and therefore international law. Having acceded to this treaty, Armenia is obliged to implement its provisions through national laws, regulations and other measures. There is therefore a need to identify all obligations in the substantive articles of the Convention, link them with the relevant ministries and agencies, avail the required resources and seek support internationally where appropriate.

Second, the Convention requires Parties to develop, implement, periodically update and review comprehensive multisectoral national tobacco control strategies, plans and programmes in accordance with the Convention. The Government of Armenia shows a high level of commitment to tobacco control. Tobacco control is a priority in the overall health policy, the Programme and Action Plan for Controlling the Most Common Noncommunicable Diseases 2016-2020, as well as the Strategy on Promoting healthy Lifestyle 2017-2020. The Ministry of Health (MoH) of Armenia through its National Institute of Health (NIH) has a comprehensive National Tobacco Control Strategy and Action Plan 2017-2020. Armenia is **recommended** to (a) develop the next comprehensive multisectoral tobacco control strategy and plan of action taking into consideration provisions of the new tobacco control law, recommendations in this needs assessment report and the WHO FCTC and its guidelines for implementation; (b) build Parliamentary support for sufficient budget allocation for implementation of the tobacco control action plan and new legislation; and (c) include implementation of the WHO FCTC in relevant strategies and policy documents.

Third, Parties are called to establish a multisectoral coordination mechanism or focal point for tobacco control. The NIH serves as the national tobacco control focal point and there is no formal multisectoral coordination mechanism. It is therefore **recommended** that Armenia establish a multisectoral coordinating mechanism for tobacco control to strengthen intersectoral

[1] https://treaties.un.org/pages/ViewDetails.aspx?src=TREATY&mtdsg_no=IX-4&chapter=9&clang=_en

cooperation for WHO FCTC implementation or ensure sustainability of focal points for tobacco control.

Fourth, Armenia has successfully passed a national tobacco control law in February 2020 that address the obligations under the Convention in a comprehensive way. There are some legal provisions that are to come into force and additional ones that could be included in the legislation to bring Armenia closer to full alignment with the WHO FCTC. Some priority areas are related to WHO FCTC Articles 5.3, 8, 9 and 10, 11, 13 and 15. It is **recommended** that Armenia consider further strengthening the tobacco control legislation, ensure effective enforcement with clear roles and responsibilities, and promote compliance.

Fifth, following the adoption of the 2020 national tobacco control law, it is **recommended** that Armenia continue to raise awareness about the law and its key provisions through different media at both national and district levels to clarify how it will be implemented and to promote compliance.

Sixth, Armenia currently does not have a policy or a Code of Conduct to guide civil servants and government agencies on dealings with the tobacco industry. It is therefore **recommended** that the MoH raise awareness among other agencies on the protection of public health policy from the vested interests of the tobacco industry; to include obligations under Article 5.3 in the tobacco control legislation; and to formulate and implement a code of conduct for government officials and civil servants to guide interactions with the tobacco industry, in line with Article 5.3 and its guidelines for implementation.

Seventh, price and tax measures are an effective and important means of reducing tobacco consumption by various segments of the population, especially young persons. The Guidelines for Implementation of Article 6 of the WHO FCTC and the WHO Technical Manual on Tobacco Tax Administration recommends that tobacco excise tax account for at least 70% of retail price. On tax design, WHO recommends that governments rely more on specific tobacco excises to drive price increases (rather than rely only on ad valorem excises), increase tobacco taxes significantly to reduce the affordability of tobacco products and adjust for inflation and income growth. Armenia, in December 2019, signed the Eurasian Economic Union (EAEU) agreement on excise taxes on tobacco products, which calls for harmonization of excise tax rates in member countries. In 2024, member states are to apply an indicative rate of 35 € per 1 000 cigarettes and may deviate by 20 percent upwards or downwards. Thus, since 2020, Armenia has begun to steadily increase its excise tax rate on tobacco products to reach the indicative rate by 2024. Strengthened tobacco taxation will greatly assist Armenia to achieve its health objectives while also generating government revenues. It is therefore **recommended** that Armenia continue to monitor and increase excise tax rates for all tobacco products and substitutes on a regular basis with the objective of significantly reducing affordability, and to adopt the EAEU maximum allowable rate or to call for changes that will enable achievement of both public health and fiscal goals.

Eighth, Armenia has national tobacco cessation guidelines, a national toll-free quit line operational in January 2021, primary health care services that offer free cessation counselling by trained staff. However, the pharmacotherapies are not available, at no cost, in the national health system. It is therefore **recommended** that MOH establish a national tobacco cessation programme that ensures effective medications are readily available, accessible and free or at an affordable cost; that cessation support and treatment are available in all health-care settings, free or at an affordable cost; and that the population is informed about the availability and accessibility of services and the national toll-free quit line.

Ninth, the relevant bodies within the Ministry of Finance are able to monitor the movement of cigarettes from production or import to final sale, and illicit trade is not considered an issue at the moment. Armenia has not signed the Protocol to Eliminate Illicit Trade in Tobacco Products and does not have a tracking and tracing system or a licensing system for tobacco manufacturers, importers, distributors and retailers. It is therefore **recommended** that Armenia become a Party to the Protocol and consider taking further measures to secure the distribution system in line with Article 15 of the WHO FCTC.

Tenth, the United Nations Development Assistance Framework (UNDAF) is the strategic programme framework jointly agreed between the Government and the UN system outlining priorities in national development. Although the current UNDAF 2016-2020 includes prevention and control of noncommunicable diseases (NCDs) as one of the priorities in the area of health, WHO FCTC or tobacco control was not explicitly mentioned. It is therefore **recommended** that the Ministry of Health, Ministry of Foreign Affairs and the UN Resident Coordinator discuss to ensure supporting implementation of the WHO FCTC is included in the next UN Sustainable Development Cooperation Framework as well as other key strategic and policy documents.

Eleventh, as the last WHO STEPwise Approach to Surveillance (WHO STEPS) and Global Youth Tobacco Survey (GYTS) was conducted in 2016 and 2017/18 respectively, there is a need to conduct the next survey soon to have current data on the tobacco epidemic. It is therefore **recommended** that MoH and NIH plan for the next adult and youth tobacco survey, to conduct regular surveys at least every five years, such as through integrating tobacco questions into national surveys (TQS), and to establish a surveillance system to monitor trends.

Twelfth, the Government of the Republic of Armenia can work with different UN agencies and stakeholders to explore economically sustainable alternatives to tobacco growing with the aim of making Armenia a tobacco growing free country.

Thirteenth, the Conference of the Parties has adopted eight guidelines to implement Articles 5.3, 6, 8, 9&10, 11, 12, 13 and 14. The aim of these guidelines is to assist Parties in meeting their legal obligations under the respective articles of the Convention. The guidelines draw on the best available scientific evidence and the experience of the Parties. Armenia is strongly encouraged to follow these guidelines to support the full implementation of the WHO FCTC.

Addressing the issues raised in this report will make a substantial contribution to meeting Armenia's obligations to the WHO FCTC and to improving the health status and quality of life of the people living in Armenia. The needs identified in this report represent priority areas for action. As Armenia addresses these areas, the Convention Secretariat, in cooperation with WHO and other relevant international partners, is available and committed to providing technical assistance, to facilitating the process of engaging potential partners and identifying internationally available resources for implementation of the Convention.

In the immediate term, the Convention Secretariat is also committed to providing the following assistance upon the request of the MoH: (1) continue to support Armenia to implement the WHO FCTC under the FCTC 2030 project, (2) support and facilitate a stakeholder workshop to consider the needs assessment report findings, (3) support the development of the National Tobacco Control Strategy, and (4) provide expert technical assistance to strengthen the tobacco control legislation and tobacco taxation.

The full joint needs assessment report, which follows this summary, can also be used as the basis for any proposal(s) that may be presented to relevant international partners to support Armenia in meeting its obligations under the Convention.

The joint needs assessment was financially supported by the Governments of Australia, Norway and the United Kingdom under the FCTC 2030 project. The MoH and the WHO Country Office in Armenia provided resources and logistic support to the needs assessment exercise, including organizing the meetings during the virtual mission.

Status of implementation, gaps and recommendations

This core section of the report follows the structure of the Convention. It outlines the requirements of each of the substantive articles of the Convention, reviews the stage of implementation of each article, outlines achievements and identifies the gaps between the requirements of the treaty and level of implementation by Armenia. Finally, it provides recommendations on how the gaps identified could be addressed, with a view to supporting the country in meeting its obligations under the Convention.

Article 2. Relationship between this Convention and other agreements and legal instruments

Article 2.1 of the Convention, in order to better protect human health, encourages Parties *"to implement measures beyond those required by this Convention and its protocols, and nothing in these instruments shall prevent a Party from imposing stricter requirements that are consistent with their provisions and are in accordance with international law".*

In accordance to the "Law on Reduction and Prevention of the Damage caused to Health by the Use of Tobacco Products and Substitutions for Them (herein referred to as the 2020 TC Law), adopted on 13 February 2020, Armenia banned wholesale and retail sale of chewing tobacco in the Republic of Armenia.

Article 6(6b) of the 2020 TC Law states that smoking is prohibited in private motor vehicles in the process of movement.

It is recommended that the Government of the Republic of Armenia continues to actively seek other areas exceeding treaty requirements, with special regard to recommendations of implementation guidelines, which it can implement.

Article 2.2 clarifies that the Convention does not affect *"the right of Parties to enter into bilateral or multilateral agreements … on issues relevant or additional to the Convention and its protocols, if such agreements are compatible with their obligations under the Convention and its protocols. The Parties concerned shall communicate such agreements to the Conference of the Parties through the Secretariat".*

Armenia is a member of the Eurasian Economic Union (EAEU) since 2015 and has to conform to the decisions of the Eurasian Economic Commission (EEC), such as the EEC Council Decision No. 107 on the Technical Regulations of the Customs Union "Technical Regulation for Tobacco Products", which will be elaborated in subsequent sections of the report.

It is recommended that relevant line ministries review any agreements in their jurisdictions that may fall under the scope of Article 2.2 of the Convention. Furthermore, if such agreements have been identified, it is recommended that the Government of Armenia communicate them to the Convention Secretariat either as part of their next WHO FCTC implementation report or independently.

Article 4. Guiding Principles

The Preamble of the Convention emphasizes "the special contribution of nongovernmental organizations and other members of civil society not affiliated with the tobacco industry, including health professional bodies, women's, youth, environmental and consumer groups, and academic and health care institutions, to tobacco control efforts nationally and internationally and the vital importance of their participation in national and international tobacco control efforts".

Article 4.7 recognizes that "*the participation of civil society is essential in achieving the objective of the Convention and its protocols".*

There are around 30 nongovernmental organizations (NGOs) involved in tobacco control activities in Armenia mainly operating under the umbrella of coalition "Tobacco-free Armenia", coordinated by the public health department of the American University of Armenia (AUA). However, because funding has reduced, activities such as communication campaigns and surveys have also decreased.

Gap:Due to the lack of sustained funding, NGOs have reduced their tobacco control activities and academics have limited resources to undertake research and generate evidence to support policy change.

It is therefore recommended that the Government of Armenia engage civil society organizations and academics that have no affiliation with the tobacco industry, seek international cooperation, and coordinate among themselves to strengthen implementation of the Convention.

Article 5. General obligations

Article 5.1 calls upon Parties to *"develop, implement, periodically update and review comprehensive multisectoral national tobacco control strategies, plans and programmes in accordance with this Convention"*.

Armenia has in place the National Tobacco Control Strategy and Action Plan for the period 2017-2020. Armenia is in the process of establishing a multisectoral working group to develop the strategy and action plan for the next period 2021-2025.

The main directions of the current strategy are:

- Strategic direction 1. The effective and active cooperation with all stakeholders in the fight against smoking in the Republic of Armenia.
- Strategic direction 2. Review and amendment of the current legislative framework for the fight against smoking.
- Strategic direction 3. Development of capacity of health organizations engaged in the fight against smoking.
- Strategic direction 4. Implementation of measures against smoking among adolescents
- Strategic direction 5. Implementation of the large scale analysis of the data and level of the adverse effects on health from the use of tobacco products, identification of the main factors, causes and implementation of an effective epidemiological surveillance
- Strategic direction 6. Increasing public awareness of the harms and consequences of tobacco use.

Gap: Armenia's National Tobacco Control Strategy and Action Plan expires at the end of 2020.

It is therefore recommended that Armenia develop the next comprehensive multisectoral tobacco control strategy and action plan considering the provisions of the 2020 TC Law. It is also recommended that Armenia use the WHO FCTC Global Strategy 2019–2025 to guide prioritization of action as well as this the needs assessment report as a reference to address substantive articles of the Convention in a comprehensive way. It is further recommended that MoH engage relevant sectors outside of health, civil society and academics in the process of developing and implementing the next national tobacco control strategy and action plan.

Article 5.2(a) calls on Parties to *"establish or reinforce and finance a national coordinating mechanism or focal points for tobacco control"*.

The Head of the National Institute of Health (NIH) named after academician S. Avdalbekyan is serving as tobacco control focal point for the WHO FCTC. The NIH has a Department of Health Promotion and Anti-tobacco Programs Implementation Department, which is funded by the State Budget and currently has three staff members.

Funding for tobacco control comes through the National Programme on Healthy Lifestyle from the MoH annual budget and is based on yearly activity planning and budgeting. Implementation of Armenia's National Tobacco Control Strategy 2017–2020 is funded by the State Budget's provision to MoH. Since last year, AMD 100 million has been allocated to the National Program for fighting against smoking and environment protection. In the previous year, awareness raising was the assigned priority. For this current year, the budget is for the re-qualification activities of medical centers' staff, and for publication of information booklets and guidelines. However, due to COVID-19 pandemic, processes have been delayed.

There is currently no national coordination mechanism to coordinate tobacco control within Armenia and to oversee governance matters. However, Armenia's Tobacco Control State Programme plans to establish a National Intersectoral Tobacco Control Commission. The proposed Commission is to be led by MoH and will consist of agencies who will be also involved in the working group to develop the new national tobacco control strategy.

Gap: There is currently no national coordinating mechanism to coordinate tobacco control within Armenia.

It is therefore recommended that Armenia establish a multisectoral coordinating mechanism, such as a National Inter-sectoral Tobacco Control Commission, comprised of relevant ministries and convened regularly to meet the obligations under the Convention. It is further recommended that when initiating the process to establish a multisectoral committee, MoH refer to the Toolkit on implementation of Article 5.2(a) developed by the Convention Secretariat and UNDP. While the MoH should take the lead in implementing the Convention, other relevant ministries should also designate focal points and allocate staff time and budget to support implementation of the Convention.

Article 5.2(b) calls on Parties *to "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".*

Armenia, as a member of the EAEU, needs to conform with the Eurasian Economic Commission (EEC) Council Decision No. 107 dated 12 November 2014 that adopted Technical Regulations of the Customs Union "Technical Regulation for Tobacco Products" and established that the regulations shall enter into force on 15 May 2016. The Technical Regulations (CU TR 035/2014) are related to Articles 9, 10 and 11 of the WHO FCTC as follows and do not yet cover tobacco substitutes: characteristics of tobacco and maximum permissible content of hazardous substances; Tobacco Product Conformity Assessment and State Monitoring (Supervision) of Conformity with the Requirements of these Technical Regulations; rules on reporting the composition of tobacco products and their emissions; information requirements to be applied to consumer packaging; labeling of tobacco products with a single conformity sign on products on the market of members-states of the Customs Union. The Technical Regulations do not need to be adopted through implementing legislation. Pursuant to EEC Council Decision No. 209 of 18 December 2018, the effective date of the Technical Regulations for Tobacco Products for Armenia would be 1 January 2024.

Decision No. 219 dated 5 March 2015 "The Government of the Republic of Armenia on the Approval of the Technical Regulations on Tobacco Safety and Declaring Ineffective Decision No. 540 of the Government of the Republic of Armenia dated 28 April 2005" details the requirements for tobacco products circulating in the territory until 1 January 2024, and/or in accordance with the requirements set out in CU TR 035/2014.

The EEC Council Decision No. 107 also called for Ministries of Health of the EAEU member states to consider preparation of an international agreement to ban production, import and circulation of smokeless tobacco products on the territories of the member states of the Customs Union and the Common Economic Space.

On 13 February 2020, the National Assembly of the Republic of Armenia approved the "Law on Reduction and Prevention of the Damage Caused to Health by the Use of Tobacco Products and Substitutions for them" and amended other laws as follows:

- "Law on Making Amendments and Supplements to the Code on Administrative Offences of the Republic of Armenia"
- "Law on Making Amendments in the Law on Local Duties and Payments"
- "Law on making amendments in the Law on Advertising"
- "Law of the Republic of Armenia on making Amendments and Supplements in the Law of the "Republic of Armenia on Local Self-Government"

The 2020 TC Law and the CU TR 035/2014 are comprehensive though some revisions could be considered to bring tobacco control measures in Armenia in line with the Convention. Inclusion of the following would strengthen the legislation: provisions to protect against tobacco industry interference in the setting and implementing of public health policies; removal of all indoor designated smoking areas; establishment of regulations and standards on the contents and emissions of tobacco substitutes; prohibition or restriction of ingredients that may be used to increase palatability in tobacco products; explicit prohibition of any misleading terms and descriptions; explicit ban on contributions from tobacco companies for corporate social responsibility activities; explicit ban on cross-border tobacco advertising, promotions and sponsorship, internet sales, brand stretching and brand sharing; and licensing requirement for the import, manufacture, distribution and sale of tobacco products, tobacco substitutes and imitations.

The Administrative Offences Code defines penalties for violations and has higher amounts for repeated violations to serve as a deterrent. There are penalties for violations of the prohibition and restrictions on the use, advertising, promotion and sponsorship, importation, sales and manufacture, packaging and labelling, of tobacco products, substitutes or imitations. The enforcement of the TC Law is undertaken by the Labor and Health Inspectorates, Customs, Police and Local Government Units. There are still limitations in enforcement capacity and compliance with the law.

Armenia also has an Ombudsman, otherwise known as the Human Rights Defender of the Republic of Armenia. The Ombudsman indicated to the mission team that they support the TC Law and the premise that it is about protecting the people's right to health. They see themselves as a bridge between the government and the people. The Ombudsman provides inputs in the initial drafting of legislation, provides information to or receives feedback from the public about the law, and also gives feedback to the lead agency to recommend any improvement that could be made to ensure the law is clear and enforceable.

Gaps:

1. National technical regulations related to WHO FCTC Articles 9, 10 and 11 are not fully compliant with the CU TR 035/2014 or the WHO FCTC guidelines for implementation.
2. Certain provisions in the 2020 TC Law on health warnings and the requirements for tobacco product packaging and labelling, smoke free areas, ban on tobacco advertising, promotion and sponsorship, among others, have not yet entered into force.
3. Technical regulations still need to be developed to implement the 2020 TC Law.
4. Lack of compliance and enforcement of the TC Law remain a challenge.

It is therefore recommended that Armenia develop and adopt necessary technical regulations to implement and enforce the 2020 TC law and ensure full compliance with the WHO FCTC and its guidelines for implementation. It is also recommended that Armenia establish measures to strengthen enforcement and promote compliance with the law.

Article 5.3 stipulates that in setting *"public health policies with respect to tobacco control, Parties shall act to protect these policies from commercial and other vested interests of the tobacco industry"*. Further, the guidelines for implementation of Article 5.3 recommend that "*all branches of government... should not endorse, support, form partnerships with or participate in activities of the tobacco industry described as socially responsible"*.

There are no guidelines in place to protect health policies from the commercial and other vested interests of the tobacco industry. There are no legal provisions or Code of Conduct to govern how civil servants, government officials or employees can interact with the tobacco industry and other vested interests.

Gaps:

1. Awareness of Article 5.3 of the Convention and its guidelines among relevant government ministries is limited.
2. There is no specific code of conduct for civil servants in relation to the implementation of Article 5.3 and its guidelines. There are no measures in place requiring that all interactions with the tobacco industry deemed necessary are conducted in a transparent manner.

It is therefore recommended that the Government of Armenia develop and implement a Code of Conduct for government officials and civil servants for their interactions with the tobacco industry, in line with Article 5.3 and its guidelines. It is also recommended that any meetings that may occur between government officials, civil servants and the tobacco industry be made transparent and that any relevant information or notes for record be made available to the public. It is further recommended that the Government of Armenia, in collaboration with civil society, continue to raise awareness on protection of public health policy from the vested interests of the tobacco industry among all government agencies and public officials.

Article 5.4 calls on Parties to *"cooperate in the formulation of measures, procedures and guidelines for the implementation of the Convention and the protocols to which they are Parties"*.

Armenia participated in the drafting group on Article 6; attended all sessions of the Conference of Parties (COP) except COP5; and participated in all five sessions of the Intergovernmental Negotiating Body (INB) on a Protocol on Illicit Trade in Tobacco Products, in line with its obligations under Article 5.4. Further cooperation and participation in intergovernmental processes in this regard will facilitate implementation of the Convention, its Protocol and other instruments adopted by the COP.

Article 5.5 calls on Parties to *"cooperate, as appropriate, with competent international and regional intergovernmental organizations and other bodies to achieve the objectives of the Convention and the protocols to which they are Parties"*.

Armenia regularly cooperates and receives funding and technical support from the WHO Regional Office for Europe, the WHO Armenia Office and the United States Centers for Disease Control and Prevention (CDC) to implement the Global Tobacco Surveillance System (GTSS); and from WHO, the Bloomberg Initiative, the Union and the Convention Secretariat to meet obligations under the WHO FCTC. Armenia also receives support from the United States National Institutes of Health (US NIH) to implement a project "Smoke-free Air Coalitions in Georgia and Armenia: A Community Randomized Trial" in collaboration with Emory University and the Georgia National Center for Disease Control and Public Health. Further details on international cooperation are given under Article 22.

Article 5.6 *calls on Parties to "within means and resources at their disposal, cooperate to raise financial resources for effective implementation of the Convention through bilateral and multilateral funding mechanisms".*

Armenia has been selected to be part of the FCTC 2030 project funded by the Governments of Australia, Norway and the United Kingdom, and will receive dedicated international support from the United Nations (UN) to accelerate implementation of the WHO FCTC from 2020 to 2021.

Further opportunities for expanded support to tobacco control measures and implementation of the Convention are encouraged. This is in line with Armenia's obligations under Article 5.6.

Article 6. Price and tax measures

In **Article 6.1**, the Parties recognize that *"price and tax measures are an effective and important means of reducing tobacco consumption by various segments of the population, in particular young persons"*. Article 6.2(a) further stipulates that each Party should take account of its national health objectives concerning tobacco control in implementing *"tax policies and, where appropriate, price policies, on tobacco products so as to contribute to the health objectives aimed at reducing tobacco consumption"*. Article 6.2(b) requires Parties to prohibit or restrict, *"as appropriate, sales to and/or importations by international travellers of tax- and duty-free tobacco products"*. **Article 6.3** requires that Parties shall *"provide rates of taxation for tobacco products … in their periodic reports to the Conference of the Parties, in accordance with Article 21"*.

According to Armenia's Tax Code, tobacco products (including manufactured tobacco substitutes, cigars and cigarillos) are subject to value added tax (VAT), import tax and excise tax, and tobacco companies are subject to a profit tax. Article 89 of the Tax Code exempts excise tax on excisable goods including tobacco products, when it is intended for export and when supplied to a duty-free shop; and Article 76(1) exempts VAT on goods that have the status of an EAEU product exported into EAEU member states from the territory of the Republic of Armenia.

On 19 December 2019, Armenia signed the EAEU agreement on excise taxes on tobacco products, which calls for harmonization of excise tax rates in member countries. An indicative excise tax rate and a deviation range will be approved every five years starting from 2024. In 2024, member countries are to apply an indicative rate of 35 € per 1 000 cigarettes and may deviate by 20 per cent upwards or downwards. Since 2020 after signing of the agreement, Armenia has begun steadily increasing its excise rate on tobacco products as stipulated in Article 88 of the Tax Code to reach the indicative rate by 2024.

Product Code according to CN FEA	Name of the product group	Tax base measurement unit	Excise tax rate (AMD)			
			from 1 January 2020	from 1 January 2021	from 1 January 2022	from 1 January 2023
2402 (except for 2402 10 00011 2402 90 00011 2402 10 00012 2402 90 00012)	tobacco products	1000 pieces	9625	11070	12730	14640
2402 10 00011 2402 90 00011	cigars	1000 items	605000			
2402 10 00012 2402 90 00012	cigarillos	1000 items	16500			
2403 (except for 2403 99 90 090)	manufactured tobacco substitutes	1 kg	1500			
Source: https://www.minfin.am/website/images/website/iravakan_akter/Tax_Code_HO-165-N_04032021_26052021_ENG.docx or https://www.irtek.am/views/act.aspx?aid=150068						

According to 2019 RGTE (based on 2018 estimates), total tobacco tax as a percentage of retail price is low: 38.1% composed of 21.4% excise tax and 16.7% VAT/Sales Tax; and cigarettes have become more affordable in the period 2008 to 2018.

Gaps:

1. Currently the total tobacco tax share is below 75% of retail price considered in the WHO RGTE as a high-level of achievement and excise tax share is below 70% of retail price, the minimum level recommended in the Guidelines for implementation of Article 6 of the WHO FCTC and the WHO Technical Manual on Tobacco Tax Administration.
2. Tax rates do not take into account changes in household incomes or inflation.
3. Tax policy is not used as a public health measure.

It is therefore recommended that the Government of Armenia sets out improving public health as an objective of its tobacco tax policy to support achievement of its health goals while generating government revenue. It is also recommended that Armenia monitor and increase tax rates for all tobacco products and its substitutes on a regular and progressively higher basis, potentially annually, taking inflation and income growth into account to ensure a real increase in price so as to decrease affordability, implementing measures in accordance with recommendations made in the Guidelines for implementation of Article 6 of the WHO FCTC and the WHO Technical Manual on Tobacco Tax Administration.

In support of the Government's effort to implement effective tax and price measures to reduce tobacco consumption, the Convention Secretariat and the WHO are committed to facilitating provision of expertise and technical support upon request from the Government. Technical support may be provided in conducting studies to model the impact of raising taxes on smoking prevalence and on Government revenue as well as in analysing tobacco production data.

Article 8. Protection from exposure to tobacco smoke

Article 8.2 requires Parties to *"adopt and implement in areas of existing national jurisdiction as determined by national law and actively promote at other jurisdictional levels the adoption and implementation of effective legislative, executive, administrative and/or other measures, providing for protection from exposure to tobacco smoke in indoor workplaces, public transport, indoor public places and, as appropriate, other public places*."

Article 8 guidelines emphasize that "*there is no safe level of exposure to tobacco smoke*" and call on each Party to *"strive to provide universal protection within five years of the WHO Framework Convention's entry into force for that Party"*.

The five-year deadline for Armenia was 27 February 2010.

Article 6 of the 2020 TC law bans the use of tobacco products and substitutes in most public and workplaces. The provisions in Article 6 of the 2020 TC Law come into force on the tenth day after official promulgation except Article 6(1)(i)(paragraphs 2-5) pertaining to hotel facilities, which comes into force on 1 January 2021 and Article 6(1)(h) pertaining to public catering facilities including outdoor areas (e.g. canteens, restaurants, cafes, bars), which comes into force on 15 March 2022. The by-laws for Articles 6(2) and 6(3) pertaining to other indoor workplaces and trade centers, are to be adopted within 6-months after entry into force of the 2020 TC Law.

Articles 6(4a-b), 6(5) and 6(6a) of the 2020 TC Law state that areas may be designated for smoking within airports, hospital-type facilities providing psychiatric care and services, military units and military establishments, and water or railway transports.

Before the 2020 TC Law was adopted, the 2019 WHO RGTE found that compliance with smoke-free policies was low to moderate. The 2016 WHO STEPS Survey found that 26.6% of adults were exposed to tobacco smoke at the workplace and 56.4% of adults were exposed to tobacco smoke at home.

Gaps:

1. Certain provisions of Article 6 of the 2020 TC Law and by-laws are yet to enter into force.
2. The 2020 TC Law permits designated smoking areas inside airports, psychiatric care facilities, military units and establishments, and water and railway transport.
3. There is a lack of compliance and limited enforcement.

It is therefore recommended that the Government of Armenia ensure the remaining provisions of Article 6 of the 2020 TC Law and necessary by-laws enter into force at the stipulated date without delay. It is also recommended that the Government of Armenia strengthen the 2020 TC Law in line with Article 8 of the WHO FCTC and its guidelines for implementation, ensure that any designated smoking area is outdoors and implement 100% smoke-free policies in all indoor workplaces, public places, and as appropriate, other public places. It is further recommended that the Government strengthen monitoring, compliance building and enforcement measures.

Article 9. Regulation of the contents of tobacco products and
Article 10. Regulation of tobacco product disclosures

Article 9 requires Parties to *"adopt and implement effective legislative, executive and administrative or other measures"* for the testing and measuring of the contents and emissions of tobacco products.

Article 10 requires each Party to *"adopt and implement effective legislative, executive, administrative or other measures requiring manufacturers and importers of tobacco products to disclose to governmental authorities' information about the contents and emissions of tobacco products. Each Party shall further adopt and implement effective measures for public disclosure of information about the toxic constituents of the tobacco products and the emissions that they may produce"*.

The regulation of contents and emissions of tobacco products and their disclosure in Armenia needs to conform to the Technical Regulations of the Customs Union "Technical Regulations for Tobacco Products" (CU TR 035/2014) adopted through Decision No. 107 of the EEC Council on 12 November 2014 and which entered into force on 15 May 2016. According to EEC Decision No. 53 on Transitional Provisions of the Technical Regulations of CU TR 035/2014 approved 12 May 2015, member states have to conform to the CU TR 035/2014 requirements no later than 15 November 2017. For Armenia, this comes into effect on 1 January 2024, pursuant to EEC Council Decision No. 209 of 18 December 2018.

CU TR 035/2014 prohibit use of certain substances as ingredients of tobacco products including aromatic and flavoring substances such as those from mint herb; set maximum allowed levels of nicotine, tar and carbon monoxide as well as methods to use for determining content. It also establishes rules for the manufacturer, supervising agency and/or importer of tobacco products on the reporting the composition of tobacco products and their emissions, and requirements for content of information for tobacco product consumers.

CU TR 035/2014 does not apply to smokeless tobacco products. As stated in EEC Council Decision No. 107, in accordance with Article 3 of the Agreement on the EEC of 18 November 2011, the ministries of health of member states of the Customs Union and Common Economic Space are to study the issue of preparing an international agreement on a ban on the production, import and circulation of smokeless tobacco products on the territories of the member states. Prior to adopting such international agreement, the production, import and circulation of smokeless tobacco products on the territories of the member states of the Customs Union and Common Economic Space can be carried out in accordance with the laws of the member states. Armenia's 2020 TC law Article 3(6) bans wholesale and retail sale of chewing tobacco on its territory.

Decision No. 219 dated 5 March 2015 "The Government of the Republic of Armenia on the Approval of the Technical Regulations on Tobacco Safety and Declaring Ineffective Decision No. 540 of the Government of the Republic of Armenia dated 28 April 2005" details the requirements for tobacco products circulating in the territory until 1 January 2024, and/or in accordance with the requirements set out in CU TR 035/2014. These regulations detail the requirements applicable to raw tobacco and tobacco products, the maximum nicotine, tar and carbon monoxide levels, and the list of prohibited substances. Paragraph 17(9) of these regulations indicate that the tobacco product packaging must contain nicotine and tar content in one cigarette smoke. This is not in line with CU TR 035/2014 and the Guidelines for implementation of Article 11 of the WHO FCTC, which is to not require quantitative statements about tobacco constituents and emissions that might imply one brand is less harmful than another. It is noted that these regulations would only be valid until 1 January 2024, after which Armenia is to conform to the requirements in CU TR 035/2014.

MoH informed that there is (a) EEC Board Resolution No. 141 dated 2 September 2019 "On the draft decision of the Council of the Eurasian Economic Commission "On the approval of the reporting form on the composition of tobacco products and substances released by them sold on the territory of the state - a member of the Eurasian Economic Union during the reporting calendar year"; and (b) Government of the Republic of Armenia Decision No. 1398-H dated 27 August 2020 "On establishing the procedure for informing the population about the harmful effects of tobacco products and substitutes for tobacco products by persons involved in the tobacco industry".

Gaps:

1. The current set of technical regulations on tobacco safety approved through Decision No. 219, which will be valid until 1 January 2024, requires nicotine and tar content to be included on tobacco product packaging.
2. There are no regulations and standards on the contents and emissions of tobacco substitutes.
3. The list of prohibited substances may be limiting.
4. There is no designated testing laboratory for tobacco products and tobacco substitutes, but at least one laboratory is available which can test the levels of nicotine, tar and carbon monoxide in tobacco products.

It is therefore recommended that (1) the Government of Armenia conform to the obligations under CU TR 035/2014 as soon as possible; (2) MoH work closely with the WHO to establish regulations and standards for all tobacco products and tobacco substitutes, and prohibit or restrict ingredients that may be used to increase palatability, in line with the partial Guidelines for the implementation of Articles 9 and 10 of the WHO FCTC; (3) MoH assess the arrangements for testing, either by developing their own testing capacity or by utilizing capable laboratories

in the region through bilateral arrangements; and (4) MoH consider placing the costs of implementing effective tobacco product regulations and operating a programme for their administration on the tobacco industry and retailers.

Article 11. Packaging and labelling of tobacco products

Article 11 requires each Party *"within a period of three years after entry into force of the Convention for the Party to adopt and implement... effective measures"* on packaging and labelling of tobacco products.

The three-year deadline for Armenia was 27 February 2008.

CU TR 035/2014 stipulate the requirements for the content of information for tobacco product consumers, which include information that go on package inserts, or on the outside or inside of product packaging; and these information have to be in Russian and the official language(s) of the member state. These regulations require graphic health warnings on tobacco packages to take up no less than 50 percent of the tobacco product packaging's principal display areas. To implement paragraph 27 of CU TR 035/2014, EEC Council Decision No. 18 dated 17 March 2016 "On approval of thumbnails of warnings about the dangers of consuming tobacco products and the parameters for applying them to tobacco product consumer packaging" approved a set of graphic health warnings for applying to tobacco product packaging. Pursuant to EEC Council Decision No. 209 of 18 December 2018, the effective date of the Technical Regulations for Tobacco Products for Armenia would be 1 January 2024.

At the moment, Article 4(1) of the 2020 TC Law and Paragraph 19 of Decision No. 219 dated 5 March 2015 "The Government of the Republic of Armenia on the Approval of the Technical Regulations on Tobacco Safety and Declaring Ineffective Decision No. 540 of the Government of the Republic of Armenia dated 28 April 2005" are in effect and state that textual health warnings are to cover at least 30% of the principal surface areas of tobacco products. Paragraph 18 of Decision No. 219 provides a list of approved warning texts for use. Article 4(4) of 2020 TC Law states that from 1 January 2024, it is banned to depict brand colors, images, corporate logos and other symbols. Technical regulations for tobacco products in standardized or plain packaging will be defined.

Paragraph 21 of CU TR 035/2014 states that information applied to tobacco product packaging (package inserts) should not (a) contain any terms, descriptions, signs, symbols or other designations that directly or indirectly create the false impression that a tobacco product is less harmful than other tobacco products; (b) that directly or indirectly creates the false impression that the tobacco product has the taste of a food product (food additives); (c) that contains images or words that associate tobacco products with food products, drugs or medicinal plants; (d) that has a numerical indicator of the tar, nicotine and carbon monoxide content; among others. However, words that indicate content of menthol tobacco products, nature of the fragrance of cigars, cigarillos, hookah, thin cut smoking tobacco and pipe tobacco may be used in the composition of the information applied to consumer packaging (package inserts).

Paragraph 29 of CU TR 035/2014 state that the health warnings are to be located on the upper parts of the front and back display areas. However, if the warning were to be covered by a stamp or destroyed during normal opening of the consumer packaging, the health warning would be placed on the lower part.

Paragraph 17(9) of Decision No. 219 that details the requirements for tobacco products circulating in the territory until 1 January 2024, indicate that the tobacco product packaging must contain nicotine and tar content in one cigarette smoke. This is not in line with the requirements under CU TR 035/2014 and the Guidelines for implementation of Article 11 of the WHO FCTC, which is to not require quantitative statements about tobacco constituents and emissions that might imply one brand is less harmful than another. It is noted that these regulations would only be valid until 1 January 2024, after which Armenia is to conform to the requirements in CU TR 035/2014.

Gaps:

1. Article 4(1) of the 2020 TC Law and Paragraph 19 of Decision No. 219 states that only text health warnings are required and to cover the minimum 30% of principal display areas. CU TR 035/2014 and Article 4(4) of the 2020 TC Law will only come into effect on 1 January 2024.
2. Paragraph 21 of CU TR 035/2014 permits the use of words that indicate content of menthol tobacco products, nature of the fragrance of cigars, cigarillos, hookah, thin cut smoking tobacco and pipe tobacco may be used in the composition of the information applied to consumer packaging (package inserts).
3. Paragraph 29 of CU TR 035/2014 permits health warnings to be placed on the lower part of the tobacco product packaging if the warning might be covered by a stamp or might be destroyed during the normal opening.
4. Paragraph 17(9) of Decision No. 219, valid until 1 January 2024, requires a numerical indication of the nicotine and tar content on tobacco product packaging.

It is therefore recommended that the Government of Armenia develop and adopt the technical regulations for standardized packaging of tobacco products as soon as possible, and ensure provisions are explicit and in line with the Guidelines for implementation of Article 11 of the WHO FCTC.

Article 12. Education, communication, training and public awareness

Article 12 requires that *"each Party shall adopt and implement effective legislative, executive, administrative or other measures to promote"* education, communication and public awareness about the health, economic and environmental consequences of tobacco consumption and exposure to tobacco smoke, the benefits of tobacco cessation and tobacco-free lifestyles as well as training to all concerned professionals and persons and public access to information on the tobacco industry.

MoH and NGOs both organize various activities such as World No Tobacco Day (WNTD), delivering health messages through mass media, training programs and advocacy workshops. In 2019, Armenia developed 3 public service announcements (PSA) which were aired on commercial channels and prepared the public with the introduction of the new tobacco control laws. For WNTD, Armenia developed a PSA with the support of WHO. However, Armenia does not have a comprehensive communication plan on tobacco control nor sustainable financing mechanisms for public awareness and training activities.

The Ministry of Education, Science, Culture and Sport of the Republic of Armenia has included tobacco control in the school curricula – in higher grades (4th to 5th) within subjects on Healthy Lifestyle and Physical Culture and an expanded module from the 8th grade which is when adolescents are educated about harmful behaviors.

Under a grant project, "Smoke-free Air Coalitions in Georgia and Armenia: A Community Randomized Trial", funded by the US NIH, the Armenia NIH, American University of Armenia in collaboration with Emory University and the Georgia National Center for Disease Control and Public Health, are providing targeted trainings and workshops for community leaders. There is, however, no systematic trainings on tobacco control for health workers, community workers, social workers, media professionals, educators, decision makers and other relevant groups. Tobacco control is not included in the curricula of graduate and post-graduate programmes of medical students.

Gaps:

1. There is no comprehensive plan for the systematic implementation of education, communication and training activities within the tobacco control programme.
2. There are limited pre-service and in-service training and sensitization for health professionals.
3. There is a lack of systematic evaluation of the effectiveness of the education, communication and training programmes aimed at raising awareness of tobacco control issues.
4. There is a lack of sustainable financing mechanism for education, communication and training activities.

It is therefore recommended that MoH develop a comprehensive plan for implementation of education, communication and training activities as part of the overall National Action Plan and allocate resources for its implementation. This would include strengthening both pre-service and in-service training for public health professionals, educators and other relevant groups; including tobacco control and its impact on environmental and planetary health in the school curriculum; among others. International cooperation may be useful to ensure that rigorous, systematic and objective methods are used in designing and implementing communication and education programmes.

Article 13. Tobacco advertising, promotion and sponsorship

Article 13.1 of the Convention notes that the Parties "*recognize that a comprehensive ban on advertising, promoting and sponsorship would reduce the consumption of tobacco products*".

Article 13.2 of the Convention requires each Party to: *"in accordance with its constitution or constitutional principles, undertake a comprehensive ban of all tobacco advertising, promotion and sponsorship. This shall include, subject to the legal environment and technical means available to that Party, a comprehensive ban on cross-border advertising, promotion and sponsorship originating from its territory. In this respect, within the period of five years after entry into force of this Convention for that Party, each Party shall undertake appropriate legislative, executive, administrative and/or other measures and report accordingly in conformity with Article 21"*.

This is one of the articles of the Convention that contains a five-year deadline for implementation of specific measures. The deadline for Armenia was 27 February 2010.

Article 7 of the 2020 TC Law banned all forms of advertising, promotion and sponsorship of tobacco products, tobacco substitutes (except for substitutes used for medical purposes) and imitations of tobacco products. The law prohibits distribution of free samples; displays at point of sale; the manufacture, import and sale of food or toys that imitate tobacco products; depiction in media; and sponsorship of tobacco products and substitutes. Should there be a video or audio display of tobacco products, substitutes or imitations, the broadcaster has to display (by voice or image) a warning message on the adverse effects.

Article 5 of the 2020 TC Law bans discounts; displays in shops and catering facilities except at airport duty-free shops; sale of tobacco products or substitutes with food or non-food products; and sale within educational, youth, social protection, cultural, sport, government premises and at airports except in duty-free shops.

According to the 2016 WHO STEPS, 16% of adults noticed cigarette marketing in stores where cigarettes are sold and 14% noticed cigarette promotions.

Gaps:

1. There is no explicit ban on contributions from tobacco companies for "socially responsible causes".
2. There is no explicit ban on internet sales of tobacco products, tobacco substitutes and imitations of tobacco products.
3. There is no ban on brand sharing and brand stretching.

It is therefore recommended that the Government of Armenia enact and enforce a comprehensive ban on tobacco advertising, promotion and sponsorship to fulfil the obligations under WHO FCTC Article 13 and its guidelines for implementation. Areas that Armenia could consider include explicitly prohibiting contributions from tobacco companies including corporate social responsibility activities regardless of whether it is publicized, internet sales, brand sharing and brand stretching.

Article 13.5 encourages Parties to: *"implement measures beyond the obligations set out in paragraph 4"*.

Armenia has not implemented any measures beyond the obligations set out in paragraph 4.

Article 13.7 reaffirms Parties' *"sovereign right to ban those forms of cross-border tobacco advertising, promotion and sponsorship entering their territory and to impose equal penalties as those applicable to domestic advertising, promotion and sponsorship originating from their territory in accordance with their national law".*

Armenia has not implemented any measures to ban cross border advertising, promotion and sponsorship entering into its territory.

Gap: Cross-border advertisement is not explicitly addressed in the 2020 TC Law.

It is therefore recommended that Armenia amend the TC Law to explicitly ban cross-border advertising, promotion and sponsorship.

Article 14. Measures concerning tobacco dependence and cessation

Article 14.1 requires each Party to *"develop and disseminate appropriate, comprehensive and integrated guidelines* [concerning tobacco dependence and cessation] *based on scientific evidence and best practices…*[and] *take effective measures to promote cessation of tobacco use and adequate treatment for tobacco dependence"*.

The Ministry of Health of Armenia has adopted National Tobacco Cessation Guidelines, though there is a need to raise awareness about them among medical professionals.

Gap: Armenia's National Tobacco Cessation Guidelines are not widely disseminated nor used by health professionals.

It is therefore recommended that Armenia increase awareness of its national tobacco cessation guidelines and makes full use of the Guidelines for implementation of Article 14 of the WHO FCTC to strengthen existing national guidelines or when developing and implementing policies and programmes in this area.

Article 14.2 stipulates that to achieve the end outlined in Article 14.1, "*each Party shall endeavour to"* implement effective tobacco cessation programmes aimed at promoting the cessation of tobacco use, include diagnosis and treatment of tobacco dependence and counselling services on cessation of tobacco use in national health and education programmes, establish in health care facilities and rehabilitation centres programmes for diagnosing, counselling, preventing and treating tobacco dependence, and ensure the accessibility and affordability of treatments for tobacco dependence.

Article 10 of the 2020 TC Law states that users of tobacco products and tobacco substitutes who go to medical institutions to seek treatment for their nicotine addiction may obtain free medical aid and services within the framework of targeted state programmes.

According to the 2019 WHO RGTE, nicotine replacement therapy (NRT) is available in pharmacies without a prescription, varenicline is available in pharmacies with a prescription, and smoking cessation services are available in primary health care centers provided by trained staff, free of cost. MoH informed that a free quit line has been established at NIH in December 2020 and became function in January 2021.

The 2016 WHO STEPS found that 34.5% of current smokers (34.0% of men and 47.8% of women) tried to stop smoking during the last 12 months. Among these current smokers, 29.2% of men and 39.0% of women received advice from a health professional to stop smoking during their visit in the last 12 months.

Gaps:

1. Pharmacotherapies are not on the country's essential drug list and not free of cost.
2. The toll-free national quit line was not yet established at the time of the needs assessment.

It is therefore recommended that MOH establish a national tobacco cessation programme in line with Article 14 and its guidelines for implementation. This includes ensuring that effective medications are readily available, accessible, and free or at an affordable cost; providing cessation support and treatment in all health-care settings and by all health-care providers, free or at an affordable cost; and ensuring that the population is informed about the availability and accessibility of services and encouraged to use them; among others. It is also recommended that MoH progress on the establishment of a national toll-free quit line, promote the use of it, and consider other innovative approaches whilst prioritizing those based on scientific evidence.

Article 15. Illicit trade in tobacco products

In **Article 15** of the Convention the *"Parties recognize that the elimination of all forms of illicit trade in tobacco products, including smuggling, illicit manufacturing and counterfeiting, and the development and implementation of related national law, in addition to subregional, regional and global agreements, are essential components of tobacco control"*.

There are several measures to control the supply of tobacco products as follows:

1. Decision No. 843-N of the Government of the Republic of Armenia dated 19 July 2007 "On Determining the Procedure for Issuing Permit for Sale of Alcoholic Beverages and/or Tobacco Products in Public Catering Facilities" requires permission to be obtained to sell tobacco products in food establishments.

2. Article 389 of the Tax Code states that tobacco products (cigars, cheroots, cigarillos and cigarettes, of tobacco or of tobacco substitutes) are subject to stamping with excise stamps. Penalties for violations are specified in the Tax Code and the Criminal Code.

3. Under the CU TR 035/2014, Article 10 and Section XI state that tobacco products that have passed the assessment of conformity with the requirements of the Technical Regulations shall be marked with a single conformity sign on the products; Article 18 states that special stamps need to be applied to tobacco product packaging; Article 19 indicates that name of the legal entity, manufacturer or importer needs to be provided; and Section IX states that tobacco products have to undergone a conformity assessment and the applicant submitting the declaration and supporting documents should be registered as a legal entity or individual in compliance with the laws of the member state, or as an individual business entity such as a manufacturer or importer.

4. The 2020 TC Law does not have explicit provisions that require a specific license to manufacture, import, export, distribute and sell tobacco products, tobacco substitutes and tobacco imitations.

According to the Ministry of Finance, smuggling of tobacco products in Armenia is insignificant, partly because it has one of the lowest retail prices in the region. Both Customs and the Revenue Office are able to follow cigarettes from production or import to final sale. Customs collect data on cross-border trade in tobacco products, which can be shared with relevant ministries.

Gaps:

1. Armenia is not yet a Party to the Protocol to Eliminate Illicit trade in Tobacco Products.
2. There is no tracking and tracing system to further secure the distribution system and assist in the investigation of illicit trade.
1. There is no licensing system for the manufacture, import, distribution and retail of tobacco products, tobacco substitutes and imitations of tobacco products.

It is therefore recommended that the Government of Armenia accede to the Protocol on Illicit Trade in Tobacco Products and introduce legislative and administrative measures to address gaps and fulfil obligations under Article 15 of the WHO FCTC, including development of a practical tracking and tracing system to secure the distribution system and support the investigation of illicit trade; a licensing system for manufacturers, importers, distributors and retailers of tobacco products, substitutes and imitations; among others.

Article 16. Sales to and by minors

Article 16 requires "*measures at the appropriate government level to prohibit the sales of tobacco products to persons under the age set by domestic law, national law or eighteen*."

Article 5(1) of the 2020 TC Law prohibits the sale of tobacco products, tobacco substitutes or imitations of tobacco products to persons under 18 years of age. However, enforcement and compliance remain a challenge. Minors can still easily access tobacco products.

Article 16.1(a) requires Parties to ensure that "*all sellers of tobacco products place a clear and prominent indicator inside their point of sale about the prohibition of tobacco sales to minors and, in case of doubt, [to] request that each tobacco purchaser provide appropriate evidence of having reached full legal age*".

Article 5(1) of TC Law 2020 states the seller may require the buyer to present an identification for proof of legal age.

It is recommended that the Government of Armenia strengthen enforcement of this provision of the law.

Article 16.1(b) requires Parties to "*ban the sale of tobacco products in any manner by which they are directly accessible, such as store shelves*;".

Article 5(3) of the 2020 TC Law bans the sale of tobacco products, accessories, tobacco substitutes or imitations of tobacco products by self-service (i.e. in any manner by which they are directly accessible).

Armenia has met the obligations under Article 16.1(b).

Article 16.1(c) requires Parties to prohibit "*the manufacture and sale of sweets, snacks, toys or any other objects in the form of tobacco products which appeal to minors*".

The 2020 TC Law prohibits manufacturing, importing or selling food or toys, constituting imitations of tobacco products.

Armenia has met the obligations under Article 16.1(c).

Article16.1(d) calls on each Party to ensure *"that tobacco vending machines under its jurisdiction are not accessible to minors and do not promote the sale of tobacco products to minors"*.
Article 5(4) of the 2020 TC Law bans the sale of tobacco products, accessories, tobacco substitutes or imitations of tobacco products through vending machines or other mechanical devices.

Armenia has met the obligations under Article 16.1(d).

Article 16.3 calls on Parties to *"endeavour to prohibit the sale of cigarettes individually or in small packets which increase the affordability of such products to minors"*.

Article 5(7) of the 2020 TC Law prohibits the sale of tobacco individually or in open or smaller packets. Currently there are no cases of single stick sales in Armenia. It is prohibited since 2005 and well complied with.

Article 16.6 calls on Parties to *"provide penalties against sellers and distributors in order to ensure compliance."*

The Administrative Offences Code imposes penalties on retailers and sellers for violations on sale to and by minors.

Article 16.7 calls on Parties to "*adopt and implement effective legislative, executive, administrative or other measures to prohibit the sales of tobacco products **by** persons under the age set by domestic law, national law or eighteen*."

The 2020 TC Law prohibits the sale of tobacco products, tobacco substitutes or imitations of tobacco products by persons under 18 years of age.

Article 17. Provision of support for economically viable alternative activities

Article 17 calls on Parties to promote, as appropriate, *"in cooperation with each other and with competent international and regional intergovernmental organizations… economically viable alternatives for tobacco workers, growers and, as the case may be, individual sellers"*.

Tobacco is grown in Armenia. Overall, 393 hectares in Armenia are used for tobacco cultivation, mainly in Tavush, Ararat, Armavir and Vayots Dzor. While this is not a large area, the area used for tobacco growing expanded by 96 hectares between 2009 and 2018. The volume of harvested crop was 457 tons in 2009 and 527 tons in 2018.[1,2]

Gap: There is no programme to promote economically viable alternatives for tobacco growers, workers and individual sellers.

[1] Statistical Committee of the RA, Sown areas of agricultural crops, planting area of permanent crops, gross harvest and average crop capacity for 2009. https://www.armstat.am/file/article/canqer_h_2009.pdf
[2] Statistical Committee of the RA, Sown areas of agricultural crops, planting area of permanent crops, gross harvest and average crop capacity for 2018. https://www.armstat.am/file/article/29_gt_2018.pdf

It is recommended that the relevant government agencies be made aware of the obligation under Article 17 and to promote economically viable alternatives to tobacco growers, workers and individual sellers. It is also recommended that Armenia promote economically viable alternatives to tobacco growing through mobilization of support by development partners.

Article 18. Protection of the environment and the health of persons

In Article 18, Parties agree 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".*

There is no information on any measure or policy in place to protect the environment and health of persons involved in tobacco manufacturing.

It is therefore recommended that the Ministry of Labour and Social Affairs, Ministry of Environment and the Ministry of Economy work together and make joint efforts in meeting this treaty obligation. It is also recommended that MoH submit a request to the aforementioned Ministries to require, by law, tobacco farms and factories to pass an environmental impact assessment, to have an environmental protection plan in place, and to ensure farms and factories meet occupational health and safety standards.

Article 19. Liability

Article 19 requires Parties to consider, for the purpose of tobacco control, *"taking legislative action or promoting their existing laws, where necessary, to deal with criminal and civil liability, including compensation where appropriate"*.

There is no provision in the tobacco control legislation to deal with criminal and civil liability. The minimum standard of holding the tobacco companies accountable would be to enforce the current law and ensure tobacco companies comply.

It is therefore recommended that the Government of Armenia enforce and ensure that the tobacco industry comply with the existing tobacco control-related legislation. It is also recommended that Armenia review and further the options of implementing Article 19 in its national context. Armenia may, as necessary, introduce a provision in its tobacco control legislation to deal with civil and criminal liability, including compensation where appropriate, and strengthen its existing civil and criminal law frameworks.

Article 20. Research, surveillance and exchange of information

Article 20 requires Parties to *"develop and promote national research and to coordinate research programmes at the regional and international levels in the field of tobacco control"*.

Armenia has conducted research and surveillance in the field related to tobacco control in collaboration with WHO and the US CDC. For each survey, financial and technical assistance were provided as well as training for key country personnel on survey methodology, implementation and analysis. GYTS was conducted in 2009 and the WHO STEPS Survey was conducted in 2016. Demographic and Health Survey 2015-2016 was conducted with the help of the USAID. There is, however, a need for regular data collection.

Gaps:

1. Youth and adult surveys to assess trends and risk factors of tobacco use in Armenia were conducted some time ago and require an update.
2. There is a lack of financial resources to conduct regular youth and adult surveys for effective tobacco surveillance.

It is therefore recommended that the Government of Armenia conduct regular youth and adult nationally representative surveys at least every 5 years and establish a national system for the epidemiological surveillance of tobacco consumption and related social, economic and health indicators. It is also recommended that Armenia establish a national programme for the surveillance of tobacco consumption and exposure to tobacco smoke and to integrate it into national, regional and global health surveillance programmes.

Article 21. Reporting and exchange of information

Article 21 requires each Party to *"submit to the Conference of the Parties, through the Secretariat, periodic reports on its implementation of this Convention*".

Armenia has provided five implementation reports in 2007, 2010, 2012, 2014, and 2020. Armenia is encouraged to continue to do so .

As the COP established a new two-year cycle of Parties implementation reports starting from 2012 with a deadline of submission six months prior to each COP session, it is therefore recommended that the government start the preparation of the next report well in advance to meet the deadline.

It is also recommended that the relevant Government departments contribute to the preparation of country reports by providing data as requested in the reporting instrument of the WHO FCTC in a timely manner.[1]

Article 22. Cooperation in the scientific, technical, and legal fields and provision of related expertise

Article 22 requires that Parties *"shall cooperate directly or through competent international bodies to strengthen their capacity to fulfil the obligations arising from this Convention, taking into account the needs of developing country Parties and Parties with economies in transition. Such cooperation shall promote the transfer of technical, scientific and legal expertise and technology, as mutually agreed, to establish and strengthen national tobacco control strategies, plans and programmes"*.

The UN, WHO, the Convention Secretariat, the Bloomberg Initiative and the US NIH have provided technical and financial assistance to the Government of Armenia.

[1]One of the approaches found efficient in other countries is to coordinate with the government agencies and other stakeholders who have the necessary information to contribute with to the preparation of the national implementation report, for example through requesting initiation of data collection by such entities in a circular note sent by the Ministry of Health focal point and later, once data have been collected by the relevant entities, to organize a meeting for the finalization of the implementation report.

With the support of the UN Interagency Task Force on Prevention and Control of Noncommunicable Diseases (UNIATF), Armenia undertook an investment case study on the prevention and control of noncommunicable diseases (NCDs) in 2019. The investment case looked at the costs of NCDs and the benefits of four highly cost-effective packages of policy interventions, including addressing tobacco smoking.

Following submission of an application to the Convention Secretariat, Armenia was selected to be part of the FCTC 2030 project, funded by the governments of Australia, Norway and the United Kingdom. The FCTC 2030 project will be providing Armenia with financial and technical support to accelerate implementation of the WHO FCTC and will also support the conduct of an investment case for tobacco control.

Within the framework of Bloomberg Grant, Armenia NIH is implementing a project entitled: "Decreasing smoking prevalence in Armenia by enhancing comprehensive tobacco control policy and taxation for tobacco products project for 2019-2020" which will be extended due to the COVID-19 pandemic. The US NIH has also funded a project, "Smoke-free Air Coalitions in Georgia and Armenia: A Community Randomized Trial", that Armenia NIH and the American University of Armenia is implementing in collaboration with Emory University and the Georgia National Center for Disease Control and Public Health.

Tobacco use was mentioned in Armenia's UNDAF 2016-2020 and the SDG Voluntary National Review 2020, none discussed the WHO FCTC nor tobacco control strategies extensively. With the conclusion of the UNDAF 2016-2020, Armenia is in the process of developing the UN Sustainable Development Cooperation Framework 2020–2025. This is an opportunity to include implementation of the WHO FCTC. The Fourth Session of the Conference of the Parties, in Decision FCTC/COP4(17)[1] had acknowledged the importance of integrating WHO FCTC implementation into the UNDAF at country level and as part of a single UN strategy.

Gap – Strengthening implementation of the WHO FCTC has not been highlighted as a priority in key strategic and policy documents.

It is therefore recommended that MoH discuss with the UN Resident Coordinator and the Ministry of Foreign Affairs to include implementation of the WHO FCTC in the UNSDCF in 2021 and beyond, and discuss priority activities during the upcoming meeting of the UN Country Team. The tobacco control activities may include priorities identified in the joint needs assessment report. It is further recommended that the Government of Armenia actively seek opportunities to cooperate with other Parties, competent international organizations and development partners present in the country to support implementation of the Convention.

Article 26. Financial resources

In **Article 26**, Parties recognize *"the important role that financial resources play in achieving the objective of this Convention"*. Furthermore, Article 26.2 calls on each Party to *"provide financial support in respect of its national activities intended to achieve the objective of the Convention, in accordance with its national plans, priorities and programmes"*.

[1] See FCTC/COP/4/REC/1, Decisions and ancillary documents, available at: https://apps.who.int/gb/fctc/E/E_cop4.htm

The Government of Armenia fully recognizes the importance of financial resources in implementation of the Convention. The MoH and NIH have annual budget allocation from the government, supplemented with additional financial support from the Convention Secretariat, WHO and the Bloomberg Initiative to achieve the objectives of the WHO FCTC.

Gaps:

1. The National Tobacco Control Programme lacks sustainable funding to support key tobacco control activities.
2. Other relevant ministries that have obligations to implement the Convention have not allocated staff time and budget to implementation of the Convention.

It is therefore recommended that the Government of Armenia allocate sufficient budget and staff time to support implementation of the Convention and enforcement of the national tobacco control law.

Article 26.3 requires Parties to *"promote, as appropriate, the utilization of bilateral, regional, subregional and other multilateral channels to provide funding for the development and strengthening of multisectoral comprehensive tobacco control programmes of developing country Parties and Parties with economies in transition"*.

As described in Article 22, Armenia has received financial and technical assistance from the WHO, US NIH and the Bloomberg Initiative to support tobacco control activities. And following submission of an application to the Convention Secretariat, Armenia was selected to be part of the FCTC 2030 project, funded by the governments of Australia, Norway and the United Kingdom. The FCTC 2030 project will be providing Armenia with financial and technical support.

It is therefore recommended in line with Article 26.3 of the Convention that the Government of Armenia continue to seek assistance from development partners and promote the inclusion of implementation of the Convention in bilateral and multilateral agreements and action plans developed with these agencies.

Article 26.3 specifically points out that projects promoting *"economically viable alternatives to tobacco production, including crop diversification should be addressed and supported in the context of nationally developed strategies of sustainable development"*.

The Government has not to date promoted such projects. The national strategies of sustainable development have not addressed economically viable alternatives to tobacco production, including crop diversification.

It is therefore recommended that the MoH and relevant ministries make efforts in implementing obligations under Article 26.3 of the Convention.

Article 26.4 stipulates that *"Parties represented in relevant regional and international intergovernmental organizations and financial and development institutions shall encourage these entities to provide financial assistance for developing country Parties and for Parties with economies in transition to assist them in meeting their obligations under the Convention, without limiting the rights of participation within these organizations"*.

Armenia has been successful in mobilizing financial assistance from international organizations and development partners (listed under Article 22 of this report).

It is therefore recommended that Armenia continue to be a strong advocate and utilize the potential of Article 26.4 to move the Convention higher up the international development agenda. It is also recommended that other ministries proactively urge regional and international organizations and financial institutions to provide financial assistance to developing countries and support them in implementing the Convention.

ANNEX

List of Government agencies and their representatives, legislative bodies, members of the international team and nongovernmental organizations participating in the joint needs assessment

Government of the Republic of Armenia:

1. Human Rights Defender Office of the Republic of Armenia
   - Nina Pirumyan, Head of Research and Education Center
   - Tigran Melkonyan, Deputy Head of Research and Education Center
   - Levon Sargsyan, Head of the Department of Business Right Protection

2. Ministry of Economy of the Republic of Armenia
   - Varos Simonyan, Deputy minister
   - Zhanna Zakaryan, Acting Head of Quality Infrastructure Development Department
   - Naira Vardanyan, Chief Specialist of Quality Infrastructure Development Department

3. Ministry of Education, Science, Culture and Sports of the Republic of Armenia
   - Arthur Martirosyan, Deputy minister
   - Anahit Muradyan, Chief specialist of the Department of Public Education
   - Marina Aghajanyan, Chief Specialist of the Development Programs and Monitoring Department
   - Robert Stepanyan, Head of Development Programs and Monitoring Department
   - Anahit Muradyan, Chief specialist, Department of Public Education
   - Artur Sedrakyan

4. Ministry of Finance of the Republic of Armenia
   - Ori Alaverdyan, Head of Revenue Policy and Administration Methodology Department

5. Ministry of Health of the Republic of Armenia
   - Arsen Torosyan, Minister
   - Lena Nanushyan, Deputy minister
   - Mariam Mnatsakanyan, Chief Organizer at the Public Health division

6. Ministry of Justice of the Republic of Armenia
   - Arman Ghajoyan, Chief Specialist of the Foreign Relations Department of the International Legal Cooperation Department

7. National Assembly of Republic of Armenia
   - David Melik- Nubaryan, Expert, Standing Committee on Healthcare and Social Affairs
   - Marietta Khurshudyan, Expert, Standing Committee on Healthcare and Social Affairs

8. National Institute of Health of the Republic of Armenia
   - Aleksander Bazarchyan, Director
   - Arevik Torossyan, Head of Health Promotion and Tobacco control Programs Department
   - Shushanik Isahakyan, National Health Account Expert
   - Davit Petrosyan, Chief Advisor

9. Office of the Prime Minister of the Republic of Armenia
    - Liana Ghaltaghchyan, Deputy Chief of Prime Minister staff

Nongovernmental organizations and academic institutions:

1. American University of Armenia (AUA)
    - Arusyak Harutyunyan
    - Varduhi Hayrumyan
    - Zaruhi Grigoryan

2. Non-governmental organization "Be Informed"
    - Arusyak Mkrtchyan, Founder

Secretariat of the WHO FCTC

1. Adriana Blanco Marquizo, Head
2. Andrew Black, Coordinator, Development Assistance
3. Trinette Lee, Technical Officer, Development Assistance
4. Patrick Musavuli, Technical Officer, Development Assistance
5. Nino Maglakelidze, Consultant, FCTC 2030 Project
6. Elena Egorova, Team Assistant
7. Anita Gschwend, Assistant

WHO

1. Egor Zaitsev, WHO Representative, WHO Country Office in Armenia
2. Henrik Khachatryan, National Professional Officer, WHO Country Office in Armenia
3. Kristina Mauer-Stender, Programme Manager, Tobacco Control, WHO Regional Office for Europe
4. Angela Ciobanu, Technical Officer, Tobacco Control, WHO Regional Office for Europe

UN Resident Coordinator Office

Shombi Sharp, UN Resident Coordinator

UNDP

1. Dmitri Mariyasin, UNDP Resident Representative in Armenia
2. Michaela Stojkorska, Deputy Resident Representative, UNDP Armenia
3. Anna Gyurjyan, Portfolio Manager, UNDP Armenia
4. Dudley Tarlton, Programme Specialist, HIV, Health and Development, UNDP Istanbul Regional Hub for Europe and Central Asia
5. John Macauley, Regional Programme Specialist, HIV, Health and Development, UNDP Istanbul Regional Hub for Europe and Central Asia

UK Embassy

David Moran, British Chargé d'Affaires ad interim in Armenia

EU Delegation

Andrea Wiktorin, Ambassador of the European Union to the Republic of Armenia, Head of Delegation

World Bank Armenia office

Marianna Koshkakaryan, Health Consultant

Program of the mission

Day 1, Tuesday 14 July 2020. Launch of FCTC 2030 Project		
11:15 – 11:30 Yerevan 09:15 – 09:30 Geneva	Connect to Zoom Meeting Room	
11:30 – 12:30 Yerevan 09:30 – 10:30 Geneva	Bilateral meeting with RA Minister of Health Arsen Torosyan (closed meeting) Key participants: - Egor Zaitsev, WHO Representative - Adriana Blanco Marquizo, Head, Convention Secretariat - Andrew Black, Coordinator, Development Assistance, Convention Secretariat - Dudley Tarlton, Programme Specialist, UNDP Istanbul	Moderator: NIH
12:30 – 13:30 Yerevan 10:30 – 11:30 Geneva	Lunch	
13:30 – 13:45 Yerevan 11:30 – 11:45 Geneva	Participants connect to Zoom Meeting Room (Live video available - https://www.facebook.com/WHOArmenia/posts/2640682816258639)	
13:45 – 14:00 Yerevan 11:45 – 12:00 Geneva	Introduction of the FCTC 2030 Project - By Andrew Black, Coordinator, Convention Secretariat	Moderator: NIH
14:00 – 14:15 Yerevan 12:00 – 12:15 Geneva	Opening and Launch of FCTC 2030 Project - Deputy Minister of Health Dr Lena Nanushyan	Moderator: NIH
14:15 – 14:30 Yerevan 12:15 – 12:30 Geneva	Remarks by high-level officials - Other Ministries - David Moran, British Chargé d'Affaires ad interim	Moderator: NIH
14:30 – 15:00 Yerevan 12:30 – 13:00 Geneva	Remarks - Shombi Sharp, UN Resident Coordinator - Egor Zaitsev, WHO Representative - Dmitry Mariyasin, UNDP Resident Representative - Adriana Blanco Marquizo, Head, Convention Secretariat	Moderator: NIH
Day 2, Wednesday 15 July 2020. Stakeholders Meeting		
13:30 – 14:00 Yerevan	Participants connect to Zoom Meeting room	

11:30 – 12:00 Geneva		
14:00 – 14:30 Yerevan 12:00 – 12:30 Geneva	Round of introductions	Moderator: NIH
14:30 – 14:45 Yerevan 12:30 – 12:45 Geneva	Brief report on progress of tobacco control in Armenia & priorities for Armenia	MOH Tobacco Control Focal Point
14:45 – 15:00 Yerevan 12:45 – 13:00 Geneva	Overview of the WHO FCTC and Mission Objectives	Andrew Black, Convention Secretariat
15:00 – 15:10 Yerevan 13:00 – 13:10 Geneva	The WHO FCTC in the 2030 development agenda	Dudley Tarlton, UNDP
15:10 – 15:20 Yerevan 13:10 – 13:20 Geneva	Tobacco control in the Region	WHO EURO/WHO Armenia
	Stakeholder Presentations	
15:20 – 17:00 Yerevan 13:20 – 15:00 Geneva	Role of different Government Sectors in tobacco control - **Ministry of Finance** - **Ministry of Economy** - **Prime Minister Office** - **Ministry of Justice (participated but didn't speak)** - **Ministry of Education, Science, Culture and Sport (participated but didn't speak)** - **Human Rights Defender Office** - **Health Commission** - **American University of Armenia** Open forum for other interventions and Q&A	Moderator: NIH

Day 3, Thursday 16 July 2020. Bilateral Meetings

Time	**Group 1**	**Group 2**
	- Chair: Alexander Bazarchyan - Armenia Support: Henrik Khachatryan (Zoom co-host) - Zoom host/co-host: Elena Egorova & Anita Gschwend - Consultant (report writer): Nino Maglakelidze - Interpreters #1: Kachatur Adumyan, Marina Sahakyan, Artashes Emin	- Chair: Arevik Torosyan - Armenia Support: Shushanik Isahakyan (Zoom host) - Zoom co-host/Rapporteur: Trinette Lee - Interpreters #2: Guevork Guevorkian, Vladimir Ter-Ghazaryan, Vahagn Petrosyan

11:10 – 11:30 Yerevan 09:10 – 09:30 Geneva	Participants connect to Zoom	
11:30 – 12:30 Yerevan 09:30 – 10:30 Geneva	***Ministry of Finance*** Moderators: Dudley Tarlton & Andrew Black	***Ministry of Justice*** Moderators: John Macauley & Trinette Lee/Patrick Musavuli
13:40 – 14:00 Yerevan 11:40 – 12:00 Geneva	Participants connect to Zoom	
14:00 – 15:00 Yerevan 12:00 – 13:00 Geneva	***Ministry of Economy*** Moderators: Dudley Tarlton & Andrew Black	***Human Rights Defender Office*** Moderators: John Macauley & Patrick Musavuli/Trinette Lee
15:10 – 15:30 Yerevan 13:10 – 13:30 Geneva	Participants connect to Zoom	
15:30 – 16:30 Yerevan 13:30 – 14:30 Geneva	***Prime Minister's Office*** Moderator: Andrew Black & John Macauley	***National Assembly of Republic of Armenia*** Moderator: Dudley Tarlton & Patrick Musavuli/Trinette Lee
Day 4, Friday 17 July 2020. Bilateral Meetings		
Time	Group 1 - Chair: Alexander Bazarchyan - Armenia Support: Henrik Khachatryan (Zoom co-host) - Zoom co-hosts/Rapporteur: Elena Egorova & Anita Gschwend - Interpreters #1: Kachatur Adumyan, Marina Sahakyan, Artashes Emin	Group 2 - Chair: Arevik Torosyan - Armenia Support: Shushanik Isahakyan (Zoom co-host) - Zoom co-host/Rapporteur: Trinette Lee - Consultant (Report writer): Nino Maglakelidze - Interpreters #2: Guevork Guevorkian, Vladimir Ter-Ghazaryan, Vahagn Petrosyan
11:10 – 11:30 Yerevan 09:10 – 09:30 Geneva	Participants connect to Zoom	
11:30 – 12:30 Yerevan 09:30 – 10:30 Geneva		*Ministry of Education, Science, Culture and Sport* Moderators: John Macauley & Andrew Black

13:40 – 14:00 Yerevan 11:40 – 12:00 Geneva	Participants connect to Zoom		
14:00 – 15:00 Yerevan 12:00 – 13:00 Geneva	CSOs Moderators: Patrick Musavuli & John Macauley	Presentation & Discussion with Academia & Students Moderators: Dudley Tarlton & Nino Maglakelidze	
	Mission team drafts recommendations for debrief		
Day 5, Tuesday 21 July. Debrief			
12:40 – 13:00 Yerevan 10:40 – 11:00 Geneva	Participants connect to Zoom		
13:00 – 14:00 Yerevan 11:00 – 12:00 Geneva	UNRC, UNDP RR & UNCT - Chair: Egor Zaitsev, WHO Representative - Mission leads: Andrew Black, Convention Secretariat & Dudley Tarlton, UNDP		
14:10 – 14:30 Yerevan 12:10 – 12:30 Geneva	Participants connect to Zoom		
14:30 – 15:30 Yerevan 12:30 – 13:30 Geneva	Debrief with Minister of Health - Initiation of meeting by NIH - Opening: Egor Zaitsev, WHO Representative - Technical debrief by Mission Leads: Convention Secretariat & UNDP - UNRC, UNDP RR & UNCT		Chair/Moderator: NIH