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TOBACCO CONTROL IN THE AMERICAS

This document is a follow-up report on Resolutions CSP25.R12 and CSP25.R15 of the 25th Pan American Sanitary Conference (September 1998).

The report describes the progress achieved by the Organization in the implementation of the Regional Program on Prevention and Control of Tobacco Use during the period 1998-1999 in the Americas. It also contains a follow-up on the feasibility of adopting a regional convention on tobacco control through the Organization of American States.

The Executive Committee is invited to examine this report and make recommendations for further action.

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1. Background

The Director presented an updated report and proposal for a Regional Program on Prevention and Control of Tobacco Use to the 25th Pan American Sanitary Conference in September 1998. As a result of this presentation and the ensuing discussions the Conference adopted two resolutions on the subject:

1.1 *Resolution CSP25.R12: Prevention and Control of Tobacco Use*

This resolution adopted the recommendations presented in Document CSP25/11, requesting that Member States:

- take urgent steps to protect children and adolescents through the regulation of advertising, to enforce laws and ordinances aimed at eliminating the sale of tobacco products to minors, and to establish effective prevention programs;
- designate a staff member or unit to be in charge of intra- and inter-ministerial coordination of the national programs for the prevention and control of smoking;
- prepare and implement a plan of action, with educational, legislative, regulatory, and fiscal components, for prevention of tobacco use.

The resolution also requests the Director to mobilize budgetary and extrabudgetary resources needed to support and strengthen the regional program to control smoking.

1.2 *Resolution CSP25.R15: Regional Convention against Tobacco Use*

In view of the concerns expressed by Member States about the impact at all levels of the cultivation of tobacco and the manufacture and marketing of tobacco products, this resolution requests the Director to study the feasibility of preparing a regional convention against tobacco use and submit a progress report to the Governing Bodies in 1999. The Director made an oral report on this topic to the Subcommittee on Planning and Programming in March 1999.

2. Tobacco-related Activities of PAHO during 1998-1999

Many countries in the Americas have not yet enacted effective tobacco control measures in spite of the extensive efforts of the Secretariat of PAHO/WHO.

As a result of the recommendations contained in Resolution CSP25.R12, PAHO is implementing a series of programs and projects to enhance Regional action to guide

governments in launching policies, legislation, programs, education, and research to prevent the initiation of tobacco use, to support widespread cessation of tobacco consumption, and to protect non-smokers from environmental tobacco pollution.

3. Lines of Action of the Regional Program on Prevention and Control of Tobacco Use

3.1 *Mobilization of Resources*

PAHO's regular budget resources, as well as extrabudgetary funds and financial partnerships listed below, have permitted the start up of important activities in communication, monitoring, prevention, smoking cessation and capacity building. At the same time, PAHO has increased human resources dedicated to the technical development of the Program through the addition of three short-term consultants and a professional position for a regional advisor to the Regional Program on Prevention and Control of Tobacco Use. This post is partially funded with Canadian support. In addition, funds from the US Centers for Disease Control and Prevention and the National Cancer Institute have permitted PAHO to continue the operation of an inter-country program through a consultant for the Interagency Plan, operating out of Caracas, Venezuela. The following financial resources have been mobilized by PAHO during 1998–1999:

- *United States:* Centers for Disease Control and Prevention, American Cancer Society, National Cancer Institute, and SmithKline and Beecham. Total 1998-1999 contributions: US\$ 214,000;
- *Canada:* Health Canada, Research Institute on Tobacco Control (RITC). Total 1998-1999 contributions: \$150,000;
- *Government of Spain:* \$382,000;
- other PAHO/WHO extrabudgetary funds: \$175,000.

3.2 *Activities with Collaborating Centers and Agencies*

- Johns Hopkins University, through its WHO Collaborating Center on International Health Law, provided support to conduct a feasibility study for a regional convention on tobacco control and provided technical support for putting in place a research project on legislation for the Region. A professor from that Center, appointed by the WHO Tobacco-Free Initiative, was invited to the meeting of the Latin American Parliament (PARLATINO) in Havana, Cuba, to discuss international issues of tobacco control.

- National Cancer Institute of Brazil (INCA): this PAHO/WHO Collaborating Center was instrumental in developing methodologies on prevention of tobacco use in schools and communities. This center was also involved in regional training and building strategic alliances in the Southern Cone.
- National Institute on Drug Abuse and Dependence of Costa Rica (IAFA): the PAHO/WHO Collaborating Center has been pivotal in the activation of the project "Towards Tobacco-Free Generations of Youth and Children", which is being implemented at the national level with technical support from PAHO. This project will soon be extended to Chile, Uruguay, and Venezuela.
- US Centers for Disease Control and Prevention (CDC): in addition to its financial support to the Interagency Plan on Tobacco or Health for Latin America, CDC is providing technical support to the Capacity Building Regional Project in data collection on adolescent tobacco use and on a special legislation project that will gather and analyze data from different Member States.
- Argentinean Anti-Tobacco Coalition (UATA): this agency has taken responsibility for implementing a Southern Cone support group to enhance intercountry cooperative programs.

3.3 *Formulation and Management of National Plans and Programs*

In line with the recommendations of the 25th Pan American Sanitary Conference, PAHO has taken the following steps to support local action:

- appointment of tobacco control and prevention focal points at most of the PAHO/WHO Representatives' Offices;
- designation of local nongovernmental organizations (NGOs)—the Latin American Coordinating Committee on Tobacco Control (CLACCTA) in particular—to harness public and private support for the anti-tobacco cause at the national level;
- financing and implementing capacity building seminars with strong components of program planning, design, evaluation and management;
- arrangement of country missions to follow up on the progress of the different tasks set out by the 25th Pan American Sanitary Conference.

3.4 *Communication for Health and Advocacy*

Through its Health Promotion and Social Communication Program, PAHO is carrying out two workshops for journalists and other communicators with a twofold purpose: enhance communication skills to promote the anti-tobacco cause (advocacy), and learn how the tobacco industry and advertising companies promote tobacco products, especially those that target children and adolescents.

3.5 *Capacity Building*

Together with social communication, advocacy, and program management, PAHO is carrying out a series of regional seminars and workshops for training of trainers in areas such as policy-making, needs assessment, comprehensive prevention approaches, and smoking cessation. This project is financed with PAHO extrabudgetary funds, which will be complemented with WHO resources to ensure full regional coverage.

3.6 *Monitoring, Needs Assessment, and Evaluation*

PAHO has designed and tested a template to facilitate reporting by the countries on the different aspects of tobacco production, levels of consumption, and health consequences of tobacco use. The instrument has incorporated the World Bank's questionnaire on the econometrics of tobacco. At the same time, a proposal to the Research Institute on Tobacco Control (RITC) of Canada would assess the current status of legislation throughout the Region.

Finally, a consultant has been hired to gather and collate available data to assess the tobacco-attributable burden of disease. The project also aims to develop regional standards to improve the accuracy of epidemiological assessment, which may provide information to increase awareness among policy makers in different sectors.

3.7 *Development of Evidence and Prevention Models*

With funding from the Government of Spain, PAHO has been able to update and adjust evidence-based methodologies to discourage the onset of tobacco use among children and youth. The process of activating national programs comprises: support by PAHO consultants, development of appropriate methodologies, training to put methods into place, and monitoring and evaluation of the process and outcome. One country, Costa Rica, has achieved full implementation with PAHO's support and the concerted efforts of both the Ministries of Education and Health, the National Center on Drugs, and the National Institute on Substance Abuse.

3.8 *Promotion of Policy and Legislation*

In addition to the basic set of recommendations presented to the Director at the 25th Pan American Sanitary Conference, aiming at putting in place comprehensive national programs which called, inter alia, for the appointment of coordinators on tobacco control and the establishment of smoke-free environments, the Conference requested PAHO to engage in implementing key elements for accomplishing legislation targets.

In November 1998, the Health Commission of the Latin American Parliament resolved to appoint a special committee to examine and take appropriate action to establish effective legislation in Member States to curtail the negative impact of tobacco use. As a follow-up to this recommendation, the Latin American Parliament called a special forum on this topic at its meeting in May 1999 in Havana, Cuba.

3.9 *Information Dissemination*

The Regional Program on Prevention and Control of Tobacco Use operates a Web page to maintain a steady source of updated and relevant information for the media, the general public, and tobacco or health focal points.

In recent years PAHO has supported regional efforts to commemorate the World No Tobacco Day, including the production and dissemination of relevant materials, folders, posters and a public service announcement. In 1999, the focus has been on publications pertaining to the theme of this year: smoking cessation. A symposium and a monograph on the subject complement a series of information kits. This year, several private agencies and the US Coalition for World No Tobacco Day (WNTD) will carry out significant activities to commemorate WNTD in the United States.

3.10 *Special Activities and Events*

PAHO has continued to support a network of advocates and leaders from both governmental and nongovernmental organizations in Latin America. This network has been in operation since 1985 and has become the Coordinating Committee on Tobacco Control for Latin America (CLACCTA). As a partner organization to carry out the Interagency Plan supported by Health Canada and a consortium of interested agencies in the United States, CLACCTA has received international support, and PAHO has mobilized additional resources for this group to be represented at the II European and First Ibero-American Conference on Tobacco or Health, held in the Canary Islands in 1999. CLACCTA representatives and three PAHO regional advisors contributed to the conference through presentations and workshops. A CDC-sponsored PAHO consultant, in tandem with the Robert Wood Johnson Foundation, will ensure a similar CLACCTA representation and active participation in the program at the World Conference on Tobacco or Health, to be held in Chicago in October 2000.

4. Report on Resolution CSP25.R15: Regional Convention Against Tobacco Use

This resolution requested the Director to study the feasibility of preparing a regional convention against tobacco use and to submit a progress report to the Governing Bodies in 1999.

The first steps to execute this resolution involved communicating with and engaging the Organization of American States (OAS) in the process, as it is the only regional organization that has the constitutional mandate to prepare and adopt conventions.

At the same time, PAHO commissioned a group specialized in international legislation to draft a discussion paper to assess the feasibility of a regional tobacco convention. A grant from Health Canada supported this study.

The Director established a continuing line of communication with the OAS Secretary General, the Deputy Secretary General and Ambassadors to the OAS who had initially pledged their support to the idea of a regional convention. The Director was also invited to make a presentation on tobacco control and the possibility of a regional convention to the Permanent Council in March 1999.

At the technical level, the legal consultants responsible for drafting a discussion paper on the proposed convention, as well as the Director of the Division of Health Promotion and Protection (HPP) and the Regional Advisor on Tobacco or Health of the Division of Health Promotion and Protection, held three technical meetings with the Director of the Department of International Law of the OAS.

The Director provided a follow-up report to the 32nd Session of the Subcommittee on Planning and Programming in March 1999.

PAHO has continued to work closely with a team of consultants in international law, and maintains a continuing liaison with the responsible counterpart in Geneva, who is charged with developing a framework convention on tobacco control for WHO, in order to ensure compatibility between the two proposed instruments.

The initial idea for a regional convention was received with interest and enthusiasm by the OAS Secretary General, who immediately instructed all relevant specialized units of that organization to cooperate with PAHO and provide their guidance and support. The first step was to be the drafting of a resolution by an interested Member State to the OAS Permanent Council. This draft of the resolution was reviewed by PAHO's consultants, under the guidance of the OAS Department of International Law.

Nevertheless, before this proposed resolution reached the Permanent Council of the Organization of American States (OAS), a working group of that Council and some Member States raised doubts about the pertinence of the OAS getting involved in tobacco control, a matter that they interpreted as belonging strictly to the field of public health. At that point, it became evident that it would be difficult to reach a consensus among Member States, which is the way the OAS would develop a convention. In view of this situation, the Director decided that it would not be feasible to pursue a regional convention at this time.

5. Conclusions and Recommendations

The Secretariat considers that the most sensible way to implement the recommendations of the 25th Pan American Sanitary Conference is by continuing and strengthening the lines of action for the prevention and control of tobacco use depicted above. For this purpose, the Division of Health Promotion and Protection of PAHO has planned a workshop to review and update the Regional Program on Prevention and Control of Tobacco Use.

The systematic mobilization of resources to support Member States to develop comprehensive national plans appears to be the best way to proceed at this time. Plans would include monitoring of the epidemic, econometric studies, legislation, protection of non-smokers, educational and communication approaches to discourage smoking onset, and assistance to smokers through updated and accessible smoking cessation interventions.

It is also considered essential to continue proper levels of intersectoral support, as well as a solid network of international cooperation among organizations and Member States. PAHO will ensure the continuation of appropriate linkages with other United Nations organizations, and in particular with the Tobacco-Free Initiative of WHO and with UNICEF.

The Regional Program is currently being strengthened with extrabudgetary funds, and this has allowed an important addition of key human resources and operational funds for priority projects and programs. It is expected that Member States will follow suit by appointing a responsible national coordinator on tobacco control and prevention and by allocating additional resources, corresponding to the magnitude of the negative impact of tobacco on public health and development.

The Executive Committee is invited to review this report and make recommendations for further action.