

Working Group on Sustainable Implementation of the WHO FCTC

BRIDGING THE FCTC RESOURCE GAP

Resources for tobacco control: a bleak reality

Tobacco use kills 6 million people each year. Sadly, resources spent on tobacco control are in no way commensurate with the death and disability caused by this product.

Since negotiations on the WHO Framework Convention on Tobacco Control (FCTC) started in 1999, funding for global health has climbed from US\$9.9 billion to \$28.1 billion in 2012¹ (measured in 2010 US dollars). Virtually none of this money has gone to tobacco control: countries spend from \$0.001 to \$1.00 per person annually on FCTC implementation², and the annual budget of the FCTC Secretariat is less than \$10 million³.

There is no doubt that tobacco control is underfunded. The question is: **why is this so and how can FCTC Parties change it?** There has never been a better time to explore why insufficient resources are devoted to tobacco control, and to propose ways to mobilize funding for FCTC implementation at the country level.

In October 2013, an FCTC working group will meet to address challenges to FCTC implementation. This **Working Group on Sustainable Measures to Strengthen Implementation of the WHO FCTC** is mandated to provide to the sixth session of the Conference of the Parties (COP6) in 2014 recommendations on how to mobilize and sustain support for FCTC implementation.

The working group will need to address a number of issues, as different Parties experience different obstacles to their tobacco control work. But there are

THE WAY FORWARD

The following steps will help Parties to have a productive first meeting of the working group in October 2013.

Identify obstacles to resource mobilization

There might be several barriers that hinder access to resources for FCTC implementation. Exchanging Parties' experiences early in the meeting will allow the group to develop possible solutions.

Request data and background information

It will be important to review work undertaken so far, such as the outcomes and impact of the existing mechanisms of assistance.

Propose solutions

The group was tasked to propose a wide range of recommendations. Some suggestions are provided in this document. An initial list of options should emerge during the meeting in October.

also many similarities: numerous Parties face a shortage of resources available to advance their tobacco control work⁴.

Identifying obstacles to resource mobilization

It is likely that Parties have different experiences in resource mobilization. A preliminary exchange of views regarding the challenges to finding resources will be critical to identifying key issues, commonalities and differences. This exchange of views should take place during the first working group meeting in October.



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Examples of obstacles experienced by those working in tobacco control might include:

- Relatively little evidence about how much it costs to run effective tobacco control programmes in developing countries. Without data to serve as reference points, it becomes difficult for tobacco control staff to justify proposed expenditures or budget increases.
- Countries are not sufficiently equipped to demonstrate all the costs associated with tobacco use. It is relatively easy to illustrate the impact of tobacco use on mortality, but it is more complex to calculate its economic costs. But it is the projected economic costs that usually prompt governments to devote sufficient attention to public health concerns.

Delegates to the working group may wish to come prepared to provide specific examples of difficulties to unlocking resources for tobacco control in their countries and internationally.

Request data and background information

Having access to relevant background information prior to the October meeting will help the working group complete a full review of the possible obstacles to mobilizing resources for FCTC implementation.

For example, over 20 needs assessments have been undertaken since 2009 to assist Parties to identify their resource needs⁵. Similarly, the database of available resources has been in place for nearly three years⁶. These tools were established by COP1 in 2006 to facilitate resource mobilization for tobacco control⁷; however very little evidence is available concerning their outcomes and impact.

Additional background information may include data and an overview on:

- existing tools and international/regional capacity (e.g. experts) to quantify the harms of tobacco use in economic terms;
- examples of the size and scope of budgets for tobacco control of a representative sample of FCTC Parties (regional balance, size of population, prevalence of tobacco use, socio-economic development).

WHO, relevant UN agencies and international bodies such as the World Bank should be invited to the working group meeting to provide a brief overview of their work in this regard.

DOCUMENTS ABOUT RESOURCES FOR FCTC IMPLEMENTATION

- WHO FCTC (2006): *Review of existing and potential sources and mechanisms of assistance*
- WHO (2011): *Scaling up action against non-communicable diseases: How much will it cost?*
- WHO (2012): *Assessing national capacity for the prevention and control of NCDs*

Propose solutions

Once current obstacles to mobilizing resources for tobacco control are identified, the next step for the working group will be to propose a wide range of recommendations to overcome them.

If, for example, assessing financial needs for domestic tobacco control is noted as a challenge the working group may propose that the COP mandate development of a model budget for tobacco control and additional tools to help countries promote and justify tobacco control expenses.

If there are concerns that discussions to date on resources for FCTC implementation have not been comprehensive, the working group may consider a recommendation that each COP session includes a full review of available resources. Relevant UN agencies and public and philanthropic donors could be invited to participate in such reviews.

¹ Institute for Health Metrics and Evaluation (IHME). 2012. *Financing Global Health 2012: The End of the Golden Age?* Seattle: IHME.

² WHO. 2008. *WHO Report on the Global Tobacco Epidemic*. Geneva: WHO.

³ COP5 decision FCTC/COP5(19)

⁴ WHO FCTC. 2012. *Global Progress Report*. Geneva: WHO FCTC

⁵ For more information see <http://www.who.int/fctc/en/>

⁶ *ibid*

⁷ COP1 decision FCTC/COP1(13)