

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(26) Moscow Declaration

Mindful of the preamble to the Constitution of the World Health Organization, which states that the enjoyment of the highest attainable standard of health is one of the fundamental rights of every human being;

Recalling decision FCTC/COP4(5) on the adoption of the Punta del Este Declaration on the Implementation of the WHO FCTC;

Recalling decision FCTC/COP5(5) on the adoption of the Seoul Declaration;

Welcoming the political declarations adopted at the First Global Ministerial Conference on Healthy Lifestyles and Control of Noncommunicable Diseases (NCDs), held in April 2011 in Moscow, and the World Conference on Social Determinants of Health, held in October 2011, and also the final report of the United Nations Conference on Sustainable Development, held in June 2012; the resolution of the Economic and Social Council on United Nations system-wide coherence on tobacco control, adopted in July 2012; the Helsinki Statement on Health in all Policies, 2013; resolution WHA66.10 of the World Health Organization, which adopted the global monitoring framework with respect to NCDs, 2013; resolution A/RES/66/2 of the High-level Meeting of the General Assembly on the Prevention and Control of NCDs, 2014;

Recalling that tobacco consumption is not a right but an addiction;

Noting the report of the Convention Secretariat on global progress in implementation of the WHO FCTC;

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

1. NOTES that:

- (1) international collaboration on tobacco control is a key factor in the reduction of the burden of NCDs;
- (2) the implementation of the WHO FCTC, its guidelines and protocols facilitate the enjoyment of the right to the highest attainable standard of health, recognized in international law and national legislation of the vast majority of States;
- (3) the goal of tobacco control measures required by the WHO FCTC at the international and national levels is to halt and reverse the tobacco epidemic;
- (4) the heaviest burden of disease related to tobacco use is borne by the most vulnerable population groups;
- (5) tobacco companies are exploring new ways of maintaining dependence and encouraging use, developing new tobacco products and nicotine-delivery systems, making them fashionable, technological and innovative;

2. CALLS ON the Parties:

- (1) to strengthen collaboration on tobacco control with a view to attaining the global voluntary target of 30% relative reduction in the prevalence of current tobacco use in persons aged 15 years and over by the year 2025, through the WHO FCTC mechanisms and global coordination mechanism for NCD prevention and control;
- (2) to take special account, during implementation of national tobacco control measures, of the population groups, including women, children and adolescents, minority groups and low socioeconomic groups, who are especially vulnerable to the efforts of the tobacco industry to recruit and maintain users;
- (3) to continuously adopt progressive, comprehensive, multisectoral and responsive national tobacco control strategies, plans and programmes aimed at achieving the overall objectives of the WHO FCTC, while providing support to such programmes at the international level;
- (4) to monitor new forms of tobacco products and tobacco and nicotine use and take steps to minimize the introduction and proliferation of such products through prohibition or restrictions of manufacturing and promotion and sales as provided for by the WHO FCTC, its guidelines and protocols:
- (5) to accelerate the full implementation of the WHO FCTC at national levels, integrating mechanisms for monitoring and evaluation and measures to address new and emerging challenges in addressing the tobacco epidemic;
- (6) to share best practices through the WHO FCTC Information Platform or other methods to address major challenges in implementing the WHO FCTC.

(Fifth plenary meeting, 18 October 2014)

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