DECISION

FCTC/COP6(8) Smokeless tobacco products

The Conference of the Parties (COP),

Recalling documents FCTC/COP/4/12 and FCTC/COP/5/12, and taking note of the report contained in document FCTC/COP/6/9;

Recognizing that the consumption of smokeless tobacco (SLT) products has become a matter of global public health concern with more than 80 Parties reporting the use of some form of SLT product;

Further recognizing that the WHO South-East Asia Region is home to nearly 90% of the world’s 300 million users of SLT products;

Taking note of the fact that the prevalence of SLT use has seen an increase in most Parties;

Further taking note of the fact that SLT is a key causal risk factor for a number of noncommunicable diseases, especially oral cancer, heart disease and adverse reproductive outcomes, and that it increases all-cause mortality;

Commending the Parties that have adopted policies and programme measures to prohibit, restrict or reduce the consumption of SLT;

Taking note of the lack of adequate regulatory, enforcement or product-testing capacity to regulate SLT products or test for their constituents;

Agreeing that SLT control is no longer a regional issue and that it merits global level actions to strengthen policies, programmes and implementation;

Acknowledging the need to build a suitable communications strategy to denormalize SLT use, and to sensitize and educate policy-makers and the public on harms of SLT use, as well as the need to train health professionals on cessation of SLT use;
Taking note of Parties’ commitment and support to the global effort to establish a knowledge hub on SLT products that builds upon the existing knowledge base and research capacity on SLT;

Agreeing on the need for:

(a) improvement in surveillance of SLT products and related indicators as part of regular health surveys;

(b) effective price and tax measures to be taken in line with Article 6 of the FCTC and the guidelines for its implementation and in line with other tobacco products such as cigarettes in accordance with national laws;

(c) operational and implementation research on opportunities and challenges in effective implementation of WHO FCTC provisions, and health and economic cost studies of specific SLT products;

(d) strict regulation of new and existing SLT products;

(e) strong efforts to reduce sales of SLT products to minors and their access to such products through strict application of relevant legislative and administrative measures;

(f) consideration of developing specific cessation support for people who use SLT and to assess the effectiveness of SLT cessation interventions in accordance with Article 14 guidelines;

(g) encouragement to all WHO regions to develop SLT strategies specific to regions and/or subregions;

(h) establishment of a global knowledge hub on SLT that serves as a repository of information, product-specific SLT burden, and research needs, including best practices and implementation challenges concerning SLT;

1. INVITES Parties to

   (a) consider, as appropriate, developing product specific policies and regulations to protect the health of their citizens, acknowledging the WHO FCTC provisions, especially on labelling, packaging, ingredients, sales arrangements, advertising, tax measures, or other strict regulations, such as prohibition of the import, manufacture and sale of identified SLTs in line with applicable legal provisions and public health priorities;

   (b) to promote action for education and public awareness on the risks of use of these products, and offer cessation treatment.

2. DECIDES to request the Convention Secretariat to:

   (a) include, as appropriate, a specific reference to and discussion of SLT issues in the ongoing working group discussions, especially in the working group on Articles 9 and 10 of the WHO FCTC;

   (b) include, as appropriate, a separate examination of SLT issues as and when any of the existing guidelines are reviewed in future;
(c) in consultation with the WHO Secretariat, explore the feasibility of establishing a global knowledge hub on SLT.

(Fifth plenary meeting, 18 October 2014)