



DRC

17-21 AUGUST
2015

NEEDS ASSESSMENT MISSION



Introduction

The needs assessment mission for the implementation of the World Health Organization Framework Convention on Tobacco Control (WHO FCTC) was conducted August 17-21, 2015, by the Convention Secretariat jointly with the Ministry of Public Health of the Democratic Republic of the Congo. The international team, which came at the government's invitation, included representatives of the WHO Regional Office for Africa (AFRO) and the United Nations Development Programme (UNDP). The team met with the leaders of government agencies, NGOs and civil society who are involved in implementing the WHO FCTC at country level.

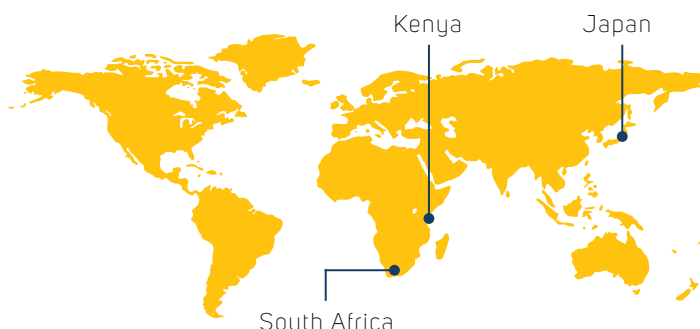
Tobacco control milestones in DRC



- 2002** Ministerial Order No. 4 establishes tobacco advertising criteria.
- 2005** The Democratic Republic of the Congo ratifies the WHO FCTC.
- 2006** The WHO FCTC enters into force in the Democratic Republic of the Congo.
- 2007** Ministerial Order No. 1250 regulates the use and consumption of tobacco products and derivatives.
- 2012** Ministerial Order No. 1250 adds tobacco labeling and inspection requirements.

Cigarette imports in DRC

This map shows the main countries that export tobacco to the DRC.



Key facts



Over
10,370
people are **killed** by
tobacco-caused
disease each year.



Over
324,000
children use
tobacco each day.



Over
3,078,000
adults use **tobacco**
each day.



15.3%
of **men** are daily
smokers.



1.3%
of **women** are daily
smokers.



11.5%
of **boys** are daily
smokers.



3.7%
of **girls** are daily
smokers.



Approximately
151 men
and
48 women
are **killed** every
week by **tobacco**.



3%
of **agricultural**
land is devoted to
tobacco growing.



3,820
metric tons of
tobacco leaf are
produced a year.



2,100,000,000
cigarettes are **produced** a year.

The total **tax rate** on
cigarettes is
39.4%



Main findings and recommendations

● The National Health Development Plan (NHDP), developed by the Ministry of Health of the Democratic Republic of the Congo, covers many major health issues, including HIV/AIDS, malaria, tuberculosis, maternal and child health, food and nutrition and education. However, the NHDP does not mention tobacco control or the WHO FCTC.

Recommendation: Clarify and strengthen the mechanisms to develop, implement and monitor a comprehensive multisectoral national tobacco plan.

● The Democratic Republic of the Congo has not yet established a focal point for tobacco, tobacco control unit or a national coordinating mechanism for tobacco control.

Recommendation: Create and strengthen coordinating mechanisms throughout the government in order to implement the WHO FCTC.

● The Democratic Republic of the Congo taxes cigarettes.

Recommendation: Increase cigarette taxes regularly at a rate above the general inflation rate to discourage consumption.

● There is some tobacco cultivation in the Democratic Republic of the Congo. No information is available about programs to promote economically viable and sustainable alternatives for tobacco workers.

Recommendation: Implement programs to encourage and support

The Democratic Republic of the Congo has few strong mechanisms in place to identify, prevent and address tobacco industry influence.

Recommendation: Improve mechanisms to prevent tobacco industry influence and enforce them rigorously.

a transition from tobacco cultivation to the sustainable cultivation of other crops.

● The current United Nations Development Assistance Framework (UNDAF) for the Democratic Republic of the Congo does not mention the need for tobacco control or implementation of the WHO FCTC.

Recommendation: Include WHO FCTC implementation during the midterm review.

● The Conference of the Parties has adopted eight guidelines to implement articles 5.3, 6, 8, 9-10, 11, 12, 13 and 14. These guidelines draw on the best available scientific evidence and the experience of the Parties. Additionally, economically sustainable alternatives to tobacco growing are suggested in relation to articles 17 and 18 of the WHO FCTC.

Recommendation: Follow these guidelines to fully implement the WHO FCTC.

● WHO, UNDP, UNICEF, UNFPA, UNAIDS and the World Bank are all committed to supporting the Democratic Republic of the Congo in its efforts to comply with the WHO FCTC.

Recommendation: Take advantage of the help these agencies can offer.

● The United Nations Development Assistance Framework (UNDAF) is a strategic program framework agreed between the Democratic Republic of the Congo and the UN system to outline priorities for national development. The current UNDAF (2014-2018) has included implementation of the WHO FCTC.

Recommendation: Include supporting implementation for the WHO FCTC in the current UNDAF.

SWOT analysis

Strengths: ministerial orders dealing with the use and consumption of tobacco products and tobacco advertising; the National Health Development plan; the National Medical and Health Fund.

Weaknesses: a high level of poverty; a fragile healthcare system; WHO FCTC implementation is not included in the UNDAF; insufficient monitoring, surveillance and evaluation systems; no funding for noncommunicable disease treatment, control, prevention, surveillance and evaluation; above-average incidence of adults and children consuming tobacco on a daily basis; no policy or action plan in place.

Opportunities: ability to add the WHO FCTC to the UNDAF; a department in the Ministry of Health is responsible for noncommunicable diseases.

Threats: tobacco industry interference; a growing illicit cigarette trade market; insufficient capacity for strengthened work in government departments outside of the healthcare area to implement the WHO FCTC; other health concerns rank higher in priority, making it more difficult to find sufficient funds.

Post needs assessment assistance available from the Convention Secretariat

● Supporting and facilitating a stakeholder workshop to consider the needs assessment report.

● Providing immediate support for any priorities identified by the Ministry of Health.

Outcomes



1) The needs assessment helped to raise awareness of the importance of multisectoral aspects of tobacco control and became a driving factor for the implementation of the WHO FCTC.

2) Since the mission, much progress has been made, such as the development of the Strategic Plan on Tobacco Control and the process of establishing national multisectoral coordinating mechanisms.

3) The recommendations were used by government representatives to engage with different stakeholders and request their support for the implementation of the Convention.