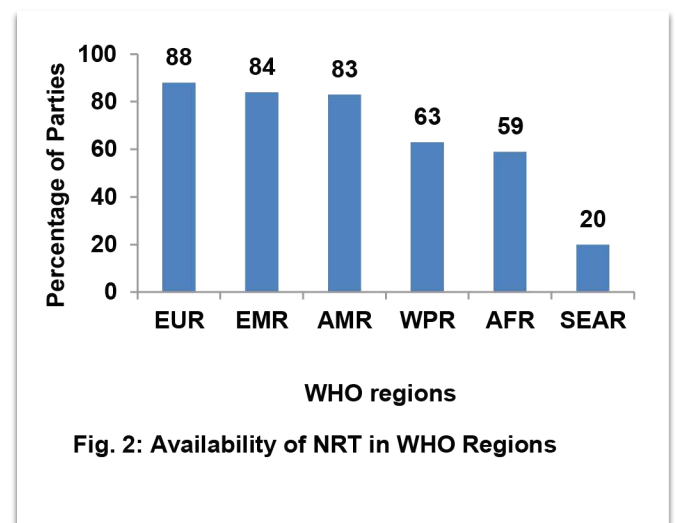
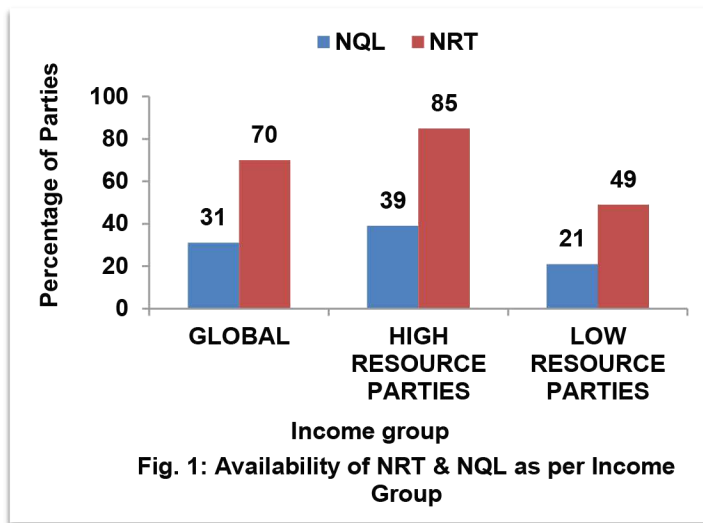


Demand Reduction Measures Concerning SLT Dependence and Cessation

Article 14 of the WHO FCTC states that “Each party shall develop and disseminate appropriate, comprehensive and integrated guidelines based on scientific evidence and best practices, taking into account national circumstances and priorities, and shall take effective measures to promote cessation of tobacco use and adequate treatment for tobacco dependence.”

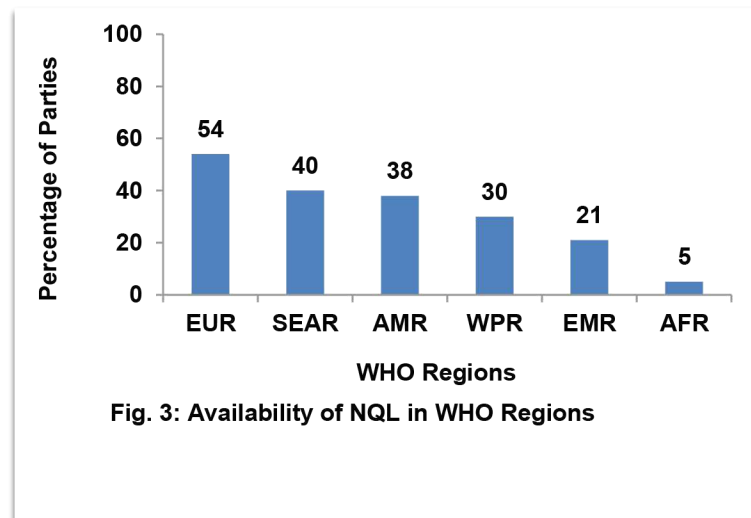
Nicotine Replacement Therapy (NRT)

- NRT is legally available in the jurisdiction of 3/4th Parties (70%) and mostly available in high resource countries (Fig. 1).
- Parties in all the WHO regions, except SEAR, have high availability of NRT (Fig. 2).



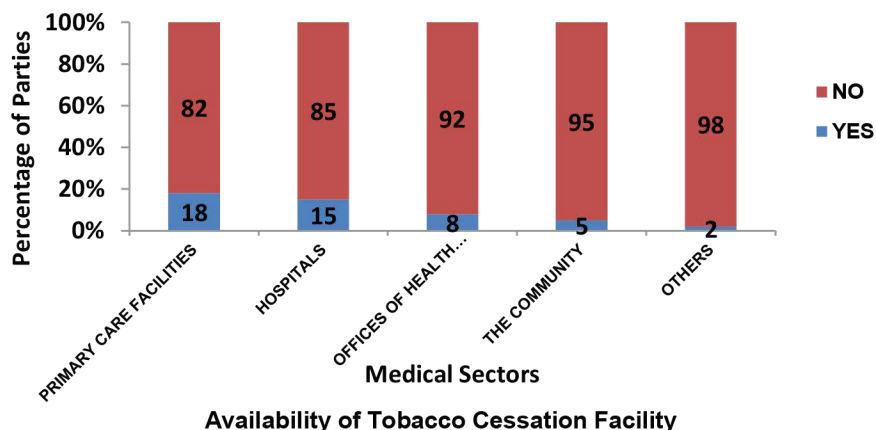
National toll-free Quitlines (NQL)

- NQL are available in very few Parties (31%) and mostly available in high resource countries (Fig. 1).
- Availability of NQL varies from 54% in EUR to 5% in AFR (Fig. 3).



Tobacco Cessation Support

Tobacco cessation support is available at various health care facilities, in less than 20% of Parties (Fig. 4).



Very few Parties have reported full coverage of the costs of tobacco cessation treatment or available pharmaceutical products for the purpose, at least in one of the tobacco cessation support facilities (Fig. 5).

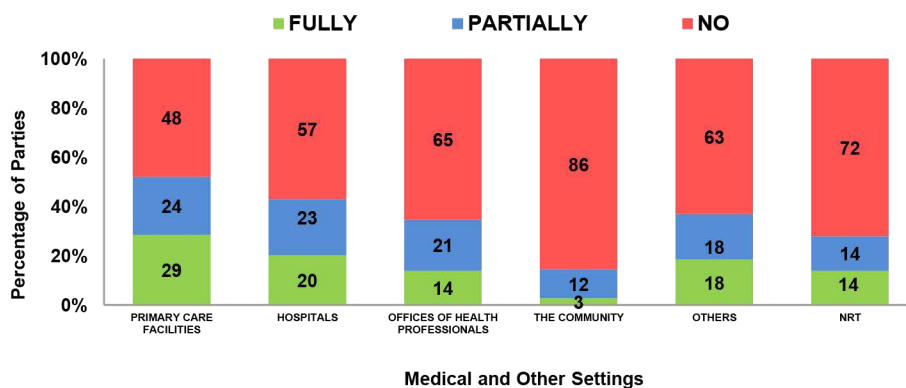


Fig. 5: Cost Coverage of the various tobacco cessation interventions in the Parties

Capacity building of health professionals and other stakeholders of tobacco control

- GATS reports from various countries show at least 50% smokers are advised to quit while only 25% of smokeless tobacco users are offered this advice (Fig. 6).
- There is a lack of formal training on tobacco cessation among health professionals, medical/dental/nursing students and school personnel.

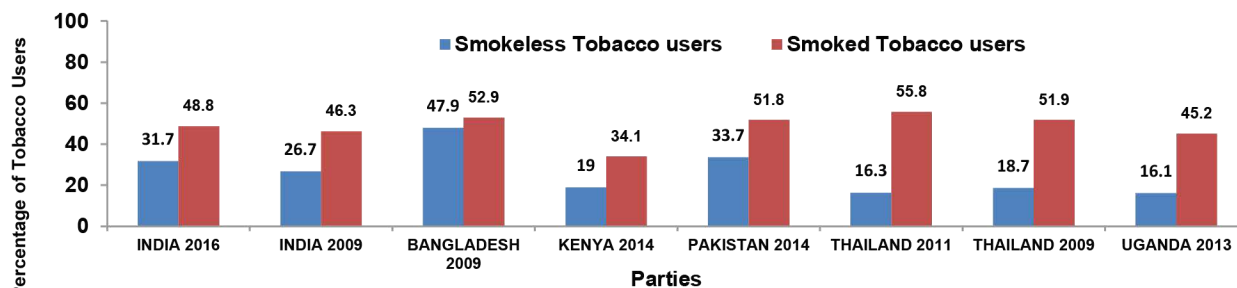


Fig. 6: Tobacco Users Advised to Quit by Health Care Provider in Past 12 Months (Global Adult Tobacco Survey)

Findings from meta-analysis of SLT cessation intervention trials

Meta-analysis has shown that behavioral intervention alone has 60% more chance of quitting SLT and is the most effective way of intervention both for low and high resource settings.