



Sri Lanka

IMPACT ASSESSMENT



We have made significant progress since the ratification of the FCTC. This is especially evident in enacting laws and awareness raising programmes, as well as methodically introducing prohibitions and regulations. The FCTC has been a platform for accelerating tobacco control activities in Sri Lanka. Without its support, a lot of these things could have not happened in this time period.

Introduction


The impact assessment for the implementation of the WHO Framework Convention on Tobacco Control (WHO FCTC) was conducted in Sri Lanka from 7 to 10 March 2016. The WHO country office participated in the mission, which was led by members of the independent Impact Assessment Expert Group, established by the Conference of the Parties.

Key facts



Sri Lanka was the **first** country in South-East Asia and the fourth country in the world to ratify the WHO FCTC. It was also among the first 15 Parties to sign the WHO FCTC Protocol to Eliminate Illicit Trade in Tobacco Products

Smoking prevalence in Sri Lanka is relatively **low**:



5.5% of boys aged 13 to 15 are tobacco smokers

Key tobacco control milestones

2003

Sri Lanka ratifies the WHO FCTC

2005

WHO FCTC enters into force in Sri Lanka

2006

National Authority on Tobacco and Alcohol Act (NATA Act) passed

2012

Amendment made to the Tobacco Product Labelling and Packaging Regulations

2014

Amendment made to the NATA Act

2016

Sri Lanka becomes Party to the WHO FCTC Protocol to Eliminate Illicit Trade in Tobacco Products


Promulgation of Regulations to control the importation, distribution and sale of smokeless tobacco products



11.5% of the population are daily smokers




2.2% of girls aged 13 to 15 are tobacco smokers



90% of cigarettes are sold individually, with the cheapest stick sold for **4 US cents** (6 rupees) and the cheapest imported stick for **24-26 US cents** (37-40 rupees)



A pack of Gold Leaf cigarettes costs **US\$ 4.50** (700 rupees). Dunhill cigarettes cost **US\$ 4.80** (740 rupees)



80% of the front and back of tobacco packaging are covered by pictorial health warnings



With the FCTC we have experienced global momentum and we feel that we belong to a global community. We have become partners in a global agenda. That is why we are advancing.

Key observations

● The WHO FCTC has generated high-level political commitment. As a powerful legal instrument, it has helped drive national policy and provided a foundation for Sri Lanka's robust anti-tobacco agenda. It has also accelerated the drafting and adoption of the National Authority for Tobacco and Alcohol Control (NATA) Act No. 27, Sri Lanka's key tobacco control legislation. The establishment of the NATA in 2006 as the national coordinating mechanism is a testament to the WHO FCTC's role in facilitating multisectoral coordination and cooperation in tobacco control.

● The Sri Lankan Government, as required by the Convention, has taken steps to support tobacco farmers' transition to alternative crops. Momentum is now so great that tobacco growing in Sri Lanka is planned to be phased out by the year 2020.

● The WHO FCTC and its guidelines helped to facilitate and accelerate the legislative processes for tobacco control. Prior to the ratification of the Convention there was no comprehensive tobacco control legislation. The drafting of legislation to control tobacco and alcohol consumption commenced in 1999, was accelerated by the WHO FCTC, and was adopted in 2006. The WHO FCTC continues to guide the implementation and promotion of the Act.

● Sri Lanka has used WHO FCTC Articles 8 and 13 as a legal basis to implement

comprehensive smoke-free legislation, and to introduce measures to restrict tobacco advertising and promotion. Since the latter does not ban tobacco industry sponsorship and corporate social responsibility activities, NATA is planning to amend the NATA Act to eliminate those forms of tobacco promotion.

● The WHO FCTC has also played an important role in building and driving local grassroots movements. One example is the establishment of tobacco-free villages and towns where no cigarettes are sold.

● While cigarette prices are relatively high in Sri Lanka, they are still relatively affordable. This provides room for further increases in tax rates and the simplification of the tax structure. Before the adoption of the WHO FCTC, the government considered a tax on tobacco products as a revenue source. After the adoption of the WHO FCTC, tax is perceived as an instrument for public health more than as a source of government revenue. Stringent taxation policies are seen as effective strategy to reduce the prevalence of tobacco use.

● To comply with Article 14 of the Convention, Sri Lanka established tobacco cessation measures appropriate to the cultural context and national circumstances and priorities. Some examples include a toll-free quitline (established in 2010), availability of prescription quit medications (not free) and cessation counselling.

● The WHO FCTC also provided impetus for integrating its implementation within broader health and development plans, including noncommunicable disease (NCD) prevention and control programmes. The Sri Lanka Second Health Sector Development Project 2013–2018 sets out strategies to strengthen the health system and build capacity for tobacco control. This includes the provision of support for regulatory and service-delivery measures.



Outcomes

✓ Communities empowered and politicians mobilized for tobacco control, providing momentum to existing initiatives.

✓ Triggered discussions on the establishment of a national coordinating mechanism on tobacco control, resulting in the establishment of the National Authority for Tobacco and Alcohol Control (NATA).

✓ Contributed to the denormalization of tobacco and led to shifts in political and social attitudes due to increased advocacy

work and implementation of the NATA Act. This has led to progress in the establishment of smoke-free environments, packaging and labelling restrictions, awareness programmes and the banning of tobacco advertising, promotion and sponsorship.

✓ Continues to guide amendments to the NATA Act and other related legislation to further strengthen tobacco control.

✓ Provided the momentum to strengthen measures to prevent illicit trade.