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TOBACCO CONTROL

Tobacco use remains a leading public health challenge, causing approximately 3 million deaths annually in the Western Pacific Region and hindering health and economic development. Despite progress under the global *WHO Framework Convention on Tobacco Control* and the *Regional Action Plan for Tobacco Control in the Western Pacific (2020–2030)*, implementation of tobacco control measures has been uneven. Most countries in the Region are not on track to achieve the targeted 30% reduction in tobacco use by 2030. Emerging threats – including an e-cigarette epidemic targeting young people, increasing tobacco industry interference and stalled progress on key measures, such as taxation and enforcement – underscore the need to urgently accelerate action.

This draft regional acceleration plan supports Member States in prioritizing high-impact interventions and addressing persistent gaps to reach the 2030 milestone. Building on regional and global plans and analyses, including a 2025 regional review, this draft plan was developed in consultation with Member States and technical experts to ensure alignment with up-to-date evidence and country contexts. The plan to accelerate action is structured around two foundations: strengthened leadership and governance, and denormalizing tobacco and related industries. These in turn are essential to progress on three priority actions: increasing taxation, closing implementation gaps, and regulating new and emerging products.

The Regional Committee for the Western Pacific is requested to consider for endorsement the draft *Accelerating Progress towards the 2030 Tobacco Control Target in the Western Pacific Region.*

DRAFT
ACCELERATING PROGRESS TOWARDS THE 2030 TOBACCO CONTROL TARGET IN THE WESTERN PACIFIC REGION

1. BACKGROUND

The Western Pacific Region must urgently accelerate action to meet the 2030 target of a 30% reduction in tobacco use from the 2015 baseline, set under the *Regional Action Plan for Tobacco Control in the Western Pacific (2020–2030)*, which the World Health Organization (WHO) Regional Committee for the Western Pacific endorsed in 2019. Tobacco remains a leading public health threat that causes an estimated 3 million deaths annually in the Region, including significant mortality from second-hand smoke exposure, and imposes major economic and health system burdens. Although countries have made progress through implementation of the global *WHO Framework Convention on Tobacco Control* (WHO FCTC) and the Regional Action Plan, these efforts have been uneven. Many countries are not on track to achieve the 2030 goal. (Click here for implementation progress.)

Box 1. MPOWER: The key demand-reduction measures of the WHO FCTC

M – Monitor tobacco use and prevention policies (Article 20)
P – Protect people from tobacco smoke (Article 8)
O – Offer help to quit tobacco use (Article 14)
W – Warn about the dangers of tobacco (Articles 11 and 12)
E – Enforce bans on tobacco advertising, promotion and sponsorship (Article 13)
R – Raise taxes on tobacco (Article 6)

Using age-standardized adult prevalence data, only eight of 26 countries in the Region are on track to meet the reduction target. Most must urgently accelerate implementation. Youth tobacco use has declined overall but remains high in several areas. The emergence of an e-cigarette epidemic targeting youth – with prevalence among young people reaching especially high levels in some countries – is of growing concern. Overall, gains achieved in tobacco control are under fire.

Systemic barriers to progress persist. Implementation of MPOWER measures (see Box 1) – central to the WHO FCTC – has stagnated, with notable gaps in taxation, enforcement and cessation support. Limited uptake of the most effective policy lever, namely taxation, represents a major missed opportunity. At the same time, tobacco industry interference is increasing, which threatens to undermine policy development and implementation. This interference is correlated with higher tobacco use prevalence among both adults and youth.

Finally, governance and political challenges – reflected in lax tobacco control efforts, weak multisectoral coordination and delays in implementing WHO FCTC-recommended actions – continue

to impede progress. Addressing these issues, while strengthening implementation of evidence-based policies and countering industry influence, is essential to accelerate progress towards the 2030 regional tobacco reduction target.

Details of the situational analysis conducted in preparing this draft document are available in the information document: *Situational Analysis of Actions Required to Accelerate Progress towards Achieving the 2030 Tobacco Control Target in the Western Pacific Region.*

2. PLAN OF WORK

2.1 Actions needed urgently

2.1.1 The foundation for accelerated progress: Leadership and countering the industry

Strengthening leadership is essential

Across the Western Pacific Region, countries continue to face challenges in sustaining long-term political commitment for tobacco control. Frequent turnover among ministers, senior officials and programme managers has weakened institutional memory and disrupted continuity in policy implementation. This instability has slowed progress towards the 2030 tobacco reduction goal.

In addition, many current leaders were not part of earlier tobacco control movements, resulting in an uneven response to the tobacco epidemic, industry tactics and obligations under the WHO FCTC, which entered into force in 2005 as the first international treaty on public health.

Three leadership challenges consistently undermine progress in tobacco control: low prioritization of tobacco control; complacency based on the belief that enough has been done; and distraction caused by the rapid emergence of new tobacco and nicotine products, such as e-cigarettes, heated tobacco products (HTPs) and nicotine pouches. These dynamics divert attention from core WHO FCTC measures and weaken implementation.

Strengthening leadership capacity is essential. Countries need structured, ongoing leadership development programmes to cultivate new champions, reinforce institutional knowledge and expand leadership beyond the health sector. Real progress has occurred where health and non-health ministries – such as finance, education, customs and justice – have partnered for tobacco control. Youth leadership also must rise. Young people remain the primary target of tobacco and related industries, yet their engagement in tobacco control remains limited.

Financial sustainability also remains a persistent barrier. Countries have access to policy tools that can generate stable funding streams, including non-tax levies, earmarked health funds, and mechanisms requiring industry contributions to regulatory and enforcement costs; however, strong leadership is needed to advance these arrangements and ensure sustainable investment in implementation and enforcement.

Countering tobacco and related industries

Countering interference from tobacco and related industries is equally vital to accelerate progress towards the 2030 goal. Industry influence drives tobacco use higher in the Region. Interference delays tax increases, weakens smoke-free laws, blocks advertising bans, and creates loopholes to keep products affordable and accessible. Even countries with strong legislation are vulnerable, as these industries influence policy-making or present themselves as partners in health.

To protect public health policies from industry interference, robust governance is essential, including transparency rules, conflict-of-interest safeguards and limits on interactions. Without these protections, other tobacco control measures cannot reach their potential. Industry tactics are increasingly sophisticated, exploiting regulatory gaps and shifting rapidly towards new products. A dedicated, cross-cutting strategy on industry accountability is necessary. In addition, WHO FCTC Article 5.3 on protection of public health policies from tobacco industry interference must be institutionalized across all ministries, not just health.

Monitoring industry activity is critical. Governments need early warning systems to track new products, cross-border marketing and emerging forms of interference. Monitoring must extend beyond traditional tobacco companies to include industries involved in new nicotine products and their allies. Where capacity is limited, coordination with civil society and international partners is essential to fill gaps in monitoring.

Governments also require practical guidance on countering interference during implementation of tobacco control measures. Non-litigation financial mechanisms – such as fees, levies and compensation funds – can hold industries accountable, especially in areas where litigation is not feasible.

2.1.2 Priorities to accelerate progress towards 2030

With limited time remaining, countries must focus on high-impact measures that deliver rapid public health gains. Global evidence confirms that the most effective interventions are contained in the WHO FCTC, with taxation being the single most powerful and cost-effective measure. The

WHO European Region's "quick buys" framework is a set of high-impact policies designed to show measurable public health results within one political cycle (up to five years). The framework highlights taxation, smoke-free environments and pharmacotherapy for tobacco cessation as the fastest interventions, followed by large graphic warnings along with plain packaging and comprehensive bans on tobacco advertising, promotion and sponsorship.

The evolving tobacco control landscape underscores the need to sustain and advance progress. In November 2025, the Conference of the Parties to the WHO FCTC adopted recommendations for forward-looking measures that go beyond current treaty requirements (see Box 2). These measures, when integrated into comprehensive tobacco control measures, offer additional tools to accelerate progress.

Regional data highlight three priorities for action:

Priority 1. Making tobacco and nicotine products less affordable through taxation

Taxation remains the Region's highest-impact measure. Governments must substantially increase prices on all tobacco and nicotine products, in line with WHO FCTC Article 6 and its guidelines. A 10% price increase typically reduces consumption by 4–8% within the first year. Yet the implementation status of taxation has declined in the Region, with cigarettes becoming more affordable in many countries between 2014 and 2024. Taxation must also extend to e-cigarettes and other nicotine products where legally sold.

Tax increases alone are insufficient. Countries must reform structures to harmonize taxes across product categories and prevent industry manipulation. Strong local data enable optimal tax reforms. At the same time, strengthening tax administration and enforcement, through enhanced supply-chain controls such as licensing, tax stamps and product registration, is critical as illicit trade continues to undermine tax effectiveness. Ratifying and implementing the *Protocol to Eliminate Illicit Trade in Tobacco Products* – a companion treaty to the WHO FCTC that entered into force in 2018 – provides a comprehensive framework for securing supply chains and reducing illegal trade.

Effective taxation requires whole-of-government coordination. Ministries of finance, customs, justice and trade must be engaged and supported by health economists to provide robust economic rationale and counter industry interference.

Priority 2. Closing implementation and enforcement gaps in high-impact measures

Implementation of tobacco control measures varies widely from country to country. This priority emphasizes flexibility: countries should identify a limited set of high-impact interventions to

address more critical gaps and deliver rapid reductions in tobacco and nicotine use, including core WHO FCTC and MPOWER-aligned measures.

Progress towards the 2030 target will require focusing on measures with the greatest immediate impact and tailoring them to local contexts. Rather than diluting capacity across multiple priorities, countries should target feasible measures likely to deliver quicker gains. This approach makes implementation strategic, context-specific and results-oriented as the 2030 deadline rapidly approaches.

Strengthening enforcement of existing laws, such as smoke-free environments and advertising bans, is often the most immediate opportunity. Expanding access to cessation services, including support for addiction to e-cigarettes and other nicotine products, is another opportunity. Countries must also address digital and cross-border marketing, which is used increasingly to circumvent advertising bans.

Forward-looking measures under Article 2.1 of the WHO FCTC offer additional tools to reduce supply, reshape markets, regulate products and strengthen consumer protections. These measures may complement existing policies and amplify momentum.

Countries must also prepare for both anticipated and emerging policy windows. Anticipated opportunities, such as budget cycles or leadership transitions, can create openings for priority measures. Additional priorities may be advanced when unexpected opportunities arise, such as the rise of new political champions or shifts in public opinion, by maintaining interventions at the ready for implementation.

Priority 3. Banning or regulating new and emerging tobacco and nicotine products

Countries should ban or strictly regulate products such as e-cigarettes, HTPs and nicotine pouches. Even where bans exist, strong enforcement is essential to prevent illicit supply. Where sales are permitted as consumer products, comprehensive regulation must at a minimum prevent youth uptake and nicotine addiction, including flavour bans, limits on nicotine concentration and full implementation of WHO FCTC measures. Any government pursuing cessation strategies using e-cigarettes should regulate them as medicinal products, as recommended in the WHO *Electronic cigarettes: Call to action*.

Unregulated or poorly regulated new products can normalize nicotine use and lead to dual or polysubstance use of tobacco and nicotine products, undermining progress. Regulatory frameworks must be future-proofed to prevent new products from exploiting loopholes. Better data systems are needed to track use patterns and guide policy.

Box 2. Forward-looking measures in accelerating tobacco control progress

Forward-looking tobacco control measures are innovative policies that go beyond existing WHO FCTC requirements to accelerate reductions in tobacco use, nicotine addiction and exposure to tobacco smoke. These measures are increasingly relevant in the Western Pacific Region, where high tobacco use prevalence, rapid growth of new and emerging products, and persistent industry interference continue to challenge progress.

The Expert Group on Forward-looking Tobacco Control Measures, established under Article 2.1 of the WHO FCTC, identified 16 such measures across four domains: tobacco supply, institutional/market structure, product regulation and consumer protection. The measures include introducing retail reduction, minimum price policies or tobacco-free generation laws; phasing out tobacco sales; enacting environmental "producer pays" rules; ending government support for tobacco farming; reducing supplier profits; enacting nicotine-reduction standards and comprehensive bans on flavours and additives; banning the use of filters, which do not prevent harms and end up as toxic litter; and expanding smoke-free environments.

Though continually evolving, the evidence base for forward-looking measures is not as robust as that for core WHO FCTC measures. Emerging research and country experiences suggest these approaches hold significant promise for reducing tobacco and nicotine use. Forward-looking measures offer countries ways to accelerate progress, reduce youth nicotine addiction and transform markets dominated by transnational tobacco companies.

These measures should complement, not replace, core WHO FCTC implementation. Member States are encouraged to consider adopting these measures based on national contexts and feasibility, noting that the list may expand as new evidence emerges.

Source: Conference of the Parties to the WHO Framework Convention on Tobacco Control. Document FCTC/COP/11/5. Forward-looking tobacco control measures (in relation to article 2.1 of the WHO FCTC): report by the expert group. Geneva: World Health Organization; 2025.

2.1.3 Overarching principles

Accelerating progress requires shared principles that guide implementation across the Region.

Sustaining progress beyond 2030

While the proposed priorities focus on accelerating progress towards the 2030 target, they also help build a foundation for continued tobacco control beyond 2030. Near-term actions can support healthier environments that safeguard future generations from the harms of tobacco and nicotine products.

Flexibility beyond the minimum

The proposed priorities represent a minimum baseline of high-impact actions. Countries and areas can adapt, sequence or go beyond the baseline based on national contexts, capacities and resources.

Collaboration beyond borders

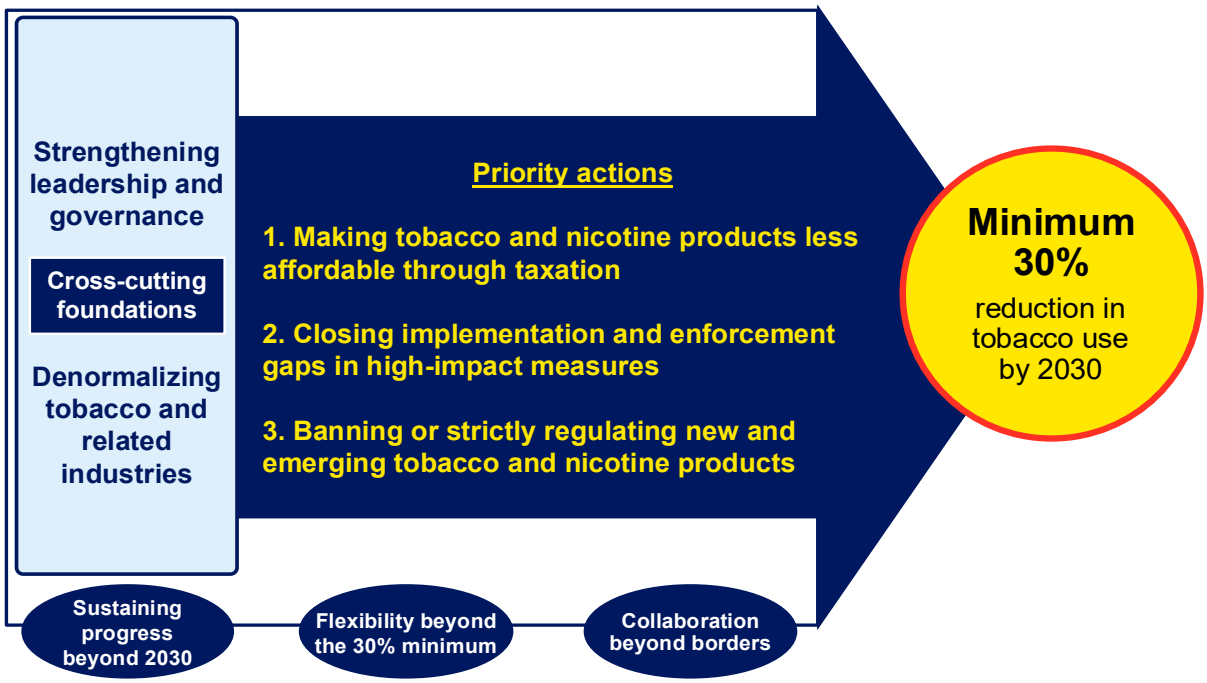
Regional collaboration is central to advancing priorities across the Region and requires action beyond national borders across multiple dimensions:

- Addressing cross-border challenges: Challenges such as digital marketing, illicit trade and industry interference transcend national borders. Countries need coordinated regional responses, shared evidence repositories and unified messaging to counter industry narratives.

- Enhancing cross-border enforcement: For cross-border challenges such as illicit trade, countries must strengthen cooperation among customs, law enforcement and other regulatory authorities, supported by joint monitoring systems and implementation of the *Protocol to Eliminate Illicit Trade in Tobacco Products*.

- Strengthening practical, country-level implementation capacity: Countries require context-specific solutions that reflect operational realities. Peer-to-peer learning, structured exchanges and accessible technical expertise can accelerate adoption of effective practices.

Fig. 1. A graphic representation of *Accelerating Progress towards the 2030 Tobacco Control Target in the Western Pacific Region*



3. IMPLEMENTATION

This section outlines practical steps to translate the plan into action, with a focus on achieving measurable progress towards the 2030 tobacco use reduction target while laying the groundwork for sustained impact beyond 2030. The plan lays out ways to achieve cross-cutting foundations to enable accelerated and sustained progress, alongside priority actions that focus on high-impact policy measures. The milestones describe the intended outcomes to be achieved within this period at the national level, while key actions by governments, WHO, academia, civil society and other partners collectively support the achievement of milestones. The actions listed for each actor are not exhaustive. They reflect critical roles in which each is well placed to act or to lead. Other stakeholders are encouraged to engage where relevant and feasible. While the emphasis is on near-term implementation and enforcement gains, these actions are also designed to strengthen systems, capacities and policy environments to sustain long-term momentum. All actions should be implemented in line with the WHO FCTC and its guidelines, considering national contexts and capacities.

Cross-cutting foundation 1 – Leadership and governance

Strategic objectives

- Revitalize and sustain political commitment, expand leadership beyond the health sector and cultivate new champions, especially among young people, to drive tobacco control to 2030 and beyond.

Milestones

- Multisectoral coordination mechanisms for tobacco control established and functional.
- Sustainable financing mechanisms operational and protecting tobacco control budgets.
- Tobacco control champions identified among key stakeholders across different sectors, including youth.

Key actions

Governments	• Establish structured leadership development programmes for ministers, senior officials and tobacco control programme staff to champion and sustain tobacco control priorities. • Engage non-health ministries (including finance, education, customs, justice and other relevant sectors) to build whole-of-government commitment. Build cross-sectoral leadership within these sectors. • Engage academia, civil society, youth advocates and other partners to strengthen a whole-of-society approach.

	• Develop sustainable financing strategies (such as non-tax levies, earmarked funds, industry fees and other funding mechanisms) as applicable and available in the national context, to support tobacco control actions.
WHO	• Facilitate high-level advocacy and leadership training for ministers and senior officials, country tobacco control staff and partners. Work with other organizations already conducting tobacco control leadership programmes to adapt their curricula for the Region and co-host training. • Convene cross-sectoral government actors and facilitate political dialogue on tobacco control priorities. • Supply high-quality data to strengthen leadership and decision-making.
Academia	• Advocate for political commitment and accountability across governments. • Mobilize youth leadership and community engagement to identify and encourage community champions for tobacco control. • Monitor government follow-through on leadership commitments. • Engage media to sustain political attention. Feature exemplars of tobacco control leadership creating positive impacts on health.
Civil society	• Advocate for political commitment and accountability across governments. • Mobilize youth leadership and community engagement to identify and encourage community champions for tobacco control. • Monitor government follow-through on leadership commitments. • Engage media to sustain political attention. Feature exemplars of tobacco control leadership creating positive impacts on health.
Other partners	• Intergovernmental and multilateral organizations: Address tobacco control as a key development agenda on their platforms. • Youth advocates: Create networks of youth leaders to advocate directly to political leadership and participate in leadership cultivation programmes.

Cross-cutting foundation 2 – Denormalizing tobacco and related industries

Strategic objective

- Institutionalize WHO FCTC Article 5.3 across governments, establish proactive monitoring systems, and build norms against tobacco and related industries and their activities.

Milestones

- WHO FCTC Article 5.3 measures institutionalized across all ministries and legislative bodies.
- Monitoring systems for tobacco and related industries integrated into routine government functions.
- Increased awareness in society of the harms caused by tobacco and related industries to build a consensus for reducing their activities.

Key actions

Governments	• Implement measures in line with WHO FCTC Article 5.3 and its implementation guidelines. • Establish monitoring systems for tobacco and related industries (tobacco industry monitoring) and early warning systems. • Implement non-litigation financial accountability mechanisms, such as fees, levies and compensation funds. • Strengthen civil society partnerships to raise awareness of the harms caused by tobacco and related industries and to monitor their activities.
WHO	• Provide capacity-building on Article 5.3 implementation across government sectors. • Offer technical assistance and normative guidance on tobacco industry monitoring. • Work with other United Nations agencies to denormalize tobacco and related industries in broader development initiatives.
Academia	• Generate evidence on industry tactics and regulatory loopholes. • Assist governments to interpret and act on tobacco industry monitoring data. • Serve as independent evaluators of the influence and policy effectiveness of tobacco and related industries.
Civil society	• Conduct shadow monitoring of interference by tobacco and related industries. • Expose deceptive practices, including so-called corporate social responsibility campaigns, and mobilize public awareness on industry tactics with media. • Hold governments accountable for enforcing Article 5.3 measures.
Other partners	• Intergovernmental and multilateral organizations: Denormalize tobacco and related industries in their respective areas of work. • Youth advocates: Mobilize youth groups to expose industry efforts that target young people.

Priority 1. Making tobacco and nicotine products less affordable through taxation

Strategic objective

- In countries or areas without bans, make all tobacco and nicotine products significantly less affordable through tax structure reform, tax increases and strong enforcement.

Milestones

- Excise tax structure optimized and rates increased across all tobacco and nicotine products.
- Tax administration and supply control measures strengthened and enforced.

Key actions

Governments	• Co-develop a multi-year taxation scheme between health and finance ministries to achieve shared goals. • Strengthen the monitoring of taxes and prices and use data to guide tax reforms. When possible, use existing data systems to detect tax avoidance or price manipulation without large-scale enforcement expansion. • Partner with media outlets to build public support for tax reforms. • Implement comprehensive tax reforms, ensuring simplified tax structures and large, regular tax increases. Harmonize taxes across all tobacco and nicotine products. • Strengthen tax administration and supply-chain control, including licensing, tax stamps and product registration or reporting. • Ratify and implement the *Protocol to Eliminate Illicit Trade in Tobacco Products*. • Where feasible, earmark tobacco tax revenue for health. Where tax revenues are already earmarked for tobacco control, safeguard funds against erosion or diversion to non-health expenditures.
WHO	• Provide technical support to assist with comprehensive tax reform and enforcement. • Facilitate regional experience-sharing on tax administration and illicit trade control. • Maximize the use of tax and price data collection to heighten political commitment.
Academia	• Produce policy research in health economics, the societal cost of tobacco and nicotine products, and tax policy for these products. • Develop accessible policy briefs and evidence summaries to support tax reforms. • Develop data-informed communication materials on tax reforms for use by a broad range of advocates. • Conduct shadow monitoring of illicit trade and tax implementation.
Civil society	• Advocate for comprehensive tax reforms and enforcement, and for preservation of earmarked tax revenues for health. • Mobilize youth and communities to support tax reform. • Work with media to increase the visibility of tax policies, deter non-compliance and build social pressure against illicit trade.
Other partners	• Development banks: Provide economic analyses and frameworks that support taxation for tobacco control, as well as evidence on the total cost of tobacco and nicotine products to society. • Youth advocates: Advocate for tax reforms that protect young people.

Priority 2. Closing implementation and enforcement gaps in high-impact measures

Strategic objective

- Focus on the most impactful, context-specific priorities to achieve measurable progress by 2030.

Milestones

- Context-specific priorities implemented and enforced at the national level.
- Compliance with priorities improved.
- Bold policy actions and forward-looking measures adopted.

Key actions

Governments	• Implement context-specific priority measures by strengthening policy instruments and enforcement. • Strengthen multisectoral enforcement coordination mechanisms and build operational capacity. • Monitor compliance with tobacco control measures regularly to improve implementation strategies. Use simple tools and indicators developed by academia to acquire actionable data without heavy investments in systems. • Seize windows for bold policy actions and forward-looking measures.
WHO	• Assist in finding and providing data to support implementation priorities. • Deliver high-level advocacy to bolster political will for bold policy actions and forward-looking measures. • Facilitate the sharing of regional experience on implementing tobacco control measures, including bold policy actions and forward-looking measures.
Academia	• Generate contextualized evidence tailored to national needs and provide economic and technical evidence to inform priority-setting. • Translate research into accessible formats for policy-makers. • Develop practical and low-cost tools to assess public compliance with tobacco control measures. • Establish regional research hubs for shared learning and collaborative evidence generation across countries.
Civil society	• Engage media to build public support for priority actions. • Advocate for enforcement and implementation of priority measures. • Provide operational insights to improve policy execution. • Monitor progress and hold governments accountable.
Other partners	• Intergovernmental and multilateral organizations: Support cross-regional knowledge exchange and co-convening with WHO to enable regional collaboration. • Youth advocates: Mobilize youth groups to build momentum for bold policy actions and forward-looking measures to protect future generations.

Priority 3. Banning or regulating new and emerging tobacco and nicotine products

Strategic objective

- Ensure all new tobacco and nicotine products are banned or strongly regulated, with effective enforcement to prevent youth uptake, nicotine addiction and renormalization of tobacco use.

Milestones

- Bans or strict regulations on new and emerging tobacco and nicotine products in place and enforced.
- Regulatory frameworks protected from future product evolution and other efforts to undermine tobacco control.

Key actions

Governments	• Ban the manufacturing, distribution and sale of new and emerging tobacco and nicotine products, as appropriate. • Where not banned, strictly regulate products in line with the WHO FCTC and its implementation guidelines. • At a minimum to protect youth from addiction, ban flavours and additives, limit nicotine concentration and prohibit remote or online sale, particularly through digital platforms. • Strengthen multisectoral enforcement coordination mechanisms and operational capacity. • Strengthen surveillance of product availability and use to inform and improve regulation and implementation. • Ensure future-proof national laws; have future-proofing provisions at the ready to address new tobacco, nicotine and related products with the potential to undermine tobacco control.
WHO	• Maintain global surveillance and provide regulatory guidance to governments. • Convene technical experts to support governments and identify country exemplars for cross-regional sharing. • Coordinate regional strategies on cross-border issues such as marketing and illicit trade.
Academia	• Serve as technical experts to support national and regional efforts for regulation and enforcement. • Evaluate national policies and generate evidence-based policy options. • Counter industry harm-reduction claims with rigorous evidence and counter-arguments in formats that government and tobacco control advocates can readily use or adapt.
Civil society	• Communicate risks of new and emerging tobacco and nicotine products to the public by engaging media and other stakeholders. • Lead youth-centred advocacy and peer-to-peer education. • Monitor compliance with bans or regulatory measures, including the accountability of governments to act in a timely manner.
Other partners	• Intergovernmental and multilateral organizations: Support cross-regional knowledge exchange and co-convening with WHO to enable regional collaboration. • Youth advocates: Mobilize peers and advocate for strong protections for young people.

4. ROLE OF THE WHO SECRETARIAT

WHO in the Western Pacific Region will provide strategic, technical and operational support to accelerate implementation of high-impact tobacco control measures across the countries and areas of the Region. The Organization's role includes support in leadership development, multisectoral coordination, enforcement strengthening, data generation and synthesis, and technical guidance on taxation, regulation and industry accountability.

4.1 Strengthening leadership, governance and multisectoral commitment

WHO will facilitate high-level advocacy to elevate tobacco control as a political priority, engaging ministers, senior officials and actors across governments. WHO will co-host leadership training programmes, adapting existing curricula for the Region and embedding enforcement strategies. WHO will also convene multisectoral dialogues, bringing together finance, customs, justice, education, environment and other ministries to build and strengthen whole-of-government commitment. To support evidence-informed decision-making, WHO will supply high-quality, timely data to national leaders and others.

4.2 Institutionalizing Article 5.3 and countering industry interference

WHO will provide capacity-building to help governments implement Article 5.3 across all ministries, not just health. This includes training on conflict-of-interest safeguards, transparency mechanisms and limits on interactions with industry. WHO will also offer technical assistance on tobacco industry monitoring. Working with other United Nations agencies, WHO will promote denormalization of tobacco and related industries across broader development agendas.

4.3 Supporting taxation and affordability measures

WHO will assist governments in co-developing multi-year tax road maps with ministries of finance. The Organization will provide technical guidance on comprehensive tax reform, including harmonization across products, simplification of systems and alignment with Article 6 guidelines. WHO will also help strengthen monitoring of prices and taxes, and support countries in using data to detect tax avoidance and guide reforms. It will also promote strategic communications to build support for tax reforms.

4.4 Closing implementation and enforcement gaps

WHO will offer technical support to identify context-specific priorities. The Organization will support efforts to strengthen smoke-free laws, advertising bans and other core measures, as well as their implementation and enforcement, considering operational realities and resource constraints many countries face. WHO will help countries expand cessation services and provide guidance on countering digital and cross-border marketing, aligning national actions with WHO FCTC guidelines. For countries pursuing forward-looking measures, WHO will share emerging evidence.

4.5 Regulating new and emerging tobacco and nicotine products

WHO will provide technical guidance on regulatory frameworks for e-cigarettes, HTPs, nicotine pouches and other new products, including flavour bans, nicotine limits and marketing restrictions. The Organization will advise on future-proofing regulations to prevent loopholes and ensure alignment with up-to-date regulatory guidance. WHO will also support countries in strengthening surveillance systems to track use patterns, dual use and emerging products.

4.6 Enhancing regional collaboration and cross-border enforcement

WHO will facilitate regional information-sharing platforms, enabling countries to exchange implementation experiences, enforcement models and arguments to counter tobacco industry claims. The Organization will support cross-border cooperation on illicit trade, including intelligence-sharing and alignment of enforcement approaches, as well as regional strategies addressing other cross-border issues such as marketing. WHO will also promote implementation of the *Protocol to Eliminate Illicit Trade in Tobacco Products*.

5. MONITORING AND EVALUATION

The monitoring framework of this strategic guide, presented in the table below, constitutes a renewed Regional Action Plan monitoring and evaluation framework, to support accelerated progress towards its overall target: to attain in each country and area by 2030 a minimum 30% relative reduction in the age-standardized prevalence of current tobacco use among people aged 15 years and older from the 2015 estimated baseline.

Monitoring focuses on tracking implementation of policy actions and enabling conditions required to achieve this overall target. Structured around five domains – two cross-cutting foundations and three priorities for action – this plan provides a coherent, Region-wide mechanism to track progress, strengthen accountability and sustain political commitment. These monitoring results will also inform the end-of-term evaluation of the Regional Action Plan to be reported to the Regional Committee.

By grounding this plan to accelerate action on indicators that already are being collected, countries and areas can focus on strengthening data quality, completeness and timeliness, rather than building new systems.

Monitoring objective			
To track progress towards the Regional Action Plan's overall target to achieve by 2030 a minimum 30% relative reduction in the age-standardized prevalence of current tobacco use in each country and area of the Region among people aged 15 years and older from the 2015 estimated baseline.			
Domain	**Indicator**	**Existing data source**	**Frequency**
Cross-cutting foundation 1. Leadership and governance	**Existence of a national multisectoral tobacco control coordination mechanism**	WHO FCTC Reporting Article 5.2	Biennial
	Government budget allocation for tobacco control	WHO report on the global tobacco epidemic; WHO FCTC reporting	Biennial
Cross-cutting foundation 2. Denormalizing tobacco and related industry interference	**Presence of Article 5.3 policy or code of conduct across ministries**	WHO FCTC reporting; Global Tobacco Industry Index	Biennial
Priority 1. Making tobacco and nicotine products less affordable through taxation	**Affordability of cigarettes**	WHO report on the global tobacco epidemic	Biennial
	Excise tax share of retail price	WHO report on the global tobacco epidemic	Biennial
Priority 2. Closing implementation and enforcement gaps in high-impact measures	**MPOWER score for priority components**	WHO report on the global tobacco epidemic	Biennial
	Policy initiatives and measures that address enforcement	National tobacco control plan/strategy; FCTC reporting; national laws	Annual or biennial
	Existence and implementation of enforcement mechanisms that engage multisectoral partners	National tobacco control plan/strategy; WHO FCTC reporting; national laws	Annual or biennial
Priority 3. Banning or regulating new and emerging tobacco and nicotine products	**Regulatory status of e-cigarettes and HTPs**	WHO report on the global tobacco epidemic; WHO FCTC reporting	Biennial
	Prevalence of e-cigarette and HTP use among youth and adults	Nationally representative surveys, including Global Adult Tobacco Survey and Global Youth Tobacco Survey	Baseline, 2028 and 2030

6. CONCLUSION

The Western Pacific Region faces a critical moment in tobacco control. Despite progress under the WHO FCTC and the Regional Action Plan, most countries are not on track to achieve a 30% reduction in tobacco use by 2030. Stagnant MPOWER scores, rising tobacco industry interference and a rapidly escalating youth e-cigarette epidemic threaten to reverse decades of gains. This draft *Accelerating Progress towards the 2030 Tobacco Control Target in the Western Pacific Region* presents focused, evidence-based steps to put countries and areas on track towards achieving the 2030 target, as well as protecting future generations from what is a preventable major risk factor for premature mortality and chronic disease in the Region.

The plan emphasizes three core components:

1. Strengthening leadership and governance, including revitalizing political commitment, expanding multisectoral action and institutionalizing WHO FCTC Article 5.3 protections against industry interference.

2. Prioritizing high-impact policies, particularly tobacco taxation, smoke-free environments, strong health warnings, comprehensive advertising bans and expanded cessation services.

3. Regulating or banning new and emerging nicotine products, supported by improved surveillance, enforcement and cross-border cooperation.

The anticipated impacts include reduced tobacco and nicotine use, stronger protection for youth, improved health outcomes and accelerated progress towards the 2030 target. By addressing structural barriers – especially weak enforcement, insufficient data systems and aggressive industry tactics – this plan aims to restore momentum and ensure that all countries and areas benefit from proven, cost-effective interventions.

Every country and area plays a vital role. Progress depends on collective action, shared accountability and coordinated regional responses to challenges such as illicit trade, the growing e-cigarette epidemic and digital marketing. This aligns with the shared vision for the work of WHO with Member States, for which “weaving health” is used as a metaphor for countries interlacing their strengths, resources and commitments to protect families and communities. *Accelerating Progress towards the 2030 Tobacco Control Target in the Western Pacific Region* also reinforces the priorities of the global WHO Fourteenth General Programme of Work (2025–2028) by advancing healthier populations, reducing preventable deaths and strengthening systems that safeguard well-being across the life course, leaving no one behind.

Together, these efforts form a unified regional mat – woven through partnership, leadership and shared purpose – to save lives and secure a healthier future for the more than 2.2 billion people of the Western Pacific Region.