





The FCTC guidelines provided a very good directional guide. It served as an instrument to enable us to push for comprehensive tobacco control measures.

Introduction

The impact assessment for the implementation of the WHO Framework Convention on Tobacco Control (WHO FCTC) was conducted in the Philippines from 12 to 15 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

Philippines ratifies the WHO FCTC and the WHO FCTC enters into force

2010

Elaboration of a Joint Memorandum Circular on the "Protection of the bureaucracy against tobacco industry interference"

2013

Sin Tax Law adopted

2014

Graphic Health Warnings Law (GHW) adopted

2016

Enactment of the Graphic Health Warnings Law (GHW) Implementing Rules and Regulations (IRR)

Key facts

From 2017, a tax of 59 US cents (30 pesos) was imposed per pack. This tax will increase by

4%

every year thereafter





Individual cigarettes are available and highly affordable. One stick of Marlboro costs

6 US cents

(3 pesos)



As of 2014,

50%

of the principal display areas of tobacco packaging must be covered by graphic health warnings



of the Filipino population smokes, **47.7%** of men and **9.0%** of women



20.5% of boys and

9.1%

of girls aged 13 to 15 are tobacco smokers



The FCTC is the best model for any local government wanting to enact a no smoking ordinance. It is comprehensive and has practical provisions that can be implemented without breaching any statutes, much more the Constitution.

Key observations

- The Philippines has made significant advances using the WHO FCTC as a basis and legal instrument to adopt comprehensive tobacco control measures at both national and local levels. It has served as a guide for the implementation of tobacco control activities in the country by providing a larger vision, defining desired outcomes, setting out priorities and monitoring progress. Collaboration between the government sectors has been established. For instance, the National Tobacco Prevention and Control Program (NTPCP) has been tasked to use the WHO FCTC as a guiding tool to reduce the burden of disease and death caused by tobacco. The adoption of the Sin Tax Law in 2013 as a health (and not tax) bill has also contributed to providing universal health coverage, ensuring that nearly all the poorest of the population is covered.
- By following the provisions of Article
 4.7 of the Convention, civil society in the
 Philippines have rallied together to accelerate tobacco control progress and ensure
 adherence to the Convention. NGOs have
 developed strong relationships with the
 Department of Health (DOH), are habitually providing technical advice and spearheading tobacco control initiatives.
- The WHO FCTC provided momentum for attitudinal change towards tobacco industry interference in the implementation of tobacco control measures by raising

- awareness of its tactics. The Philippines is a tobacco-growing country and the industry is represented at the Inter-Agency Committee on Tobacco (IACT), which is responsible for protecting public health and interests. However, there are calls to amend the legislation to align it with WHO FCTC requirements and remove the industry from the IACT.
- The WHO FCTC has provided the Philippines with a legal base to push for tax measures for health. Prior to the implementation of the Convention, the rationale for price and tax increase did not exist. This has resulted in tax rises for tobacco products including various excise taxes depending on the retail price, and incremental increases between 2014 and 2016.
- The Philippines has made significant strides in implementing measures for protection from tobacco smoke exposure by using WHO FCTC Article 8 as a key reference in developing local ordinances, administrative orders and memorandums. For example, a 100% smoke-free policy has been established in all government facilities.
- The WHO FCTC contributed to the introduction of strong health warnings and the adoption of graphic health warnings. The Graphic Health Warnings Law (GHW) of 2014 requires graphic health warnings to cover 50% of each of the principal display areas of the packaging.

 Another tobacco control accomplishment is the comprehensive tobacco advertising, promotion and sponsorship (TAPS) ban based on WHO FCTC guidelines. All tobacco advertising outdoors, on television, cable television, radio, cinema and mass media were banned in 2007 and 2008. However, tobacco advertising and promotion at point-of-sale is still allowed.





Outcomes

- ✓ Rallied a strong civil society movement that plays an important role in advocating for comprehensive tobacco control measures.
- $\checkmark\,$ Protected government agencies and officials from tobacco industry interference.
- ✓ Increased revenues and budget for health, particularly for universal health care.
- ✓ Provided evidence-based guidelines and gave grounds, broader context and good governance principles to push for higher tax rates.
- \checkmark Successfully adopted graphic health warnings and facilitated implementation of strong health warnings.