





All this knowledge, all this improvement in Brazil on tobacco control is a result of the FCTC. With the FCTC and its guidelines, we can reach things that we couldn't, things that wouldn't have been possible.

Introduction

The impact assessment for the implementation of the WHO Framework Convention on Tobacco Control (WHO FCTC) was conducted in Brazil from 25 to 28 April 2016. The mission was led by members of the independent Impact Assessment Expert Group, established by the Conference of the Parties.

Key tobacco control milestones

2005

Brazil ratifies the WHO FCTC

2006

WHO FCTC enters into force in Brazil

The implementation of the National Programme for Diversification in Tobacco Growing Areas

2011

A more comprehensive reform in the taxation system for tobacco products and the Minimum Price Policy for cigarettes is established

2012

Additives such as menthol and other flavours in tobacco products are prohibited

2014

All enclosed public places are declared smoke-free without allowances for designated smoking areas

Key facts

100,000-150,000



smokers a year enroll in the cessation programme in one of the 250 cessation centres



Brazil has an outstanding smoking cessation rate, with a

19.6%

decline in prevalence from 1989 (34.3%) to 2013 (14.7%)

Brazil is the world's largest



tobacco exporter and second largest tobacco producer with a long tradition of family tobacco growing



of young people are smokers; 5.8% of boys and 5.4% of girls (2015)

of the adult population are smokers; 18.9% of men and **11%** of women (2013)

As of 2016, tax accounted for

of the most widely sold brand of cigarette retail prices

Pictorial health warnings cover

100%

of the back and there are text-only warnings on 30% of the lower front surface of tobacco packaging



From 2006 to 2013, there was a

increase in the average price of cigarettes, a 32% decrease in domestic cigarette sales and a 48% increase in tax revenues



The FCTC has been a milestone in enhancing tobacco control in Brazil, enhancing the health sector's power to mobilize all other sectors to commit to the FCTC goals, principles and objectives.

Key observations

- Brazil has taken advantage of the WHO FCTC as a legal instrument. The Convention's impact was felt as soon as negotiations began. It has served as an overarching framework to promote and guide tobacco control efforts and strategies. Brazil strengthened and expanded an existing ban on smoking as part of WHO FCTC implementation. Eight years after the entry into force of the Convention, it became the largest country in the world to implement comprehensive smoke-free legislation. A progressive escalation of the health warnings on tobacco products was also introduced, with increasingly blunt images and warnings, occupying more and more of the cigarette packaging. Brazil is also the first country in the world to ban misleading descriptors, and the second to introduce pictorial warnings after Canada (in 2001).
- In Brazil, the WHO FCTC not only facilitated the development of regulatory mechanisms for tobacco control, but also resulted in the establishment of a tobacco control-focused organization. In 2003, Brazil became the first country in the Americas to establish an intergovernmental body responsible for WHO FCTC implementation. This body, the National Commission (known as CONICQ) has representatives from 18 divisions of the federal government and is responsible for promoting and implementing Brazil's treaty obligations. The effective functioning of CONICQ is largely possible because the

- WHO FCTC has unified the focus on tobacco control at all levels of government, especially in cross-departmental coordination. The WHO FCTC has enhanced the health sector's power to mobilize other sectors towards achieving common Convention goals.
- Brazil is the world's largest exporter and second biggest producer of tobacco. With WHO FCTC help, the government has started taking steps to provide tobacco farmers with alternative livelihoods. The Ministry of Agrarian Development (MDA) launched a comprehensive diversification programme for small tobacco farmers following WHO FCTC ratification in 2005. Additionally, investments were made by National Programme for Diversification in Tobacco Growing Areas amounting to US\$ 12 million between 2005 and 2012. The MDA gave more than US\$ 5 million towards income diversification of small farmers and major tobacco growing municipalities.
- By following WHO FCTC Article 6, Brazil has been able to implement more stringent price and tax measures. In Brazil, cigarettes incur both a specific and ad valorem tax, and are also subject to VAT. In 2012, a mixed excise tax system was implemented in Brazil to reduce the gap between cigarette prices across brands. The specific tax is adjusted to a rate above anticipated inflation on an annual basis, and the ad valorem tax also increases

- each year. Total tax receipts are reported to have increased by 147% from 2006 to 2009.
- The WHO FCTC Protocol to Eliminate Illicit Trade in Tobacco Products has been a turning point in combating illicit trade in Brazil. In 2007, several measures for the control, registration and inspection of tobacco products were introduced.
- Civil society participation in tobacco control has been significantly enhanced since the WHO FCTC negotiations started in Brazil. The Alliance for the Control of Tobacco Use (ACT), a nongovernmental organization (NGO) network of more than 200 organizations, has supported tobacco control through research activities, training programmes, the media and policy advocacy. Civil society has played an important role in the development and implementation of comprehensive smokefree legislation and continues to assist with monitoring efforts.
- Brazil has followed Article 20 of the Convention and implemented various national systems for surveillance to monitor the prevalence of tobacco use and assess the impact of tobacco control measures by collecting reliable data. In the past, the statistics used by the Ministry of Trade were provided by the tobacco industry.

Outcomes

- ✓ Development of guidelines and standards of interaction with the tobacco industry to prevent conflicts of interest by CONICQ members
- $\checkmark\,$ Increased taxation and reduced affordability of tobacco products and their consumption.
- ✓ Passage of an additive ban in 2012. The measure was suspended by a lawsuit and awaits judgement in the Federal Supreme Court.
- ✓ Mobilization of civil society to ensure WHO FCTC implementation even before its ratification.
- $\checkmark\,$ As of 2014, Brazil is the largest country to implement smoke-free legislation.
- $\checkmark\,$ As of 2001, Brazil was the second country in the world to implement pictorial health warnings.

- ✓ The WHO FCTC raised the issue of tobacco with the National Congress through seminars, hearings and bills.
- $\checkmark\,$ A progressive and comprehensive ban on tobacco advertising, promotion and sponsorship (TAPS).
- ✓ Strengthening of cessation strategies and programmes with cessation treatment in the Brazilian public health system as of 2013.
- ✓ Launched the Observatory of Tobacco Industry Strategies (2016) creating a new line of research focusing on knowledge and systematization of information about tobacco industry tactics.
- ✓ Maintained updated information about WHO FCTC implementation in Brazil through a website (the Observatory of National Tobacco Control Policy).
- $\checkmark\,$ Transformation of tobacco control into an issue of the state and not simply a matter of public health.