International Tobacco Control Policy Evaluation Project

Impact Assessment of the WHO Framework Convention on Tobacco Control in Its First Decade

Geoffrey T. Fong (gfong@uwaterloo.ca)
University of Waterloo and
Ontario Institute for Cancer Research

OICR Ontario Institute for Cancer Research

European Conference on Tobacco or Health
Porto, Portugal—March 23, 2017

UNIVERSITY OF WATERLOO

The Global Tobacco Epidemic

- 1.1 billion people smoke (82% live in LMICs)
- 20th century: **100 million deaths**
- 21st century: **1 billion deaths**
- This year: 5.4 million users will die and 600,000 non-users will die of second-hand smoke
- Tobacco (smoking) causes 1/6 of all NCDs worldwide and is the only risk factor that causes all 4 leading NCDs
- **WHO: tobacco is the leading preventable cause of death and disability in the world**

itc
International Tobacco Control Policy Evaluation Project

Prevalence of current tobacco smoking (%) by region by sex, 2010 and 2025						
	2010			2025		
Region	male	female	both sexes	male	female	both sexes
AFRO	23.2	2.5	12.8	34.7	1.6	18.1
AMRO	24.1	14.2	19.0	16.3	8.6	12.3
EMRO	35.1	3.1	19.5	45.3	2.5	24.6
EURO	40.3	19.9	29.6	31.3	15.9	23.3
SEARO	33.1	2.9	18.2	27.5	1.2	14.5
WPRO	49.4	3.6	26.8	43.3	2.4	23.2
GLOBAL	**36.9**	**7.3**	**22.1**	**33.2**	**4.7**	**18.9**

WHO global report on trends in prevalence of tobacco smoking 2015

itc
International Tobacco Control Policy Evaluation Project

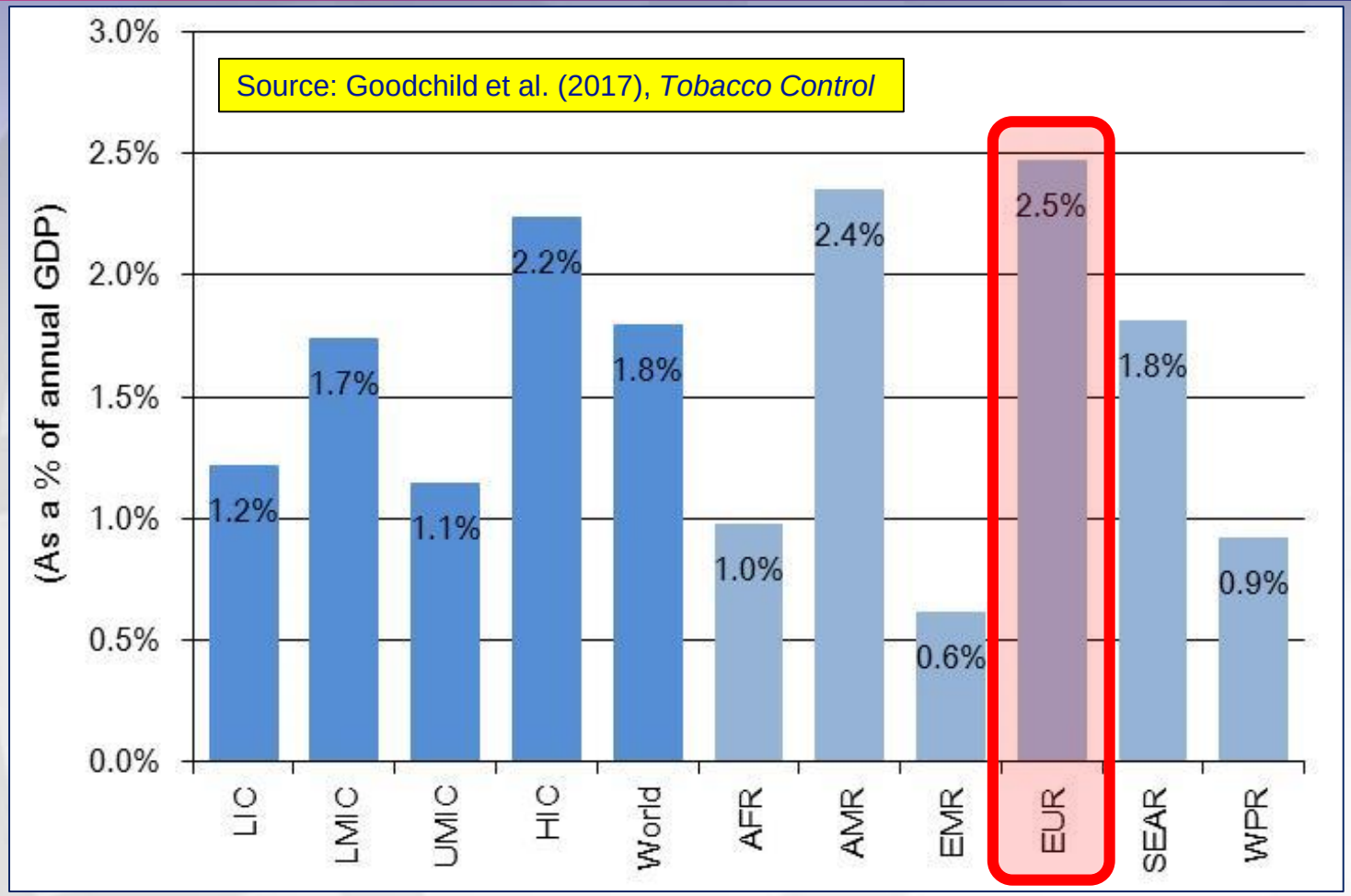
Percentage of all deaths caused by tobacco by WHO Region

WHO Region	Proportion of all deaths attributable to tobacco (%)		
	Men	Women	All adults
African	5	1	3
Americas	17	15	16
Eastern Mediterannean	12	2	7
European	25	7	16
South East Asian	14	5	10
Western Pacific	14	11	13
Global	16	7	12

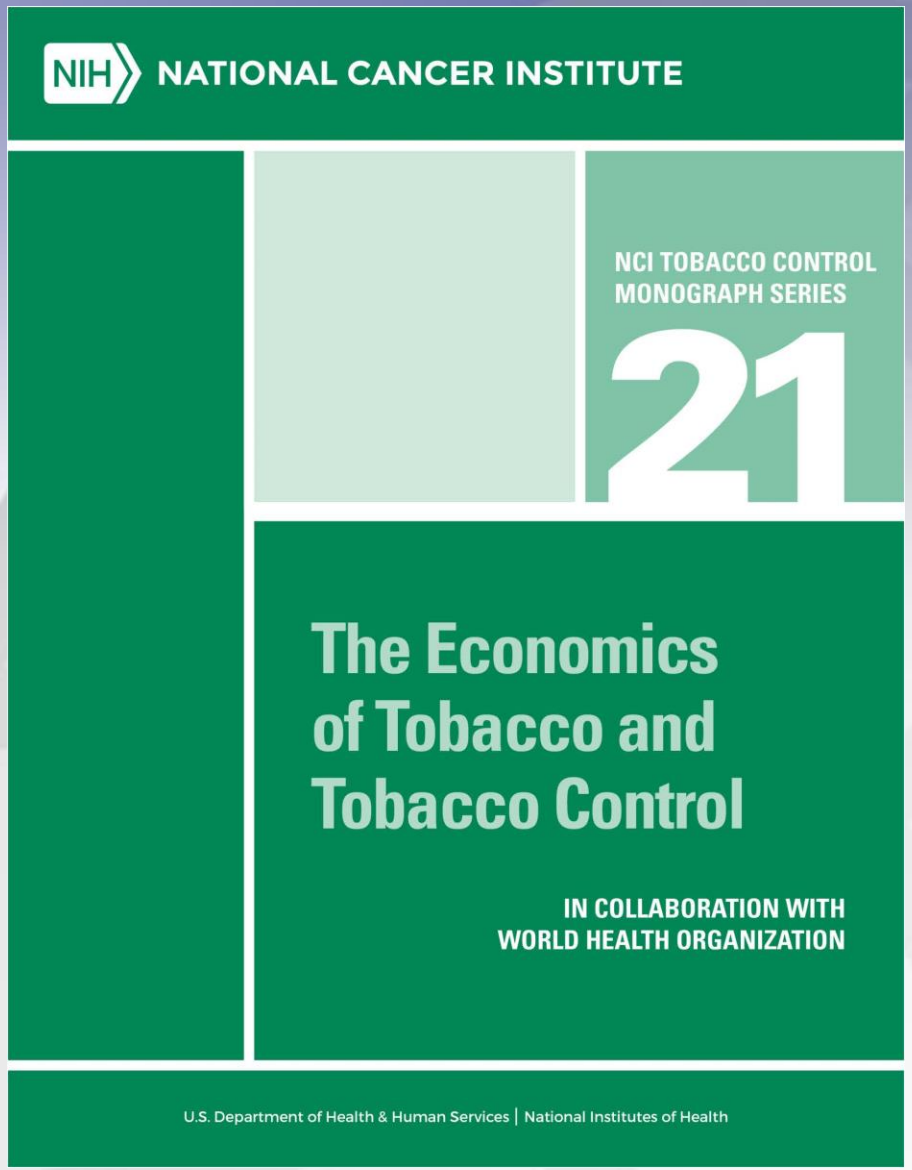
- One in 6 deaths in Europe are caused by tobacco (nearly all due to smoking);
- Smoking causes one in 4 deaths among EU men

itc
International Tobacco Control Policy Evaluation Project

Economic Costs of Smoking-Attributable Diseases as Share of GDP, 2012, by Income Group and WHO Region



itc
International Tobacco Control Policy Evaluation Project



Tobacco use causes over $1 Trillion per year in economic losses

https://cancercontrol.cancer.gov/brp/tcrb/monographs/21/index.html

itc
International Tobacco Control Policy Evaluation Project

"Tobacco is the most effective agent of death ever developed and deployed on a worldwide scale."

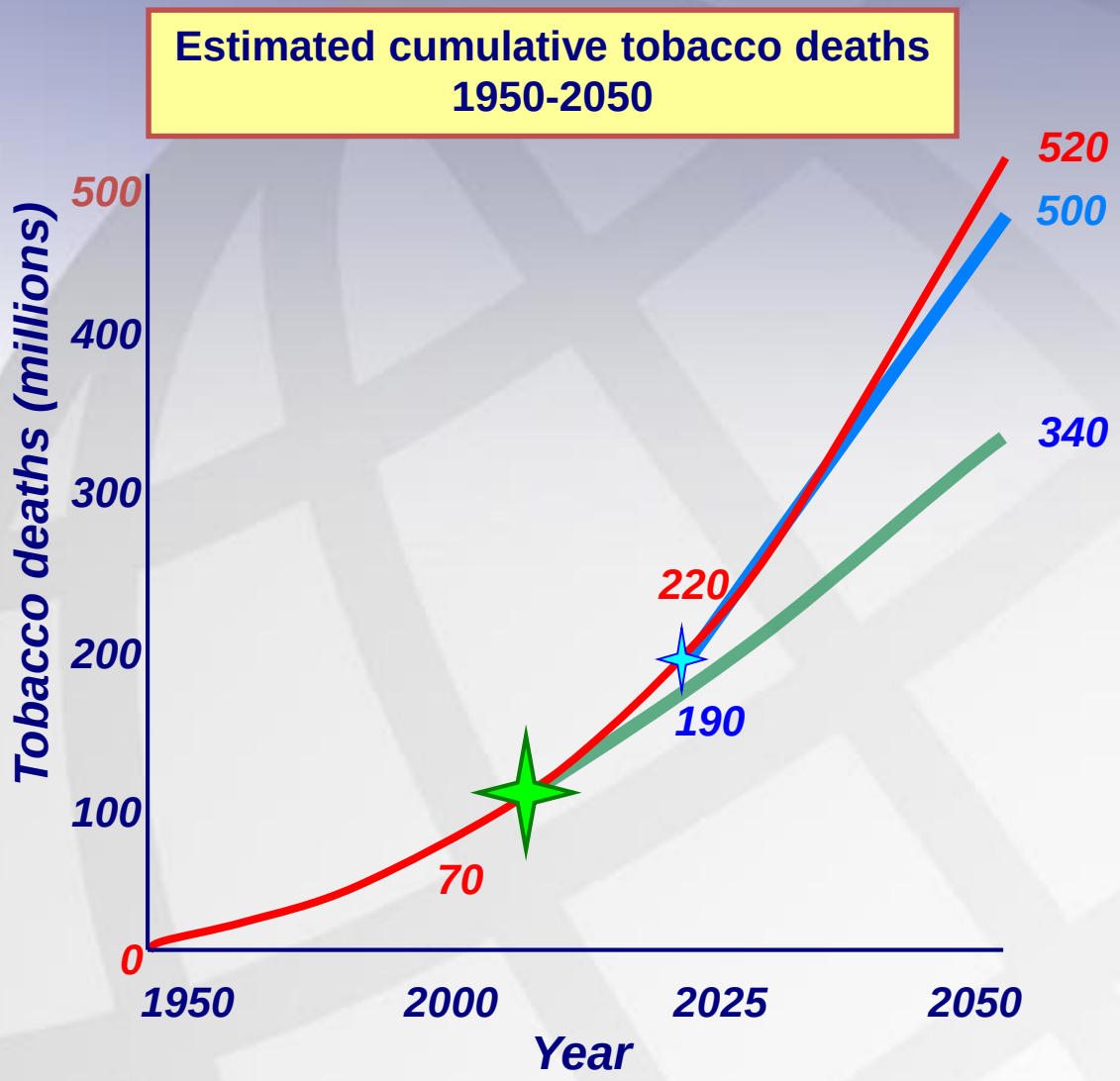
– John Seffrin, former CEO
American Cancer Society

itc
International Tobacco Control
Policy Evaluation Project

The only feasible way to combat such a massive threat is by implementing population-level interventions

itc
International Tobacco Control
Policy Evaluation Project

Huge Potential of Population Interventions



Intervention impact depends on two main factors:

1. **Timing**
2. **Strength**

World Bank. Curbing the epidemic: Governments and the economics of tobacco control. World Bank Publications, 1999. p80.

itc
International Tobacco Control Policy Evaluation Project

Keys to Combating the Tobacco Epidemic:

1. Identify strong, evidence-based measures that will reduce tobacco-caused harm.
2. Implement them as quickly as possible.

itc
International Tobacco Control Policy Evaluation Project

Framework Convention on Tobacco Control (FCTC)

- Legally binding international treaty: first under the WHO
- Adopted May 2003; came into force in Feb 2005
- Multisectoral: whole-of-government approach
- Includes broad range of tobacco control policies:
  - Pictorial warnings
  - Comprehensive smoke-free laws
  - Higher taxes to reduce demand
  - Bans/restrictions on marketing
  - Support for cessation
  - Measures to reduce illicit trade
  - Tobacco product regulation
- Tobacco industry must be prevented from influencing policies and measures
- **Greatest disease prevention initiative in history**

itc
International Tobacco Control
Policy Evaluation Project

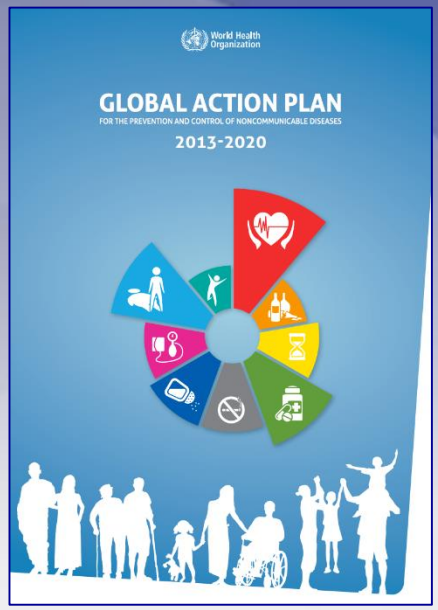
Framework Convention on Tobacco Control (FCTC)

- 180 Parties (179 countries + European Union)
- 7 Conferences of the Parties
- Guidelines have been developed and adopted for many of the Articles
- New protocol on illicit trade was adopted at COP5 (2012)

itc
International Tobacco Control Policy Evaluation Project

Development Planning and Tobacco Control

Integrating the WHO Framework Convention on Tobacco Control into UN and National Development Planning Instruments



FCTC

WHO FRAMEWORK CONVENTION ON TOBACCO CONTROL

itc
International Tobacco Control Policy Evaluation Project

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

Sixth session
Moscow, Russian Federation, 13–18 October 2014

18 October 2014

DECISION

FCTC/COP6(13) **Impact assessment of the WHO FCTC**

(1) that an impact assessment of the WHO FCTC will be conducted, under the guidance of the Bureau, and as outlined under option A in paragraph 27 of document FCTC/COP/6/15;

(2) that the purpose of the impact assessment should be to assess and examine the impact of the WHO FCTC on implementation of tobacco control measures and on the effectiveness of its implementation in order to assess the impact of the Convention as a tool for reducing tobacco consumption and prevalence after its first 10 years of operation;

To assess and examine the impact of the WHO FCTC on:

1. Implementation of tobacco control measures

2. The effectiveness of implementation

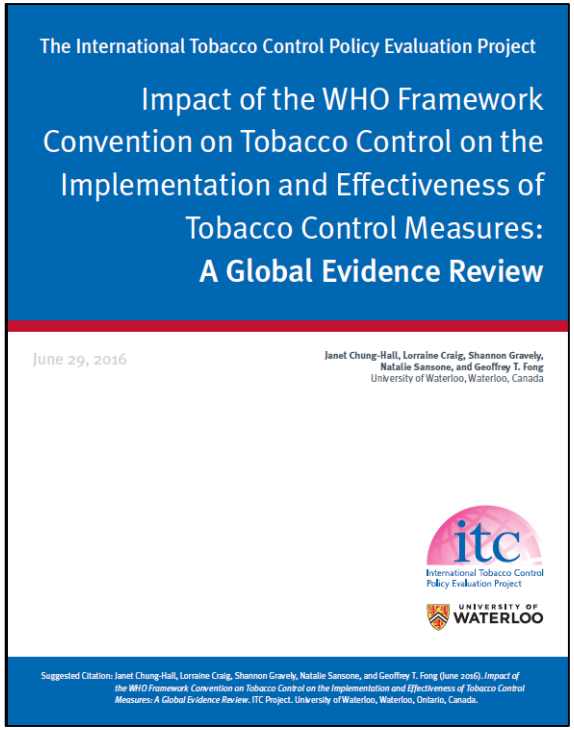
Impact Assessment Expert Group

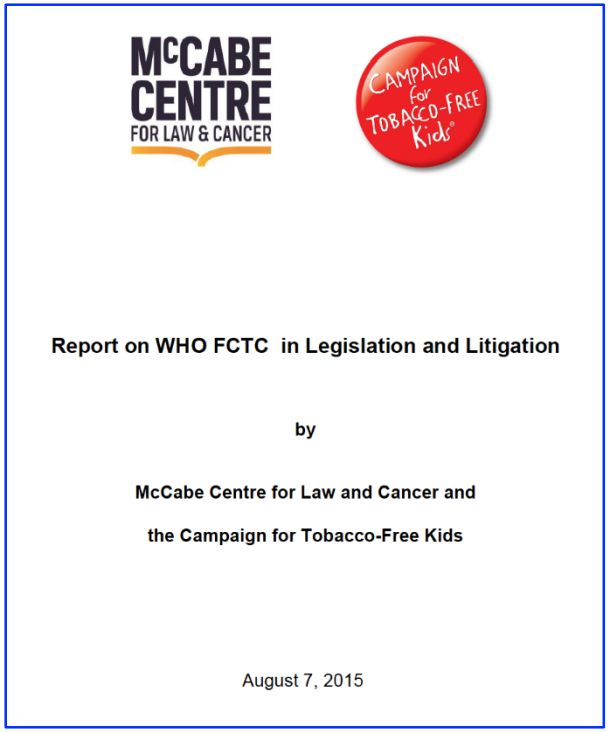
Pekka Puska, Finland (Chair)
Mike Daube, Australia (Deputy Chair)
Geoffrey T. Fong, Canada (Technical Coordinator)
Sudhir Gupta, India
Tom McInerney, United States
Corné van Walbeek, South Africa

itc
International Tobacco Control Policy Evaluation Project

Sources of Evidence

1. Global evidence review of scientific studies (ITC Project)
2. Commissioned reports, government reports, other literature





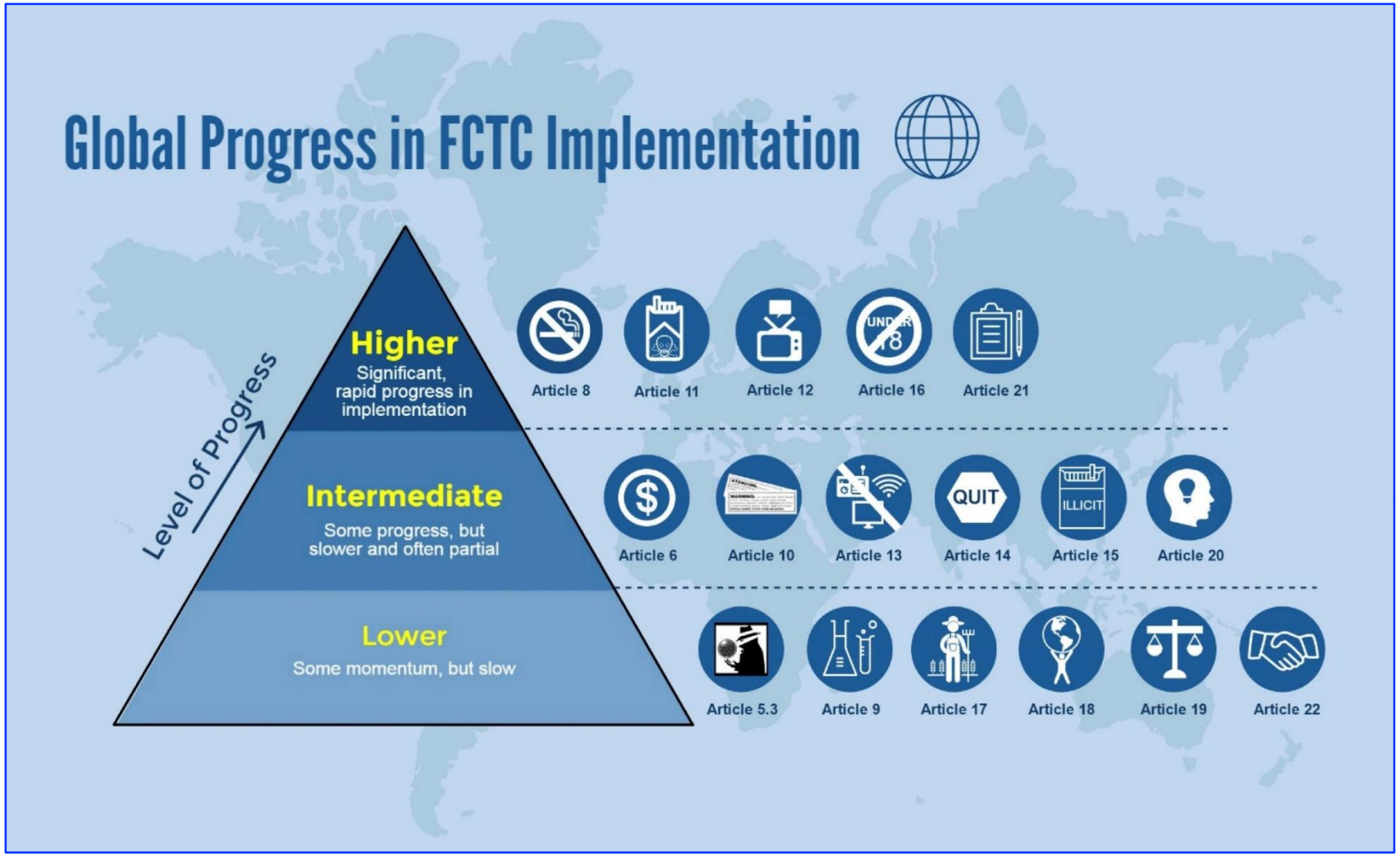
Sources of Evidence

3. Missions to 12 selected countries
   (2 x 6 WHO Regions, 3 x 4 World Bank economic groups)

Low Income	Lower-Middle Income	Upper-Middle Income	High Income
Kenya	Sri Lanka	Brazil	Uruguay
Madagascar	Philippines	Turkey	United Kingdom
Bangladesh	Pakistan	Iran	Republic of Korea

AFR	AMR	EMR	EUR	SEAR	WPR

Global Progress in FCTC Implementation



The International Tobacco Control Policy Evaluation Project (the ITC Project)


Canada


United States


Australia


United Kingdom


Greece

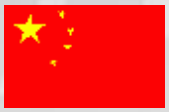

Ireland


Thailand


Malaysia


South Korea

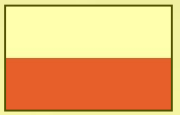

Hungary


China


Uruguay


Mexico

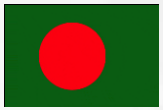

New Zealand


Poland


France


Germany


Netherlands


Bangladesh


Romania


Brazil


Mauritius


Bhutan


India


Spain


Zambia


Kenya

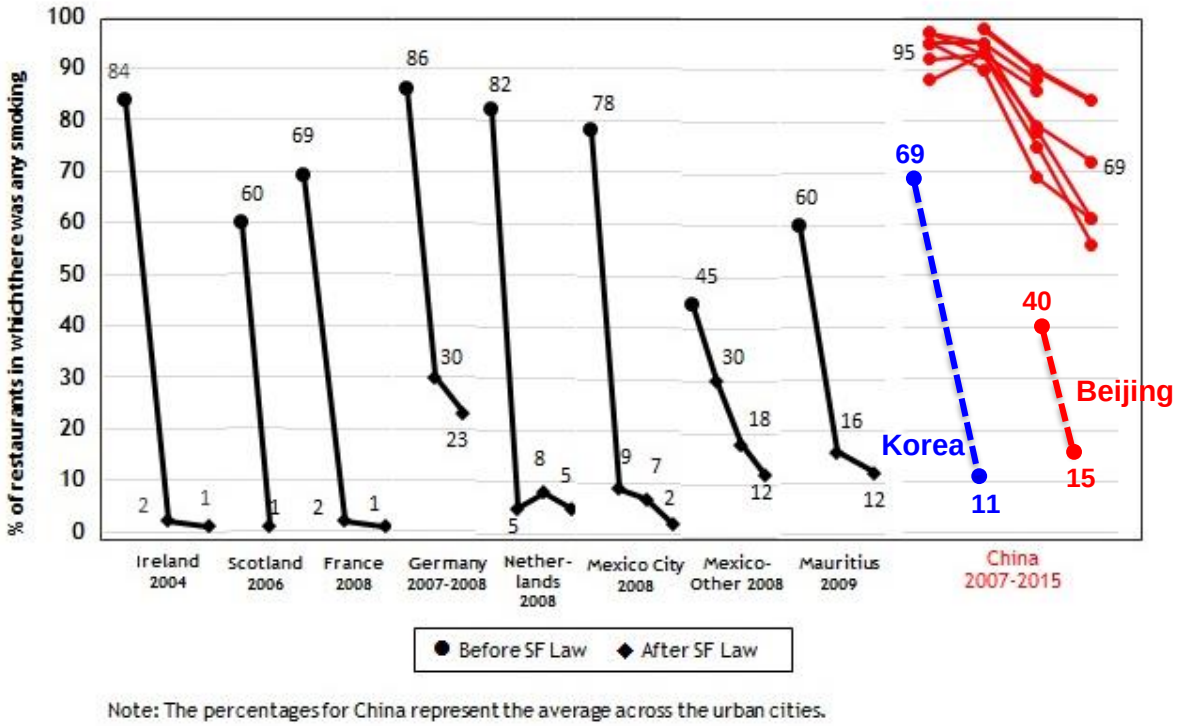

Abu Dhabi

eurest plus

itc
International Tobacco Control Policy Evaluation Project

Smoking in Restaurants

Smoking Prevalence observed in restaurants in 7 ITC China cities from Wave 2 to 5 (2007 to 2015) compared to other countries before and after comprehensive smoke-free laws: Ireland (2004), Scotland (2006), France (2008), Germany (2007-08), Netherlands (2008), Mexico City (2008), Other Mexican Cities (2008), and Mauritius (2009)



Note: The percentages for China represent the average across the urban cities.

Note: the percentage shown for Republic of Korea in 2016 is based on a preliminary, unweighted, and unadjusted dataset

Decrease in restaurant smoking in China is **much smaller** than in other ITC countries that have implemented completely **comprehensive** smoke-free laws

But Beijing's comprehensive smoke-free law shows that comprehensive smoke-free laws **can** work in China (data from Xiao et al., 2016)

Strong Article 8 implementation leads to dramatic decreases in tobacco smoke in public areas

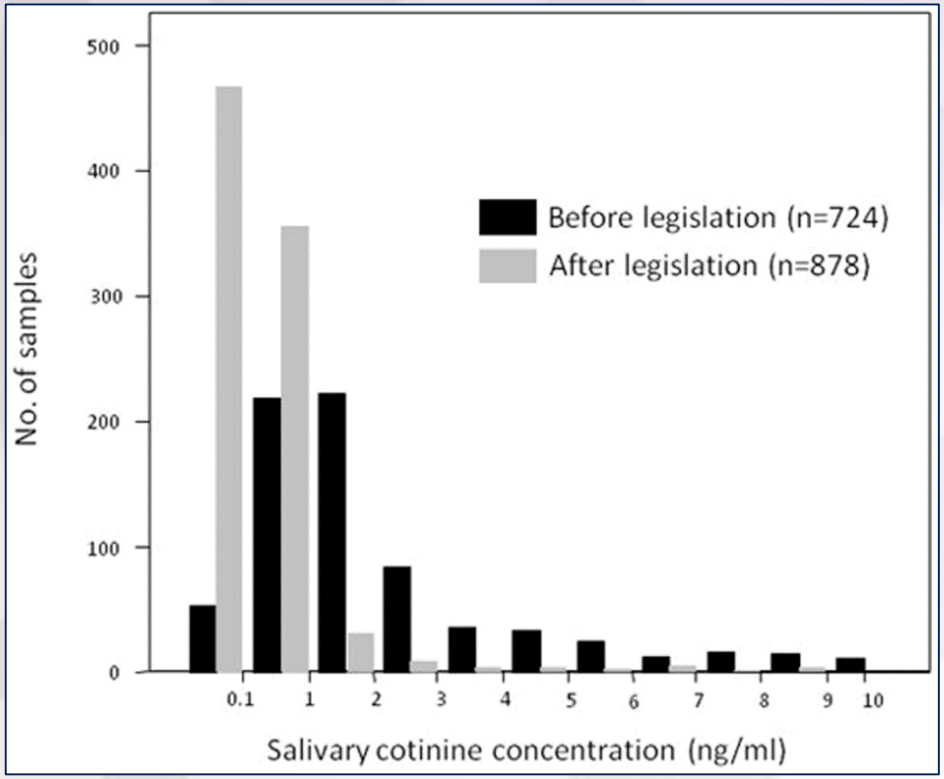
itc
International Tobacco Control Policy Evaluation Project

PLOS ONE | TENTH ANNIVERSARY

Impact of the Spanish Smoke-Free Legislation on Adult, Non-Smoker Exposure to Secondhand Smoke: Cross-Sectional Surveys before (2004) and after (2012) Legislation

Xisca Sureda, Jose M. Martínez-Sánchez, Marcela Fu, Raúl Pérez-Ortuño, Cristina Martínez, Esther Carabasa, María J. López, Esteve Saltó, José A. Pascual, Esteve Fernández

Published: February 27, 2014 • http://dx.doi.org/10.1371/journal.pone.0089430

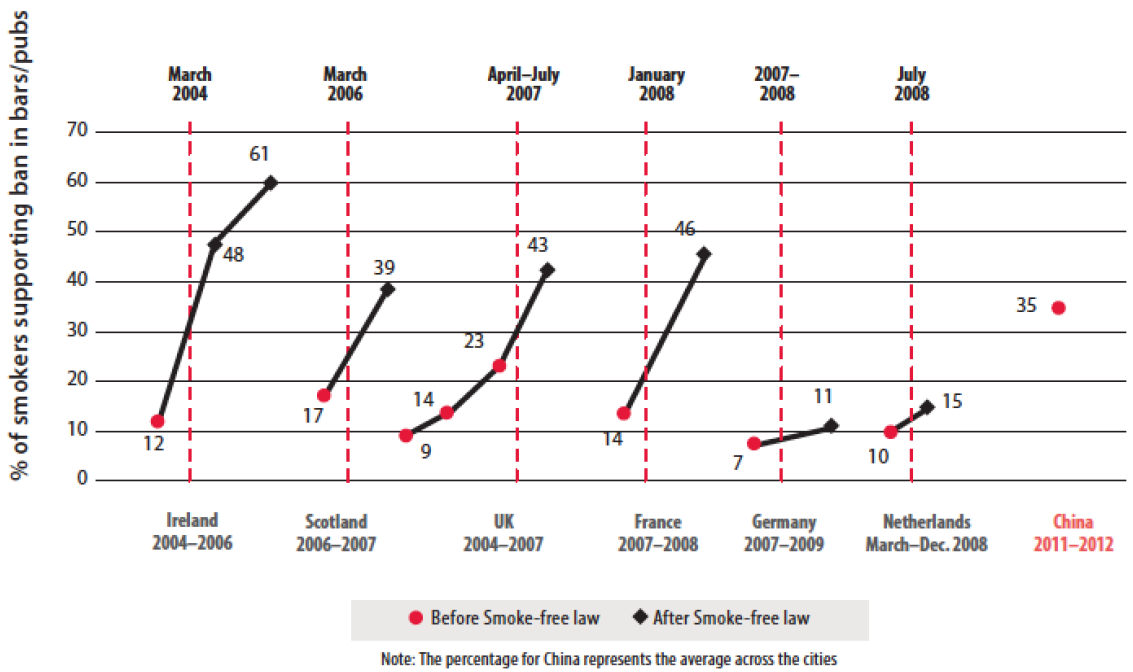


Cotinine decreased 87% after the comprehensive smoke-free law in Spain

itc
International Tobacco Control Policy Evaluation Project

Support for smoking bans in bars Pre-post in 6 ITC countries + China

FIGURE 15. Support among smokers for bans in bars/pubs in China (2011–2012) compared with other countries



Note: The percentage for China represents the average across the cities

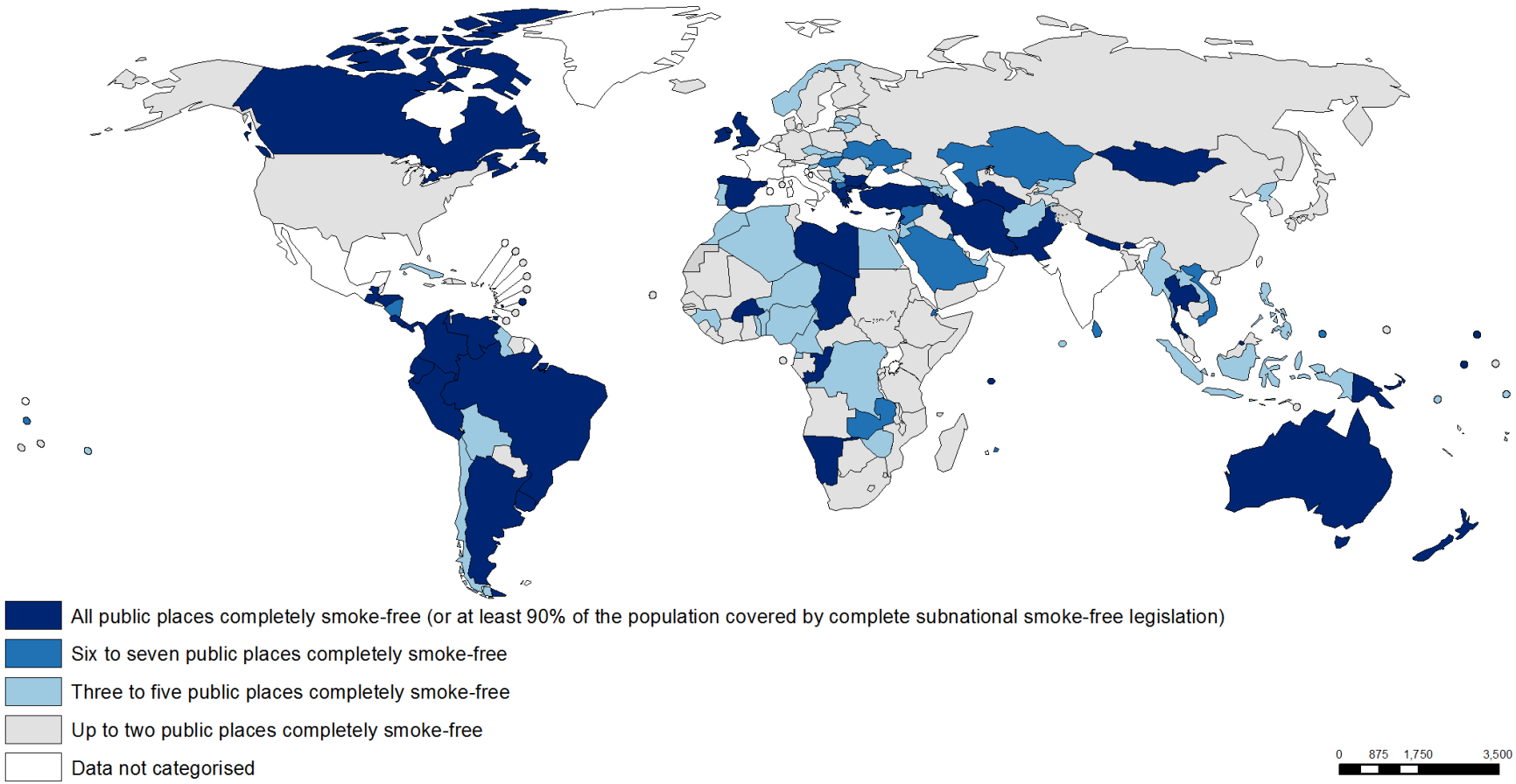
Smokers' support for **comprehensive** smoke-free laws in China is already MUCH higher than it was in any other ITC country before those countries implemented smoke-free laws that were successful.

itc
International Tobacco Control Policy Evaluation Project

Protect People From Tobacco Smoke (FCTC Article 8)

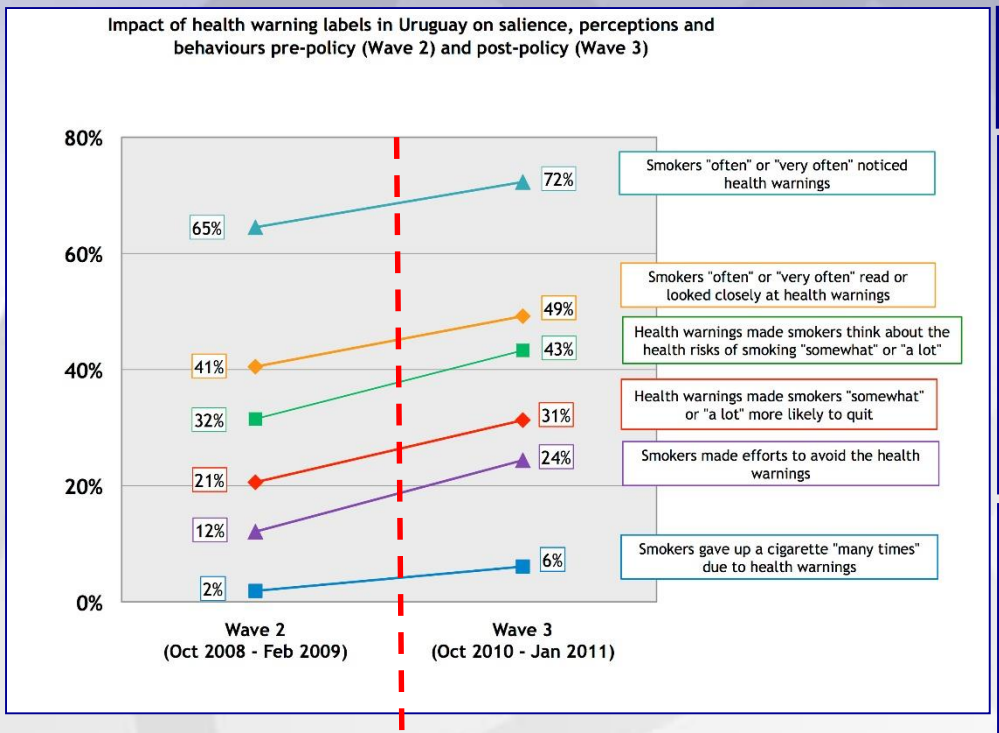
2012: 1.1 billion people in 43 countries (16% of the world's population) are covered by complete smoke-free legislation.

2014: 1.3 billion people in 49 countries (18% of the world's population)



PMI Uses Trade Treaty to Challenge Uruguay

Philip Morris International challenges 80% Uruguay's warnings claiming that warnings larger than 50% (Article 11 Guidelines) would not be more effective.



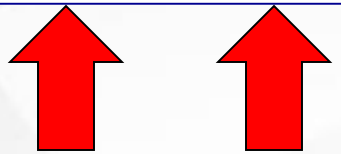
Size increased from 50% to 80%

Gravely et al., 2016 (*Tob Control*)

The impact of the 2009/2010 enhancement of cigarette health warning labels in Uruguay: longitudinal findings from the International Tobacco Control (ITC) Uruguay Survey

Shannon Gravely,[1] Geoffrey T Fong,[1,2,3] Pete Driezen,[1] Mary McNally,[1] James F Thrasher,[4] Mary E Thompson,[5] Marcelo Boado,[6] Eduardo Bianco,[7] Ron Borland,[8] David Hammond[2]

Conclusions The 2009/2010 changes to HWLs in Uruguay, including a substantial increment in size, led to increases of key HWL indicators, thus supporting the conclusion that enhancing HWLs beyond minimum guideline recommendations can lead to even higher levels of effectiveness.

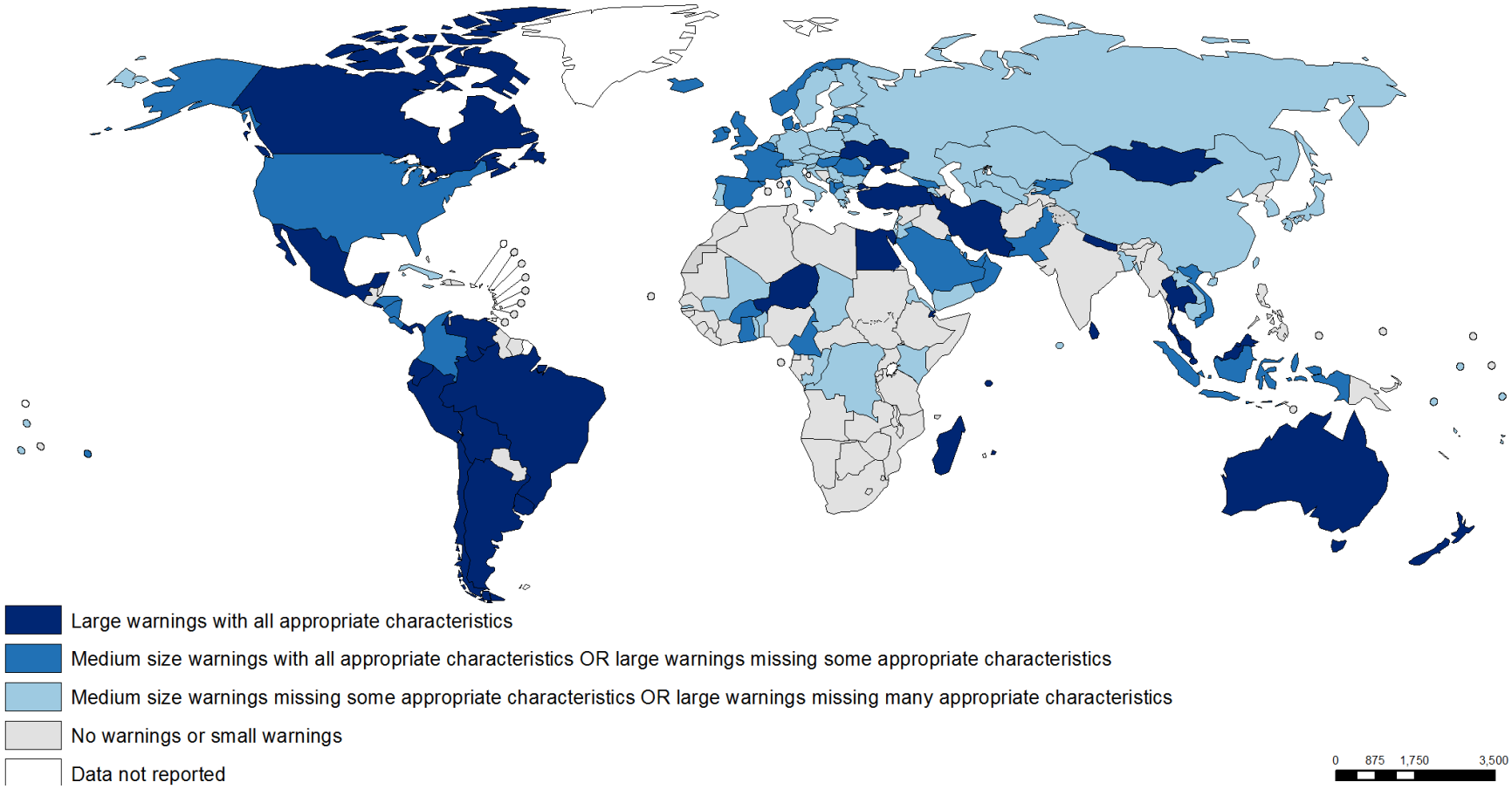


itc
International Tobacco Control Policy Evaluation Project

Warn About The Dangers of Tobacco (FCTC Article 11)

2012: 1.0 billion people in 30 countries (14% of the world's population) are exposed to strong graphic health warnings.

2014: 1.4 billion people in 42 countries (20% of the world's population)



Implementation of key demand-reduction measures of the WHO Framework Convention on Tobacco Control and change in smoking prevalence in 126 countries: an association study

Shannon Gravely, Gary A Giovino, Lorraine Craig, Alison Commar, Edouard Tursan D'Espaignet, Kerstin Schotte, Geoffrey T Fong

Gravely et al.:
Published this week in
Lancet Public Health

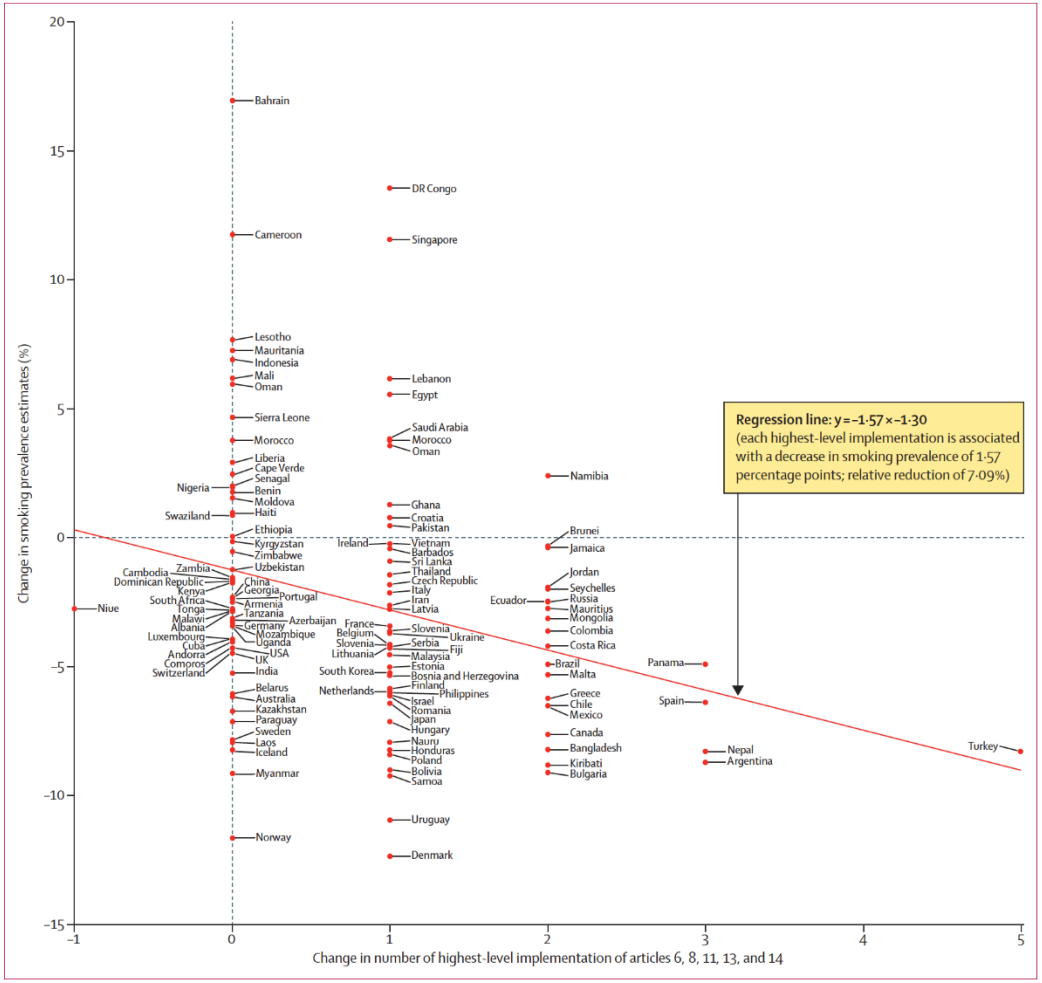


Figure 2: Relation between change in the number of five key WHO FCTC demand-reduction measures implemented at the highest level between 2007 and 2014 (x-axis) and change in smoking prevalence between 2005 and 2015 (y-axis)

- Analysis of WHO data from 126 countries
- **Predictor:** number of highest-level implementations of key demand-reduction FCTC policies between 2007 and 2014
- **Outcome:** WHO smoking prevalence trend estimates from 2005 to 2015 (first decade of the WHO FCTC)
- **Results:** Each additional highest-level implementation associated with 1.57 percentage point decrease in smoking rate (7.09% relative decrease)

1. Why has FCTC implementation been so slow?

2. Why has implementation been, in too many cases, at levels below the standards set by the FCTC Article Guidelines?

"Tobacco use is unlike other threats to global health. Infectious diseases do not employ multinational public relations firms. There are no front groups to promote the spread of cholera. Mosquitoes have no lobbyists."

– WHO Zeltner Report (2000)

itc
International Tobacco Control Policy Evaluation Project

Tobacco Industry Interference

- Overt and covert political influence (donations, corporate social responsibility)
- Misinformation and disinformation campaigns to spread and perpetuate myths:
- Graphic warnings will make people defensive; they will be MORE likely to smoke
- People, especially smokers, won't support smoke-free laws
- Tobacco growing/manufacturing/sales are central to the country's economy
- Tobacco control laws will have negative economic impact
  - "Smoke-free laws will hurt restaurants and bars."
  - "Higher taxes/graphic warnings/plain packaging will increase smuggling."

itc
International Tobacco Control Policy Evaluation Project

The war against the industry is fought on the battlefield of evidence

itc
International Tobacco Control
Policy Evaluation Project

MAIN FINDINGS

- FCTC has played an instrumental role as catalyst and framework for action—foundation for legislation and in defense against legal challenges.
- FCTC has promoted tobacco control action in countries where little had been done, and has helped to strengthen action in countries where it was in place before ratification.
- FCTC has broadened tobacco control across government and administration. And it has had impact on a range of international and global institutions and agendas.
- FCTC has strengthened the role of civil society in tobacco control
- FCTC has contributed to reductions in prevalence among Parties that have implemented FCTC policies at high levels, thus contributing to reductions in tobacco-related mortality and morbidity.
- Tobacco industry continues to be the greatest threat to the implementation of the WHO FCTC.

RECOMMENDATIONS

COP 7 Delhi, India 2016

FCTC WHO FRAMEWORK CONVENTION ON TOBACCO CONTROL

- Parties should strongly support action towards swifter and stronger implementation.
- Article 5.3 should be fully observed by all sectors of government.
- Increase and align tax levels with Article 6 guidelines
- Increase technical support especially in LMICs in key areas (eg. taxation) and to respond to emerging challenges (esp. non-cigarette tobacco products, new nicotine delivery products).
- Parties should develop national surveillance systems to assess trends, to evaluate measures, and to make full use of the information.

FCTC

WHO FRAMEWORK CONVENTION ON TOBACCO CONTROL

"The FCTC is an evidence-based treaty that reaffirms the right of all people to the highest standard of health."

– FCTC Foreword

"Evidence"
mentioned 5 times

"Scientific"
mentioned 13 times

"Effective(ness)"
mentioned 28 times

itc
International Tobacco Control Policy Evaluation Project

Final thoughts on evidence

- Industry could not stop the FCTC
- But the industry can slow and weaken the implementation of the FCTC
- Evidence has never been more important in the fight against the global tobacco epidemic

itc
International Tobacco Control Policy Evaluation Project

Thank you
Obrigado

Geoffrey T. Fong: gfong@uwaterloo.ca
www.itcproject.org