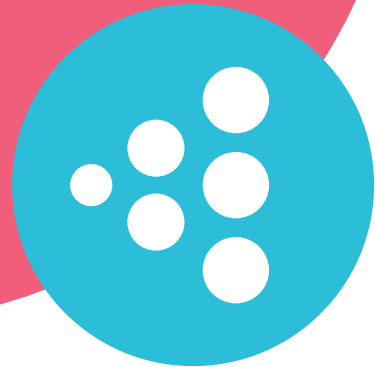


MPOWER IN ACTION

Defeating the global tobacco epidemic





The World Health Organization (WHO) is tackling global tobacco use head on with high-impact, proactive measures for tobacco control.

For many years, WHO has worked with governments worldwide to strengthen policies, programmes and strategies that prevent and reduce tobacco use. In 2005, the WHO Framework Convention on Tobacco Control (WHO FCTC) came into force as a response to the global tobacco epidemic and has since become the most rapidly and widely embraced treaty in United Nations (UN) history.

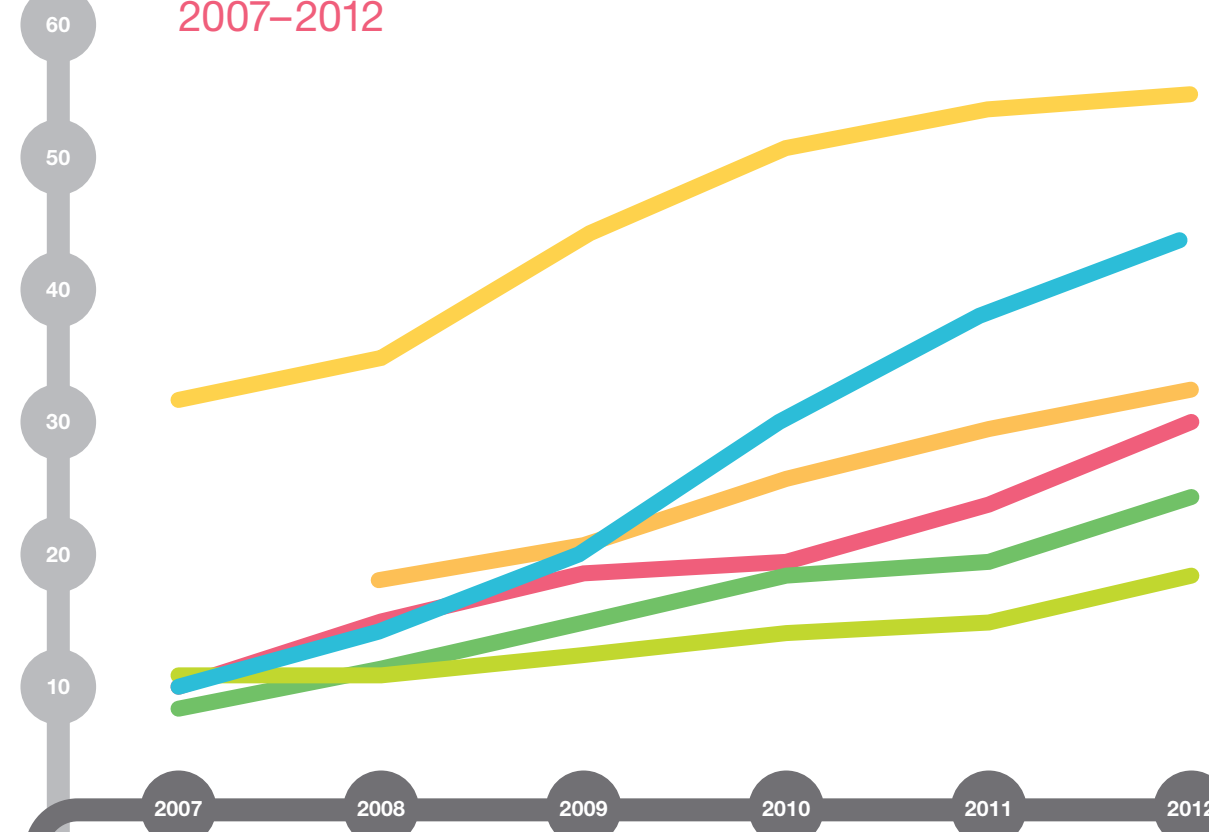
In 2008, WHO packaged and promoted six proven measures to reduce tobacco use worldwide. Known as MPOWER, the measures support scale up of specific provisions of the WHO FCTC on the ground.

That same year, New York City's Mayor Michael Bloomberg introduced the Bloomberg Initiative (BI), a catalytic way of working on global tobacco control. With six core partners, including WHO, BI draws on innovative management models of other major public health programmes and private sector principles. BI is committed to promoting worldwide freedom from tobacco use through supporting countries to take a more active approach. Led by the countries themselves and focused on monitoring performance and results, BI struck out into new territory, further enabling MPOWER to positively impact tobacco control.

WHO
FCTC

Number of countries with measures at the highest level of implementation

MPOWER progress 2007–2012



Source: WHO Report on the Global Tobacco Epidemic, 2013

- **Monitoring** tobacco use and prevention policies
- **Protecting** people from tobacco smoke
- **Offering** help to quit tobacco use
- **Warning** about the dangers of tobacco
- **Enforcing** bans on tobacco advertising, promotion and sponsorship
- **Raising** tobacco taxes

MPOWER in action

Tobacco kills millions of people around the world every year.

In 2008, WHO introduced six practical, affordable and achievable measures to help countries implement specific provisions of the WHO FCTC.

Called **MPOWER**, these measures comprise specific demand-reduction interventions for effective tobacco control on the ground, which can be tailored to each country's needs.

Supported by partners at all levels and rigorously tracked, MPOWER helps countries design and carry out policy, particularly in developing countries where the tobacco industry actively seeks new markets.



MPOWER has contributed to global tobacco control.

MPOWER has gained investment from organizations such as Bloomberg Philanthropies and the Bill & Melinda Gates Foundation. MPOWER has reached all regions of the world, including helping in the fight against tobacco use in Africa, leading to the establishment of the continent's first tobacco control centre in 2011. It has been at the heart of reduction in tobacco prevalence everywhere from Uruguay to Turkey. In short, MPOWER is delivering results in the places where it is needed the most.

It is estimated that implementing the PWER measures of MPOWER – including overall programme management and media support – costs annually US\$ 0.11 per capita in low and middle-income countries. More than half of this cost is related to media campaigns.



2008



MPOWER's impact has been impressive

7.4 million premature **deaths will be averted** due to the MPOWER measures being adopted from 2007 to 2010 **at the highest levels.**



30 countries with more than 1 billion people now mandate best-practice **health warning labels.**



2.3 billion people are now covered by **at least one MPOWER** measure at the highest level of achievement.



530 million people are now living in countries with the recommended minimum tobacco taxes.



>1 billion people are protected from second-hand smoke by comprehensive national **smoke-free laws in 43 countries.**



MPOWER
stands for:



MONITORING
tobacco use and
prevention policies



PROTECTING
people from
tobacco smoke



OFFERING
help to quit
tobacco use

WARNING
about the dangers
of tobacco



ENFORCING
bans on tobacco advertising,
promotion and sponsorship



RAISING
tobacco taxes



13.4%



heart disease



lung cancer



Turkey's MPOWER story

Turkey is a country historically steeped in tobacco culture, from growing to smoking. Six years ago, more than 1 in 3 adults used tobacco, the highest rate in Europe.

But the WHO FCTC changed things. The implementation of MPOWER selected demand reduction measures led to a reduction of smoking. By 2012 data showed that smoking was **down by a relative 13.4%** and exposure to second-hand smoke was on the decline too. Turkey became the third country in Europe to go **100% smoke free indoors** and the first country to achieve all six MPOWER measures at the highest level.

Turkey's government and civil society, WHO and other global organizations all deserve great credit for such success – a demonstration of their sustained commitment to tobacco control.

The MPOWER measures will be life-changing for Turkey's people, reducing the likelihood of heart disease, lung cancer and other chronic diseases. Progress is already evident, with studies showing a **20% decline in 2012** in the number of citizens admitted to hospital for smoking-related diseases. It's a powerful example of what MPOWER can achieve, and absolute proof that no country needs to remain dependent on tobacco.



“This country was the first in the world to achieve all six MPOWER demand-reduction measures for tobacco control at the highest possible level of achievement... This country's leadership in forging tough policies for tobacco control goes beyond safeguarding the health of the Turkish people. It is a model for other countries to follow.”

Dr Margaret Chan,
WHO Director-General

“I love my people and I want them to live their lives in good health. This is my aim. Stealing someone else's right to live in good health is unacceptable. Struggling against the use of tobacco products has become as important as our counterterrorism struggle, which is ever on our agenda. Tobacco products are literally murdering our future generations. MPOWER not only brought down the consumption rate, but it also changed public opinion. People said it would be protested, but instead it was accepted by everyone and many people started quitting.”

Recep Tayyip Erdoğan,
Prime Minister, Turkey 2013



Learning from our success

MPOWER shows that global initiatives to tackle non-communicable disease (NCD) risk factors really work.

NYC

2011



In New York, 2011, global heads of state adopted the UN Political Declaration on the Prevention and Control of Non-Communicable Diseases at a UN summit. In the Declaration, governments committed to accelerate the implementation of the WHO FCTC and articulate the clear need to find cost-effective strategies to address key risk factors – including diet, alcohol consumption and lack of physical activity and tobacco, in the fight against NCDs.

Tobacco industry and tobacco control: a conflict of interest

In Article 5.3, the WHO FCTC requires Party governments to protect their public health policies from commercial and other vested interests of the tobacco industry in accordance with national law.

In applying effective tobacco control measures governments must be aware that there is a fundamental and irreconcilable conflict between the tobacco industry's interests and public health.

To find out more about MPOWER and how it could be put into practice in your country, visit <http://www.who.int/tobacco/en/>



MPOWER's journey to defeat the global tobacco epidemic

WHO

2005
WHO FCTC

The WHO FCTC enters into force.

2006



Bloomberg Philanthropies donates US\$ 125 million to the cause.



WHO starts collecting data for the first ever Global Tobacco Control Report.

2007



WHO introduces a global team to focus on tobacco control in 15 countries.



11 countries have comprehensive smoke-free laws.



12 countries are providing appropriate services for people to quit smoking.



12 countries now have effective bans on tobacco advertising, promotion and sponsorship.



Bill & Melinda Gates Foundation and Bloomberg Philanthropies contribute an additional US\$ 375 million to tobacco control.

2008



WHO introduces MPOWER.



Global tobacco household survey is launched.



15 countries now have warnings on cigarette packs, meeting best practices.



World Health Assembly endorses the NCD Action Plan including implementing MPOWER to support WHO FCTC.

2009



WHO starts working with ministries of finance on tobacco tax.

25%



Uruguay reports 25% reduction in tobacco prevalence over 3 years.



20 countries are now smoke free.



WHO launches the second WHO Report on the Global Tobacco Epidemic in Turkey.

2010



27 countries have now raised taxes to 75% of retail prices.



18 countries now have effective bans on tobacco advertising, promotion and sponsorship.



WHO launches a graphic health warnings database.

2011



WHO launches the third WHO Report on the Global Tobacco Epidemic in Uruguay.



18 countries now offer cessation services at best-practice level.



37 countries now have smoke-free laws.



The first-ever African tobacco control capacity building hub is established in Uganda.



UN declares tobacco use a major challenge for the 21st century and governments commit to accelerate the implementation of WHO FCTC.

2012



Turkey attains highest level of achievement in all six MPOWER measures.



32 countries have now changed their tax structures and increased tobacco taxes.



24 countries now have effective bans on advertising, promotion and sponsorship.



30 countries now have warnings on cigarette packs, meeting best practices.

2013



WHO launches the fourth WHO Report on the Global Tobacco Epidemic in Panama.



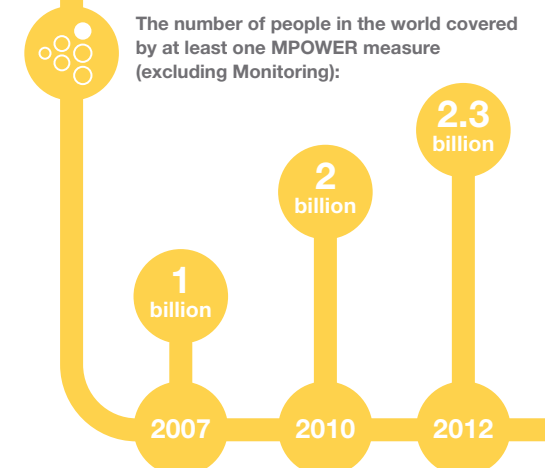
World Health Assembly (WHA) endorses voluntary global targets for non-communicable diseases (NCDs), including a 30% relative reduction in prevalence of current tobacco use in persons aged 15+ years.



WHA endorses the Global Action Plan for NCDs, 2013–2020, with MPOWER as a key WHO tool for reducing tobacco use.



The success of MPOWER is highlighted in peer-reviewed journals.





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