



Before the FCTC, tobacco was not a key priority of the health department. ... Meetings and consultations at the global level reinforced the priority of our tobacco control agenda. This is a result of the FCTC and its negotiations held in Geneva.

Introduction

The impact assessment for the implementation of the WHO Framework Convention on Tobacco Control (WHO FCTC) was conducted in Pakistan from 2 to 5 May 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

1979, 2002

The Cigarettes (Printing of Warning) Ordinance 1979 and its amendment, the Prohibition of Smoking and Protection of Non-Smokers Health Ordinance, 2002

2004

Pakistan ratifies the Convention

2005

Introduction of Federal Excise Act and Federal Excise Rules

2007

A federal Tobacco Control Cell (TCC) is established to coordinate WHO FCTC implementation

2010

Implementation of the Prohibition of Sale of Cigarettes to Minors Rules

2015

The law prescribe 85% health warnings on the front and back of cigarette packages

Key facts



The illicit tobacco sector consists of
18%
 of the total domestic cigarette market



Total tax on cigarettes is close to
70%



7.2%
 of Pakistani young people smoke (ages 13 to 15)



12.4%
 of the Pakistani population smokes



9.2%
 of boys and
4.1%
 of girls aged 13 to 15, are tobacco smokers



22.2%
 of men and
2.1%
 of women are smokers



Federal Excise Duty on 20 cigarettes from the lower tier is
28,40 rupees
 (26 US cents) while on a higher tier pack it is
63,10 rupees
 (60 US cents)



The FCTC guidelines provided a solid foundation for our tobacco control measures. To this day we use the guidelines for the development of new legislation. The Prohibition of Sale of Cigarettes to Minors Rules is one example.

Key observations

- The WHO FCTC provided momentum for the development and implementation of tobacco control strategies and policies at the national level, including continued strengthening of existing measures. Specifically, in 2009 the list of smoke-free public places was expanded, and tobacco advertising restrictions were incrementally strengthened in 2006, 2009 and 2013. Prior to the WHO FCTC, pictorial health warnings had not even been considered. The Prohibition of Sale of Cigarettes to Minors Rules were promulgated in 2010 in line with the recommendations of Article 16 of WHO FCTC. Under the rules, a ban was imposed on the manufacture, sale, or offer for sale and import of packs containing fewer than 20 cigarette sticks. Further, the manufacture or offer to sell sweets, snacks, or toys in the form of cigarettes were prohibited.

- Following Article 5.2, Pakistan developed its first coordinating mechanism for tobacco control. Most notably, the Tobacco Control Cell (TCC) was established in 2007. This aims to enhance: tobacco control efforts (including provision of technical support, training, research and dissemination); engagement with the media, academia, and NGOs; and the drafting of legislation. While the TCC works at the federal level, it also coordinates with provincial governments to ensure that tobacco control activities are implemented and enforced at the subnational level.

- Civil society participation in tobacco control has been strengthened following the entry into force of the WHO FCTC. The Network for Consumer Protection and the Society for Alternative Media and

Research (SAMAR) have filed a petition challenging the decision of the inter-ministerial committee on health warnings in the Islamabad High Court. The group alleges that the inter-ministerial committee (IMC) compromised a decision to increase the size of health warnings on tobacco packaging to 85% following lobbying by the tobacco industry. The case continues in the court.

- Facilitated by the WHO FCTC, Pakistan was able to link tobacco control with strategies to prevent and control noncommunicable diseases (NCD). Plans to establish an NCD cell that may be integrated with the TCC are underway.

- While the price of cigarettes in Pakistan is still low compared with countries in a similar economic position, the WHO FCTC has guided the implementation of stronger price and taxation measures. Article 6 and

Article 5.3, which is related (since ministries of finance often serve as entry points for tobacco industry interference with tobacco policies), have served as buzzwords and key reference material. In 2015, the Federal Excise Duty was increased by 29.23 % and 19.25% on the lower and upper tier of cigarettes, respectively.

- Adoption of the Article 5.3 guidelines by the Conference of the Parties has heightened awareness of tobacco industry activities in Pakistan and has helped limit government interaction with it. For instance, the tobacco industry has lost its observer status at meetings. Additionally, measures for greater transparency of any government interactions with the tobacco industry have been put in place, mostly in the health ministry. A draft code of conduct for public officials to assist with the fulfilment of Article 5.3 is currently being developed.



Outcomes

- ✓ Reinforced tobacco control collaboration between sectors.
- ✓ Facilitated civil society's involvement in tobacco control and greater overall accountability of all stakeholders.
- ✓ Facilitated progressive escalation of health warnings on tobacco products and served as a supporting legal framework for phased increase of warning size.
- ✓ Facilitated a progressive ban on tobacco advertising, promotion and sponsorship and expansion of smoke-free public places.

- ✓ Served as a turning point in addressing illicit trade of tobacco products.
- ✓ Provided impetus for greater tobacco control capacity and mass media campaigns for educational purposes.
- ✓ Served as a basis for Pakistan's first-ever tobacco industry liability regulation and as a supporting legal framework in court case challenges.