

CCICT EDITORIAL

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Upcoming events

International meetings
 COP9 (October 8-13).
 MOP2 (November 15-18).

THE WHO FCTC SECRETARIAT'S KNOWLEDGE HUBS

The Convention Secretariat works with, as part of its overall knowledge management activities and as a response to various decisions of the Conference of the Parties, institutions that could assist Parties in a number of technical areas of the Convention. These entities are also expected to assist the Convention Secretariat in fulfilling the mandates given to it by the Conference of the Parties.

These collaborative partners are:

- **The WHO FCTC Secretariat's Knowledge Hubs**, that focus their work on some articles of the Convention, and specifically, on providing assistance to Parties in their implementation of those articles; and
- **Tobacco industry monitoring centres (observatories)**, that monitor, identify, document and support any work that prevent tobacco industry interference with implementation of the WHO FCTC, in line with the requirements of Article 5.3 of the Convention and the recommendations of the relevant guidelines.

Knowledge Hubs

The Convention Secretariat has established eight knowledge hubs so far (see below). The hubs' task is to analyse, synthesize and disseminate to the Parties to the Convention knowledge and information on matters under their expertise in relation to the Convention, in accordance with Article 22 (Cooperation in the scientific, technical, and legal fields and provision of related expertise). The knowledge hubs are global in the scope of their work, and their work will go beyond the boundaries of the hosting countries, sub-regions and regions.

The first knowledge hub became operational in Australia in 2014.

The list of current hubs is given in the table below.

Knowledge Hub	Organization	City and Country	Type of organization
WHO FCTC Secretariat's Knowledge Hub on Legal Challenges	McCabe Center for Law and Cancer	Melbourne, Australia	NGO (affiliated with UICC, a COP observer)
WHO FCTC Secretariat's Knowledge Hub on Surveillance	National Institute for Health and Welfare	Helsinki, Finland	Government (Institute affiliated with Health Ministry)
WHO FCTC Secretariat's Knowledge Hub on Smokeless Tobacco	National Institute for Cancer Prevention and Research	Noida, India	Government (Institute affiliated with Health Ministry)
WHO FCTC Secretariat's Knowledge Hub on Water Pipes	American University of Beirut	Beirut, Lebanon	Academic institution
WHO FCTC Secretariat's Knowledge Hub on Taxation	University of Cape Town	Cape Town, South Africa	Academic institution
WHO FCTC Secretariat's Knowledge Hub on International Cooperation	International Cooperation Centre on Tobacco Control	Montevideo, Uruguay	Government (Institute affiliated with Health Ministry)
WHO FCTC Secretariat's Knowledge Hub for Article 5.3	Thammasat University	Bangkok, Thailand	Academic institution
WHO FCTC Secretariat's Knowledge Hub on Articles 17 & 18	Oswaldo Cruz Foundation (Fiocruz)	Rio de Janeiro, Brazil	Government (Institute affiliated with Health Ministry)

Adapted from: <https://fctc.who.int/coordination-platform/knowledge-hubs>

New knowledge hubs could be established in the next future.

Recently FCTC Secretariat has released the 2021 KH Newsletter presenting the work of the WHO FCTC Knowledge Hubs, carried out between October 2020 and October 2021. The Newsletter is available through this link.

<https://fctc.who.int/coordination-platform/knowledge-hubs/news>

If you want to get further information on the activities and cooperation developed by these Centers, there you will find the activity reports of the previous years in the same link.

**Editorial Committee of the CCICT Bulletin
MoH of Uruguay**

INVESTMENT FUND

PROPOSAL FOR THE IMPLEMENTATION OF THE WHO FCTC AND THE PROTOCOL TO ELIMINATE ILLICIT TRADE IN TOBACCO PRODUCTS

The Investment Fund for the WHO Framework Convention on Tobacco Control and the Investment Fund for the WHO Protocol to Eliminate Illicit Trade in Tobacco Products are financial mechanisms whose objectives are to provide financial support to the Parties of both instruments for efficient implementation of both the Convention and the Protocol. Taking into account that more than half of the costs of the activities approved by the Conference of the Parties (COP) and the Meeting of the Parties (MOP) depend on extra-budgetary funds, they are in need to seek new financing mechanisms. Both funds will provide an annual source of income from accrued interest, which at the same time can help reduce the funding gap between work plan activities and income received through contributions received by the Parties.

The Investment Fund for the implementation of the FCTC aims to make a significant financial contribution to assist in its implementation and thus achieve the objectives of the Global Strategy to Accelerate Tobacco Control in the period 2019-2025. On the other hand, the Investment Fund for the Protocol is intended to start after the decision of the Second Session of the MOP and put it into operation in 2022.

Both Funds will operate under a trust contract which will be designated and established as a financial mechanism in accordance with article 26 of the WHO FCTC, whose operation will be in accordance with article 5.3 of the WHO FCTC. The COP and the MOP will be the governing bodies of the respective funds and will be the ones who will supervise the policies and priorities of the Fund.

The objective of the Fund is to obtain capital for a minimum of 50 million dollars and 25 million dollars to the Convention and the Protocol respectively, in the form of interest-free loans, with a term of 5 years, from investors, financial philanthropic entities and the Parties to the Convention (the latter will not be obliged to contribute). These capitals will be placed in an investment portfolio managed by the trustee (The World Bank), whose estimated profitability is 4.5% per year. The interest generated will finance the implementation of the WHO FCTC and the Protocol, supervised by the Secretariat, which together with the World Bank will recommend to the COP and the MOP the reference interest rate to determine the income to be extracted from the Fund.

The Fund will be deposited with the World Bank Group, independently managed by an external fund manager. The Fund's lending agencies will have no direct influence over the use or direction of the Fund's income or over the funding decisions of the COP or MOP.

The Convention Secretariat will be the facilitator for the implementation of the policies adopted by the COP and the MOP, and in turn; it will be responsible for providing administrative, legal and program management experience.

The administrative and management costs of the Fund's investments will be paid by the income generated by the interests of the Fund; the capital of the Fund will not be used, except for the periods in which the returns are negative.

An investor in the Fund, starting two years after the signing of the agreement, may decide to withdraw it by means of a six-month notice in writing to the Secretariat of the Agreement. Loans received will be repaid subject to market fluctuations and penalties as prescribed by the Fund Administrator. Likewise, the COP and the MOP respectively may decide to terminate the Fund in the event that it is not fulfilling its purpose, based on the Bureau's recommendations.

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THE TOBACCO INDUSTRY USES THE HARM REDUCTION APPROACH TO PROFIT FROM SMOKERS' HEALTH

The tobacco industry has a long history of deception regarding the risk of its products. Big tobacco companies have co-opted “harm reduction” and distorted this public health approach several times in history to market other claimed safer products. In the 1950s, when evidence was available regarding the health damages of cigarettes, filters emerged to make cigarettes a seemingly safer product. In the 1970s tobacco companies marketed “light” cigarettes as less risky even though internally the companies knew it was not true. Rather than reducing harm to smokers, the tobacco industry’s misuse of the concept has historically resulted in more smokers and fewer quitters.

Nowadays, with massive evidence regarding tobacco harms, a new generation of products like e-cigarettes (technically, electronic nicotine delivery system-ENDS) and heated tobacco products (HTPs) are being promoted as reduced-risk products. As a matter of fact, the industry’s communications strategy is to market them using the “harm reduction” phrase explicitly.

According to British American Tobacco (BAT), “tobacco harm reduction is a public health strategy that is about minimizing the negative health impact of conventional cigarettes – including by offering smokers who would not otherwise give up smoking an alternative source of nicotine with potentially lower health risks”. (1) In the same line, Philip Morris International states that harm reduction is “a commonsense approach for public health” and that they “are delivering better, more satisfying alternatives for adult smokers, so that the largest number of those who don’t quit can switch to them.” (2) That is, tobacco companies are constantly presenting less risky products to “reduce” the harm caused by the cigarettes they continue to sell.

The tobacco industry’s latest version of “harm reduction” fails to meet the basic standards of what a harm reduction approach to a public health problem actually means. True harm reduction is an established **public health strategy** designed to **reduce the death and disease** that arise from the **use of risky and addictive products** like illicit drugs or even tobacco products. It aims to change behaviors in the absence of effective policies and laws (3); “through supervision, regulated access and the engagement of medical or public health professionals”. (4, 5)

A valid harm reduction approach **recognizes an inevitable situation**. It is a movement based on three principles: social justice and human rights, community sense, and evidence-based. (6, 7, 8) To be successful, a harm reduction strategy needs to be carefully targeted to addicted users, overseen and/or conducted under rules established by health or governmental agencies whose only interest is to reduce harm and administered with proper government controls to prevent its sale and distribution to youth and non-users.



The tobacco industry’s approach is simplistic and noncompliant with public health objectives: it promotes widespread and unrestricted access to addictive products. The industry invests millions of dollars in advertising and lawyers to continue promoting their cigarettes and circumvent legal frameworks to keep marketing them. The underlying objective of any business is to maximize its profits.

If the industry’s “harm-reduction” strategy were to effectively reduce the harms to health caused by cigarettes, would it comply with the main corporate goal? Certainly not.

On the one hand, tobacco use is legal, and there are safe, evidence-based ways to help smokers quit. These methods include counseling, quit lines, and medically approved nicotine replacement therapies, among others. Moreover, implementing evidence-based policies such as making tobacco products less affordable and printing effective health warnings on tobacco products can spur smokers to quit, while smoke-free laws and bans on tobacco advertising make it less likely that non-smokers will begin smoking or former smokers will relapse.

There is no conclusive evidence that switching from cigarettes to HTPs or ENDS may reduce nicotine dependence or exposure to harmful components found in cigarettes. (9) The problem is posed when further analyzing this evidence. New products may renormalize smoking behaviors, act as a gateway to tobacco use between children and adolescents, and foster dual-use. (10, 11, 12) The latter constitutes a big issue as smokers are discouraged to quit and continue to be exposed to nicotine and other harmful constituents, including formaldehyde (a known carcinogen), toxins and metals such as nickel, chromium, and lead. (13) Emerging evidence suggests that “dual use may indeed be more harmful than conventional cigarette use alone”. (14)

According to the USA experience, ENDS present more harm than benefits. (15) Millions of young people started using e-cigarettes reaching epidemic levels. (16) When thinking from the corporate's interests, this makes total sense: the tobacco market gets bigger by reaching new smokers and former smokers do not leave the market as they are now also addicted to their new devices.

The corporate behavior that leads to all these preventable deaths is not only an abuse of corporate power on citizens, but a violation of the rights to health and life recognized in numerous global and regional human rights instruments that recognize the right to the highest attainable standard of health. (17, 18) The human right to health that States must guarantee includes a strict prohibition or regulation of these harmful products (19), in line with the WHO Framework Convention on Tobacco Control (FCTC) provisions, its guidelines and the resolutions established every two years by the Conference of the Parties that governs this treaty. There is perhaps no area of law that so effectively protects human rights as tobacco control.

The industry is so courageous that it cynically suggests that banning or strictly regulating e-cigarettes violates the human rights of smokers. This is offensive and wrong. Industries that sell harmful products and whose sole objective is to make a profit have no authority to speak on public health nor on human rights.

The wide array of health harms from smoking are well known; therefore, smokers should have access to evidence-based cessation support and services. E-cigarettes or HTPs are not proven to be effective cessation devices. (20) Using the harm reduction strategy as an argument to sell these products is not only unethical but also to the detriment of the population's human right to health.

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PARTIES MUST SAFEGUARD THE TREATY FROM BIG TOBACCO BY IMPLEMENTING “MAXIMIZING TRANSPARENCY” DECISIONS AND SUBMITTING DECLARATIONS OF INTEREST

As COP9 and MOP2 approaches, governments are grappling with many uncertainties and challenges posed by the COVID-19 pandemic. But one thing is certain: The tobacco industry's attempts to undermine public health policy have only increased. And industry interference threatens the future of the WHO FCTC and its potential to save lives around the globe. (1)

The tobacco industry and its front groups' tactics for derailing the treaty process are well-documented. At COP7, Philip Morris International set up a covert operations room at a hotel an hour away from the COP convention center. There, corporate representatives held secret meetings with Party delegates. (2) In 2015, a British American Tobacco (BAT) employee-turned-whistleblower exposed evidence of BAT presumably bribing WHO FCTC delegates from several East African nations. (3)

And just this month, new bombshell evidence (BBC Panorama documentary (4), along with newly published research (5)), came to light showing how BAT, one of the biggest tobacco corporations in the world, engaged in a years-long, widespread, systematized scheme of questionable payments across 10 African countries.

There is no doubt that the tobacco industry will attempt to take advantage of the all-virtual format of COP9 and MOP2, using new and old tactics to interfere with the treaty process.

Fortunately, Parties already created a powerful solution: At COP8 and MOP1, Parties agreed upon groundbreaking decisions to maximize transparency among delegations to the treaty negotiations. These decisions enhance Article 5.3 of the WHO FCTC, known as the 'backbone of the treaty,' which guides Parties to protect negotiations from the undue influence of the tobacco industry.

Specifically, Parties decided to require members of the public, the media, and accredited observer organizations attending negotiations to submit declarations of any conflicts of interest with the tobacco industry.

Moreover, when designating representatives to meetings such as COPs and MOPs, each Party agreed to formally indicate that it has “observed Article 5.3 of the WHO FCTC and has been mindful of [...] the Guidelines for the implementation of Article 5.3 of the WHO FCTC.” (6, 7) Parties may do this via a declaration-of-interest form, or the format they determine to be in accordance with their internal procedures and domestic legislation. (8)

These measures are groundbreaking. When fully implemented by all treaty delegations, they will help ensure that treaty meetings are free of the corrosive interference of the tobacco industry, and that treaty decisions advance public health and save lives first and foremost.

That is why it is critical that Parties fully implement the “maximizing transparency” decisions this year and submit declarations of interest prior to COP9 and MOP2. In so doing, Parties are leading by example and demonstrating their integrity and commitment. They are sending a strong message to the world that public health is essential and that the WHO FCTC will not be undermined by the vested interests of the tobacco industry.

For more information, Parties are encouraged to visit the COP9 Resource Hub developed by a coalition of well-respected public health organizations not affiliated with the tobacco industry (some of them longtime observers to the WHO FCTC process): www.CorporateAccountability.org/COP9

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THE PROTOCOL: SYSTEMS FOR TRACKING AND LOCATING TOBACCO PRODUCTS

The Protocol to Eliminate Illicit Trade in Tobacco Products (here in after Protocol) is an international treaty, negotiated within the framework of article 15 of the WHO Framework Convention on Tobacco Control (FCTC), to address the threat growing illicit international trade in tobacco products that undermines any comprehensive tobacco control policy. The Protocol entered into force on September 25, 2018 and is open for ratification and accession by Parties to the FCTC.

The governance of the Protocol is in charge of the Meeting of the Parties (MOP), which is the deliberative body in charge of decision-making and control of its status and effective application, made up of all the Parties to the Protocol. In this sense, the Parties undertook through international health cooperation to adopt a set of measures to eliminate all forms of illicit trade in tobacco products, as a main objective, understood as any practice or conduct prohibited by law, that goes from production to the sale or purchase of said products.

One of the most important and central measures of the Protocol to eliminate illicit trade and protect the supply chain of tobacco products is to create a global traceability regime and a world information clearinghouse attached to the FCTC Secretariat in a term of 5 years from the entry into force of the Protocol, which will expire on September 25, 2023.

Additionally, that world regime must encompass national and regional track and trace systems, so that each Party to the Protocol must implement a national / regional system within 5 years of entry into force for that Party; also, within the same period they must stamp a unique digital identifying code or seal with essential information about the product on all cigarette packs, and 10 years for other tobacco products.

Article 8 of the Protocol establishes the general requirements of the track and trace system (T&T system), but does not provide technical, commercial, operational or technological specifications. Indeed, there are experiences of traceability systems, good practices and the use of technologies in other industrial chains (e.g. Food), that can be transferred and adapted to traceability solutions for tobacco products.

International literature on track and trace solutions provides general concepts and principles, as well as proven good practice recommendations that support traceability throughout the supply chain. In this point, the transfer of knowledge, experiences and international and intersectoral cooperation between the Parties and national and international organizations is essential for the effective application of the Protocol.

Each Party, prior to the implementation of a T&T system, must analyze its own context in terms of its governance structure and the nature and size of the illegal trade given that national and regional realities are different, therefore, implementation is not unique for all. For this reasons, the implementation requires: 1º) Planning and analysis of the environment, to define a general strategy, governance model and project execution plan; 2º) T&T system design program, including technical specifications, equipment and execution plan; 3º) Acquisition process (suppliers) or internal development of a T&T system, the cost must be assumed by the tobacco industry (IT); 4º) Implementation of the T&T system, implies integrate it with the operating environment and having an agency with a great capacity to implement, manage and guarantee its execution over time, in addition to integrating it into the industry.

Governments and competent authorities must consider and understand that having or offering an adequate traceability solution is not a mere exercise in acquiring systems, but rather a long coordinated and structured path, avoiding any T&T system developed by IT. There are other regimes such as the marking of products with tax stamps, which, although is not a track and trace tool, have security functions and of control for the Tax Administration that, if updated, can fulfill tracking and tracing functions.

There are essential elements that a secure traceability system must include: a governance model where it is established who is in charge of the T&T system (supervision, control and validation); use identification marks that must be unique (UID), secure, non-removable, non-sequential or repeatable (serialization), which can be sophisticated codes or seals (numeric or alphanumeric or QR code), digital or physical incorporated into a package, external packaging of tobacco products by aggregation; incorporate security functions to protect UIDs against counterfeiting, manipulation, duplication, fraud, with security elements totally independent of IT and developed by specialized companies; possibility of authentication, is the ability to verify the originality (authenticity) of the product through the UID, by the user (consumer, official agent) either by eye or by electronic devices; data storage and management implies having a robust, secure, reliable and accessible database with information on the entire life cycle of the tobacco product throughout the supply chain, guaranteeing that it is a legal product; supply chain events refers to the movement of tobacco products along the chain, including the complete logistics and product history, which should be recorded, loaded and stored, in order to control, detect and execute fraud within the supply chain.

The Protocol establishes a series of obligations and requirements for the Parties, such as enhancing the effectiveness of the competent authorities and services, not delegating their functions and obligations of monitoring and tracing, exercising direct control of the T&T system of all tobacco products (national, imported and exported).

Finally, interaction with IT must be minimal and transparent, strictly limited to necessary issues.

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