COVID-19’S IMPACT ON THE FCTC, CESSATION, AND TOBACCO POLICY
SPEAKERS

Adriana Blanco  
Head of the WHO FCTC Secretariat

Martin Raw  
Director at International Centre for Tobacco Cessation (ICTC)

Raquel Fernandez Megina  
President, Nofumadores.org

MODERATOR

Laurent Huber  
ASH Executive Director
Tobacco Control during COVID-19 and beyond

12 November 2020

Dr Adriana Blanco Marquizo, Head of the Secretariat of the WHO FCTC
The Global Tobacco Epidemic

8 Million people die each year from Tobacco use

Each day, 22,000 people die from tobacco use or second-hand smoke exposure

Tobacco is NOT a done issue!

1.3 billion tobacco users

IF LEFT UNCHECKED, TOBACCO USE WILL KILL ONE BILLION PEOPLE THIS CENTURY
Tobacco is a development issue

**Economic**

The economic costs of tobacco use are substantial and include significant health care costs for treating the diseases caused by tobacco use and the lost productivity that results from tobacco-attributable morbidity and mortality.

Global economy loss due to tobacco

$1.4 trillion ~2% of global GDP

**Environmental**

Tobacco farming - itself health-harming - often relies on unlawful or exploitative labour, including child labour, and contributes to environmental degradation.

Tobacco farming is responsible for nearly 5% of global deforestation with 200,000 hectares of woody biomass loss per year.

Cigarette butts are by far the largest single type of litter by count.

Since the 1980s cigarette butts have consistently comprised 30-40% of all items picked up in annual international coastal and urban clean-ups.
Tobacco use is a common risk factor for the four major chronic noncommunicable diseases (NCDs):

- Cardiovascular diseases
- Cancer
- Respiratory diseases
- Diabetes

Leading cause of death in the world

2016: 56.9 million deaths

40.5 M (71%) = NCDs-related total deaths

Source: Research paper - Global economic cost of smoking-attributable diseases

NCDs: a slow motion pandemic
A powerful 15 year old legal instrument is at hand! The WHO Framework Convention on Tobacco Control now with 182 Parties and guided by Global strategy

[Map of the world showing the countries that are Parties to the WHO Framework Convention on Tobacco Control]
And another legal instrument! The 2-year old Protocol to Eliminate Illicit Trade in Tobacco Products with 62 Parties currently
HEALTH is key to social, economic and productive development.

Goal 3.4 of the 2030 Agenda will not be met if target 3.a is not met.
*0.25 of the world’s population have an underlying condition – mainly NCDs = their vulnerability to COVID-19 and the risk of severe disease & death

Smokers also share this poor prognosis

Building-back-better strategies

Addressing NCDs & tobacco use = integral part of the immediate COVID-19 response and of the recovery at the global, regional & national levels

*Source: COVID-19 Scientific Brief WHO
WHO Framework Convention on Tobacco Control: Key measures to implement during COVID-19

ART. 14
Demand reduction measures - Cessation

ART. 5.3 and ART. 13
Tobacco industry interference

ART. 6
Price and tax measures

ART. 8 and ART. 11
Protection from exposure to tobacco smoke
Packaging and labelling
WHO FCTC ARTICLE 5.3

- RAISE AWARENESS
- MEASURES TO LIMIT INTERACTIONS
- REJECT PARTNERSHIPS
- AVOID CONFLICT OF INTEREST
- ACCURATE AND TRANSPARENT INFORMATION
- DENORMALIZE AND REGULATE CSR
- NO PREFERENTIAL TREATMENT
- STATE OWNED INDUSTRY TREATED EQUALLY

Statement from Head of Convention Secretariat (May 2020)
https://bit.ly/3dImTnh

Guidelines Article 5.5
https://bit.ly/3dImTnh
Response to tobacco industry interference during COVID-19:
Webinars of Knowledge Hub for Article 5.3 with participation of Convention Secretariat


• **Tobacco Industry Accountability and Liability in the Time of COVID-19** – July 2020 – examples of “key experiences regionally and globally on the implementation of selected tobacco control policies during COVID-19” in the [policy brief](#) elaborated after the webinar.

• **Overcoming Tobacco Industry Interference to Achieve Sustainable Development Goals** - September 2020 – Materials available [here](#).
Tobacco control efforts in times of COVID-19: some progress from around the world

- **NETHERLANDS**: End the sale of tobacco in supermarkets & gas stations; ratified the Protocol 3 July 2020; plain packaging from 1 October 2020
- **ANDORRA**: Ratified the WHO FCTC on 11 May 2020
- **KENYA**: Ratified the Protocol on 4 May 2020
- **HUNGARY**: Ratified the Protocol on 23 June 2020
- **EGYPT**: Ratified the Protocol on 10 September 2020
- **SEYCHELLES**: Ratified the Protocol on 7 January 2020
- **ETHIOPIA**: Landmark bill to increase tobacco taxes
- **EUROPEAN UNION**: Ban of flavored cigarettes
- **SINGAPORE**: Plain packaging from 1 July 2020

Continue work on tobacco control even during the pandemic and even more so after
UPDATES ON EXPERT AND WORKING GROUPS – delivering on its mandates through virtual means

**FCTC/COP8(21) Implementation of Articles 9 and 10 of the WHO FCTC**
- Article 9&10 Expert Group *(ENSP, FCA)*
- Cigarette Ventilation *(FCA, The Union)*

**FCTC/COP8(17)**
- Article 13 Working Group on cross-border TAPS and depiction of tobacco in entertainment - media *(CTFK, FCA, WMA)*

**FCTC/MOP1(6)**
- Protocol Working Group on Tracking and Tracing systems, including the global information sharing focal point and unique identification markings for cigarette packets and packages *(ACS, FCA)*

**FCTC/MOP1(10)**
- Protocol Working Group on Assistance and Cooperation *(ACS, ENSP, FCA)*
Support to Parties: upcoming resources, virtual launches of new FCTC 2030 pilot countries, first ever virtual needs assessment in Armenia, webinars, etc.
Critical role of civil society in implementation of the WHOFCTC

- The Convention Secretariat will convene two informal virtual meetings per year as well as individual consultations with NGOs on specific areas, upon the NGO requests or Parties’ needs.
- Recognition of the wealth of expertise and knowledge within civil society organizations, and believes that further exchanges of information will be vital to a greater success of the implementation of the Convention and the Protocol.
- Taking into account that the Secretariat is very much bound to its mandates, through COP decisions, NGOs with observer status to the COP can bridge potential gaps, especially for assistance to Parties, communication and dissemination of information, conducting research and providing evidence-based data.

Strategic Objective 2.2 Catalyze and leverage the contributions of external stakeholders, particularly civil society, to achieve the aims of the Convention.

- Specific objectives 2.2.1 Enhance civil society participation including through the adoption of best practices of other United Nations organizations, taking into consideration WHO FCTC Article 5.3.

Specific objective 3.2.2 Promote multisectoral collaborative efforts, including increased collaboration with civil society organizations.

APPLY TO BE OBSERVERS TO THE COP
https://www.who.int/fctc/cop/observers_cop/en/

APPLY TO BE OBSERVERS TO THE MOP
https://www.who.int/fctc/protocol/mop/observers-mop/en/

NEW DEADLINE: 15 August 2021
Thank you!

See you in COP9 and MOP2 in The Hague in November 2021!
Covid-19, the FCTC, and tobacco cessation

Martin Raw PhD

Director, International Centre for Tobacco Cessation
and
Visiting Professor
New York University School of Global Public Health

12 November 2020
Data on cessation since early March

Smokers who contract Covid are more likely to get severe symptoms (WHO)

Some suggestion from regional UK data that non-Covid related deaths are higher than would be expected on normal trends (ASH UK webinar)

There are also many other factors that may increase the risks of illness for tobacco users, for example raised blood pressure
Data on cessation attempts since early 2020 lockdown - 1

Compared to data from the same period last year, smokers were more likely to try to stop during lockdown (UK data)

They were also more likely to succeed
(self report, no long term follow up)

Not clear what proportion of these attempts were triggered by lockdown (12% in this UK study)
Data on cessation attempts since early 2020 lockdown - 2

The proportion of smokers that used support to try to stop remained stable before and during lockdown, at 50% (UK data)

However the proportion that used remote support rose from 2.7% to 10.9%
(eg. quitlines, text messaging, apps, websites)

With obvious implications for what we should be trying to do to support quit attempts
Conclusions so far - 1

Covid-19 and its associated lockdowns are prompting many tobacco users to try to stop

And are probably increasing their motivation to do so
(because of the potentially severe health consequences)

But by the nature of the pandemic face-to-face support will be much less available/accessible
Conclusions so far - 2

So what is available globally and can we do anything – quickly – to help?

With a focus – obviously – on support that involves minimal, if any, face-to-face contact

Obvious candidates:
Apps including text messaging, quitlines, websites, medicines including nicotine replacement, cytisine where licensed
Reducing tobacco use in health professionals

<table>
<thead>
<tr>
<th>Country</th>
<th>Method and sample details</th>
<th>Published</th>
<th>% who smoke</th>
</tr>
</thead>
<tbody>
<tr>
<td>Bulgaria³</td>
<td>National survey (n=1194) in 8 of 28 regions</td>
<td>2005</td>
<td>44.2</td>
</tr>
<tr>
<td>Denmark⁶</td>
<td>Postal questionnaire with 313 GPs</td>
<td>1993</td>
<td>33</td>
</tr>
<tr>
<td>Greece¹⁰</td>
<td>National questionnaire of 1,284 physicians including 370 GPs</td>
<td>2007</td>
<td>38.6</td>
</tr>
<tr>
<td>Italy¹¹</td>
<td>Regional phone interview</td>
<td>2003</td>
<td>28.3</td>
</tr>
<tr>
<td>Netherlands¹²</td>
<td>Postal survey with GPs and other physicians.</td>
<td>1990/93</td>
<td>38</td>
</tr>
<tr>
<td>Romania¹⁴</td>
<td>Survey, details not given, n=1136, p=0.05</td>
<td>2000</td>
<td>43.2</td>
</tr>
<tr>
<td>Slovakia⁴</td>
<td>European postal survey of GPs</td>
<td>2005</td>
<td>48.5</td>
</tr>
<tr>
<td>Sweden⁴</td>
<td>European postal survey of GPs</td>
<td>2005</td>
<td>3.7</td>
</tr>
</tbody>
</table>

Stead M, Angus K, Holme I, Tait G (2007) Review of the literature on factors that facilitate and hinder use of smoking cessation interventions by GPs, and of interventions to change GP behaviour. CRUK Centre for Tobacco Control Research
Prevalence of tobacco use in healthcare workers: A systematic review and meta-analysis

Kapka Nilan1,2*, Tricia M. McKeever1,6, Ann McNeill1,4, Martin Raw5,4,6, Rachael L. Murray1,4,6

1. UK Centre for Tobacco and Alcohol Studies, School of Medicine, Clinical Sciences Building, Nottingham City Hospital, University of Nottingham, Nottingham, United Kingdom, 2. UK Centre for Tobacco and Alcohol Studies, Institute of Psychiatry, Psychology & Neuroscience (IAPP), King’s College London, London, United Kingdom, 3. NYU College of Global Public Health: New York University, New York, New York, United States of America, 4. NYU Medical School, New York University, New York, New York, United States of America

* These authors contributed equally to this work.

Abstract

Objectives
To estimate tobacco use prevalence in healthcare workers (HCW) by country income level, occupation and sex, and compare the estimates with the prevalence in the general population.

Methods
We systematically searched five databases: Medline, EMBASE, CINHAL Plus, CAB Abstracts, and LILACS for original studies published between 2000 and March 2016 without language restriction. All primary studies that reported tobacco use in any category of HCW were included. Study extraction and quality assessment were conducted independently by three reviewers, using a standardised data extraction and quality appraisal form. We performed random effect meta-analyses to obtain prevalence estimates by World Bank (WB) country income level, sex, and occupation. Data on prevalence of tobacco use in the general population were obtained from the World Health Organisation (WHO) Global Health Observatory website. The review protocol registration number on PROSPERO is CRD42016041231.

Results
229 studies met our inclusion criteria, representing 457,415 HCW and 63 countries: 29 high-income countries (HIC), 21 upper-middle-income countries (UMIC), and 13 lower-middle- and low-income countries (LMIC). The overall pooled prevalence of tobacco use in HCW was 21%, 31% in males and 17% in females. Highest estimates were in male doctors in LLMC and LMIC (44% and 46%) and female nurses in LLMC and LMIC (91% and 94%).
More recent data

(still very few up-to-date studies – a seriously neglected area)

229 studies from 2000 to 2016 representing 457,000 healthcare workers in 63 countries

Overall average – 21%

Highest – 35% and 45%

(male doctors in upper and lower middle income countries)
## Availability of medications

<table>
<thead>
<tr>
<th>Medication</th>
<th>All</th>
<th>High</th>
<th>UM</th>
<th>LM</th>
<th>Low</th>
</tr>
</thead>
<tbody>
<tr>
<td>NRT gum</td>
<td>72</td>
<td>96</td>
<td>60</td>
<td>61</td>
<td>53</td>
</tr>
<tr>
<td>Bupropion</td>
<td>60</td>
<td>90</td>
<td>58</td>
<td>39</td>
<td>18</td>
</tr>
<tr>
<td>Varenicline</td>
<td>54</td>
<td>88</td>
<td>48</td>
<td>36</td>
<td>6</td>
</tr>
<tr>
<td>Cytisine</td>
<td>14</td>
<td>10</td>
<td>13</td>
<td>19</td>
<td>12</td>
</tr>
</tbody>
</table>

High=High income countries; UM=Upper middle income countries; LM=Lower middle income countries; Low=Low income countries
A recently published study emphasises how few countries have even put stop smoking medicines on their essential medicines list.

Just 25% have even one on the national EML.
## Quitlines and text messaging

<table>
<thead>
<tr>
<th>Does your country</th>
<th>% Yes</th>
</tr>
</thead>
<tbody>
<tr>
<td>Integrate brief advice in existing services?</td>
<td>44</td>
</tr>
<tr>
<td>Have nationwide specialised treatment facilities?</td>
<td>26</td>
</tr>
<tr>
<td>Have a national telephone quitline?</td>
<td>23</td>
</tr>
<tr>
<td>Have cessation support via text messaging?</td>
<td>17</td>
</tr>
</tbody>
</table>
So what can we do to make the most of the current situation?

• Increase our efforts to persuade and help healthcare workers to stop
• Promote cessation support in publicity material
• Especially text messaging, quitlines, and affordable medicines

• Go back to basics and implement FCTC Article 14 and its guidelines on tobacco cessation more vigorously; implementation of this article is lagging far behind others
Resources

• FCTC Article 14 and FCTC Article 14 Guidelines
• Tools to implement Article 14
  • National Situation Analysis
  • Guidance on developing National Cessation Guidelines
  • Effectiveness and Affordability Review
  • Affordability Calculator (excel spreadsheet)
  • New Zealand cessation guidelines
  • A library of national cessation strategies, guidelines and case studies
• Raw et al 2013 & 2017 surveys on progress in implementing Article 14, published in *Addiction*
• Most of these materials on: [www.treatobacco.net](http://www.treatobacco.net)
Smoking Still Kills

The five-year strategy set out in the Government’s Tobacco Control Plan for England comes to an end in 2015. Smoking Still Kills proposes new targets for a renewed national strategy to accelerate the decline in smoking prevalence over the next decade. The report sets out short-term objectives and longer term aims and develops the agenda for tobacco control launched in 2008 with Beyond Smoking Kills.

A key recommendation of Smoking Still Kills is for the Government to impose an annual levy on tobacco companies and for the money raised to be used to pay for measures such as mass media campaigns and stop smoking services.

The recommendations have been developed by an editorial board in consultation with an advisory board of academics and experts, and following feedback from four regional events with local and national tobacco control professionals.

view full article

Tobacco Watch report on FCTC Article 14

Latest Additions

ASH Daily News
If you want to subscribe, click on the link.

SSA PhD Symposium 2017
8 November, 2017
Cluny Place, Newcastle upon Tyne, UK

SSA Annual Conferences 2017
9-10 November, 2017
Cluny Place, Newcastle upon Tyne, UK

11ème Congrès de la SFT
16-17 novembre 2017
Paris, France

2018 SRNT 24th Annual Meeting
21-24 February, 2018
Baltimore, Maryland

Global Forum on Nicotine 2017
15-17 June, 2017
Warsaw, Poland

Coming & Past Conferences
Access to archives of past conferences

Nicotine without smoke: tobacco harm reduction
Royal College of Physicians

NCSCT e-cigarette briefing (updated)
A briefing for stop smoking services

ASH Briefing on e-cigarettes (undated)
<table>
<thead>
<tr>
<th>Tools to implement Article 14</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Key Article 14 documents</strong></td>
</tr>
<tr>
<td><strong>Tools to implement the Article 14 guidelines</strong></td>
</tr>
<tr>
<td><strong>National cessation strategies</strong></td>
</tr>
<tr>
<td><strong>National cessation guidelines</strong></td>
</tr>
<tr>
<td><strong>National cessation case studies</strong></td>
</tr>
<tr>
<td><strong>Monitoring</strong></td>
</tr>
<tr>
<td><strong>Selected papers</strong></td>
</tr>
<tr>
<td><strong>Other resources</strong></td>
</tr>
</tbody>
</table>
Tools to implement the Article 14 guidelines

These tools have been developed to help countries analyse and improve their provision of tobacco cessation support. 

FCTC Article 14 Guidelines (2010) also available in Chinese, French, Russian & Spanish

English
To promote implementation of FCTC Article 14 on tobacco cessation:

Introduction
National Situation Analysis. Notes on how to conduct this analysis.

National Situation Analysis. A tool to analyse tobacco cessation support at country level.

Guidance on developing national tobacco cessation guidelines.

Healthcare interventions to promote and assist tobacco cessation: a review of efficacy, effectiveness and affordability for use in national guideline development.


Affordability calculator for healthcare interventions to promote and assist tobacco cessation.

New Zealand guidelines

Link to New Zealand guidelines.

Español
Herramientas para promover la implementación del artículo 14 del GMCT sobre cesación tabásica.

Introducción


Análisis de la situación del país. Una herramienta para analizar el abandono del consumo de tabaco a nivel de país.

Guía sobre la elaboración de directrices nacionales.

Healthcare interventions to promote and assist tobacco cessation: a review of efficacy, effectiveness and affordability for use in national guideline development.


Affordability calculator for healthcare interventions to promote and assist tobacco cessation.
National cessation strategies

The development of official national tobacco cessation strategies is relatively recent. We will add to this collection as new strategies are published.

- England 2011
- France 2014
- Lebanon 2018
- New Zealand 2004
- Uruguay 2014
- Uruguay 2014 (English)
National cessation guidelines

Most of these are official national guidelines, but some do not have "official" status. Posting them here does not imply that we have reviewed them or in any sense endorsed them.

Argentina 2005
Argentina 2011
Australia 2004 - general practice
Australia 2007 - pharmacotherapy
Australia 2011
Austria 2010
Brasil 2004
Canada 2008
Canada 2010 - pregnancy
Canada 2011 / Canada 2011 en français
Ontario 2007 - nursing
Chile 2003
Czech Republic 2005
Czech Republic - for physicians 2015
Czech Republic - for nurses 2015
Czech Republic - for pharmacists 2015
England 1998 - Clinical
England 1998 - Cost effectiveness
England 2003
Estonia 2010
Finland 2003 in English
Finland 2012
France 1998 / France 1998 in English
France 2004 - prospect  / France 2004 - pregnancy in English
France 2005 - obstetricians / France 2005 - perioperative in English
France 2007
France 2013
France 2014
Georgia 2010
Thank you very much

Martin Raw *PhD*

International Centre for Tobacco Cessation

Visiting Professor, New York University School of Global Public Health

Happy to respond to questions by email as well as in the Q&A:

martin@martinraw.com
HOW TO USE THE COVID-19 PANDEMIC SITUATION TO ADVANCE TOBACCO CONTROL POLICIES:

THE SPANISH APPROACH

By Raquel Fernández Megina. President of Nofumadores.org

nofumadores.org
ACTIONS TAKEN
Stop the sale of tobacco during the state of alarm for the Covid-19 situation

Nofumadores.org questions why tobacco stores remain open during the state of alarm
Tobacco is not a basic commodity and cannot be equated with food and medicine.

MARCH – LOCKDOWN: TOBACCO STORES KEEP OPEN DURING THE STATE OF ALARM

1. Signature collection
Campaign

change.org

Ir al panel de control de mi petición

Petición cerrada

Stop the sale of tobacco during the state of alarm for the Covid-19 situation
Esta petición ha conseguido 21.967 firmas

2. Press releases ➔ 10 digital newspapers appearances

Nofumadores.org demands the immediate closure of tobacco stores for the coronavirus crisis

La organización Nofumadores.org denuncia que los estancos permanezcan abiertos durante el estado de alarma ya que considera que el tabaco no es un bien de primera necesidad

Recuerda que en un estudio publicado por The Lancet sobre pacientes chinos se apunta que el porcentaje de varones en fase crítica del virus dobla al de mujeres y se asocia a la mayor prevalencia del tabaquismo entre los hombres.
3. Delivery of signatures to the Ministry of Health

21,967
FIRMAS
PIDIENDO
LA SUSPENSIÓN
DE LA VENTA
DE TABACO
DURANTE EL ESTADO DE ALARMA
change.org/EstadoAlarmaSinTabaco

4. Reply from the Health Minister

MARCH - LOCKDOWN: TOBACCO STORES KEEP OPEN DURING THE STATE OF ALARM

...this government's commitment to reduce smoking remains intact...
MAY - REOPENING: NEED TO KEEP IN MIND TOBACCO POLICIES DURING THIS PERIOD

1. Letter to the Health Minister and the President

A letter is sent to the Minister of Health, on behalf of the tobacco prevention agents, asking for restaurants and bars outdoor dining 100% smoke free in view of the reopening of confinement due to COVID19. The letter was proposed by NoFumadores.org and supported by ENSP (European Network for Smoking and Tobacco Prevention), FAECAP (Federation of Associations of Community Nursing and Primary Care) and the Lovexair Foundation.
The considerations made in your letters and the documentation provided by your entity help us to adopt short and medium-term measures.
JULY-AUGUST - NEW NORMAL: DEMAND TO DECLARE OUTDOOR DINING AREAS SMOKE AND VAPOR FREE

1. Manifest. Support from other entities

MANIFEST TO URGE THE SPANISH GOVERNMENT TO DECLARE OUTDOOR DINING IN HOSPITALITY BUSINESS SMOKE AND VAPOR-FREE AREAS

2. Signature collection Campaign

change.org

Terrazas sin humos ¡YA!

Qué hay de nuevo Detalles de la petición Con

Terrazas sin humos ¡YA!

104,498 Firmantes

SMOKE-FREE OUTDOOR DINING NOW!
7 Press releases  ➔ 43 digital newspaper appearances

The fight against Covid-19 requires banishing tobacco from outdoor dining in bars and restaurants
Nofumadores.org, the citizen initiative XQNS, and the FAECAP nurses demand for the re-opening smoke-free outdoor dining and a social distance of 10 meters to smoke or “vape”.

May 16th, 2020

The reopening decree-law makes the ashtrays disappear from the outside seating and the ground fills with cigarette butts
Nofumadores.org demands that the Government make explicit the smoking and vaping ban in common outside areas

June 11th, 2020

Nofumadores.org demands the immediate smoking ban in the hospitality business
550,000 deaths from smoking since 2010 call for drastic measures

May 29th, 2020

Nofumadores.org demands to the Hospitality Business Confederation to put to an end smoking at restaurant outdoor dining

July 9th, 2020

More than 20 medical and citizen associations demand a Decree-Law to urgently ban smoking in bars and restaurants outdoor dining
Nofumadores.org sends a manifesto to the Government demanding for immediate measures against smoking in public places to stop the Covid-19 pandemic

July 30th, 2020

More than 81,000 signatures ask to ban smoke in hospitality business outdoor dining
Nofumadores.org demands that the Galician law, that bans smoking in the streets, be extended to all of Spain

August 13th, 2020

Nofumadores.org demands an end to smoke on restaurants outdoor dining regardless of interpersonal distance
The association asks the rest of Regional Governments to follow the example of the Balearic Islands

August 31st, 2020

JULY-AUGUST - NEW NORMAL: DEMAND TO DECLARE OUTDOOR DINING AREAS SMOKE AND VAPOR FREE
4. July 28th: The MANIFESTO was delivered by email to the Health Minister and the President’s Cabinet.

5. August 12th: The MANIFESTO was delivered by email to the Public Health directors of the 17 Regional Governments.

6. August 30th: 94,000 signatures collected in the change.org campaign “Smoke-free outdoor dining NOW!” were delivered by email to the Cabinet of the Minister of Health and to all Regional Presidents.
7. Reply from the Health Minister

... as expressed in the manifesto sent, smoking prevention and control measures must be a good part of the response given to this disease ...

... we have approved the document “Stance of health authorities in relation to tobacco and related product consumption during the Covid 19 pandemic” ...

... I must acknowledge the important contribution of your entity and the other signatories of the manifesto in the materialization of these agreements. Thanks to the collaboration that we started prior to the pandemic, plus the continuous communication work, through your positions and documents, provided to my team during these months, we have had valuable contributions to adopt the measures achieved so far.
SEPTEMBER: BACK TO SCHOOL - DEMAND TO ESTABLISH A 10-METER SECURITY PERIMETER AT SCHOOL ENTRANCES AND UNIVERSITY CAMPUSES

1. Press release → 14 digital newspaper appearances

Health and citizen associations demand a perimeter without tobacco around educational centers
Spanish universities fail to protect young adults from tobacco

September 3rd 2020

2. Official request to all regional presidents
Has the government of Spain considered establishing a smoke-free perimeter at the entrances of educational and university centers?

If so, when would this measure will come into effect?
Smokers are fourteen times more likely to develop COVID-19 pneumonia

Nofumadores.org demands the immediate closure of tobacco stores in the face of the coronavirus crisis.

March 23rd

Nofumadores.org demands the adoption of urgent measures to reduce smoking because the Covid-19 crisis

The government is asked for a plan that includes a return to normality without smoke in the hospitality industry

April 17th

The author of the study on nicotine and Covid-19 received funds from the tobacco companies

Nofumadores.org denounces the interference of the tobacco industry in the pandemic

April 24th

Nofumadores.org asks the UN to combat the misinformation of COVID 19 spread by the tobacco industry

May 12th

Nofumadores.org reports the massive non-compliance of smokers to wear a mask on the streets

Nofumadores.org points out that the cigarette is used as a safe-conduct not to cover the face

July 19th

Nofumadores.org requests the extension to all Spain of the smoking ban in the Canary Islands and the Balearic Islands

The ineffectiveness of the two meters apart favors contagion in the middle of the second wave

October 10th
RECAP OF OUR MEDIA CAMPAIGNS

• 16 press releases
• 95 appearances in digital newspapers
• 8 radio interviews
• 6 interviews on TV
RESULTS:
Smoke-free outdoor spaces
Galicia bans smoking on the street and outdoor dining if safety distance cannot be guaranteed

Núñez Feijóo ha anunciado la sorprendente medida, que entra en vigor desde este mismo jueves.

LD/Agencias 2020-08-12

August 12th, 2020
AGREEMENT BETWEEN HEALTH MINISTRY AND ALL THE REGIONAL GOVERNMENTS

Nightlife venues closed down and smoking banned on the street all over Spain

August 14th, 2020
Health Authorities implement the 'Smoke-free beaches' project by banning smoking in the sands of Cantabria

August 23th, 2020

La Consejería de Sanidad destaca este domingo que ha hecho realidad el proyecto de 'Playas sin humo' que desde la Dirección General de Salud Pública se viene impulsando en los últimos años, con la publicación de la resolución que prohíbe fumar en las playas como medida para prevenir el contagio del coronavirus.

Este proyecto de 'Playas sin humo', puesto en marcha con la resolución publicada el pasado sábado 15 de agosto en el Boletín Oficial de Cantabria (BOC) y que a primeros de mes se presentó a los alcaldes de los municipios costeros de Cantabria con buena acogida, tiene como objetivo que las playas y zonas de baño sean verdaderos espacios de disfrute, convivencia, respeto mutuo, ocio saludable y contacto con la naturaleza.

En un comunicado, la directora general de Salud Pública, Paloma Navas, ha explicado que la limitación del tabaco en la costa tiene un doble objetivo, centrado por un lado en la mejora de los hábitos saludables y en evitar que los fumadores pasivos estén sometidos al humo y, por otro lado, en mejorar la calidad de la arena y del agua.
Balearic Islands bans smoking in the street, reduces capacity and closes beaches at night

La presidenta del Govern, Francina Armengol, y la consellera Patricia Gómez comparecen tras la reunión con los presidentes y presidentas de los consells insulares, así como con el presidente de la FELIB y el alcalde de Palma para abordar temas relacionados con el control de la pandemia del coronavirus.

Entre las medidas adoptadas, Armengol ha anunciado que se prohibirá fumar en Baleares en cualquier espacio público sin tener en cuenta la distancia entre las personas, las playas y parque se cerrarán por la noche y la obligatoriedad de llevar mascarilla se extiende a los paseos marítimos y a centros de trabajo, aunque con excepciones en este último caso.

...smoking ban in the Balearic Islands in any public space regardless the distance between people,...
Pioneer: Canary Islands bans smoking while walking

El Boletín Oficial de Canarias (BOC) ha publicado este viernes, 9 de octubre, las normas adoptadas el jueves en el Consejo de Gobierno del Ejecutivo regional en relación a normas relacionadas con la contención del coronavirus y entre las que se encuentran la obligación de utilizar mascarilla higiénica o quirúrgica para asistir a los centros sanitarios, así como prohibir fumar mientras se camina.
Castilla y León region bans smoking on outdoor dining and also in the street when two meters of distance cannot be respected

October 16th, 2020
MEETING WITH THE MINISTER OF HEALTH

October 29th, 2020
CONCLUSIONS

• Don’t let anyone tell you this is not the right moment to bring up tobacco issues because we are in the middle of a crisis and the government has their hands full.

• Big Tobacco won’t have those considerations and will use the pandemic to misinform the public.

• Look at the Covid-19 pandemic as an opportunity to work on tobacco control measures.

• Be persistent
THANK YOU

Raquel Fernández Megina
President of Nofumadores.org

informacion@nofumadores.org
www.nofumadores.org
@nofumadores / twitter.com/nofumadores
facebook.com/nofumadores.org
Q&A
Stay Involved

Twitter @ASHorg @LaurentHuber
Instagram @ASHorg
Facebook @ASHglobalAction
Info@ash.org

Recordings from previous webinars and Live Chats on social media: https://ash.org/webinars

NEXT WEBINAR:

Tomorrow at 9:00am ET

ASH with support from its partners, including the Framework Convention Alliance and Corporate Accountability International, will host a week of webinars. These webinars are focused on the FCTC and at times may be more technical than some of our previous webinars, but the topics we will cover, including endgame, liability, human rights, and COVID, will be useful to advocates from every background.

Friday, Nov. 13th:
Closing the Funding Gap for FCTC Implementation at the Global and National Level

Full Description & Registration Link:
https://ash.org/cop2020

Toolkit for Advocates
Talking with government and media about the COVID-19 and tobacco use co-morbidity and policies to protect the health of everyone during the pandemic.

ash.org/covid19

Global action for everyone's health

nofumadores.org

ICTC International Centre for Tobacco Cessation