

The Tobacco Industry's Human Rights Violations

April 29, 2026



UNITED NATIONS
HUMAN RIGHTS
OFFICE OF THE HIGH COMMISSIONER

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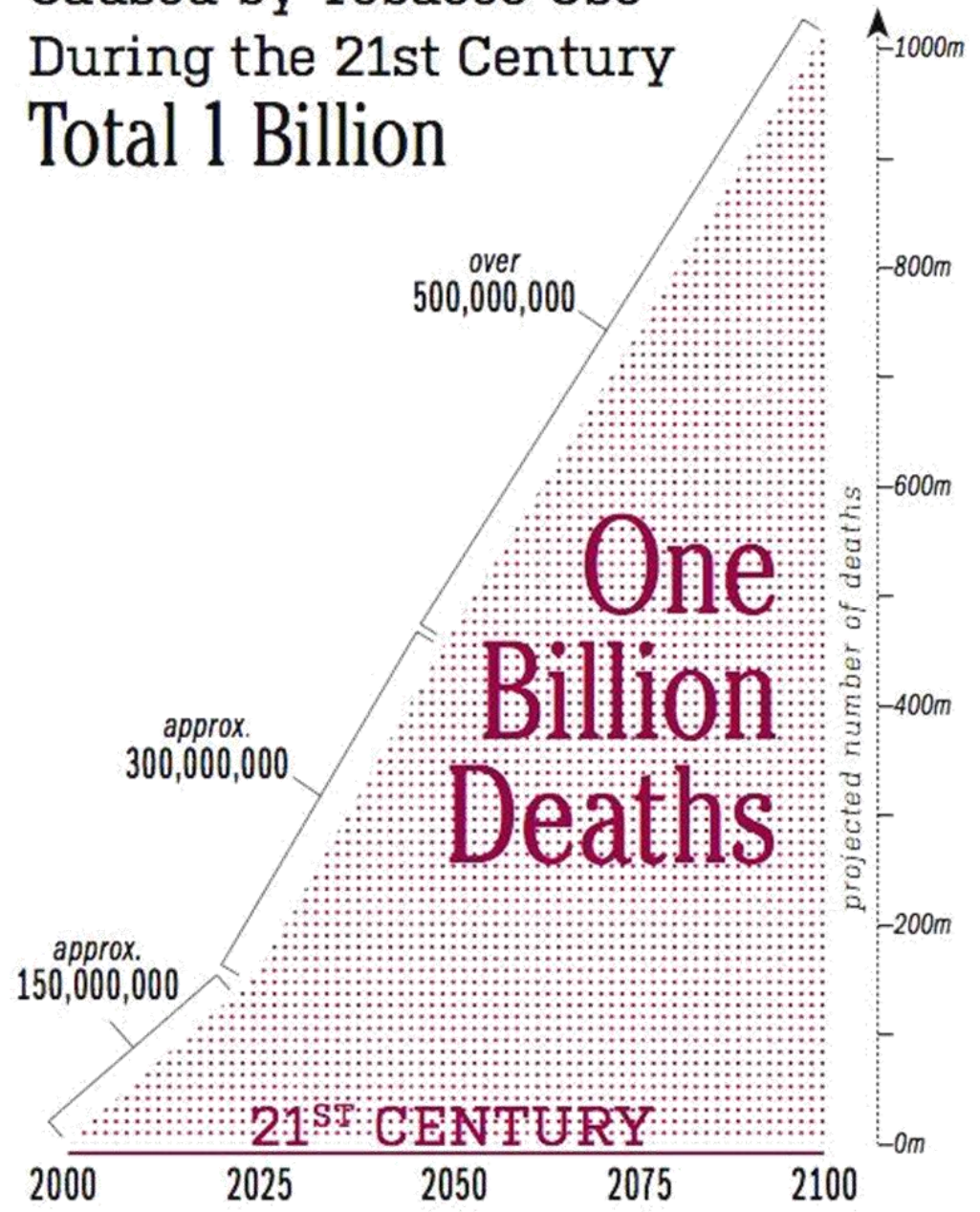
Tobacco, Women's Health, and Women's Rights

Kelsey Romeo-Stuppy

Managing Attorney

ASH > ACTION ON SMOKING & HEALTH

Projected Deaths Caused by Tobacco Use During the 21st Century Total 1 Billion



Tobacco infringes on



right to **life**

right to **health**

right to **education**

children's rights

women's rights

and many others

HUMAN RIGHTS: THE ARGUMENT

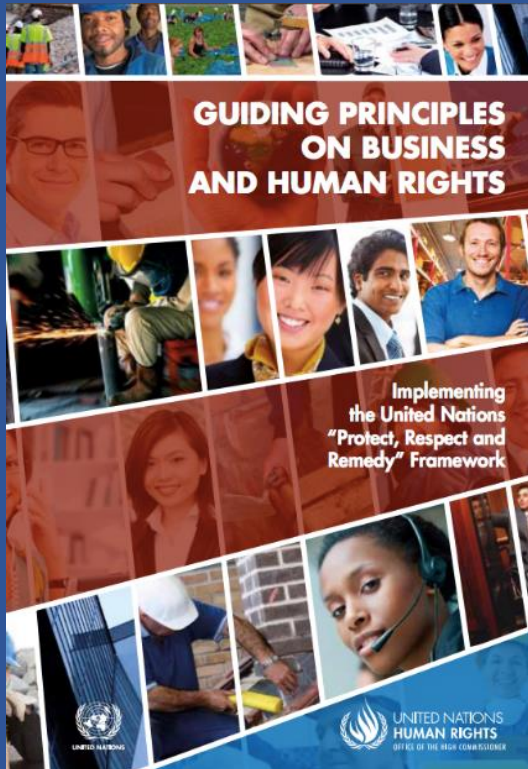
Everyone has a
right to life and
to health

Governments
have a duty to
enforce those
rights

Governments therefore
have a duty to protect
their citizens from the
tobacco industry and
harms from tobacco

Legal remedies are
available at the
international, regional,
and national levels.

RUGGIE PRINCIPLES



Protect =

Protect citizens from tobacco industry

Respect =

Industry should respect human rights norms

Remedy =

Mechanisms and processes to request reparation when industry infringes on human rights

TOBACCO INFRINGES ON



WOMEN'S RIGHTS



CHILDREN'S RIGHTS



RIGHT TO LIFE



RIGHT TO HEALTH



RIGHT TO EDUCATION

How it comes together: a real life example

The National Component

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UNITED STATES DISTRICT COURT
NORTHERN DISTRICT OF CALIFORNIA
SAN FRANCISCO DIVISION

AFRICAN AMERICAN TOBACCO)
CONTROL LEADERSHIP COUNCIL and)
ACTION ON SMOKING AND HEALTH,)

Plaintiffs,)

Case No.:

COMPLAINT

(Administrative Procedure Act Case)

How it comes together: a real life example

The International Component

International Convention on the Elimination of All Forms of Racial Discrimination

Adopted and opened for signature and ratification by General Assembly resolution 2106 (XX) of 21 December 1965

entry into force 4 January 1969, in accordance with Article 19

The States Parties to this Convention,

Considering that the Charter of the United Nations is based on the principles of the dignity and equality inherent in all human beings, and that all Member States have pledged themselves to take joint and separate action, in co-operation with the Organization, for the achievement of one of the purposes of the United Nations which is to promote and encourage universal respect for and observance of human rights and fundamental freedoms for all, without distinction as to race, sex, language or religion, Considering that the Universal Declaration of Human Rights proclaims that all human beings are born free and equal in dignity and rights and that everyone is entitled to all the rights and freedoms set out therein, without distinction of any kind, in particular as to race, colour or national origin,

Considering that all human beings are equal before the law and are entitled to equal protection of the law against any discrimination and against any incitement to discrimination,



Why are these reports needed?

Tobacco violates numerous human rights, particularly, the **right to health.**

Human rights bodies are **4x more likely** to mention tobacco after receiving a report on the tobacco epidemic.

cessation of the production and marketing of tobacco.”

- Danish Institute for Human Rights, 2017




THE CAPE TOWN DECLARATION

153 ORGANIZATIONS AGREE
"The manufacture, marketing and sale of tobacco are incompatible with the human right to health."

ash.org/declaration #TobaccoViolation

ASH
ACTION
ON SMOKING & HEALTH

Global action for *everyone's* health. 

Tobacco Endgame

GLOBAL ENDGAME PROGRESS

- **Maldives:** Smoke-Free Generation **implemented** (e-cigs already banned)
- **United Kingdom:** Tobacco-Free Generation bill pending
- **South Australia:** Nicotine-Free Generation bill pending
- **France:** Tobacco-Free Generation bill pending
- **European Union:** Funding endgame work in 23 countries

FILTER BAN

Under consideration:

- **United Kingdom**
- **Australia**
- **European Union**

530,000 → **139 MILLION**
PROTECTED GLOBALLY

CHAMPIONS TO NOTE

- **BALANGA CITY, PHILIPPINES (2016)**
Tobacco-Free Generation policy, first in the world. Industry lawsuit blocked.
- **NEW ZEALAND (2022–2023 → REPEALED)**
Historic Smokefree Generation law reversed by new government.

GLOBAL ENDGAME PROGRESS

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FILTER BAN

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**70 MILLION+
PROTECTED**

CHAMPIONS TO NOTE

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U.S. ENDGAME PROGRESS

SALES BANS

- 
1. Beverly Hills, CA
 2. Manhattan Beach, CA
 3. Tiburon, CA
 4. Ross, CA

PHASING OUT RETAIL LICENSES

1. Dolgeville, NY
2. Bloomington, MN
3. Little Canada, MN
4. St. Anthony Village, MN
5. Columbia Heights, MN
6. Wakefield, MA




FILTER BAN

- Santa Cruz County, CA



860,000 AMERICANS PROTECTED

NICOTINE-FREE GENERATION POLICIES

- 
1. Brookline, MA
 2. Stoneham, MA
 3. Wakefield, MA
 4. Melrose, MA
 5. Winchester, MA
 6. Malden, MA
 7. Reading, MA
 8. Concord, MA
 9. Manchester, MA
 10. Chelsea, MA
 11. Belchertown, MA
 12. Needham, MA
 13. Pelham, MA
 14. Newton, MA
 15. Somerville, MA
 16. Hopkinton, MA
 17. Conway, MA
 18. South Hadley, MA
 19. Dover, MA
 20. Leverett, MA
 21. Amherst, MA
 22. Hardwick, MA
 23. Northampton, MA

STATE BILLS INTRODUCED

1. Hawaii - 2025
2. Indiana - 2025
3. Massachusetts - 2025
4. Nevada - 2025
5. California - 2024



INCREASED DEMAND FOR
CESSATION SUPPORT

Summary

Tobacco products kill when used **exactly as their manufacturer intends**. They don't require mis-use or over-use to cause harm.

It's time to phase out the sale of commercial tobacco products. Human rights paths can help.

THANK YOU!

CONTACT INFORMATION

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OUR CHILDREN DESERVE TO
GROW UP WITHOUT TOBACCO

Human Rights for Tobacco Control

The Right to Health & Tobacco Control

Khaled HASSINE

OHCHR | Economic, Social and Cultural Rights Section

ASH > ACTION ON SMOKING & HEALTH

Wednesday, 29 April 2026

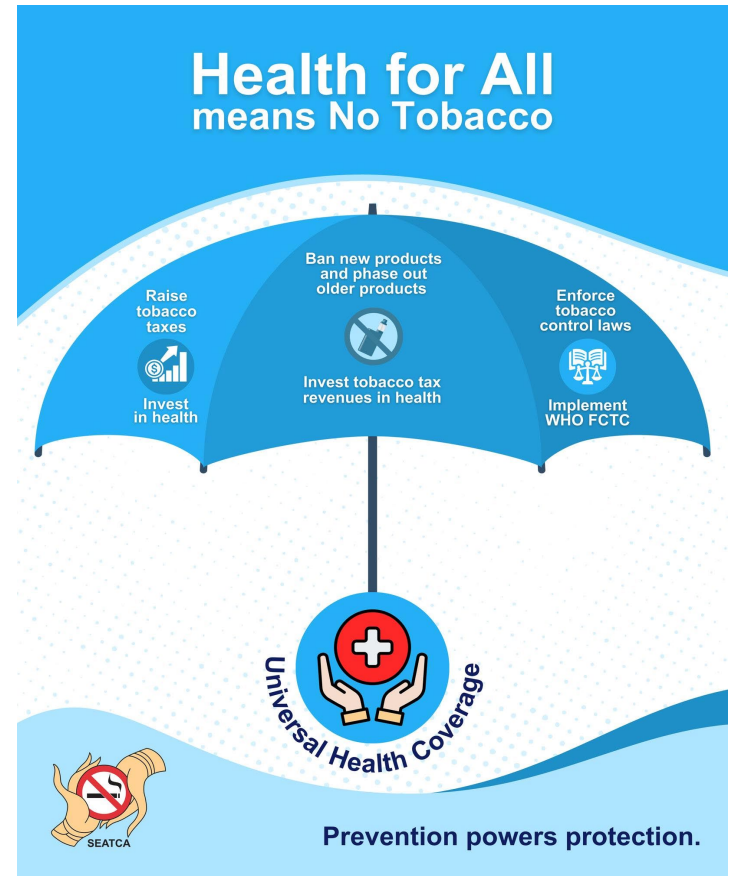


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Right to health & Tobacco Control



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Point of Departure: The Right to Health

From a right to health perspective, tobacco control is a core obligation of States under international law. Article 12 of the International Covenant on Economic, Social and Cultural Rights (ICESCR) and General Comment No. 14 requires States to prevent disease, regulate harmful industries, ensure access to essential health services including cessation support, and protect individuals from exposure to harmful substances, including second-hand smoke.

In collaboration with a wide range of stakeholders, OHCHR works at the **intersection** of the right to health and tobacco control and provides guidance on implementing a human rights-based approach towards strengthening the **implementation of the WHO Framework Convention on Tobacco Control (WHO FCTC)**.



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THE FCTC AND THE RIGHT TO HEALTH

A Landmark Instrument

The FCTC has fundamentally shaped the global response to one of the most preventable public health crises of our time – a direct expression of the human right to the highest attainable standard of physical and mental health.

Human Rights Obligation

States must:

- Prevent exposure to harmful substances
- Regulate corporate actors that undermine health
- Ensure access to information and protective measures

A human rights-based approach brings the full weight of the international accountability framework to FCTC implementation.



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Leveraging Human Rights to Advance Tobacco Control

Strategic opportunity to use Human Rights and its system to support the implementation of the Framework Convention on Tobacco Control (FCTC) moving forward:

- After more than 20 years since entry into force of the FCTC it is the dedicated binding instrument under WHO that has fundamentally shaped the global response to one of the most preventable public health crisis;
- It is a **clear expression of the human right of everyone to the enjoyment of the highest attainable standard of physical and mental health**, as protected under **international human rights law**, such as the International Covenant on Economic, Social and Cultural Rights, among others;
- Primary obligation to prevent exposure to harmful substances, regulate actors whose activities undermine the Right to Health, and ensure access to information and protective measure;
- A human rights-based approach brings the full weight of the international human rights protection system, including its accountability framework.



The AAAQ framework

Four essential & interrelated elements



The normative content of the right to health - **Availability, Accessibility, Acceptability and Quality (AAAQ)** - provides a structured framework for assessing the tobacco impact on the right to health.

The AAAQ Framework

CESCR General Comment No. 14 establishes four interrelated dimensions for assessing States' obligations under Article 12 ICESCR *et al.* — providing the normative architecture for evaluating implementation.

A Availability	A Accessibility	A Acceptability	Q Quality
Functioning public health facilities, goods, and services — including tobacco cessation programmes and harm-reduction measures — must be available in sufficient quantity.	Health services and information must be accessible to all without discrimination — physically, economically, and on a non-discriminatory basis.	Health facilities and services must be medically ethical and culturally appropriate, including tobacco control measures affecting indigenous peoples and minorities.	Health facilities, goods, and services must be scientifically and medically appropriate and of good quality — including evidence-based tobacco control policies.



UN Human Rights Treaty Bodies

In periodic dialogues with States, Treaty Bodies have repeatedly underscored that tobacco control is an essential component of States' human rights obligations.

CESCR

Explicitly recalls the FCTC in concluding observations and calls for its effective implementation as part of States' obligations under Article 12 ICESCR

CRC

Addresses tobacco's disproportionate impact on children and calls for regulation of industry practices targeting minors

CEDAW

Highlights gendered dimensions of tobacco — including targeted marketing and differential access to cessation services

CRPD

Addresses compounding vulnerabilities and the particular exposure of persons with disabilities to tobacco-related harms

Other Bodies

Address regulation of the tobacco industry, elimination of child labour in tobacco production, and second-hand smoke exposure



The Role of Civil Society

Civil society and NGOs play a decisive role in the periodic monitoring of States' obligations under human rights law.

Evidence & Analysis

Civil society provides evidence on promising practices and on remaining protection gaps, implementation shortfalls, and discriminatory impacts — directly informing treaty body analysis.

Dialogue & Influence

Through submissions and meetings with treaty body experts, NGOs contribute directly to the dialogue with States, ensure recommendations are actionable and adapted to national realities.

Domestic Follow-up

Civil society engagement throughout the monitoring cycle sustains domestic implementation by monitoring compliance, supporting affected communities, and holding governments to their pledges.

These recommendations of the UN human rights treaty bodies provide authoritative guidance to States, often with clear timelines, that strengthen national implementation and legislative reform — creating domestic momentum for measures consistent with the FCTC.



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Universal Periodic Review

An Important Platform for State-to-State Dialogue

Along with stakeholder submissions and Treaty Body recommendations, the UPR creates a platform for exchange both with States and among States — generating political commitment and mobilizing cross-government engagement.

01

Across multiple UPR cycles, States have recommended one another to strengthen tobacco control measures.

02

Calls to ratify the FCTC and adopt legislation, strategies, and programmes to reduce consumption.

03

Civil society participation is decisive — sustaining domestic follow-up and ensuring accountability.



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UN Special Procedures

46

Thematic
Mandates

13

Country
Mandates

Providing detailed thematic and country analysis — identifying implementation gaps and offering actionable recommendations. Capacity building and technical cooperation remain important practical tools.

SR

Right to Health

SR on the right to the highest attainable standard of health

SR

Indigenous Peoples

SR on the rights of indigenous peoples

SR

Extreme Poverty

SR on extreme poverty and human rights

SR

Healthy Environment

SR on the right to a clean, healthy and sustainable environment



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THE HUMAN RIGHTS ECOSYSTEM

A complementary, mutually reinforcing system for global implementation

Constructive Dialogue

Treaty Bodies, UPR, and Special Procedures engage States in structured, periodic dialogue — generating political commitment and targeted recommendations.

Monitoring & Analysis

Human rights mechanisms identify implementation gaps, assess progress, and provide authoritative guidance with clear timelines to support domestic reform.

Accountability & Follow-up

Civil society engagement throughout the monitoring cycle sustains implementation, supports communities, and holds governments accountable to their pledges.

Together, these mechanisms offer a multitude of concrete entry points for stakeholder engagement — supporting States in closing implementation gaps and ensuring tobacco control delivers equally for all.



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KEY TAKEAWAYS

The UN Human Rights Office along with the UN Human Rights Council, its supervisory bodies and independent mechanisms form a reinforcing ecosystem that can leverage further progress in tobacco control implementation – encompassing constructive dialogue, monitoring, accountability and follow-up.

UN Human Rights Office
Treaty Bodies | Universal Periodic Review | Special Procedures |
Civil Society



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THANK YOU

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STAY INVOLVED



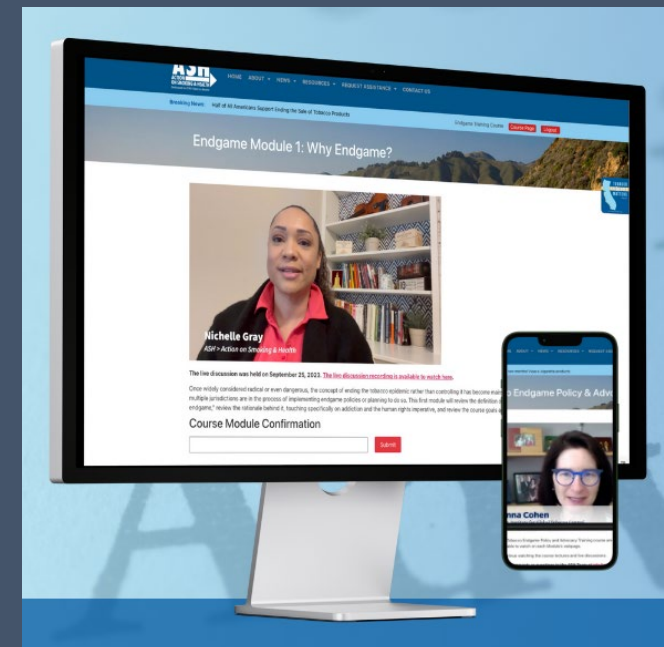
Please complete our survey. Thank you!



Next Webinar

World No Tobacco Day 2026
Tobacco Industry Tactics Exposed

May 21, 2026



**Tobacco Endgame
Policy and Advocacy
Training Course**

June 22nd Live Discussion

<https://ProjectSunset.ash.org>