



# Ethiopia

19-22 OCTOBER  
2015

## NEEDS ASSESSMENT MISSION



**F C T C**  
WHO FRAMEWORK CONVENTION  
ON TOBACCO CONTROL  
SECRETARIAT

### Introduction

The needs assessment mission for the implementation of the World Health Organization Framework Convention on Tobacco Control (WHO FCTC) was conducted October 19-22, 2015, by the Convention Secretariat jointly with the Federal Ministry of Health of Ethiopia. The international team, which came at the government's invitation, included representatives of the WHO Regional Office for Africa (AFRO). The team met with the leaders of government agencies, NGOs and civil society who are involved in implementing the WHO FCTC at country level.

### Key facts



In 2005,

**9%**

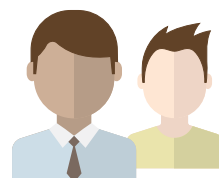
of students consumed some form of tobacco, with

**3%**

smoking **cigarettes** and

**8%**

using some other form of **tobacco**.



In 2013, over

**100,000**

**children** and

**2,326,000**

**adults** in Ethiopia used tobacco every day.

### Tobacco control milestones in Ethiopia



**2004** Ethiopia signs the WHO FCTC.

**2014** Ethiopia ratifies the WHO FCTC.

**2015** Tobacco Control Directive No. 28/2015 is passed, enforcing the WHO FCTC.

In 2006, the average age to **begin** smoking was



**21.9**  
years,

with those who smoke every day smoking an average of **7.7 cigarettes**.

In 2006,

**4.6%**

of adults **smoked** every day, with

**11%** of **men** smoking

**0.2%** of **women** smoking.



### SWOT analysis



**Strengths:** Ethiopia has one of the world's lowest smoking rates, with an average of only 62 cigarettes smoked a year per adult in 2012, according to a study by the World Lung Foundation.



**Weaknesses:** WHO FCTC implementation is not included in the UNDAF or other national strategies and there is limited research and surveillance related to tobacco consumption and exposure, making it difficult to analyze trends.



**Opportunities:** the WHO FCTC has recently been ratified and can be included in the UNDAF.



**Threats:** a belief that the tobacco control directive might promote illicit commercial activity instead of discouraging smokers, as well as a belief that tobacco control is perhaps not a priority because Ethiopian smoking rates are so low.

In 2000, Ethiopia produced

**1,931,000,000**

cigarettes.



In 2000, Ethiopia produced

**3,358**

metric tons of **tobacco leaf**.



In 2012, the lowest priced **cigarettes** in Ethiopia sold for the equivalent of

**USD 0.24**

for a pack of 20, with Marlboros selling for the equivalent of

**USD 1.69** for a pack of 20.



## Main findings and recommendations

- Ethiopia does not currently have a national tobacco control strategy.

**Recommendation:** Finalize and obtain endorsement of the National Tobacco Control Strategic Plan as soon as possible. Disseminate it at the federal and regional levels.

- Smoking prevalence is relatively low compared to other countries in the Africa Region.

**Recommendation:** Take this difference into consideration when developing strategies and interventions.

- There is a need to strengthen tobacco control coordination across sectors and between federal and regional levels.

**Recommendation:** Ensure that the implementation of the WHO FCTC is prioritized in the Joint Steering Committee for Drug Control agenda and make tobacco control a cross-sectoral issue.

- Ethiopia does not earmark any percentage of tax income to fund a national plan for tobacco control. Tobacco taxes in Ethiopia have not changed or increased in recent years.

**Recommendation:** Increase tax rates on a regular basis, taking into account inflation and income growth, and ban the sale of duty-free tobacco at local airports for incoming passengers.

The government must be aware of the negative impact on the implementation of the Convention that the entry of big multinational tobacco companies into the Ethiopian market would have.

**Recommendation:** Continue prioritizing public health and ensure that the development and implementation of public health policies for tobacco control are insulated from vested interests of the tobacco industry.

- Ethiopia has begun public information campaigns for tobacco control related to World No Tobacco Day, as well as various campaigns aimed at school-age children, though there are no long-term control campaigns in Ethiopia.

**Recommendation:** Strengthen public awareness of the current TC Directive and the consequences of tobacco consumption.

- The United Nations Development Assistance Framework (UNDAF) is a strategic program framework agreed to between Ethiopia and the UN system that outlines priorities for national development.

**Recommendation:** Ensure that supporting implementation of the Convention is included in the next UNDAF.

- In order to better protect human health, Parties are encouraged to implement measures beyond those required by the Convention and its protocols.

**Recommendation:** The Government, while working on meeting the obligations under the Convention, should also identify other areas in which measures going beyond the minimum requirements of the Convention can be implemented.

- Ethiopia has not yet provided information on bilateral or multilateral agreements relevant to the Convention and its Protocols.

**Recommendation:** The Ministry of Foreign Affairs and Foreign Trade should identify these agreements and report them as appropriate.

- The current Proclamation allows designated smoking rooms and areas in indoor public places.

**Recommendation:** Require 100% smoke free indoor public places.

- Sale of tobacco products by minors is not prohibited.

**Recommendation:** Include a provision in a new Proclamation that bans the sale of tobacco products by minors.

- Health warnings are not fully aligned with WHO FCTC guidelines.

**Recommendation:** Increase size of health warnings, include warnings in a common local language and pictorial health warnings.

- The implementation of a cessation program is in process.

**Recommendation:** Finalize cessation guidelines, make treatment available as soon as possible and integrate cessation into primary health care.

## Post needs assessment assistance available from the Convention Secretariat

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

- Conducting a media campaign to intensify public awareness of the WHO FCTC

- Providing immediate support for any priorities the Ministry of Health identifies.

## Outcomes



**1)** The needs assessment mission in Ethiopia contributed to raise awareness of the need to enforce tobacco control measures and to strengthen the role of the Ethiopian Food, Medicines and Health Care Administration and Control Authority.

**2)** The needs assessment recommendations helped to strengthen cooperation on tobacco control between different stakeholders.

**3)** UN Agencies are now aware of the importance of incorporating the implementation of the WHO FCTC in the next UNDAF.