Article 20: Research, Surveillance and Exchange of Information





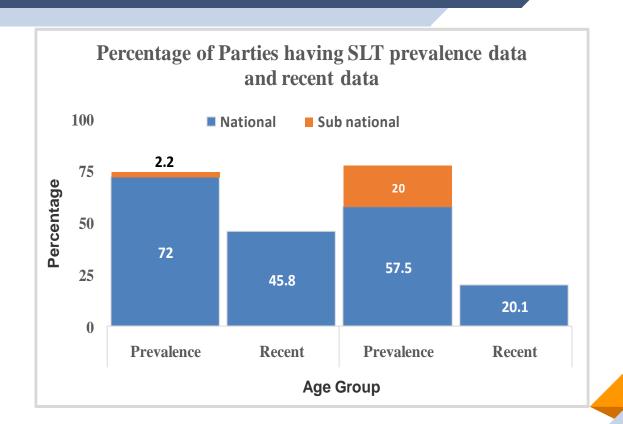
Background

The Parties undertake to develop and promote national research and to coordinate research programmes at the regional and international levels in the field of tobacco control.

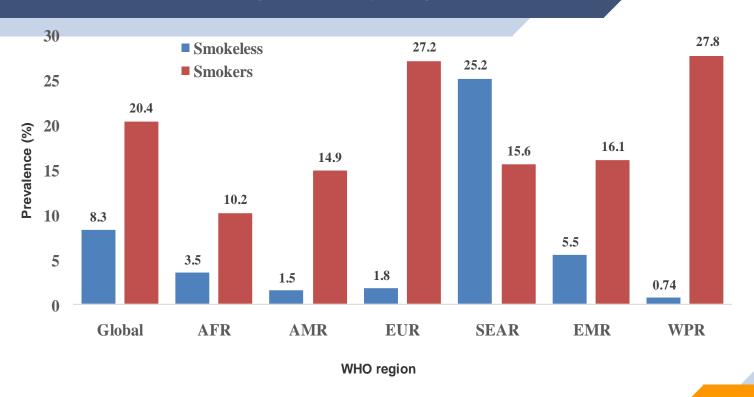
The Parties shall establish, as appropriate, programmes for national, regional and global surveillance of the magnitude, patterns, determinants and consequences of tobacco consumption and exposure to tobacco smoke.

The Parties shall, subject to national law, promote and facilitate the exchange of publicly available scientific, technical, socioeconomic, commercial and legal information, as well as information regarding practices of the tobacco industry and cultivation of tobacco.

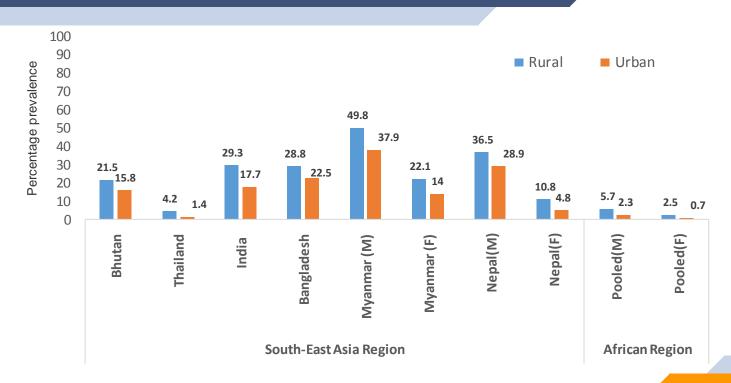
Key Observations



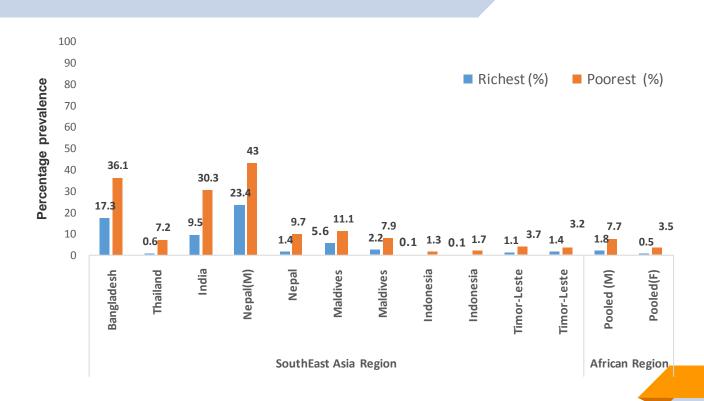
Prevalence (%) of Smoking and Smokeless Tobacco Use Among Adults by Region



Prevalence of Smokeless Tobacco Use among Adults by Residence in SEAR and AFR



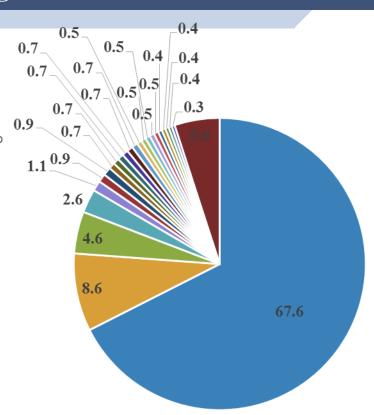
Prevalence of Smokeless Tobacco Use among Adults by Family Income in SEAR and AFR



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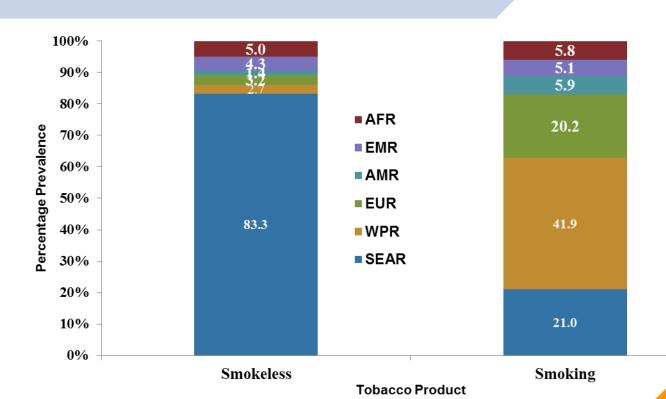
Proportion of SLT Users Among Adult by **High Burden Parties**

- India
- Bangladesh
- Myanmar
- Pakistan
- China
- Nepal
- Colombia
- Democratic Republic of the Congo
- Malaysia
- Madagascar
- Germany
- Uzbekistan Sri Lanka
- Nigeria
- South Africa
- Afghanistan
- Yemen
- Thailand
- Eavpt
- Algeria
- Philippines
- Sweden
- Kenva
- others



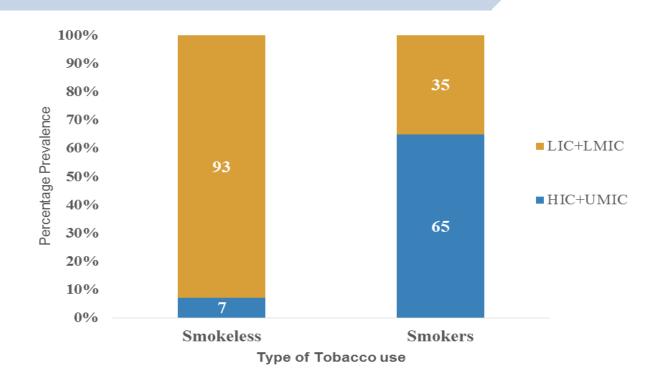
- Over 350 million SLT users live in 129 countries which are parties to the convention
- Nearly 85% SLT users live India, Bangladesh, Pakistan Myanmar, and China:
- 95% of SLT users live in 23 countries

Proportion of Smokers and SLT Users among Adults by WHO Region

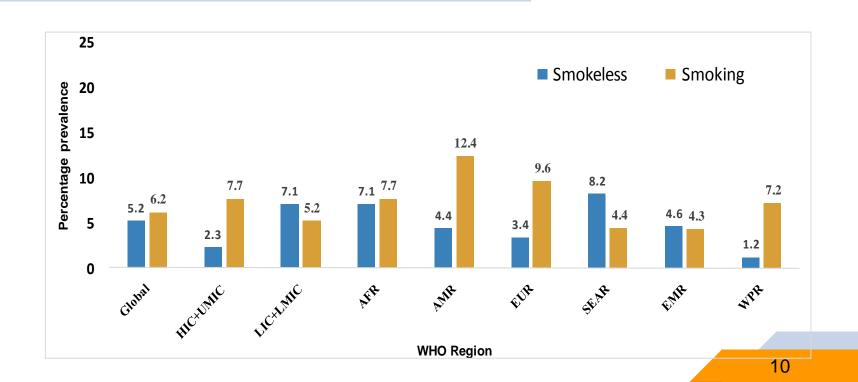


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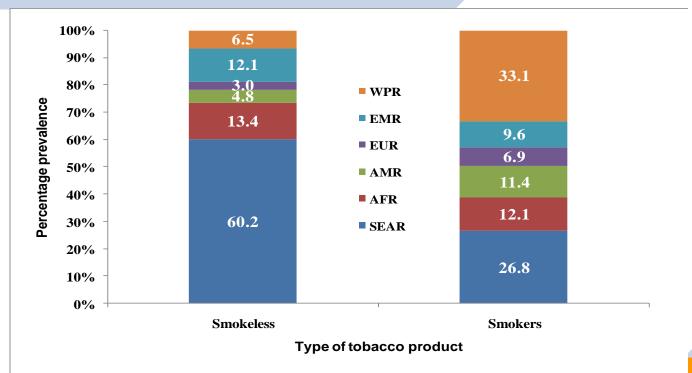
Proportion of Smokers and Smokeless Tobacco Users by Income Group



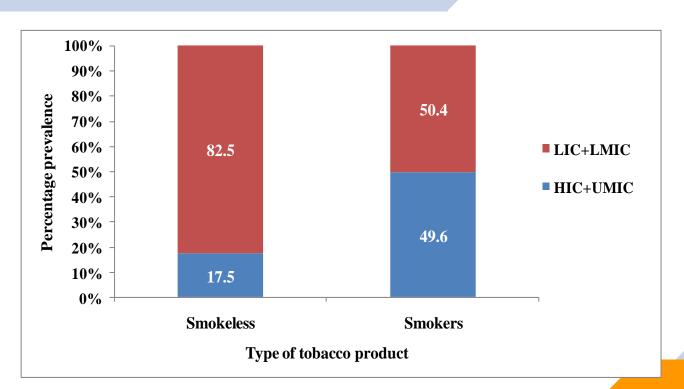
Prevalence of Smoking and Smokeless Tobacco Use among Adolescents by Region and Income Group



Proportion of Smokers and Smokeless Tobacco Users Among Adolescents by Region

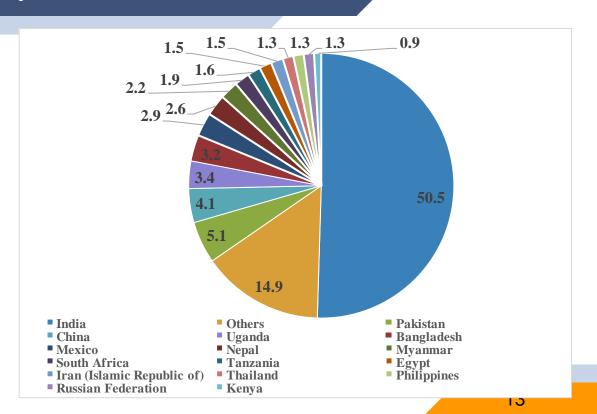


Proportion of Smokers and Smokeless Tobacco Users Among Adolescents by Income Group

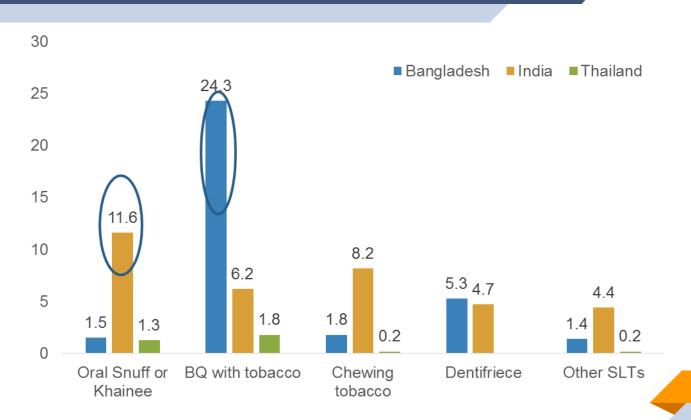


Proportion of Smokeless Tobacco Users Among Adolescents by Countries

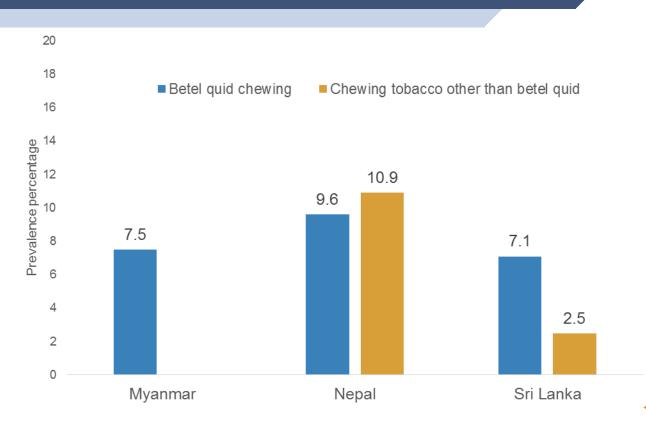
- Nearly 15 million
- 67% in 5
- 85% in 16



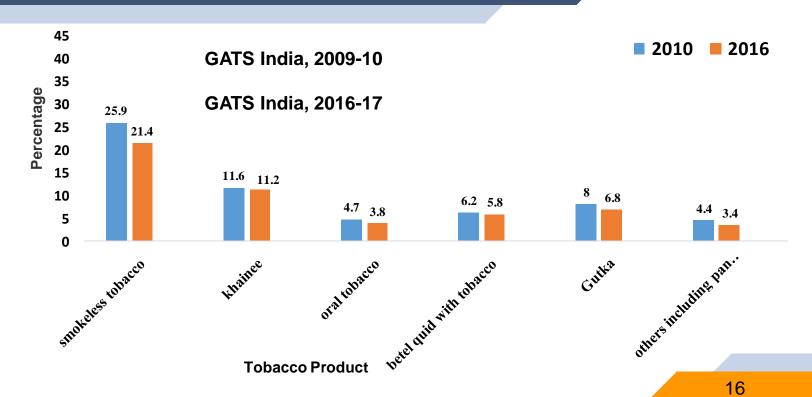
Prevalence of Different SLT Products in Adults in Selected Countries of SEAR



SLT product prevalence among adolescent in selected countries of SEAR



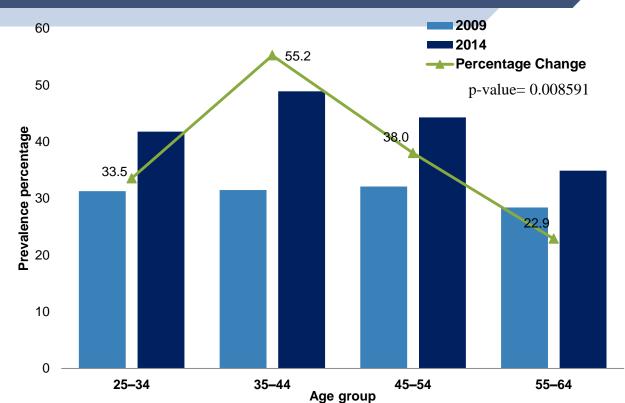
Percentage of various SLT Product Users among Adults in India; Findings from GATS Data

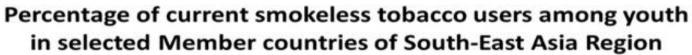


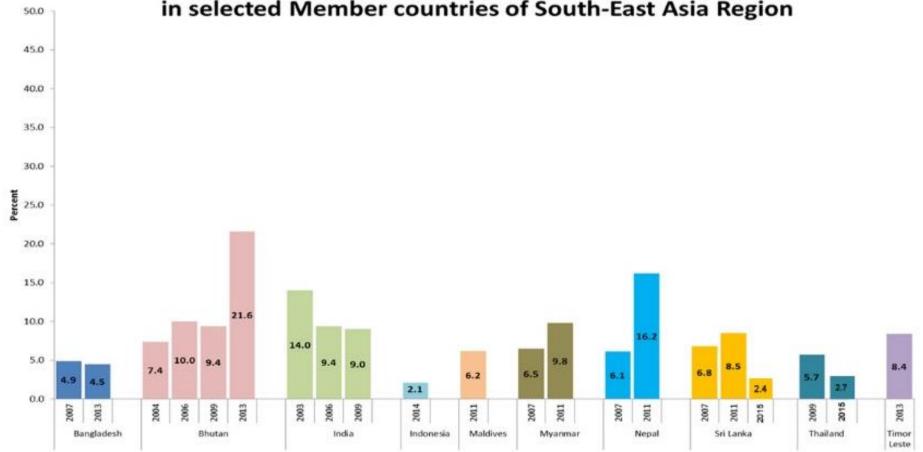
Change in Current SLT Use among Adults in Myanmar by Age Groups

STEPS, 2009

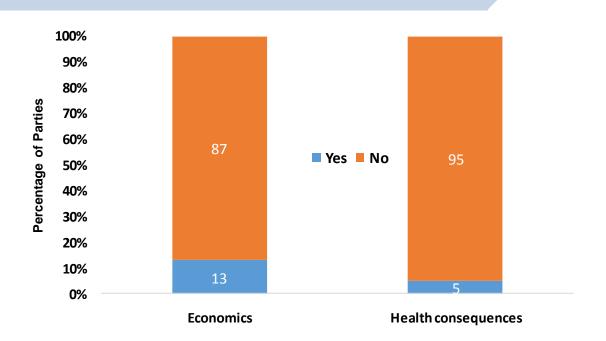
STEPS, 2014







Percentage of Parties having data on Economic and Health Consequences of SLT



Summary

- SLT use prevalence among adults and adolescent available for nearly three fourth of Parties
- Recent data on adult prevalence available for nearly half of the Parties and on adolescent prevalence is available for 20% of the Parties
- Periodic data on SLT use prevalence is available for nearly 10% of the Parties
- Nearly 2 in 10 adults smoke and nearly one in 10 use SLT globally
- SLT use among adult and adolescent is higher than smoking in SEAR unlike other regions
- Over 90% of global adult SLT use burden is in Low Resource Parties
- Among women tobacco users, predominant form is SLT
- SLT use is higher in rural areas (1.25-3 times) and in poorest community (3-17 times) in SEAR and AFR
- SLT use among adults is on the increase in Myanmar and has decreased in India

Summary (contd..)

- SLT product prevalence is available for limited number of Parties both for adults and adolescent
- SLT use among adolescent has markedly increased in some SEAR countries
- Data on Economic Consequences of SLT is available for 13% of the Parties.
- Data on SLT Health consequences is available for 5%0f the Parties
- Chemical studies on SLT are reported for 10% of the Parties

Recommendation...

- SLT use prevalence among adults and adolescents should be monitored on periodic basis
- National level monitoring should include indicators on health, economic and social consequences of SLT especially for high burden Parties.
- 3. Research and surveillance data on tobacco control should be accessible in public domain.
- 4. Guidelines for Article 20 may be developed

THANK YOU