

Regional framework for action on tobacco control

Strategic intervention	Progress indicator	Relevant WHO Framework Convention on Tobacco Control (FCTC) article
Governance and political commitment		
<ul style="list-style-type: none"> → Become a Party to the WHO FCTC → Develop national tobacco control strategies, plans and programmes aligned with the WHO FCTC → Assign a full-time focal point for tobacco control → Adopt measures to protect public health policies from the influence of the tobacco industry → Ensure the sustainability of tobacco control programmes 	<ul style="list-style-type: none"> → A comprehensive national tobacco control law is in place, in line with WHO FCTC commitments → Comprehensive, multisectoral national tobacco control strategies, plans and programmes, consistent with the WHO FCTC, are enacted → A designated national multisectoral coordinating mechanism for tobacco control is in place → A tobacco control focal point is in place → Measures to address Article 5.3 of the WHO FCTC are included in national tobacco control plans → Funding is available in the ministry of health budget for tobacco control programmes 	Article 5
Demand reduction		
<ul style="list-style-type: none"> → Increase tobacco taxes to at least 75% of the retail price, and include all tobacco products in tax increases → Expand current smoke-free policies to cover all public places and workplaces → Establish a complete ban on tobacco advertising, promotion and sponsorship, including a ban on tobacco promotion in drama → Enforce graphic health warnings at least 50% of the pack size on all tobacco products and packaging in line with WHO FCTC guidelines → Incorporate delivery of brief cessation advice into essential services package for primary health care, including 	<ul style="list-style-type: none"> → Tobacco tax is at least 75% of retail price for all tobacco products, through using excise tax → All public places and workplaces are totally smoke-free with no designated smoking areas → All forms of tobacco advertising, promotion or sponsorship are banned → All tobacco products have graphic health warnings at least 50% of pack size → Brief tobacco cessation advice is integrated into primary health care, health promotion, risk reduction and disease control programmes. Primary health care workers are trained in brief tobacco cessation advice. Quit line is established 	Articles 6–14
Demand reduction		
<ul style="list-style-type: none"> establishment of quit line, and ensure availability of nicotine replacement therapy and mandate training of all health professionals in giving brief cessation advice 		
Supply restriction		
<ul style="list-style-type: none"> → For Member States that are Parties to the WHO FCTC, pursue ratification of the Protocol to Eliminate Illicit Trade in Tobacco Products → Adopt measures to minimize illicit trade in tobacco products → Ban tobacco sales to and by minors → Transition tobacco farmers towards other crops → Eliminate incentives for tobacco agriculture 	<ul style="list-style-type: none"> → The number of WHO FCTC Parties that have ratified the Protocol to Eliminate Illicit Trade in Tobacco Products has increased to nine → Tracking and tracing system of tobacco products is in place → Legislation banning sales of tobacco products to and by minors is enacted in all Member States → Policies and programmes to reduce tobacco agriculture are being established 	Articles 15–17
Surveillance, monitoring and research		
<ul style="list-style-type: none"> → Regularly implement standard global/regional surveys (e.g. Global Tobacco Surveillance System surveys) and evaluation on tobacco control activities and disseminate results widely → Institute research to monitor tobacco industry efforts to circumvent tobacco control in the Region 	<ul style="list-style-type: none"> → National adult and youth surveys are regularly conducted, every 5 years → Tobacco industry monitoring and research is actively being implemented in the Region 	Article 20 and part of Article 5