

## **Regional Meeting for the Eighth Session of the Conference of the Parties (COP8) to WHO FCTC, 20-21 August 2018, New Delhi, India**

The meeting was held at Hotel Ashok, New Delhi, India. The meeting began with message by Dr Poonam Khetrpal Singh, Regional Director, WHO Regional Office for South-East Asia (SEARO), read by Dr Thamarangsi Thaksaphon, Director, NDE, WHO SEARO, as given under:

Distinguished participants, ladies and gentlemen,

Welcome to this regional workshop of the Eighth Session of the Conference of the Parties to the WHO Framework Convention on Tobacco Control.

Although our Regional Director, Dr Poonam Khetrpal Singh, would have very much liked to attend this important event, she is unfortunately unable to due to prior commitments. I therefore take great pleasure in delivering this message on her behalf.

The Regional Director says tobacco use, which is driven by industry marketing and fueled by social inequities, is one of the largest causes of preventable death worldwide.

She says it is inhibiting socioeconomic development at the household, national and global levels, is exacting economic burdens on national health care systems, and is infringing human rights. To solve the problem, she emphasizes, countries must act multilaterally.

The Regional Director notes that in the WHO South-East Asia Region – as per the second edition of the WHO Global Report on trends in prevalence of tobacco smoking (2000-2025) – there are about 237 million adult smokers and 301 million adult smokeless tobacco users aged 15 years and above. This makes it one of the world's largest tobacco consuming regions, housing more than one fifth of its smokers and more than 80% of its smokeless tobacco users.

Dr Khetrpal Singh notes with deep regret that every year nearly 1.6 million people die due to tobacco consumption.

She is nevertheless pleased that, in the spirit of international cooperation, in May 2003 WHO Member States challenged the global spread of tobacco by adopting an international tobacco control treaty, the Framework Convention on Tobacco Control, or FCTC. The Convention represents the first time in WHO's history that it has used its authority to draft a binding international treaty.

The Regional Director highlights that the trust Parties to the Convention placed in WHO was unprecedented and was instrumental in the treaty entering into force in February 2005. Significantly, the Convention has created general principles of cognitive and normative consensus for international public health, challenging the globalization of the tobacco epidemic by adopting a dynamic and incremental approach to international tobacco control. Many of the Region's Member States were at the forefront of enacting the treaty.

Dr Khetrpal Singh notes that since its inception the Convention has progressively developed, and its scope and approach have become more robust. There has been a rapid growth in the number of Parties to the Convention – from the 40 ratifications needed for it to enter into force to the current membership of 181 Parties. Moreover, the Protocol to Eliminate Illicit Trade in Tobacco Products, the first Protocol to the Convention, was adopted in November 2012 at the fifth session of the Conference of the Parties in Seoul, Republic of Korea. Following the ratification of the United Kingdom of Great Britain and Northern Ireland on 27 June 2018, the conditions for the Protocol to enter into force have been met. Notably, two of our Region's countries – Sri Lanka

and India – are among the 47 countries that are Parties to the Protocol. The Protocol will enter into force on 25 September 2018.

The Regional Director notes that the Convention and its guidelines provide the foundation for Member States to implement and manage tobacco control. However, she says, to help make this a reality, WHO introduced the MPOWER package to assist in reducing the demand for tobacco products at country-level. Since its launch in February 2008, MPOWER has become the internationally applicable and now widely recognized summary of the essential elements of tobacco control strategy.

Dr Khetrpal Singh is pleased that most of the Region's Member States have taken significant steps towards building enabling environments to promote tobacco-free cultures and lives. She is also pleased that data from the recent Global Adult Tobacco Surveys (GATS) conducted in India and Bangladesh substantiate the impact enabling environments can have. Notably, among adults aged 15 years or older, the prevalence of current tobacco use has decreased from 43.3% in 2009 to 35.3% in 2017 in Bangladesh and from 34.6% 2009 to 28.6% in 2016 in India.

The Regional Director commends Democratic Republic of Korea, Nepal, Sri Lanka, Timor-Leste and Thailand for banning electronic cigarettes. Democratic Republic of Korea, India, Sri Lanka and Thailand have meanwhile banned smokeless tobacco. She says the Region is doing exceptionally well in the implementation of large graphic health warnings on the packages of tobacco products, with Member States such as Timor-Leste, Nepal, India, Thailand, Sri Lanka and Myanmar taking the lead, Sri Lanka recently adopting a resolution on the plain packaging of tobacco products, and Thailand also introducing legislation to do the same. Nepal has meanwhile issued a new notification mandating compulsory registration and licensing for the sale of tobacco products and has also banned the use of all tobacco products in public places.

Importantly, Dr Khetrpal Singh says, many of the Region's Member States have increased as well as simplified taxes on tobacco products. Taxes have been raised in Bangladesh to 77% and in Sri Lanka to 76% of the retail price of the most widely sold brand of cigarettes. Sri Lanka and India have acceded to the Protocol to Eliminate Illicit Trade in Tobacco Products. Thailand has passed new and comprehensive tobacco control legislation, which bans the sale of tobacco products to those under 20 years, a complete ban on all forms of tobacco advertising and marketing, a ban on tobacco companies conducting corporate social responsibility activities, a strict prohibition on sales of tobacco products in temples, medical facilities, pharmacies, educational institutions, public parks, zoos and amusement parks, and a ban on the sale of loose cigarettes. Bangladesh and Indonesia have meanwhile shown how strong anti-tobacco mass media campaigns can support tobacco control policy measures.

The Regional Director says a new knowledge hub to track tobacco industry interference in public policy-making has been established in Bangkok, Thailand. That is in addition to the Centre for Combating Tobacco, an observatory established at the Faculty of Medicine, University of Colombo, Sri Lanka, under Article 5.3 of the WHO-FCTC to combat growing tobacco industry interference. A global knowledge hub on smokeless tobacco products has meanwhile been established at the National Institute of Cancer Prevention and Research in Noida, India. The primary objective of this hub is to collect evidence on different aspects of smokeless tobacco and develop a knowledge-base for different stakeholders.

The Ministry of Health and Family Welfare, India has also established three Tobacco Products Testing Laboratories (one Apex and two Regional). Once fully operable, the apex lab will serve as a reference lab for the entire Region.

Dr Khetrpal Singh emphasizes that it is imperative the Region's Member States build upon and carry this momentum forward.

As per the second edition of the WHO Global Report on trends in prevalence of tobacco smoking, the prevalence of tobacco smoking in the Region appears to be decreasing; however, the Region may still not reach the target of a 30% relative reduction in prevalence between 2010 and 2025. As per the report, a gap of 1.5% persists between the 2025 target prevalence and the 2025 projected prevalence of tobacco smoking by people aged 15 years and above in our Region. Thus, for the Region's Member States to attain the global targets, they must strengthen their efforts to fully implement the WHO FCTC.

At the present juncture, the Regional Director notes, it is important for Member States to think beyond MPOWER measures. Supply-side issues addressing the illicit trade in tobacco products, restricting access of tobacco products to minors and provisioning alternative livelihoods for tobacco growers and workers-are becoming increasingly crucial.

Importantly, she says, more Member States should consider becoming parties to the Protocol to Eliminate Illicit Trade in Tobacco Products. As the tobacco industry is singularly targeting teenagers and youth, Member States should comprehensively implement provisions related to restricting the access of minors to tobacco products. Dr Khetrapal Singh notes that tobacco growers and workers, often used by the industry as front groups to rally against tobacco control, are important stakeholders for us. She also says they are increasingly looking towards us for provisioning viable alternative livelihoods with effective market support systems.

With the progressive improvement in the implementation of tobacco control measures, the pattern of the Region's tobacco epidemic seems to be changing. Big Tobacco is increasingly targeting the Region, while new tobacco products have emerged aimed at renormalizing tobacco use, especially among youth and teenagers. The smokeless tobacco industry is consolidating itself as its market grows. Gender-specific risks need to be increasingly addressed by each of the Region's Member States while developing tobacco control strategies.

The Regional Director emphasizes that it is now time for us to make our planet tobacco-free. She says we must all deal with the challenges together, with all opportunities to take the tobacco control agenda forward made full use of. Biennial session of the conference of the Parties to the WHO FCTC present us with one such opportunity.

Dr Khetrapal Singh says the countries of our Region ought to strategically leverage the unique opportunity of the eighth session of the conference of the Parties (COP-8) to the WHO FCTC to encourage governments to strengthen the implementation of the tobacco control measures contained in the Convention. Given this background, during this regional workshop Member States should consider all aspects of the COP-8 agenda and strive to take a common regional stand on important tobacco control issues. This will ensure that decisions and resolutions adopted during COP-8 are in sync with the regional tobacco control agenda and priorities. Thus, the conclusions and recommendations of this workshop have significant potential to bolster the implementation of tobacco control measures across our Region.

To this end, the Regional Director wishes you productive deliberations.

I take the opportunity to echo that sentiment and wish you all the best in coming days.

Thank you.

## **Objectives of the Meeting:**

### **General objective**

To prepare and support for a proactive participation of SEAR Member States and advance regional interest to the COP7 meeting.

### **Specific objectives**

1. To review and brief the Member States on the outcomes of the Working Groups, Study Groups and Expert groups on various Articles of WHO FCTC.
2. To brief the Member States and other Stakeholders on the regional perspective on important agenda items of COP 7, including smokeless tobacco, illicit trade, tobacco taxation, plain packaging etc.
3. To gain a consensus on the regional position on selective issues of common interest among Member States.
4. To discuss the potential roles of SEAR member States as representative to the governing bodies of FCTC/COP.

## PROGRAMME

**Day 1: Monday, the 20<sup>th</sup> day of August 2018**

Time	Agenda item	Remarks
<b>08:30—09.30 AM</b>	<b>Registration</b>	
<b>09.30—10.10 AM</b>	<p><b>Opening of the meeting and adoption of the agenda:</b></p> <p>Welcome</p> <p>Address by the representative of Convention Secretariat, Dr Tibor Zoltan Szilagyi, Team Leader, Reporting &amp; Knowledge Management, Convention Secretariat</p> <p>Address by Dr Vinayak Prasad, Actg. Director, PND, WHO HQ</p> <p>Message by Dr Poonam Khetrpal Singh, Regional Director, WHO SEARO – to be read by Dr Thamarangsi Thaksaphon, Director, NDE, WHO-SEARO</p> <p>Address: Mrs Preeti Sudan, COP Bureau President &amp; Secretary HFW, India</p> <p>Introduction to the objectives of the meeting – Dr Jagdish Kaur, RA, TFI, WHO SEARO</p> <p>Introduction of participants, nomination of office-bearers and adoption of the agenda</p> <p>Group photograph</p>	Opening Ceremony
<b>10.10—10.40 AM</b>	<b>Health break</b>	
<b>10.40—10.55 AM</b>	Regional situation on implementation of the WHO FCTC and expected outcomes of this regional workshop: Dr Jagdish Kaur, Regional Advisor (TFI), WHO SEARO	Chair: Mrs Preeti Sudan, COP Bureau President & Secretary

<b>10.55—11.10 AM</b>	Overview of COP8 arrangement and programme of work: Dr Tibor Zoltan Szilagyi, Team Leader, FCTC Secretariat	Health & Family Welfare, India Co-chair: Dr Thar Tun Kyaw, Director General Ministry of Health & Sports, Myanmar
<b>Review of the COP documents:</b>  {The Convention Secretariat will introduce the reports, followed by discussion}		
<b>11.10 AM—12:30 PM</b>	<b>Issues where significant substantive decisions will need to be taken:</b>  Tobacco advertising, promotion and sponsorship: depiction of tobacco  in entertainment media ( <b>document FCTC/COP/8/7</b> )  Progress report on technical matters related to Articles 9 and 10  (Regulation of contents and disclosure of tobacco products, including waterpipe, smokeless tobacco and heated tobacco products) <b>(document FCTC/COP/8/8)</b>  Measures to strengthen implementation of the Convention through coordination and cooperation: report by the working group <b>(document FCTC/COP/8/11)</b>	Chair: Mrs Preeti Sudan, COP Bureau President & Secretary Health & Family Welfare, India Co-chair: Dr Thar Tun Kyaw, Director General Ministry of Health & Sports, Myanmar
<b>12.30—01.30 PM</b>	<b>Lunch</b>	

<b>01.30—03.00 PM</b>	<p><b>Issues where significant substantive decisions will need to be taken:</b></p> <p>Maximizing transparency of delegations from Parties and observers to the Conference of the Parties, its subsidiary bodies and other WHO FCTC meetings (<b>document FCTC/COP/8/15</b>)</p> <p>Proposed workplan and budget for the financial period 2020–2021 (<b>documents FCTC/COP/8/16; FCTC/COP/8/INF.DOC./2</b>)</p> <p>Convention Secretariat's fundraising strategies: Investment fund concept (<b>document FCTC/COP/8/18</b>)</p>	<p>Chair: Dr Pantip Chotbenjamaporn, Thailand Co-chair: Mr Md. Khairul Alam Sheikh, Bangladesh</p>
<b>03.00—03.15 PM</b>	<b>Health break</b>	
<b>3.15—05.00 PM</b>	<p><b>Issues where a decision needs to be taken that is expected to be fairly routine/uncontroversial:</b></p> <p>Applications for the status of observer to the Conference of the Parties (<b>document FCTC/COP/8/3</b>)</p> <p>Progress report on scientific, regulatory and market developments on electronic nicotine delivery systems and electronic non-nicotine delivery systems (<b>document FCTC/COP/8/10</b>)</p> <p>Tobacco control in emergency situations (<b>document FCTC/COP/8/13</b>)</p> <p>Payment of the assessed contributions and measures to reduce Parties in arrears (<b>document FCTC/COP/8/17</b>)</p> <p>Review of accreditation of observers to the Conference of the Parties</p> <p>(<b>document FCTC/COP/8/19</b>)</p>	<p>Chair: Mr Hassan Mohamed, Maldives Co-chair: Mr Sunil Raj Sharma, Nepal</p>
<b>5.00-5.10 PM</b>	Wrap up of Day 1	RA, TFI

**Day 2: Tuesday, the 21<sup>st</sup> day of August 2018**

<b>09.00—10.45 AM</b>	<p><b>Issues where the COP is merely expected to take note of work done and take regular decisions:</b></p> <p>Global progress in implementation of the WHO FCTC, followed by a general debate</p> <p><b>(document FCTC/COP/8/4)</b></p> <p>Protocol to Eliminate Illicit Trade in Tobacco Products <b>(documents FCTC/COP/8/5, FCTC/COP/8/6)</b></p> <p>Progress report on technical matters related to Articles 4.2.d (gender issues) 5.3 (tobacco industry interference), 17 and 18 (alternative livelihoods and protection of the environment) and 19 (liability)</p> <p><b>(document FCTC/COP/8/9)</b></p> <p>Progress report implementation assistance and international cooperation <b>(document FCTC/COP/8/12)</b></p>	<p>Chair: Dr V.T.S.K. Siriwardana, Director (Non-Communicable Diseases), Sri Lanka Co-chair: Mr Mario Sere Kai, Timor-Leste</p>
<b>10.45—11.00 AM</b>	<b>Health break</b>	
<b>11.00 -11.30 AM</b>	<p>Performance and Progress reports</p> <p><b>(document FCTC/COP/8/14)</b></p> <p>Strengthening synergy between the Conference of the Parties and the World Health Assembly: report by the WHO Director-General on the outcome of the Seventieth and Seventy-First World Health Assembly <b>(document FCTC/COP/8/22)</b></p>	<p>Chair: Mr Chhimi Dorji Deputy Chief Program Officer, Bhutan Co-chair: Dr Ri Jin, National Programme Manager for Tobacco Control, DPR Korea</p>
<b>11.30 AM-1.00 PM</b>	<p>Open session: priority issues for South-East Asia Region</p> <p>Brief statement by the civil society representative</p> <p>Summary and closure of the pre-COP preparatory meeting</p>	<p>Chair: Mrs Preeti Sudan, COP Bureau President Co-chairs: Dr. Mya Lay Nwe, Regional Coordinator Dr Jagdish Kaur</p>
<b>01.00—02.00 PM</b>	<b>Lunch</b>	



<b>02.00—04.00 PM</b>	<p>Review of the progress and challenges in FCTC implementation in SEAR countries:</p> <p>Short 7-8 minutes presentations by the programme managers of the eleven SEAR countries</p> <p>Discussion and conclusions</p>	<p>Chair: Dr Thamarangsi Thaksaphon</p> <p>Moderator: Dr Jagdish Kaur</p>
<b>04.00 PM</b>	<p style="text-align: center;"><b>Health break</b></p>	

## **Summary of South-East Asia regional response on the agenda items of eighth meeting of the Conference of the Parties**

The meeting was opened with a video message from Dr Vera Luiza da Costa e Silva, followed by the message from Dr Poonam Khetrpal Singh, Regional Director, WHO SEARO delivered by Dr Thaksaphon Thamarangsi, Director, NDE, WHO SEARO. Dr Vinayak Prasad, Actg. Director, PND WHO HQ and Dr Tibor Szilagyi, Team Leader, FCTC Secretariat also addressed the participants. Key note address was delivered by Mrs Preeti Sudan, COP Bureau President and Secretary Health & Family Welfare, Government of India. Representatives of all SEAR countries including 10 Parties to the Convention participated along with Indonesia as an observer.

Dr Jagdish Kaur, Regional Adviser, TFI, WHO SEARO made a presentation giving overview of the WHO FCTC implementation in South-East Asia Region. Dr Tibor Szilagyi, provided an overview of the COP8 arrangements and programme of work.

The following agenda items were discussed with facilitation by video presentations provided by the Secretariat and WHO:

### **A. Issues where significant decisions need to be taken**

1. Expert Group on tobacco advertising, promotion and sponsorship: depiction of tobacco in entertainment media (document FCTC/COP/8/7) – report of the expert group was presented. India impressed upon inclusion of surrogate advertisements in the same and Sri Lanka raised concern about advertising ENDS through the websites. Bhutan was also concerned about the social media advertisements of new tobacco products e.g. ENDS and proposed cross border collaborations with the neighboring countries, especially India to counter the same. They were also in favor of including ENDS and smokeless tobacco products in the existing legislation to strengthen regulation. Maldives spoke of exploitation of cross border advertisements and social media by tobacco industry and proposed consideration of a new protocol on the cross-border advertisements. It was also discussed that countries should strengthen implementation of existing Guidelines of Article 13 to overcome the issue, also taking into consideration the advancements in technology and introduction of new and non-conventional media and their exploitation by the tobacco industry.  
Regional position: WG should continue its work. Negotiation of a new Protocol not supported.
2. Progress report on technical matters related to Articles 9 and 10 (regulation of contents and disclosure of tobacco products, including water pipe, smokeless tobacco and heated tobacco products) (document FCTC/COP/8/8) – a video prepared by WHO Hq on the agenda item was presented. CSF informed that a report on regulation of water pipes by the Knowledge Hib (KH) was being reviewed by them. Key facilitators (KFs) of the WG are preparing a draft decision and document may be revised. Countries agreed that tobacco testing is needed for strengthening tobacco control laws enforcement, advocacy and awareness generation. India needed more guidance on methods and product testing. Regional position: WHO support is required for strengthening capacity in testing of tobacco products at the country level.

3. Measures to strengthen implementation of the Convention through coordination & cooperation: report by the Working Group (document FCTC/COP/8/11). Bhutan and Sri Lanka were members of the WG. India was of the view that draft of the pilot project exercise on the implementation of the Implementation Review Mechanism can be shared with the Parties to decide on the participation in the same. One country from each Region can be represented. India also felt that new documents need to be properly understood to facilitate implementation and CSF should provide support to the Parties for effective implementation. FCA was appreciative of MTSF. Maldives appreciated participation of two SEAR countries in the WG and was supportive of country specific interventions.  
Regional position: MTSF adoption supported.
4. Maximizing transparency of delegations from Parties and observers to the COP, its subsidiary bodies and other WHO FCTC meetings (document FCTC/COP/8/15). Ms Bungon (GGTC) was of the view that Media and civil society should voluntarily declare any conflict of interest. Bangladesh raised concern on rampant incidences related to conflict of interest. Maldives and Nepal stressed on strengthening implementation of Article 5.3 to prevent incidences of conflict of interest.  
Regional position: Further discussion during COP
5. Proposed work plan and budget for the financial period 2020-2021 (document FCTC/COP/8/16;FCTC/COP/8/INF.DOC/2). Bangladesh wanted more clarity on governance issues. India suggested having norms for budgeting based on minimum assurance and mobilization of additional funds from the Parties. Maldives suggested intra-regional hand-holding, one Party supporting other within the same Region. FCA raised concern on the changes in the proposed budget if MTSF has to be implemented by the Parties.  
Regional position: To be discussed further during COP
6. Convention Secretariat's fundraising strategies: Investment fund concept (document FCTC/COP/8/18).  
Regional position: Investment fund concept supported.

**B. Issues where a decision needs to be taken that is expected to be fairly routine**

1. Application for the status of observer to the Conference of the Parties (document FCTC/COP/8/3)  
Regional position: Can be discussed further at COP
2. Progress report on scientific, regulatory and market developments on electronic nicotine delivery systems and electronic non-nicotine delivery systems (document FCTC/COP/8/10). In SEAR, 5 Parties have banned ENDS and 5 are regulating the same. Countries flagged issues of illicit sale of ENDS, advertising through social media and internet, promotion as harm reduction products, support by Smoke Free World, some importers in Bangladesh declaring ENDS as electronic devices to escape increased import duty etc. Sri Lanka has used the ST clause under their law to regulate ENDS, Thailand

was concerned about the research supported by the Smoke Free World. FCA recommended to look at the decisions of previous COPs for guidance.

The proposal for IARC monograph was agreed to in general however it was also strongly felt that there is enough existing evidence and we can have the same collated in Regional context. The view was to compile regulations and best practices at the global level too during the intersession period.

Regional position: Another thought can be given and a draft decision may be prepared.

3. Tobacco control in emergency situations (document FCTC/COP/8/13)

Regional position: No discussion took place

4. Payment of the assessed contributions and measures to reduce Parties in arrears (document FCTC/COP/8/17). Bhutan was of the view that CSF should look at the practical reasons why the contributions are not made in time. Maldives suggested role of FCTC focal points at the country level to support timely submission of contributions. Bangladesh suggested more subtle communications from the Secretariat to avoid delay in payment of ACs.

Regional position: Supported

5. Review of accreditation of observers to the Conference of the Parties (document FCTC/COP/8/19)

Regional position: Decision supported

Day 2 started with summarizing the day 1 discussions and taking up the following agenda items for discussion:

**C. Issues where the COP is merely expected to take note of work done and take regular decisions**

1. Global Progress in implementation of WHO FCTC, followed by a general debate (document FCTC/COP/8/4)

Regional position: Taken note of

2. Strengthening synergy between the COP and the WHA: report by the DG WHO on the outcome of the Seventieth and Seventy-first World Health Assembly (document FCTC/COP/8/22)

Regional position: Taken note of

3. Protocol to Eliminate Illicit Trade in Tobacco Products (document FCTC/COP/8/6). Bhutan, Maldives and Nepal are progressing towards ratification of the Protocol.

Regional position: Taken note of

4. Progress report on technical matters related to Articles 4.2.d (gender issues) 5.3 (tobacco industry interference), 17 and 18 (alternative livelihoods and protection of the environment) and 19 (liability) (document FCTC/COP/8/9)

Regional position: Taken note of

5. Progress report implementation assistance and international cooperation (document FCTC/COP/8/12)

Regional position: Taken note of

6. Performance and Progress reports (document FCTC/COP/8/14)

Regional position: Taken note of

In the last session, an open discussion was held on the priority issues for South-East Asia. Smokeless tobacco, Article 5.3, Article 13, Article 14, Article 16 and Articles 17 & 18 were identified as regional priority. The KH on Article 5.3 is working on compiling data, resources, material and working closely with SEARO to develop Tobacco Industry Interference Index in ASEAR region and beyond. The KH is planning to release a report during APACT in September 2018 at Bali, Indonesia and also developing a guide to facilitate implementation of Article 5.3 at the country level. Article 5.3 was realized to be of cross cutting in nature and more research is needed. The KH on smokeless tobacco made a statement on its activities. Bangladesh was concerned about high prevalence of ST in the region, cross border illicit trade and myths related to consumption.

Framework Convention Alliance (FCA) made a brief statement on behalf of the civil society. SEARO is planning an intercountry meeting on tobacco industry interference in November, 2018.

An exercise was undertaken to invite Parties to take lead in taking up SEAR regional response to the agenda items collectively during discussions at the COP8 in view of saving time and gain more time to present response on the agenda items. The same is given in the table below as coordinated and prepared by the Regional Coordinator Dr Mya Lay Nwe:

Issues where significant substantive decisions need to be taken	Countries show interest in presenting	Issues where a decision needs to be taken that is expected to be fairly routine	Countries show interest in presenting	Issues where the COP is merely expected to take note of work done & take regular decisions	Countries show interest in presenting
Tobacco advertising, promotion and sponsorship: depiction of tobacco in entertainment media	Thailand Bangladesh DPR Korea	Applications for the status of observer to the Conference of the Parties		Global progress in implementation of the WHO FCTC, followed by a general debate	Sri Lanka
Progress report on technical matters related to Articles 9 and 10 (Regulation of contents and disclosure of tobacco products, including water pipe, smokeless	India	Progress report on scientific, regulatory and market developments on electronic nicotine delivery systems and electronic non-nicotine delivery systems	India	Strengthening synergy between the COP and the WHA: report by the DG WHO on the outcome of the Seventieth and Seventy-first World Health Assembly	- India - Maldives

Issues where significant substantive decisions need to be taken	Countries show interest in presenting	Issues where a decision needs to be taken that is expected to be fairly routine	Countries show interest in presenting	Issues where the COP is merely expected to take note of work done & take regular decisions	Countries show interest in presenting
tobacco and heated tobacco products)					
Measures to strengthen implementation of the Convention through coordination & cooperation: report by the WG	Sri Lanka	Tobacco control in emergency situations		Protocol to Eliminate Illicit Trade in Tobacco Products	- India - Bhutan - Myanmar
Maximizing transparency of delegations from Parties and observers to the COP, its subsidiary bodies and other WHO FCTC meetings	India	Payment of the assessed contributions and measures to reduce Parties in arrears		Progress report on technical matters related to Articles 4.2.d (gender issues) 5.3 (tobacco industry interference), 17 and 18 (alternative livelihoods and protection of the environment) and 19 (liability)	- 5.3 – Thailand - 17&18 - Bangladesh
Proposed workplan and budget for the financial period 2020–2021	Timor-Leste	Review of accreditation of observers to the Conference of the Parties		Progress report implementation assistance and international cooperation	
Convention Secretariat's fundraising strategies: Investment fund concept	India			Performance and Progress reports	

The proceedings were summarized and meeting was duly closed.

## **List of Participants**

### **Bangladesh**

1. Mr Md. Khairul Alam Sheikh  
Joint Secretary and Co-ordinator  
National Tobacco Control Cell  
Ministry of Health & Family Welfare  
Dhaka, Bangladesh
2. Mr Md. Tariq Hassan  
Second Secretary  
National Board of Revenue  
Segunbagicha  
Dhaka, Bangladesh

### **Bhutan**

3. Mr Ugyen Norbu  
Assistant Information and Media Officer  
Health Promotion Division  
Department of Public Health  
Ministry of Health  
Thimphu, Bhutan
4. Mr Chhimi Dorji  
Deputy Chief Program Officer  
Supply Reduction Division  
Thimphu, Bhutan

### **Democratic People's Republic of Korea**

5. Dr Ri Jin  
National Programme Manager for Tobacco Control  
State Hygiene Control Board  
Ministry of Public Health  
Democratic People's Republic of Korea
6. Dr So Ryong Ju  
Interpreter  
Ministry of Public Health  
Democratic People's Republic of Korea

### **India**

7. Mrs Preeti Sudan  
Secretary (Health)  
Ministry of Health & Family Welfare

Government of India  
New Delhi, India

8. Mr Sanjeeva Kumar  
Additional Secretary  
Ministry of Health & Family Welfare  
Government of India  
New Delhi, India
9. Mr Vikas Sheel  
Joint Secretary  
Ministry of Health & Family Welfare  
Government of India  
New Delhi, India
10. Mr Devesh Deval  
Director  
Ministry of Health & Family Welfare  
Government of India  
New Delhi, India

#### **Indonesia**

11. Ms Muhani Mualip Mahbub  
Directorate, Health Education  
Ministry of Health  
Jakarta, Indonesia
12. Dr Farina Andayani  
Directorate, NCD Control and  
Prevention  
Ministry of Health  
Jakarta, Indonesia

#### **Maldives**

13. Mr Hassan Mohamed  
Deputy Director General – HPA  
Ministry of Health  
Malé, Maldives
14. Ms Hawaa Shama'a Hassan Rasheed  
Public Health Programme Officer  
Health Protection Agency  
Malé, Maldives



## **Myanmar**

15. Dr Thar Tun Kyaw  
Director General  
Ministry of Health and Sports  
Yangon, Myanmar
16. Dr Mya Lay Nwe  
Deputy Director (Non-communicable  
Diseases)  
Department of Public Health  
Ministry of Health & Sports  
Naypyitaw, Myanmar

## **Nepal**

17. Mr Sunil Raj Sharma  
Director, National Health Education,  
Information & Communication Centre  
Ministry of Health and Population  
Kathmandu, Nepal
18. Mr Ganga Bahadur Kharel  
Under Secretary (Law)  
Ministry of Health and Population  
Kathmandu, Nepal

## **Sri Lanka**

19. Dr Lakshmi Somatunga  
Additional Secretary (Public Health Services)  
Ministry of Health, Nutrition and  
Indigenous Medicine  
Colombo, Sri Lanka
20. Dr V.T.S.K. Siriwardana  
Director (Non-Communicable Diseases)  
Ministry of Health, Nutrition and  
Indigenous Medicine  
Colombo, Sri Lanka

## **Thailand**

21. Dr Pantip Chotbenjamaporn  
Director, Bureau of Tobacco Control  
Department of Disease Control  
Ministry of Public Health  
Nonthaburi, Thailand

22. Ms Prapaprist Chamchong  
Tax Economist, Senior Professional Level  
The Excise Department  
Ministry of Finance  
Nonthaburi, Thailand

**Timor-Leste**

23. Dr Helder Juvinal Neto da Silva  
NCD Official Unit  
Ministry of Health  
Democratic Republic of Timor-Leste
24. Mr Mario Sere Kai  
Tobacco Control Officer  
Ministry of Health  
Democratic Republic of Timor-Leste

**Special Invitees / Observers**

25. Dr Palitha Abeykoon  
Chairman  
National Authority on Tobacco and  
Alcohol (NATA)  
Colombo, Sri Lanka
26. Dr Prakrit Vathesatogkit  
Action on Smoking & Health Foundation  
Bangkok, Thailand
27. Mr Chirawat Yoosabai  
Legal Officer, Practitioner Level  
Bureau of Tobacco Control  
Department of Disease Control  
Ministry of Public Health  
Nonthaburi, Thailand
28. Ms Pattaraporn Peamsomboon  
Tax Economist, Professional Level  
The Excise Department  
Ministry of Finance, Nonthaburi, Thailand
29. Ms Titiporn Gunvihok  
Policy and Plan Analyst, Professional  
Level  
Bureau of Tobacco Control  
Department of Disease Control  
Ministry of Public Health, Nonthaburi, Thailand

30. Dr Nasiruddin Ahmed  
Professor  
BRAC Institute of Governance &  
Development (BIGD)  
Dhaka, Bangladesh
31. Dr Manish Pant  
Chief, Health and Development  
United Nations Development Programme (UNDP)  
New Delhi, India
32. Dr Ravi Mehrotra  
Director  
National Institute of Cancer Prevention  
& Research  
WHO-FCTC Smokeless Tobacco Global  
Knowledge Hub, Noida (U.P.), India
33. Dr S. K. Arora  
State Nodal Officer  
State Tobacco Control Cell  
Government of NCT of Delhi  
New Delhi, India
34. Ms Nandini Verma  
Campaign for Tobacco Free Kids  
605/11, Kirti Apartments  
Mayur Vihar Phase 1 Extension  
New Delhi, India
35. Dr Roengrudee Patanavanich  
Department of Community Medicine  
Faculty of Medicine  
Ramathibodi Hospital  
Mahidol University  
Bangkok, Thailand
36. Dr L. Swasticharan  
Chief Medical Officer  
Directorate General of Health Services  
Ministry of Health & Family Welfare  
New Delhi, India

## **Other Agencies & NGOs**

37. Dr K.M.N. Perera  
Lecturer, Public Health  
Faculty of Medicine  
University of Kelaniya  
Colombo, Sri Lanka
38. Ms Bungon Ritthiphakdee  
Executive Director  
South-East Asia Tobacco Control  
Alliance (SEATCA)  
Bangkok, Thailand
39. Dr Jamhoih Tonsing  
Regional Director  
The UNION, South-East Asia Office  
C-6, Qutub Institutional Area  
New Delhi, India
40. Dr Srinath Reddy  
President  
Public Health Foundation of India  
Plot No. 47, Sector 44, Institutional Area  
Gurgaon, Haryana
41. Ms Jaspreet Kaur Pal  
Communications Director  
Campaign for Tobacco Free Kids  
605/11, Kirti Apartments  
Mayur Vihar Phase 1 Extension  
New Delhi, India
42. Dr Nandita Murukutla  
Vice President, Globally Policy &  
Research  
Policy, Advocacy & Communication  
Vital Strategies  
New York, USA
43. Ms Bhavna B. Mukhopadhyay  
Chief Executive  
Voluntary Health Association of India  
B-40, Qutub Institutional Area  
New Delhi, India
44. Ms Shoba John  
Former Chair, Framework Convention

Alliance  
C-214 Hill Crest, Holy Cross Road  
I.C. Colony, Borivali West  
Mumbai, India

### **WHO Country Office**

- 45. Dr Hendrik Jan Bekedam  
WHO Representative  
WCO, India
- 46. Ms Payden  
Deputy WR, WCO India
- 47. Dr Fikru T Tullu  
Team Leader, NCD  
WCO India
- 48. Ms Vineet Gill Munish  
National Professional Officer  
WCO India
- 49. Mr Praveen Sinha  
Consultant, WCO India
- 50. Dr Myo-Paing  
National Professional Officer  
WCO Myanmar
- 51. Dr Lonim Dixit  
National Professional Officer  
WCO Nepal
- 52. Mr Thirupathy Suveendran  
National Professional Officer  
WCO Sri Lanka

### **WHO Headquarters**

- 53. Dr Vinayak Mohan Prasad  
Actg. Director, PND/HQ  
WHO HQ

### **WHO FCTC Secretariat**

- 54. Dr Tibor Zoltan Szilagyi  
Team Leader, Reporting & Knowledge  
Management,  
WHO FCTC Secretariat

Geneva

55. Mr Dominique Nguyen  
Technical Officer  
WHO FCTC Secretariat  
Geneva

**WHO SEARO**

56. Dr Thaksaphon Thamarangsi  
Director  
Noncommunicable Diseases and Environmental Health

57. Dr Jagdish Kaur  
Regional Adviser-Tobacco Free Initiative

58. Dr Manju Rani  
Regional Adviser-NCD and Tobacco Surveillance

59. Dr Arvind Vasishta Rinkoo  
Consultant-Tobacco Free Initiative

60. Mr Jiten Arora  
Executive Assistant  
Tobacco Free Initiative



**Regional Meeting for the Eighth Session of the  
Conference of the Parties (COP8) to WHO Framework Convention on  
Tobacco Control  
20-21 August 2018, New Delhi, India**