Colombia’s Symbolic & Practical Support for the World Health Organisation’s (WHO) Framework Convention on Tobacco Control (FCTC)

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As of the 31st October 2018 Colombia owed a total of US$ 66,471 in assessed contributions (ACs) to the World Health Organisation’s (WHO) Framework Convention on Tobacco Control (FCTC). This includes an unpaid contribution of US$ 30,038 for the period 2016-2017, and an as yet unpaid contribution of US$ 36,433 for the years 2018-2019 [1]. It cannot be argued that the sum expected from Colombia is excessive. The assessed contributions are scaled based on the wealth of countries, ranging from a low of US$ 113 for signatories such as Dominica, the Cook Islands, and Grenada, to a high of US$ 1,095,280 for Japan [1].

The actual sum outstanding, and the length of time it is overdue, are hardly excessive compared to some other states. However, the outstanding amount undoubtedly hinders the operation of the WHO and the FCTC from a practical financial perspective. Perhaps more importantly it may indicate governmental ambivalence in Colombia towards the FCTC. It should be noted that compared to many other countries Colombia was relatively late in ratifying the FCTC [2].

The delay in Colombia’s payment of its assessed contribution is surprising on a number of grounds. The first of these is the damage wrought by tobacco related mortality and morbidity. It is estimated that Colombia has over 4.1 million daily smokers, resulting in almost 21,000 Colombians being killed by tobacco related illness annually [3]. The second reason why this delay is surprising is in light of the significant negative economic impact of tobacco in Colombia. The economic cost of smoking has been estimated at 3416058 million Colombian pesos per year [3].

Any ambivalence is further surprising given that the FCTC is a crucial milestone in the history of international tobacco control [4], and has been described as a global “good” [5]. The FCTC is the first treaty developed under the umbrella of the WHO, and is an internationally legally binding treaty among signatories [4-6]. The FCTC outlines duties and responsibilities of member states in combating tobacco [4-6]. The treaty is notable for the impressive speed of its adoption internationally [7], and its landmark role in acknowledging the global nature of health threats and the need to respond through joint international work [5].

As early as 1999, several years before negotiations on the treaty were even concluded, its potential potency as a valuable international instrument of tobacco control was recognised. As Simpson notes “the importance of the FCTC can be judged by that fact that it has already received that most reliable of all evaluations, the strong condemnation of the international tobacco industry” [8].
Despite the absence of involvement of populous countries such as Argentina [9], the USA and Indonesia [10], the FCTC remains crucial in the international struggle to combat tobacco. Participant nations must show solidarity with this aim and support this aim domestically through enacting tobacco control legislation, and internationally through materially and morally supporting the WHO’s FCTC. Colombia’s tardiness in payment of its assessed contribution to the FCTC undermines WHO work in this field and threatens the international credibility of the state in this field.

References