

**Needs assessment  
for implementation of the  
WHO Framework Convention on  
Tobacco Control in  
the Republic of Sierra Leone**

**Convention Secretariat**

**September 2013**

## **Executive summary**

The World Health Organization Framework Convention on Tobacco Control (WHO FCTC), the first international health treaty negotiated under the auspices of WHO, was adopted by the World Health Assembly in May 2003. It has since become one of the most widely and rapidly embraced treaties in the history of the United Nations, with 176 Parties to date. The Republic of Sierra Leone (hereinafter “Sierra Leone”) ratified the WHO FCTC on 22 May 2009 as the 165th country to do so. The Convention entered into force for Sierra Leone on 20 August 2009.

A needs assessment exercise for implementation of the WHO FCTC was conducted jointly by the Government of Sierra Leone and the Convention Secretariat from January to May 2013, including the initial analysis of the status, challenges and potential needs deriving from the country’s 2012 implementation report and other sources of information. This initial review of the available information was followed by a mission of an international team from the Convention Secretariat, the World Bank, the WHO Regional Office for Africa, and the WHO Office in Sierra Leone from 6 to 10 May 2013. The assessment involved relevant ministries and agencies of Sierra Leone (see Annex 1). This needs assessment report presents an article-by-article analysis of the country’s progress in implementation; the gaps that may exist and the subsequent possible action that can be taken to fill those gaps.

The key elements that need to be put in place to enable Sierra Leone to fully and comprehensively meet its obligations under the Convention are summarized below. Further details are contained in the report itself.

**First**, the WHO FCTC is an international treaty and therefore international law. Having ratified this treaty, Sierra Leone is obliged to implement its provisions through national laws, regulations or other measures. There is therefore a need to analyse and reflect on the recommendations of this report, identify obligations which have not yet been met in the substantive articles of the Convention, link them with the relevant ministries and agencies, obtain the required resources, and seek support internationally where appropriate.

**Second**, Parties are required to develop, implement, periodically update and review comprehensive multisectoral national tobacco control strategies, plans and programmes in accordance with the Convention. Sierra Leone has prepared a National Tobacco Control Strategic Plan that is initially expected to cover the period 2012–2016, but the Plan is still to be launched. This is expected to be done in the near future, thus ensuring that Sierra Leone complies with the requirements of Article 5.1 of the Convention. The Plan has been designed to serve as a roadmap for the implementation of the Convention in Sierra Leone, by introducing interventions with the aim of reducing both the supply and demand of tobacco products in Sierra Leone. This strategic document is also in line with the Noncommunicable Diseases Strategic Plan (2011–2016).

**Third,** Sierra Leone has not yet adopted and implemented comprehensive tobacco control legislation. However, deriving from the National Tobacco Control Strategic Plan and in line with Article 5.2(b) of the Convention, the Ministry of Health and Sanitation, in collaboration with the WHO Country Office and other stakeholders, is in the process of drafting the first ever tobacco control act for Sierra Leone. The draft legislation was reviewed by the members of the mission, and amendments were proposed to ensure that it fully reflects the requirements of the Convention and the recommendations of this needs assessment report. It is recommended that the legislative process be completed as soon as possible; the Ministry of Health and Sanitation should intensify its efforts to raise awareness among and mobilize stakeholders, especially other relevant ministries and departments, to obtain support for the draft.

**Fourth,** a national focal point for tobacco control already exists within the Health Education Division of the Ministry of Health and Sanitation. The Division is responsible for coordinating tobacco control activities at national level. It collaborates with a wide range of partners, including the WHO Country Office, the Ministry of Education, Science and Technology, the Ministry of Information and Communication and the Ministry of Youth, as well as other organizations, including nongovernmental organizations (NGOs), faith-based organizations and the United Nations Children's Fund. However, no specific budget line for tobacco control exists in the budget of either the Health Education Division or other Governmental agencies, but some financial resources for tobacco control programmes originate from either WHO or national and international NGOs. Without secure and sustainable funding the Division is unable to fully achieve its objectives. It is therefore recommended that Sierra Leone provide adequate support to the national tobacco control focal point.

**Fifth,** there is no multisectoral coordinating mechanism for tobacco control in Sierra Leone. This requirement of Article 5.2(a) of the Convention needs to be addressed without delay to ensure that all relevant ministries and agencies contribute to implementation of the Convention, with clear mandates and responsibilities. The establishment of such a multisectoral coordinating mechanism (e.g. a national committee for tobacco control) could be ensured through its inclusion in the draft tobacco control legislation currently under consideration; in the interim, until the tobacco control act is adopted, an executive decree of the Government or the Minister of Health and Sanitation could be used to establish and delineate the structure and functions of such a mechanism, outlining its mandate, terms of reference, composition and the resources available for its functioning.

**Sixth,** the Ministry of Finance and the Ministry of Health and Sanitation recognize that progressively increasing tobacco taxation is one of the most effective demand-reduction measures. However, tax rates on tobacco products in Sierra Leone are still very low, not least as a result of the abandonment, in 2007, of the previously applied excise tax regime on tobacco products. It is therefore imperative that Sierra Leone develop a new tax policy, requiring a specific excise component per pack. This specific component should be adjusted on a regular basis, preferably annually, taking into consideration the growth of

nominal income per capita to decrease the affordability of tobacco products and to contribute to health objectives.

**Seventh,** illicit trade in tobacco products originating from neighbouring countries is an area of concern for the tax and revenue authorities in Sierra Leone. It is therefore recommended that Sierra Leone cooperate bilaterally and regionally with neighbouring countries to investigate the supply of illicit tobacco products, to prosecute those undertaking illicit trade, and to introduce mechanisms for the protection of revenues as suggested by the Protocol to Eliminate Illicit Trade in Tobacco Products, adopted by the Conference of the Parties to the WHO FCTC at its fifth session in November 2012. Given the magnitude of the illicit tobacco trade in Sierra Leone as well as its public health impact, the country should urgently sign and ratify the Protocol.

**Eighth,** urgent attention is needed for the implementation of time-bound provisions of the Convention. Provisions concerning smoke-free environments (recommended deadline in the guidelines for implementation of Article 8 of the Convention to expire in August 2014), packaging and labelling of tobacco products (three-year timeline in Article 11 – expired in August 2012), and tobacco advertising, promotion and sponsorship (five-year timeline in Article 13 – to expire in August 2014), once mandated, will make a substantial contribution to the improvement of health and quality of life in Sierra Leone.

**Ninth,** Articles 9 and 10 of the Convention require Parties to regulate the contents and emissions of tobacco products, and require the testing, measuring and disclosure of the contents and emissions of those products. It is recommended that Sierra Leone introduce measures on the above areas through the draft tobacco control legislation under development, taking into account requirements of both the Convention and the related implementation guidelines. Once regulation is in place, the Standards Bureau of Sierra Leone should be scaled up to perform testing of tobacco products imported into the country. Importers should be required to regularly provide information on the ingredients used in their products. Furthermore, the new legislation should mandate that packages of tobacco products display combined textual and pictorial warnings, in line with the requirements of the Convention and the implementation guidelines, to ensure that such messages have the strongest possible impact on the whole population

**Tenth,** there are several Governmental agencies and NGOs already undertaking communication and public awareness programmes, while several others (such as the Ministry of Information and Communication; the Attitudinal and Behavioural Change Secretariat; and the Sierra Leone Broadcasting Corporation) have the know-how, capacity and communication channels to support implementation of broadly targeted outreach programmes, which should be utilized in the future for tobacco-related communication. It is recommended that resources be secured for broad and sustained mass media campaigns, especially in relation to the momentum gained by the process of elaborating the national tobacco control legislation. More synergy between the communication programmes implemented by various agencies is needed. It is also recommended that the Sierra Leone Broadcasting Corporation allocate free air time to tobacco control messages.

**Eleventh,** with respect to the involvement of the United Nations agencies in tobacco control efforts in Sierra Leone, the members of the mission learnt that the country does not currently have a United Nations Development Assistance Framework (UNDAF), but that one will be prepared for the years 2015–2019. The agency responsible for coordinating the Government’s input is the Ministry of Finance. It is recommended therefore that the Ministry of Health and Sanitation, in collaboration with the WHO Country Office, sensitize other Government departments, specifically the Ministry of Finance, as well as the United Nations Country Team, about the importance of integrating WHO FCTC implementation into the upcoming UNDAF, in the spirit of the resolution of the United Nations Economic and Social Council of July 2012 on “United Nations system-wide coherence on tobacco control”. Once implementation of the Convention is included in the UNDAF, the United Nations Country Team should include WHO FCTC implementation as a standing, regular agenda item in its meetings. Further, reference to the WHO FCTC can be made in the annex of the UNDAF document, which contains a list of the country’s international obligations under the treaties to which it is a Party.

**Twelfth,** the Conference of the Parties has adopted seven guidelines to assist Parties in implementation of Articles 5.3; 8; 9 and 10; 11; 12; 13; and 14 of the Convention.<sup>1</sup> The guidelines draw on the best available scientific evidence and the experiences of the Parties to the Convention. Sierra Leone is strongly encouraged to follow these guidelines in order to fully implement the Convention.

**In conclusion,** the needs identified in this report represent priority areas that require immediate attention. As Sierra Leone addresses these areas, the Convention Secretariat is available and committed to supporting the process of engaging potential partners and identifying internationally available resources for implementation of the Convention.

The full report, which follows this summary, can also be the basis for any proposal(s) that may be presented to relevant partners to support Sierra Leone in meeting its obligations under the Convention.

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<sup>1</sup> See <http://www.who.int/fctc/guidelines/>.

## Introduction

The WHO FCTC is the first international treaty negotiated under the auspices of WHO. Sierra Leone ratified the WHO FCTC on 22 May 2009. The Convention entered into force for Sierra Leone on 20 August 2009.

The Convention recognizes the need to generate global action so that all countries are able to implement its provisions effectively. Article 21 of the WHO FCTC requires Parties to regularly submit to the Conference of Parties (COP) reports on their implementation of the Convention, including any challenges they may face in this regard. Article 26 of the Convention recognizes the importance that financial resources play in achieving the objectives of the treaty. The COP further requested that detailed needs assessments be undertaken at country level, especially in developing countries and countries with economies in transition, to ensure that lower-resource Parties receive the necessary support to fully meet their obligations under the treaty.

At its first session (February 2006), the COP called upon developed country Parties to provide technical and financial support to developing country Parties and Parties with economies in transition (decision FCTC/COP1(13)).<sup>1</sup> The COP also called upon the developing country Parties and Parties with economies in transition to conduct needs assessments in light of their total obligations related to the implementation of all provisions of the Convention and to communicate their prioritized needs to development partners. The Convention Secretariat was further requested to assist Parties, upon request, with the conduct of needs assessments, to advise them on existing mechanisms of funding and technical assistance, and to provide information to development partners on the needs identified.

At its second session (July 2007), the COP requested the Convention Secretariat (in decision FCTC/COP2(10))<sup>2</sup> to actively seek extrabudgetary contributions specifically for the purpose of assisting Parties in need to carry out needs assessments and develop project and programme proposals for financial assistance from all available funding sources.

At its third, fourth and fifth sessions (held in November of 2008, 2010 and 2012), the COP adopted the workplans and budgets for the bienniums 2010–2011, 2012–2013 and 2014–2015, respectively. The workplans, inter alia, re-emphasized the importance of assisting developing country Parties and Parties with economies in transition, strengthening coordination with international organizations, and aligning tobacco control policies at country level to promote implementation of the Convention. Needs assessments, combined with the promotion of access to available resources, the promotion of treaty tools at country level, the transfer of expertise and technology,

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<sup>1</sup> See COP/1/2006/CD, *Decisions and ancillary documents*, available at: [http://apps.who.int/gb/fctc/E/E\\_cop1.htm](http://apps.who.int/gb/fctc/E/E_cop1.htm).

<sup>2</sup> See COP/2/2007/CD, *Decisions and ancillary documents*, available at: [http://apps.who.int/gb/fctc/E/E\\_cop2.htm](http://apps.who.int/gb/fctc/E/E_cop2.htm).

international cooperation and South-South cooperation were outlined as major components of this work.

The assessment of needs is necessary to identify the objectives to be accomplished under the WHO FCTC, resources available to a Party for implementation, and any gaps in that regard. Such assessment should therefore be comprehensive and based on all substantive articles of the WHO FCTC with a view to establishing a baseline of needs. The needs assessment is also expected to serve as a basis for assistance in programme and project development, particularly to lower-resource countries, as part of efforts to promote and accelerate access to relevant internationally available resources.

The needs assessments are carried out in three phases:

- (a) initial **analysis** of the status, challenges and potential needs deriving from the latest implementation report of the Party and other sources of information;
- (b) **visit** of an international team to the country for a joint review with government representatives of both the health and other relevant sectors; and
- (c) **follow-up** with country representatives to obtain further details and clarifications, review additional materials jointly identified, and develop and finalize the needs assessment report in cooperation with the government focal point(s).

With the above objectives and process in view, a joint assessment of the needs concerning implementation of the WHO FCTC was conducted by the Government of Sierra Leone and the Convention Secretariat, including a mission to Sierra Leone by an international team of experts from 6 to 10 May 2013. The detailed assessment involved relevant ministries and agencies of Sierra Leone. The following report is based on the findings of the joint needs assessment exercise described above.

This report contains a detailed overview of the status of implementation of substantive articles of the treaty. The report identifies gaps and areas where further action is needed to ensure full compliance with the requirements of the treaty, taking into account the guidance provided by implementation guidelines adopted by the COP where relevant. This is followed by specific recommendations concerning each particular area.

## **Status of implementation, gaps and recommendations**

This core section of the report follows the structure of the Convention. It outlines the requirements of each of the substantive articles of the Convention, reviews the stage of implementation of each article, outlines achievements and identifies the gaps between the requirements of the treaty and level of implementation by Sierra Leone. Finally, it provides recommendations on how the gaps identified could be addressed, with a view to supporting the country in meeting its obligations under the Convention.

### **Relationship between this Convention and other agreements and legal instruments (Article 2)**

Article 2.1 of the Convention, in order to better protect human health, encourages Parties *“to implement measures beyond those required by this Convention and its protocols, and nothing in these instruments shall prevent a Party from imposing stricter requirements that are consistent with their provisions and are in accordance with international law”*.

#### Status/gap

Currently, no measures have been implemented in Sierra Leone that go beyond those provided for by the Convention.

#### Key observations and recommendations

***It is recommended that the Government of Sierra Leone work primarily towards meeting its obligations under the Convention; in addition, as and when possible, it should also identify areas in which measures going beyond the requirements of the Convention can be implemented.***

Article 2.2 clarifies that the Convention does not affect *“the right of Parties to enter into bilateral or multilateral agreements ... on issues relevant or additional to the Convention and its protocols, provided that such agreements are compatible with their obligations under the Convention and its protocols. The Parties concerned shall communicate such agreements to the Conference of the Parties through the Secretariat”*.

#### Status/gap

No such information has been communicated so far by Sierra Leone to the Conference of the Parties (COP)..

Such action from the side of the Ministry of Health and Sanitation would also address the relative lack of awareness concerning this obligation, and may strengthen understanding of the role other relevant ministries, specifically the Ministry of Foreign Affairs, play in reporting on treaty-related matters.

#### Key observations and recommendations



***It is therefore recommended that*** the Ministry of Health and Sanitation liaise with other relevant Government departments, particularly the Ministry of Foreign Affairs, in order to identify any relevant agreements that ***Sierra Leone may have entered into that may fall under the scope of Article 2.2 of the Convention. Furthermore, if such agreements are identified, Sierra Leone is requested to communicate them to the COP via the Convention Secretariat either as part of their next WHO FCTC implementation report (due in early 2014) or independently.***

#### **Guiding principles (Article 4)**

The Preamble of the Convention emphasizes “*the special contribution of nongovernmental organizations and other members of civil society not affiliated with the tobacco industry, including health professional bodies, women’s, youth, environmental and consumer groups, and academic and health care institutions, to tobacco control efforts nationally and internationally and the vital importance of their participation in national and international tobacco control efforts*”.

Article 4.7 recognizes that “*the participation of civil society is essential in achieving the objective of the Convention and its protocols*”.

#### **Status**

There are a few nongovernmental organizations (NGOs) in Sierra Leone that both collaborate with the Ministry of Health and Sanitation and implement programmes that are partly or entirely tobacco-focused, namely: GOAL Sierra Leone,<sup>1</sup> Action for Development – Sierra Leone, the Health for All Coalition,<sup>2</sup> and FORUT Sierra Leone.<sup>3</sup> These organizations have played an important role in the work of the informal task force on Tobacco Control established by the Ministry of Health and Sanitation in collaboration with WHO following ratification of the WHO FCTC in 2008. The above-mentioned organizations contribute to keeping tobacco control high on the political agenda by funding and undertaking tobacco control activities in Sierra Leone, such as tobacco control advocacy workshops, awareness-raising and communication campaigns among Parliamentarians and at community level, and by providing input and technical assistance in the development of normative documents, such as the National Tobacco Control Strategic Plan and the draft tobacco control act, currently under finalization.

Faith-based organizations, such as the Inter-Religious Council of Sierra Leone, have also been involved in dissemination of information on the health hazards associated with tobacco use at the community level.

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<sup>1</sup> [http://www.goal.ie/Sierra\\_Leone/167](http://www.goal.ie/Sierra_Leone/167)

<sup>2</sup> <http://healthforallcoalition.org/>

<sup>3</sup> [http://www.forut.no/en/countries/sierra\\_leone/](http://www.forut.no/en/countries/sierra_leone/)

### Key observations and recommendations

*It is recommended that the Ministry of Health and Sanitation and other relevant departments continue to work with these civil society organizations, and also aim to identify others (e.g. medical and gender-specific), with which it can collaborate in order to promote its efforts to fully implement the WHO FCTC.*

### **General obligations (Article 5)**

Article 5.1 calls upon Parties to “develop, implement, periodically update and review comprehensive multisectoral national tobacco control strategies, plans and programmes in accordance with this Convention”.

### Status

#### *The National Tobacco Control Strategic Plan*

In September 2012, the Ministry of Health and Sanitation adopted the National Tobacco Control Strategic Plan 2012–2016. The Plan formulates objectives and contains comprehensive measures, actions and strategies that meet all requirements of the WHO FCTC. The main objectives and strategies are as follows:

To reduce demand for tobacco products:

- increase taxes and levies on tobacco products;
- protect people from exposure to tobacco smoke;
- disclose tobacco product ingredients;
- ensure that there are appropriate health warnings and pictorial messages on all packaging and labelling of tobacco products;
- enhance awareness of the dangers to health posed by tobacco and the benefits of not using tobacco;
- advocate for a total ban of all forms of advertising, promotion and sponsorship of tobacco products;
- establish tobacco dependence and cessation programmes;
- launch child and adolescent smoking prevention programmes.

To reduce the supply of tobacco products:

- curb illicit trade in tobacco products;
- ban the sale of duty-free tobacco products;
- ban the sale of tobacco products by and to minors;
- support alternative livelihoods for tobacco workers, growers and individual sellers.

To protect the environment against tobacco-related hazards:

- protect the environment from the hazards of tobacco cultivation and manufacturing;
- protect the health of people involved in tobacco cultivation, processing and manufacturing;
- protect people from exposure to environmental tobacco smoke – implement smoke-free environments.

To put in place a mechanism for technical coordination, cooperation and sharing of information on tobacco control:

- promote national research programmes;
- collaborate with stakeholders in tobacco control;
- develop and maintain a national tobacco control information system;
- establish a National Tobacco Control Unit and Coordination Committee.

To publicize and ensure enforcement of the National Tobacco Control Act:

- create public awareness of the Act;
- prepare and enforce regulations.

The Strategic Plan also envisages activities that ensure monitoring and evaluation of its implementation and describes the institutional framework necessary for its full implementation, including the roles and responsibilities of key stakeholders.

However, no funds have been dedicated so far for the implementation of the measures included in the Strategic Plan.

The Strategic Plan was re-launched (and revitalized) by the Deputy Minister of Health and Sanitation on World No Tobacco Day 2013 (31 May).

#### *Noncommunicable diseases Strategic Plan*

Sierra Leone also developed a national policy on noncommunicable diseases (2011–2016), adopted by the Ministry of Health and Sanitation in September 2012. This was followed by the adoption of the Noncommunicable Diseases Strategic Plan (2013–2017). Both documents were developed by a working group headed by the Directorate of Noncommunicable Diseases. They incorporate actions such as advocacy for the new tobacco control legislation, as an instrument to promote healthy lifestyles and to reduce the prevalence of noncommunicable diseases. Again, this policy will need to be fully funded to become instrumental and reach its scopes.

#### Gaps –

1. Implementation of the National Tobacco Control Strategic Plan 2012–2016 has not yet started due to lack of resources.

2. Government departments other than health are not fully aware that they need to contribute to the tobacco control Strategic Plan and implementation of the WHO FCTC.

Key observations and recommendations

***It is recommended that the implementation of the National Tobacco Control Strategic Plan commence without delay and that the necessary resources be secured for its implementation. Since the Strategic Plan requires activities that comprehensively cover the requirements of the WHO FCTC, its implementation will ensure that the country meets its obligations under the Convention.***

***It is also recommended that other Government departments be made aware of the need to contribute to implementation of the Strategic Plan.***

Article 5.2(a) calls on Parties to “establish or reinforce and finance a national coordinating mechanism or focal points for tobacco control”.

*National coordinating mechanism for tobacco control*

Status/gap

No such formal mechanism exists in Sierra Leone. However, a tobacco control task force was established by the Ministry of Health and Sanitation in relation to the work which led to the ratification of the WHO FCTC by Sierra Leone in 2009. The main partners of the line Ministry in the task force were the Ministry of Education, WHO and civil society organizations. After ratification, the task force continued to work irregularly, mostly in relation to the yearly celebrations of World No Tobacco Day and work on the draft tobacco control bill.

The development of the tobacco control act provides an opportunity for formalization of a national coordinating mechanism as required by the Convention. To achieve this, a normative document will be required, along with the involvement of a broader range of Government departments and other stakeholders.

Members of Government departments and other stakeholders whom the international team met during the mission indicated their commitment and willingness to contribute to the work of such a formal intersectoral coordinating mechanism. They included representatives of the Ministry of Agriculture, the Ministry of Youth, and the Sierra Leone Broadcasting Corporation. Such commitments were noted by the tobacco control focal point.

### *Focal point for tobacco control*

#### Status

A national focal point for tobacco control has been established within the Health Education Division of the Ministry of Health and Sanitation. This Division is responsible for coordinating tobacco control activities at national level. The Division currently employs eight professional staff, who work on prevention of both communicable and noncommunicable diseases.

Sierra Leone is divided into 12 districts, plus the capital city Freetown. Each district has a community health centre that carries out prevention and health promotion activities, as well as providing treatment. These centres also employ health education representatives at both district level and at the level of the three regional headquarters (Bo, Bombali, Kenema). Most of the health education representatives working at these levels have an environmental health background and some are trained in health promotion and nursing. With respect to public health, they implement policies developed and activities planned at national level.

The Division collaborates with faith-based organizations in implementing community-based programmes. Other partners of the Division include the Ministry of Education, the United Nations Children's Fund (UNICEF), WHO and the three leading local NGOs (the Health for All Coalition, FORUT and GOAL Sierra Leone).

However, there is no specific budget line for tobacco control programmes in the budget of the Health Education Division; the Government covers the salaries of those involved in tobacco control, but there is no programme funding. Therefore, while capacity for programme implementation exists in the Health Education Division, the current involvement of the Division in tobacco control efforts is limited to technical contributions, while the financial needs of the limited number of programmes are being provided either by WHO or by national and international NGOs.

#### Gaps

1. Sierra Leone has not yet established and financed a multisectoral national coordinating mechanism, consisting of stakeholders from all relevant ministries, as well as other appropriate stakeholders, and with a mandate that includes advising on and monitoring implementation of the Convention.
2. There is no programme funding for tobacco control to be used by the Health Education Division of the Ministry of Health Sanitation.

#### Key observations and recommendations

***It is therefore recommended that an intersectoral national coordinating mechanism for tobacco control be established as soon as possible. The establishment of such a mechanism (e.g. a national committee for tobacco control) could be addressed through***

*its inclusion in the draft tobacco control legislation currently under consideration; until the adoption of the tobacco control act, an executive decree of the Government could be used establish and delineate the structure and functions of such a mechanism, outlining its mandate, its terms of reference and composition, modus operandi and the resources available for its operation.<sup>1</sup> Such a measure is envisaged in the National Tobacco Control Strategic Plan.*

*With respect to the focal point for tobacco control, this function should be reinforced and financed. The Health Education Division of the Ministry of Health and Sanitation should receive a dedicated budget for tobacco control activities/programmes. In addition, it is recommended that the Government of Sierra Leone ensure that other relevant ministries also designate focal points for tobacco control and allocate staff time and budget to support implementation of the Convention.*

*Article 5.2(b) calls on Parties to “adopt and implement effective legislative, executive, administrative and/or other measures, and cooperate, as appropriate, with other Parties in developing appropriate policies, for preventing and reducing tobacco consumption, nicotine addiction and exposure to tobacco smoke”.*

#### Status

Sierra Leone currently has relevant legislation at draft stage, which includes operative paragraphs covering several articles of the Convention.<sup>2</sup> Repeated reviews of the draft by stakeholders as well as a lack of adequate and timely technical assistance for its further development have delayed completion of the draft and the legislation process. In addition, some requirements of the Convention are either not reflected in the draft (for example, Articles 5, 6, 10, and 17 of the Convention) or fall short of the requirements of the Convention or the implementation guidelines adopted by the COP (Articles 8, 11, 12, 13, 14, and 16 of the Convention). During the mission, the international team reviewed the draft legislation and proposed revisions/additions to ensure that it fully meets the requirements of the treaty and the recommendations of this needs assessment report. The comments of the team and the proposed amendments are presented in **Annex 3** of this report.

The international team had the opportunity to meet a member of the Health Committee of the Parliament as well as the Clerk of the Parliament. They were both optimistic and promised their support to the country's tobacco control efforts and the draft tobacco control act. The former Chair of the Health Committee agreed that strengthened efforts to

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<sup>1</sup> In 2012, such coordination mechanisms were reported in almost 100 Parties to the Convention. They usually include government departments and agencies, government-based institutions, medical societies, civil society organizations, academia and United Nations agencies. The Minister of Health could chair the committee and the secretarial functions could be performed by the Ministry of Health and Sanitation. The experience of other Parties to the Convention could be shared by the Convention Secretariat with Sierra Leone, as appropriate.

<sup>2</sup> These include articles 8, 9, 11, 12, 13, 14, 15 and 16 of the Convention.

advocate for the legislation are still needed, and that the tobacco control focal point should aim to sensitize members of the Health Committee and other Parliamentarians.

It has also been suggested that proper background information, including research findings, should be collected and made available to the Parliamentarians by the Ministry of Health and Sanitation. Bills are presented to the House at “pre-legislative meetings”, where the sponsor (in this case the Ministry of Health and Sanitation) presents the bill and the arguments for its adoption, and invites, as appropriate, consultants and other relevant stakeholders to speak on the scope of and need for the bill.

### Gaps

1. There is still no national tobacco control legislation, in spite of the preparatory work that has been undertaken since ratification of the Convention by Sierra Leone.
2. The draft presented to the members of the mission falls short of the requirements of the Convention and should be amended to ensure full compliance with its provisions.

### Key observations and recommendations

***It is therefore recommended that elaboration of the draft legislation be completed as soon as possible once the recommendations of the international team have been incorporated to ensure its full alignment with the provisions of the Convention (see Annex 3 of this report).***

***To ensure a smooth process of approval by the Cabinet of the draft, the Ministry of Health and Sanitation should also boost its awareness-raising on tobacco control and mobilization of other ministries. It is further recommended that, in their efforts to promote the bill within the Parliament, the Ministry of Health and Sanitation should sensitize the members of the Health Committee of the Parliament or all Parliamentarians, as appropriate.***

In support of Sierra Leone’s adoption of its draft tobacco control legislation, upon request of the Ministry of Health and Sanitation, the Convention Secretariat is committed to providing Sierra Leone with any assistance in promoting the bill in the Parliament. This may involve further reviews of the draft legislation, provision of Convention-related publications to Parliamentarians and participation in the “pre-legislative meetings”.

Article 5.3 stipulates that in setting “public health policies with respect to tobacco control, Parties shall act to protect these policies from commercial and other vested interests of the tobacco industry”.

The guidelines for implementation of Article 5.3 recommend that “all branches of government... should not endorse, support, form partnerships with or participate in activities of the tobacco industry described as socially responsible”.

### Status

No tobacco manufacturing facilities currently operate in Sierra Leone. There are importers of tobacco products, which operate in a largely unregulated tobacco market.

While no representatives of the tobacco sector are involved in the development of public health policies with respect to tobacco control, their influence is expected to become noticeable once the draft legislation is opened for public consultation before its adoption by the Cabinet.

### Gaps

1. There are no formal requirements for Government officials in line with the content and spirit of Article 5.3 of the Convention and the guidelines for its implementation.
2. There are no measures in place reflecting any of the recommendations of the guidelines for implementation of Article 5.3.

### Key observations and recommendations

***It is therefore recommended that the Ministry of Health and Sanitation, along with other key stakeholders involved in information exchange, raise awareness among Government officials as well as other persons, bodies or entities that contribute the formulation, implementation, administration and enforcement of tobacco control policies, on the requirements of Article 5.3 of the Convention and the related implementation guidelines. It should also promote effective measures to prevent tobacco industry interference through, inter alia, elaboration of a code of conduct for public officials, prescribing the standards with which they should comply in their dealings with the tobacco industry, as well as other measures as recommended by the guidelines for implementation of Article 5.3.***

Article 5.4 calls on Parties to “cooperate in the formulation of measures, procedures and guidelines for the implementation of the Convention and the protocols to which they are Parties”.

### Status/gaps

Sierra Leone has participated in sessions of the COP and the Intergovernmental Negotiating Body (INB) on a Protocol on Illicit Trade in Tobacco Products.

Furthermore, Sierra Leone has not participated so far in any working groups established by the COP, either as key facilitator or member. Therefore, it has not fully met the obligation under Article 5.4; Sierra Leone is encouraged to further cooperate and participate in intergovernmental processes in this regard in order to meet the obligations under this Article.



### Key observations and recommendations

***It is recommended that if any new working groups are established at the sixth session of the COP, Sierra Leone may wish to indicate an interest, if appropriate, in participating. Sierra Leone may also wish to provide its comments to any documents elaborated by the currently active working groups prior to their finalization and presentation to the COP, once requested to do so by the Convention Secretariat.***

Article 5.5 calls on Parties to “cooperate, as appropriate, with competent international and regional intergovernmental organizations and other bodies to achieve the objectives of the Convention and the protocols to which they are Parties”.

### Status

There are a number of examples of cooperation between Sierra Leone and local civil society organizations, which are being funded by the Governments of Ireland and Norway (through their international development programmes). The WHO Country Office and the WHO Regional Office for Africa are among the main partners of the Government in its tobacco control efforts. The African Tobacco Control Alliance has also provided funds to civil society organizations for awareness-raising and advocacy campaigns.

With respect to the involvement of the United Nations agencies in tobacco control efforts in Sierra Leone, the members of the mission learnt that the country does not currently have a United Nations Development Assistance Framework (UNDAF), while United Nations coordination within the country is being provided by the United Nations Integrated Peacebuilding Mission in Sierra Leone (UNIPSIL) and not a United Nations Resident Coordinator.

The current United Nations Transition Joint Vision (2013–2014), the bilateral agreement between the United Nations system and the Government of Sierra Leone, is expected to be replaced in 2015 by a new UNDAF (for the years 2015–2019). The entity responsible for the development of the UNDAF from the Government’s side is the Ministry of Finance.

Further details on international cooperation are given under Article 22.

### Key observations and recommendations

***It is therefore recommended that Sierra Leone strengthen its efforts with competent international and regional intergovernmental organizations. As part of this effort, the United Nations Country Team should be made aware of the country’s obligations under the WHO FCTC, and the possible contribution of the members of the Country Team, in the spirit of Economic and Social Council (ECOSOC) resolution E/2012/L.18 of July 2012 on “United Nations system-wide coherence on tobacco control”. The WHO Country Office could champion this process, in coordination with the Ministry of Health and Sanitation and the Ministry of Finance.***

Article 5.6 calls on Parties to “*within means and resources at their disposal, cooperate to raise financial resources for effective implementation of the Convention through bilateral and multilateral funding mechanisms*”.

#### Status

Sierra Leone has partly complied with Article 5.6 as a result of its cooperation with WHO, from which it has received funding for various tobacco control activities, as well as its cooperation with local NGOs. However, due to the scarcity of local resources, additional resources need to be sought so that the treaty may be more effectively implemented in Sierra Leone.

#### Key observations and recommendations

***It is recommended that the Government of Sierra Leone provide sufficient resources for the implementation of the Convention, not least by seeking other sources of funding for tobacco control efforts. Such efforts may include allocations from the central budget for tobacco control activities, as well as integration of WHO FCTC implementation within the next UNDAF, set to begin in 2015, e.g. as a poverty reduction strategy which includes efforts to tackle harmful practices and limited life skills.***

#### **Price and tax measures (Article 6)**

In Article 6.1, the Parties recognize that “*price and tax measures are an effective and important means of reducing tobacco consumption by various segments of the population, in particular young persons*”.

Article 6.2(a) stipulates that each Party should take account of its national health objectives concerning tobacco control in implementing “*tax policies and, where appropriate, price policies, on tobacco products so as to contribute to the health objectives aimed at reducing tobacco consumption*”.

#### Status/gaps

Several types of taxes are applied to tobacco products in Sierra Leone.

Historically, such taxes were levied from the early 1980s. According to the Excise Act of 1982, excise taxes should be levied on cigarettes, tobacco leaves and other tobacco products, domestically produced or imported.

Since the mid-2000s, after the closure of the only tobacco manufacturing facility in the country, local tobacco consumption in Sierra Leone has been supplied by imports; cigarettes are the main tobacco products consumed in the country.

Excise tax rates of up to 35% were imposed on a tax base formed by the sum of the declared value of imports (cost, insurance and freight (CIF) value) per pack plus import duties on that pack. Although those excise rates are typical of countries with the same degree of development, the excise tax per pack in Sierra Leone was very low, because the declared CIF values of imported cigarettes are generally low and import tariffs applied were only 20% of the value declared by the importers.

Besides excise taxes and import tariffs, Sierra Leone levied the Economic Community of West African States (ECOWAS) supplementary duty of 0.5% to cigarettes imported from countries outside the ECOWAS; this supplementary duty was calculated over declared import values.

A sales tax (at a rate of 17.5%) is also applied; this is calculated using the tax base formed by the CIF value plus tariff and excise rates. Finally, other minor charges were also applied, such as an environment tax (2.7% of CIF import values) and customs processing fees (around US\$ 10 dollars per operation). Thus the legislation in place up to the middle of the last decade led to a situation of low excise rates and a low total tax incidence on retail sale prices because, as noted above, the bases used to calculate tax and tariff obligations are extremely low. More importantly, although statistical evidence is not available, it can be inferred that such legislation must have led to low consumer prices.

Financial and revenue administration authorities consulted during the mission considered that the rates imposed on imported tobacco products contributed to increasing inflows of smuggled cigarettes from neighbouring countries. This was the diagnosis of the tax authorities of the time, which promoted a strategy of reduction on the tax burden of tobacco products.

Concerning the current situation and as a result of the above considerations, the application of excise rates to imported tobacco products was suspended in 2007 and has not been reintroduced. The sales tax was reduced from 17.5% to 15% and import duties were reduced from 20% to 10% by the Financial Act of 2008. In 2009, a goods and services tax (GST) substituted the sales tax, applying similar rates.

In summary, recent developments concerning tobacco taxation resulted in the complete abandonment of any excise tax on tobacco products and reduced the overall total tax and tariff incidence on cigarette consumer prices. It can therefore be concluded that Sierra Leone is not compliant with the requirements of Article 6.2(a) of the Convention, in spite of the fact that increased tobacco taxation is one of the most effective demand side measure, which can bring down tobacco consumption, particularly among the poor and the youth.

The members of the mission had the opportunity to note the prices of imported tobacco products in supermarket and from a street vendor (two widely used points of sale). Although there are single rates for import duties and GST, the cigarette market in Sierra

Leone is under clear segmentation, with popular brands at very low prices (even in comparison with countries with comparable income levels), and premium brands priced at the same levels as in most low- and lower-middle-income countries. **Table 1** presents prices of selected cigarette brands, in local currency and US dollars, as checked at two points of sale by members of the mission.

**Table 1. Cigarette prices observed by members of the mission in a supermarket and from a street vendor.<sup>1</sup>**

Brand	Country of origin	Supermarket		Street vendor	
		Price in Sierra Leonean Leone	Price in US\$	Price in Sierra Leonean Leone	Price in US\$
Aspen	United Kingdom	3 000	0.7		
Benson and Hedges	United Kingdom	14 000	3.25		
Business Royals	United Kingdom	2 000	0.47		
Marlboro Gold	Senegal	20 000	4.65	10 000 <sup>2</sup>	2.31
Marlboro Red	Argentina	12 000	2.79		
L & M	Malaysia	12 000	2.79		
Oris	United Kingdom	2 000	0.47	5 000	1.16
Winston	United Kingdom	14 000	3.25		
Gold Seal				1 000	0.23
Ducal				3 000	0.7

As noted, there is a wide difference between lower-priced brand and higher-priced brand cigarettes (up to 900%), which are not justified by normal CIF declared prices (up to 300%) and the present taxation/tariff system of the country, which consists of single rates.

<sup>1</sup> In cases where no data could be reported, the boxes have been shaded.

<sup>2</sup> This product carried the statement "For sale in Sierra Leone only".

**Table 2** presents assumed CIF price per pack – normal international values – of lower-priced and premium brands, the tariff and tax amounts and total incidence at some of those retail sale prices observed at the supermarket. Also, in contraposition to low outcome of tax and tariff incidence, wholesale and retail distribution margins in Sierra Leone are presented.

It is clear from **Table 2** that total tax and tariff incidence per pack is very low – between 6% and 2%. At the same time, wholesale and retail distributors are obtaining high margins on retail sale prices per pack, between 70% and 90%, which are well above typical international practice (up to 15%). It is important to note that wholesale distributors and retailers do not seem to be concerned with the competition from smuggled cheap cigarettes, because they are charging high sales prices with high margins, despite the low tax burden currently in place in Sierra Leone.

According to interviews conducted by members of the mission with personnel of the financial and revenue administration, the strategy of reducing total tax and tariff incidence on cigarette consumer prices (by suspending application of an excise tax and reducing the rates of other taxes) has not accomplished its objective of eliminating or significantly reducing the availability of illicit tobacco products in the country.

**Table 2. Tax and tariff collection and incidence, retail sale prices<sup>1</sup> and distribution margins.**

	Lower-priced brands		Higher-priced brands		
<b>Assumed CIF value per pack (US\$)</b>	0.10	0.15	0.20	0.30	0.40
<b>Import duties per pack (US\$)</b>	0.01	0.15	0.02	0.03	0.04
<b>GST per pack (US\$)</b>	0.017	0.025	0.033	0.050	0.066
<b>ECOWAS and others fees per pack</b>	0.003	0.005	0.006	0.001	0.013
<b>Total tax and tariff collection per pack (US\$)</b>	0.030	0.045	0.059	0.089	0.119
<b>Amount for wholesale and retail distribution per pack (US\$)</b>	0.34	0.505	2.531	2.861	4.131
<b>Retail sale prices (US\$)</b>	0.47	0.70	2.79	3.25	4.65
<b>Tax and tariff incidence on retail sale prices per pack (%)</b>	6.4%	6.4%	2.1%	2.7%	2.6%
<b>Wholesale and distribution margin per pack (Amount for W&amp;R distribution over RSP) (%)</b>	72.3%	72.1%	90.7%	88.0%	88.8%

**Sources:** Normal CIF values were obtained from United Nations COMTRADE. Import and tax data were provided by tax authorities. Wholesale and retail distribution amount is equal to retail sale price minus CIF value and taxes.

<sup>1</sup> Retail prices used in this analysis are those observed by the international team at the local supermarket, as also recorded in **Table 1**.

### Gaps

1. In 2007, the country suspended the application of excise duties, and the total tax and tariff burden on tobacco products is low.
2. The strategy of tax reduction, which was expected to bring down illicit trade in tobacco products, has not fulfilled its aim.
3. There is evidence of the undervaluation of CIF, which results in loss of revenue.

### Key observations and recommendations

***The country should urgently review and reintroduce an excise tax on tobacco products in order to effectively increase consumer prices and subsequently reduce tobacco consumption. A specific excise per pack is preferred to overcome the undervaluation of CIF declared values and to prevent further loss of revenue by the Government. Once introduced, this specific component should be adjusted on a regular basis, preferably annually, to achieve better health outcomes.***

***As found in Sierra Leone and shown by international experience, the most effective strategy to combat the supply of non-duty-paid cigarettes is to create and enforce a revenue protection mechanism, strengthen monitoring and anti-fraud investigation, and implement law enforcement procedures, as required under Article 15 of the WHO FCTC and the Protocol to Eliminate Illicit Trade in Tobacco Products, adopted by the fifth session of the COP in November 2012.***

***The country is participating in negotiations on tariff and tax harmonization under the ECOWAS. These regional negotiations are positive steps towards effective tobacco taxation policies at national and regional levels, and towards addressing regionally relevant issues, including regional cooperation and capacity building in related areas, such as combating illicit trade in tobacco products.***

The Convention Secretariat is committed to assisting Sierra Leone's tax authorities, upon request, in developing a new excise tax policy aimed at reducing consumption and strengthening capacities in the relevant authorities for the implementation of such policy.

Article 6.2(b) requires Parties to prohibit or restrict, "*as appropriate, sales to and/or importations by international travellers of tax- and duty-free tobacco products*".

### Status/gap

Customs regulations allow duty-free imports of 200 cigarettes or around 0.2 kg of tobacco per passenger entering into the country (irrespective of age). However, there are no restrictions concerning the sale of duty-free products to international travellers.

Sierra Leone has therefore only partially met its obligations under Article 6.2(b) of the Convention.

Key observations and recommendations

***It is recommended that Sierra Leone prohibit or restrict sales of duty-free tobacco products to international travellers.***

Article 6.3 requires that Parties shall “provide rates of taxation for tobacco products ... in their periodic reports to the Conference of the Parties, in accordance with Article 21”.

Status/gap

Such information was not provided in the WHO FCTC implementation report submitted by Sierra Leone in June 2012.

Key observations and recommendations

***It is recommended that Ministry of Finance and Development together with other relevant agencies develop a system of obtaining information about quantities of imported cigarettes and tobacco products, revenues collected from them and retail sales prices in order to monitor trends on taxation and consumption of tobacco products.***

***Such information should be provided in a timely manner to Ministry of Health and Sanitation officials who coordinate the completion of the regular WHO FCTC implementation report. The next report is due in the period of 1 January to 15 April 2014.***

**Protection from exposure to tobacco smoke (Article 8)**

Article 8.2 requires Parties to “adopt and implement in areas of existing national jurisdiction as determined by national law and actively promote at other jurisdictional levels the adoption and implementation of effective legislative, executive, administrative and/or other measures, providing for protection from exposure to tobacco smoke in indoor workplaces, public transport, indoor public places and, as appropriate, other public places.”

The Article 8 guidelines emphasize that “there is no safe level of exposure to tobacco smoke” and call on each Party to “strive to provide universal protection within five years of the WHO Framework Convention’s entry into force for that Party”.

Status

The WHO STEPS survey conducted in Sierra Leone in 2009 revealed that more than two thirds of both men and women are exposed to environmental tobacco smoke in both in the home and in the workplace.

In addition, the 2008 Global Youth Tobacco Survey conducted in the Western Area of Sierra Leone indicated that 60% of boys and 53% of girls aged 13–15 years had been exposed to tobacco smoke in public places. Additionally, this survey showed that 46% of boys and 43% of girls were also exposed to tobacco smoke in the home.

These figures indicate that the measures taken to implement Article 8 of the Convention and the related implementation guidelines have not been sufficient to effectively prevent exposure to tobacco smoke of the majority of adults and young people.

Although there is no national legislation relating to the measures required under Article 8 of the Convention and its implementation guidelines, some administrative and executive orders have been adopted and implemented in a few settings.

The Minister responsible for health, advised by the Health Education Division of the Ministry, has banned smoking on its premises. The Ministry has also successfully implemented smoke-free zones in three tertiary hospitals (Children's Hospital, Connaught Hospital and Princess Christian Maternity Hospital), and through the involvement of respective student bodies, it has implemented smoke-free zones in two educational institutions: the Njala University and the Milton Margai College of Education and Technology.

The Attitudinal and Behavioural Change Secretariat of the Ministry of Information is working on creating smoke-free environments, particularly in the Yougi Building of the Government, which hosts several Government ministries. The international team was also informed during the mission that the code of conduct for employees of Statistics Sierra Leone forbids smoking within the premises of its offices.

Regarding children and young people, the Ministry of Education introduced a code of conduct for teachers stating that “no teacher can send a student to purchase cigarettes and teachers are not permitted to smoke on school grounds.”

As a result of these limited restrictions and various public awareness programmes, such as the celebration of World No Tobacco Day, it has recently been observed by the Ministry of Health that the public has become less tolerant of smoking, particularly in public places and in the public transport.

The five-year deadline recommended by the guidelines for implementation of Article 8 of the Convention, to provide for universal protection from exposure to tobacco smoke, will be reached by Sierra Leone in August 2014. Such protection has not yet been provided by Sierra Leone. However, the draft tobacco control legislation, which is currently being finalized, calls for a ban on smoking in public places.

### Gaps

1. There is a lack of legislation requiring a ban on smoking in public places (see Annex 3 of this report for the recommendations of the international team concerning



measures to ensure that the draft legislation is in full compliance with the provisions of the Convention and the guidelines for implementation of Article 8).

2. There is a lack of recent data on exposure to tobacco smoke.

#### Key observations and recommendations

*It is therefore recommended that Sierra Leone fully implement Article 8 of the Convention and the related implementation guidelines adopted by the COP and note that the guidelines require introduction of such a policy within five years of the entry into force of the Convention for Sierra Leone (20 August 2014). This can be achieved by adopting and implementing the new tobacco control legislation, which is currently being finalized and which awaits review by the Cabinet.*

*It is also recommended that Sierra Leone include indicators on exposure to tobacco smoke (at home, in the workplace, and on public transport) in national health and demographic surveys in order to obtain up to date national data that would also allow international comparisons on the population's exposure to tobacco smoke.*

#### **Regulation of the contents of tobacco products (Article 9)**

Article 9 requires Parties to “adopt and implement effective legislative, executive and administrative or other measures” for the testing and measuring of the contents and emissions of tobacco products.

#### Status

Sierra Leone does not have any policy in place regulating the contents and emissions of tobacco products.

The Sierra Leone Standards Bureau has the capacity to test tobacco products; however no legal requirement exists for the performance of such testing.

#### Gaps –

1. There is no relevant legislation and/or regulations in place pertaining to the contents and emissions of tobacco products, and there are no limits set by law for tar, nicotine, carbon monoxide or any other ingredients of tobacco products.
2. Once comprehensive tobacco control legislation is adopted and relevant regulations developed, the existing capacity in terms of testing facilities and the applicable standards for testing and measuring contents and emissions of tobacco products of the laboratory of the Standards Bureau should be scaled up.

### Key observations and recommendations

*It is therefore recommended that the contents and emissions of tobacco products be regulated by law, by means of the draft tobacco control legislation under development. It is strongly suggested that when developing such provisions in the draft legislation Sierra Leone take into account the recommendations of the partial guidelines on Articles 9 and 10 of the Convention. Additionally, if fires caused by discarded cigarettes are an area of concern in Sierra Leone, a regulation on Reduced Ignition Propensity cigarettes should be referred to in the draft national legislation.*

The Convention Secretariat can coordinate assistance provided to the Standards Bureau of Sierra Leone, upon request, in the development and application of testing methods and standards, .

### **Regulation of tobacco product disclosures (Article 10)**

*Article 10* requires each Party to “adopt and implement effective legislative, executive, administrative or other measures requiring manufacturers and importers of tobacco products to disclose to governmental authorities information about the contents and emissions of tobacco products. Each Party shall further adopt and implement effective measures for public disclosure of information about the toxic constituents of the tobacco products and the emissions that they may produce”.

### Status

Since tobacco manufacturing no longer takes place openly in Sierra Leone, most tobacco products purchased by consumers are imported. Such products contain, on their packages, some information on contents and emissions, if required by the legislation of the country of origin.

No policy has been put in place yet requiring the importers of tobacco products to disclose to Governmental authorities information about the contents and emissions of those products. Consequently, such information is not available to the public, with the exception of imported tobacco products containing such information due to the regulations in the countries from which they originate.

The partial guidelines for implementation of Articles 9 and 10 of the Convention contain recommendations concerning disclosure of the contents of tobacco products to Government authorities. These recommendations may be taken into account when developing legislative requirements in this area.

### Gap

There is no policy in place requiring importers of tobacco products to disclose information on the contents of tobacco products to Government authorities and the public.

### Key observations and recommendations

*It is recommended that the new tobacco control legislation provide for measures on content disclosure, thereby ensuring compliance with Article 10 of the Convention and the relevant recommendations of the guidelines on Articles 9 and 10. Such information should be made available to Government authorities as often as required by law, and also to the general public as a public education tool, so that members of the public are aware of the contents of tobacco products.*

*The list of information which importers may be required to provide is included in the guidelines on Articles 9 and 10.<sup>1</sup> Sierra Leone's National Tobacco Control Strategic Plan (2012–2016) requires the Ministry of Health and Sanitation and other stakeholders to establish standards under which each tobacco product manufacturer and importer shall disclose the common or descriptive name of each ingredient present in a tobacco brand product.*

### **Packaging and labelling of tobacco products (Article 11)**

Article 11 requires each Party “within a period of three years after entry into force of the Convention for the Party to adopt and implement... effective measures” on packaging and labelling of tobacco products.

#### Status

This is one of the articles of the Convention with a deadline (in this case of three years from entry into force for implementation of specific measures). For Sierra Leone the deadline was 20 August 2012.

The National Tobacco Control Strategy 2012–2016 requires that packages of cigarettes sold in Sierra Leone carry the warning “Smoking is dangerous to your health” on 10% of one of the main surface areas. The Strategy also foresees that commercialized cigarette packs will carry the statement “For Sale in Sierra Leone only”. However, these proposals have not yet been enforced. At a widely used point of sale, the international team observed that a few tobacco products offered for sale actually carry these warnings, but that most of the products checked only carried the warnings stipulated by the country of origin. In some cases, these included pictures (see **Table 1** for more details.)

When discussing the future actions that are needed to fully implement Article 11 of the Convention with the Attitudinal and Behaviour Change Secretariat of the Ministry of Information, the international team was advised that due to the high illiteracy rate in the country, any future warnings should be bilingual (English and Krio), culturally

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<sup>1</sup> See sections 3.1.1.2 and 3.1.2.2 of the “Partial guidelines for implementation Articles 9 and 10 of the Convention”. Available at: [http://apps.who.int/iris/bitstream/10665/80510/1/9789241505185\\_eng.pdf](http://apps.who.int/iris/bitstream/10665/80510/1/9789241505185_eng.pdf) (pages 38–41).

appropriate, and should contain pictures or pictograms. **Table 3** below provides the status of implementation of measures under Article 11.

**Table 3. Requirements of Article 11 of the Convention and the level of compliance with these requirements in Sierra Leone.**

<b>Paragraph in Art. 11</b>	<b>Content</b>	<b>Level of compliance</b>	<b>Comments and identified gaps</b>
1(a)	tobacco product packaging and labelling do not promote a tobacco product by any means that are false, misleading, deceptive or likely to create an erroneous impression about its characteristics, health effects, hazards or emissions, including any term, descriptor, trademark, figurative or any other sign that directly or indirectly creates the false impression that a particular tobacco product is less harmful than other tobacco products. These may include terms such as “low tar”, “light”, “ultra-light”, or “mild”.	NOT IMPLEMENTED YET	The draft tobacco control legislation contains such requirements.
1(b)	each unit packet and package of tobacco products and any outside packaging and labelling of such products also carry health warnings describing the harmful effects of tobacco use, and may include other appropriate messages.	NOT IMPLEMENTED YET	Tobacco products commercialized in Sierra Leone contain, on their packaging, the warnings required in the country of origin. In some cases, the warnings include pictures. <sup>1</sup>
1(b)(i)	[The warning] shall be approved by the competent national authority.	NOT IMPLEMENTED YET	There is a lack of legislation on this matter.
1(b)(ii)	[The warnings] shall be rotating.	NOT IMPLEMENTED YET	The draft tobacco control legislation contains such requirement.
1(b)(iii)	[The warning] shall be large, clear, visible and legible.	NOT IMPLEMENTED YET	There is a lack of legislation on this matter.
1(b)(iv)	[The warning] should be 50% or more of the principal display areas but shall be no less than 30% of the principal display areas.	NOT IMPLEMENTED YET	The draft tobacco control legislation contains such requirement.
1(b)(v)	[The warning] may be in the form of or include pictures or pictograms	NOT IMPLEMENTED YET	There is a lack of legislation on this matter.

<sup>1</sup> The international team observed that this was the case for products originating from Argentina and Malaysia.

2	Each unit packet and package of tobacco products and any outside packaging and labelling of such products shall, in addition to the warnings specified in paragraph 1(b) of this Article, contain information on relevant constituents and emissions of tobacco products as defined by national authorities.	NOT IMPLEMENTED YET	There is a lack of legislation on this matter.
3	Each Party shall require that the warnings and other textual information specified in paragraphs 1(b) and paragraph 2 of this Article will appear on each unit packet and package of tobacco products and any outside packaging and labelling of such products in its principal language or languages.	NOT IMPLEMENTED YET	On the imported products, the textual warnings are only included in English, whereas most of the population speaks Krio.

### Gaps

1. So far, only a textual health warning is required, and this warning takes up a relatively small proportion of one of the main surface areas.
2. Application of the textual warning is poorly enforced.
3. Sierra Leone does not comply with the majority of time-bound requirements of Article 11 of the Convention, which is mainly due to a lack of relevant legislation.

### Key observations and recommendations

***It is therefore recommended that Sierra Leone include in its draft tobacco legislation measures relating to Article 11 of the Convention and the guidelines for its implementation. It is further recommended that, once the legislation is adopted by the Parliament, the Ministry of Health and Sanitation take the lead in the development of relevant regulations, by taking into account experiences and applicable normative documents developed by other Parties in the area of health warnings (e.g. those of Burkina Faso, Mauritius, Seychelles, and Uruguay).***

In support of the Government's efforts to implement Article 11 and the guidelines for its implementation, the Convention Secretariat is committed to facilitating provision of expertise and technical support for the development of packaging and labelling regulations, upon request from the Government, as well as for the development of culturally relevant warning messages, including pictures or pictograms.

***If pictures are required to be included in the warnings, Sierra Leone may wish to utilize the database of pictorial warnings<sup>1</sup> maintained by the Convention Secretariat.***

<sup>1</sup> See <http://www.who.int/tobacco/healthwarningsdatabase/en/>.

*The Secretariat can also facilitate the obtaining of licences for the use of such warnings from other Parties at no cost.*

### **Education, communication, training and public awareness (Article 12)**

Article 12 requires that “each Party shall adopt and implement effective legislative, executive, administrative or other measures to promote” education, communication and public awareness about the health, economic and environmental consequences of tobacco consumption and exposure to tobacco smoke, the benefits of tobacco cessation and tobacco-free lifestyles as well as training to all concerned professionals and persons, and public access to information on the tobacco industry.

#### **Status**

According to the Ministry of Health and Sanitation, in Sierra Leone, the level of awareness regarding the harmful effects of tobacco use and the benefits of not using tobacco is inadequate, even among the members of the staff of the Ministry. Many tobacco users are not aware of the health hazards and addictive nature of tobacco, while non-tobacco users lack knowledge of the effects of exposure to tobacco smoke.

So far, the WHO Country Office has been the main partner of the Ministry of Health and Sanitation in communication programmes. Several Government departments and civil society organizations have also undertaken relevant work.

However, the overall scope of the previous communication and educational programmes has been limited, and a mass media campaign ensuring high frequency of messages maintained over a longer period of time has not yet been implemented due to lack of sufficient funds.

Programmes implemented so far include the following:

- The Ministry of Youth, in partnership with the Ministry of Health and Sanitation, worked to sensitize youth communities (mostly in the Eastern and Southern districts) within the framework of prevention of drug use.
- The Ministry of Education, Science and Technology informed the international team that messages about how to avoid starting to use tobacco (but not cessation) are included in the health education curriculum at both primary and secondary levels.
- GOAL Sierra Leone (an NGO working on health matters), in collaboration with the Health Education Division of the Ministry of Health and Sanitation, has developed posters and videos (for World No Tobacco Day 2012) on the health effects of tobacco use; in March 2012, GOAL trained health personnel in all

community health hospitals in Freetown on how to identify addiction to tobacco in patients and motivational interviewing was also covered.

- FORUT Sierra Leone (an NGO) conducts training among teachers and also trains pupils (as peer educators) on how to disseminate information concerning the hazards of tobacco use and alcohol among their peers; the organization also mobilized religious leaders for the dissemination of information on tobacco among their congregations.
- In June 2012 training geared towards enhancing journalists' capacities to report on tobacco control was conducted by the NGO Action for Development Sierra Leone (AFDL), in collaboration with the Framework Convention Alliance, the African Tobacco Control Alliance and the African Tobacco Regional Initiative. This training was successful as it resulted in the creation of the Media Alliance for Tobacco Control. In addition, the AFDL has also conducted awareness and advocacy programmes on tobacco among Parliamentarians, religious leaders, women and schoolchildren.

During the mission, opportunities and challenges concerning implementation of Article 12 of the Convention were discussed with the stakeholders.

There are **opportunities** for creating synergies in communication programmes. There are two boards in the Ministry of Information and Communication whose work focuses on education, communication and public awareness. *First*, the Attitudinal and Behavioural Change (ABC) Secretariat is mandated to provide targeted educational initiatives that encourage positive attitudes and behaviour in all relevant sectors, including health, social and education. However, the Secretariat has never used its knowledge, experience and network to promote tobacco-free lifestyles and cessation of tobacco use. *Second*, the Directorate of Information serves to raise awareness of and to interpret and disseminate Government policies via the media. The Directorate organizes weekly press meetings in order to update the public on educational activities and other Government initiatives. It also played key role in the commemoration of World No Tobacco Day by displaying anti-smoking posters in Government offices. Both the ABC Secretariat and the Directorate of Information expressed their commitment to working together with the Ministry of Health and Sanitation and the WHO Country Office in order to identify the most effective ways in which tobacco control messages could be promoted among the various population groups in Sierra Leone.

The Health for All Coalition reported that they used a mobile public announcement system to disseminate information during the recent cholera outbreak. The Coalition indicated that the system could also be used to reach communities with anti-tobacco messages.

**Challenges** include the limitations of the scope of previous communication campaigns. A mass media campaign in radio or television has not yet been developed, mainly because

of the high cost of implementing such programmes. During the meeting with the international team, the Deputy Director General of the Sierra Leone Broadcasting Corporation promised to assist the Ministry of Health and Sanitation in any way possible in broadcasting anti-tobacco spots, provided that the Ministry of Health and Sanitation is willing to provide them with the necessary technical expertise when needed.

Another challenge noted is how to reach out to people living in remote areas, the language and nature of messages and the media to be used. It has been noted that in rural areas, comedians can be used in order to portray tobacco control messages in a way that will be captivating to the public.

### Gaps

1. There are limited and non-sustained training, sensitization and awareness programmes related to tobacco, not least because of the resource-demanding nature of such interventions.
2. No communication strategy on tobacco-related matters has been developed so far in Sierra Leone.
3. Tobacco-related matters are not included in the formal training of health professionals at graduate and postgraduate levels.
4. The public does not have access to wide range of information on the tobacco industry, as required under Article 12(c) of the Convention.

### Key observations and recommendations

***It is recommended that the Ministry of Health and Sanitation develop, as part of the implementation of the National Tobacco Control Strategy, an action plan on education, communication, training and public awareness, and allocate resources to its implementation. Contributions from United Nations agencies active in the country could also be sought and utilized, by involving, inter alia, WHO and UNICEF.***

***It is recommended that the Ministry of Health and Sanitation improve knowledge of implementation of the WHO FCTC among its staff members. The Ministry should also strengthen its cooperation with other Government ministries and agencies which have the know-how, capacity and the established network to ensure effective community outreach, and use such capacities to undertake communication programmes. Collaboration with civil society organizations should also be continued and coordination among the programmes strengthened to ensure synergy and efficient utilization of resources.***

***It is also recommended that the Ministry of Health and Sanitation and WHO work together with the Ministry of Education, Science and Technology to ensure that health professionals obtain adequate training on tobacco control in their core curricula and continuing professional training. The Ministry of Health and Sanitation should establish a web page on tobacco control on its web site, containing information***



*required under Article 12 and the related implementation guidelines,<sup>1</sup> but also with reference to Article 20.4(a). The web page should also provide information on the tobacco industry as per Article 12(c) of the Convention and the guidelines for implementation of Article 5.3 (Recommendation 5.2).<sup>2</sup>*

*The Ministry of Health and Sanitation may wish to include in the draft tobacco control legislation the requirement that the Sierra Leone Broadcasting Corporation and other national print and electronic media, provide free air time for anti-tobacco advertising and messages. In the meantime, it is recommended that the Sierra Leone Broadcasting Corporation, on a voluntary basis, allocates free air time to promote tobacco control messages.*

In support of the Government's efforts to implement Article 12, particularly the development of a communication plan and campaign materials,<sup>3</sup> as well as in the development of a web page on the Ministry of Health and Sanitation's web site, the Convention Secretariat is committed to facilitating the provision of expertise and technical support upon request from the Government.

### **Tobacco advertising, promotion and sponsorship (Article 13)**

*Article 13.1 of the Convention notes that the Parties “recognize that a comprehensive ban on advertising, promoting and sponsorship would reduce the consumption of tobacco products”.*

*Article 13.2 of the Convention requires each Party to: “in accordance with its constitution or constitutional principles, undertake a comprehensive ban of all tobacco advertising, promotion and sponsorship. This shall include, subject to the legal environment and technical means available to that Party, a comprehensive ban on cross-border advertising, promotion and sponsorship originating from its territory. In this respect, within the period of five years after entry into force of this Convention for that Party, each Party shall undertake appropriate legislative, executive, administrative and/or other measures and report accordingly in conformity with Article 21”.*

*Article 13.4(b) of the Convention requires each Party to: “requires that health or other appropriate warnings or messages accompany all tobacco advertising and, as appropriate, promotion and sponsorship.”*

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<sup>1</sup> See <http://www.who.int/fctc/guidelines/Decision.pdf>

<sup>2</sup> See [http://www.who.int/fctc/guidelines/article\\_5\\_3.pdf](http://www.who.int/fctc/guidelines/article_5_3.pdf) (page 7)

<sup>3</sup> Please also see the “Resource list of materials and information sources to promote the implementation of the Article 12 of the WHO Framework Convention on Tobacco Control and its guidelines” developed in consultation with the Key Facilitators of the working group on Article 12, WHO Headquarters and WHO regional offices, as well as other partners. Available at: [http://www.who.int/fctc/guidelines/adopted/article\\_12res/en/index.html](http://www.who.int/fctc/guidelines/adopted/article_12res/en/index.html)

#### Status/gaps

This is one of the articles of the Convention that contains a deadline for implementation of specific measures. The five-year deadline from the date of entry into force of the Convention for Sierra Leone will be 20 August 2014.

There is no comprehensive ban on tobacco advertising, promotion and sponsorship yet in place in Sierra Leone, but the (former) Sierra Leone Broadcasting Service (now called the Sierra Leone Broadcasting Corporation), in collaboration with the Ministry of Information and Communication, implemented a regulation requiring that all forms of national tobacco advertisement include a message stating the dangers of tobacco use. However, such measures have not been fully enforced by the Government.

Article 13.4(d) of the Convention stipulates that each Party that does not have a comprehensive ban in place shall require *“the disclosure to relevant governmental authorities of expenditures by tobacco industry on advertising, promotion and sponsorship not yet prohibited. Those authorities may decide to make those figures available, subject to national law, to the public and to the Conference of the Parties, pursuant to Article 21.”*

#### Status/gap

There is no such policy in place in Sierra Leone.

Article 13.7 reaffirms Parties’ *“sovereign right to ban those forms of cross-border tobacco advertising, promotion and sponsorship entering their territory and to impose equal penalties as those applicable to domestic advertising, promotion and sponsorship originating from their territory in accordance with their national law”*.

#### Status/gap

Sierra Leone has not yet implemented any measures to ban cross-border tobacco advertising, promotion and sponsorship entering into or originating from its territory.

#### Key observations and recommendations

***It is therefore recommended that Sierra Leone include in the draft tobacco control act provisions introducing a comprehensive ban on advertising, promotion and sponsorship of tobacco products. The ban shall cover all forms of tobacco advertising, promotion and sponsorship within the terms of the Convention, as required by the guidelines for implementation of Article 13 of the Convention, including, but not limited to, point-of-sale tobacco displays, Internet tobacco sales, contributions from the tobacco industry and importers in the form of “socially responsible” activities, and a ban on cross-border tobacco advertising, promotion and sponsorship entering into and originating from its territory. Sierra Leone is strongly encouraged to include in its draft legislation effective, proportionate and dissuasive penalties.***

***Until a comprehensive ban is implemented, the Government, through the agencies responsible for enforcing the relevant decree of the Ministry of Information and Communication, shall ensure that all advertisers comply with this regulation.***

#### **Measures concerning tobacco dependence and cessation (Article 14)**

Article 14.1 requires each Party to “develop and disseminate appropriate, comprehensive and integrated guidelines [concerning tobacco dependence and cessation] based on scientific evidence and best practices... [and] take effective measures to promote cessation of tobacco use and adequate treatment for tobacco dependence”.

#### **Status/gaps**

Sierra Leone has not developed or implemented comprehensive guidelines on tobacco dependence and cessation, but this requirement is included in the National Tobacco Control Strategy 2012–2016. The guidelines for implementation of Article 14 recommend that a cessation strategy be incorporated in the Strategy.

#### **Key recommendations and observations**

***It is recommended that Sierra Leone develop a national cessation strategy within the framework of the National Tobacco Control Strategy and treatment guidelines targeting health professionals describing the interventions they should perform to assist tobacco users to quit. Possible partners in this process include the Medical and Dental Association, with the Ministry of Health and Sanitation acting as coordinator in the process.***

Article 14.2 stipulates that to achieve the end outlined in Article 14.1, each Party shall endeavour to implement effective tobacco cessation programmes aimed at “promoting the cessation of tobacco use”, “include diagnosis and treatment of tobacco dependence and counselling services on cessation of tobacco use in national health and education programmes”, “establish in health care facilities and rehabilitation centres programmes for diagnosing, counselling, preventing and treating tobacco dependence”, and ensure the accessibility and affordability of treatments for tobacco dependence.

#### **Status**

Sierra Leone has not implemented programmes concerning Articles 14.2(a) to (c) of the Convention.

In relation to Article 14.2(b), the members of the mission were informed that cessation services, including tobacco dependence treatment, are only offered in private institutions and are not easily affordable by the public.

Also in relation to providing accessible cessation services, it was suggested that cessation support could be integrated into the system of monitoring and treatment of noncommunicable diseases currently being piloted in the Western Area of the country. The members of the district health management teams, provide primary health care in the subnational jurisdictions, could be trained to record tobacco use status in medical and other relevant notes and, as appropriate, to provide brief advice and information on the availability of available medications to those who wish to quit.

The National Tobacco Control Strategy envisages programmes to be put in place to provide low-cost, effective interventions to treat dependent users. In addition, the draft tobacco control legislation requires the Minister responsible for health to ensure that every district has a place where persons addicted to tobacco who wish to quit can obtain advice and treatment. District social coordinators can also be mobilized by the Ministry of Health and Sanitation, through local Government authorities, to promote or perform such work.

In relation to the requirement under Article 14.2(b) of the Convention, the international team learnt that nicotine replacement therapy is available over the counter in pharmacies and supermarkets, while bupropion is available in some pharmacies.

#### Gaps

1. Sierra Leone has not yet taken effective measures to promote cessation of tobacco use and adequate treatment of tobacco dependence, including the development of a national cessation strategy or treatment guidelines.
2. Tobacco dependence treatment and cessation are not yet incorporated into the core curriculum and continuing professional training of medical, dental, nursing, pharmacy and other relevant undergraduate and postgraduate courses and in licensing and certifying examinations.
3. No health professionals have been formally trained and mobilized to provide cessation counselling and brief cessation.
4. There is no national quit line for tobacco cessation.
5. Cessation services, where available, and the pharmaceutical products for treatment of tobacco dependence are not freely available in the public health service, and their prices may limit their use.

#### Key observations and recommendations

***It is therefore recommended that Sierra Leone implement the measures required under Article 14 of the Convention and its guidelines, particularly by establishing national programmes and services on diagnosis and treatment of tobacco dependence, and counselling services on cessation of tobacco use. Integrating counselling and cessation programmes into existing initiatives should be a primary approach in establishing basic cessation infrastructure, especially for cost-efficiency purposes.***

*It is also recommended that sustainable sources of funding be established for cessation help.<sup>1</sup> Sierra Leone is strongly encouraged to establish a free reactive telephone quit line through which smokers can obtain advice on quitting and on the available services. The quit line number could be published on tobacco packages as part of one of the rotating warnings, thus requiring the tobacco industry to cover the cost of disseminating this information.*

*Any health-care workers dealing with patients of any kind should be trained to record tobacco use, give brief advice and encourage quit attempts. To that end, it is further recommended that tobacco dependence treatment be incorporated in medical and other health professionals' curricula.*

In support of the Government's efforts to further promote tobacco dependence treatment and cessation of tobacco use, the Convention Secretariat is committed to coordinating provision of technical support in this area upon request by the Government.

### **Illicit trade in tobacco products (Article 15)**

In Article 15 of the Convention the Parties recognize “*that the elimination of all forms of illicit trade in tobacco products, including smuggling, illicit manufacturing and counterfeiting, and the development and implementation of related national law, in addition to subregional, regional and global agreements, are essential components of tobacco control*”.

The Protocol to Eliminate Illicit Trade in Tobacco Products adopted at the fifth session of the COP is a new legal instrument developed by the Parties to the Convention to reduce the supply of illicit tobacco products.<sup>2</sup> The first step towards ratification by Sierra Leone could be the organization of a national meeting with relevant stakeholders to analyse the content of the Protocol.

### **Status**

According to the authorities met during the mission, illicit trade in tobacco products is a widespread phenomenon in Sierra Leone. No proper quantitative assessment of the size of the illicit market as a proportion of the total cigarette market has been performed yet in Sierra Leone, and it is not clear from which countries the illicit products originate.

Former tax authorities have tried to tackle the issue by reducing the total tax incidence on legally imported cigarettes, by completely abandoning excise taxes on tobacco products and by reducing the rates of import tariffs and GST. The aim of this move was to reduce the total tax burden on tobacco products in Sierra Leone vis-à-vis other countries.

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<sup>1</sup> Proposed solutions can be found in the guidelines for implementation of Article 14 of the Convention. <http://www.who.int/fctc/Guidelines.pdf> (paragraphs 39-40).

<sup>2</sup> The Protocol has been open for signature by all Parties to the Convention since 10 January 2013, and Parties may sign it at the United Nations Headquarters in New York until 9 January 2014.

However, these measures did not prevent the entry of illicit tobacco products. The approach of the current Government has switched from the emphasis on tax burden differentials to addressing other possible factors underpinning illicit activities, such as the lack of proper controls and surveillance at borders and within the tobacco market, and the existence of a duty-free mechanism for intra-ECOWAS trade.

In the absence of local information on illicit trade in tobacco products, an assessment has been made using data available from international trade databases and other sources to – indirectly – provide some evidence for some illegal activities in Sierra Leone (and some neighbouring countries). This analysis will be provided in a separate document to the Ministry of Health and Sanitation and finance/customs authorities in Sierra Leone.<sup>1</sup>

An overview of the measures against illicit trade in tobacco products, with identified needs, is given in **Table 4** below.

**Table 4. Overview of measures taken against illicit trade in tobacco products in Sierra Leone.**

Paragraph in Art. 15	Content	Level of compliance	Comments and identified gaps
2	Each Party shall adopt and implement effective legislative, executive, administrative or other measures to ensure that all unit packets and packages of tobacco products and any outside packaging of such products are marked to assist Parties in determining the origin of tobacco products.	OBLIGATION NOT MET	Several years ago, there was an idea to develop a tax stamp system, but the project was not followed up. Finance and revenue authorities showed interest in the possibility of such a project in this direction.
2(a) and 3	- require that unit packets and packages of tobacco products for	OBLIGATION MET, BUT	According to finance authorities there is a relevant

<sup>1</sup> The main conclusions of the analysis are as follows:

– *First*, when cross-checking the figures for tobacco exports to Sierra Leone (from United Nations COMTRADE: <http://comtrade.un.org/>) and per capita cigarette consumption estimated by using data on legal cigarette imports (525 sticks per adult aged 15+ per year), it is evident that registered exports to Sierra Leone significantly outweigh the absorption capacity of the smoking population of the country, and thus is not motivated by domestic demand. Therefore, cigarette inflow deserves careful consideration by the Sierra Leonean authorities; it could be hypothesized that some cigarette exporters may use the country (and its neighbours) as ports of transit to unknown destinations, and possibly with partial leakages into the local and international illicit market.

– *Second*, when comparing two per capita cigarette consumption estimates in Sierra Leone (the first using import data as described above; and the second using the estimates of ERC Research Statistics International, an international market research company which uses tobacco industry reports and market surveys to prepare its estimates), the figures received are hardly comparable (525 sticks per adult aged 15+ per year versus 177 sticks per adult aged 15+ per year, respectively). This again, suggests that registered imports are well above those justified by local demand.

– *Third*, per capita GDP also does not explain the consumption figures calculated from the import data. Simply put, customers from Sierra Leone simply do not have enough resources to absorb the legally imported quantities of cigarettes.

	retail and wholesale use that are sold on its domestic market carry the statement: “ <i>Sales only allowed in (insert name of the country, subnational, regional or federal unit)</i> ” or carry any other effective marking indicating the final destination or which would assist authorities in determining whether the product is legally for sale on the domestic market.	IMPLEMENTATION NEEDS TO BE STRENGTHENED	legal provision, but no capacity for monitoring and enforcement. There is no other effective marking required on packaging to indicate final destination of tobacco products.
2(b) and 3	- consider, as appropriate, developing a practical tracking and tracing regime that would further secure the distribution system and assist in the investigation of illicit trade.	OBLIGATION NOT MET	There is no tracking and tracing system in place and no studies have been conducted on implementation of this measure.
4(a)	- monitor and collect data on cross-border trade in tobacco products, including illicit trade, and exchange information among customs, tax and other authorities, as appropriate, and in accordance with national law and relevant applicable bilateral or multilateral agreements.	OBLIGATION NOT MET	Finance and revenue authorities do not regularly collect information on cross-border trade.
4(b)	- enact or strengthen legislation, with appropriate penalties and remedies, against illicit trade in tobacco products, including counterfeit and contraband cigarettes.	OBLIGATION NOT MET	According to the Customs Act, seized smuggled tobacco products are treated similarly to other seized smuggled products: the seized illicit tobacco products are returned to the merchant after payment of a custom valuation and import duties.
4(c)	- take appropriate steps to ensure that all confiscated manufacturing equipment, counterfeit and contraband cigarettes and other tobacco products are destroyed, using environmentally-friendly methods where feasible, or disposed of in accordance with national law.	OBLIGATION NOT MET	See explanation under 4(b).
4(d)	- adopt and implement measures to monitor, document and control the storage and distribution of tobacco products held or moving under suspension of taxes or duties within its jurisdiction.	OBLIGATION NOT MET	
4(e)	- adopt measures as appropriate to enable the confiscation of proceeds derived from the illicit trade in tobacco products.	OBLIGATION NOT MET	See explanation under 4(b).

5	Information collected pursuant to subparagraphs 4(a) and 4(d) of this Article shall, as appropriate, be provided in aggregate form by the Parties in their periodic reports to the COP, in accordance with Article 21.	OBLIGATION NOT MET	Finance, revenue and customs authorities should provide the most recent information to the agency responsible for completion of WHO FCTC implementation reports, upon request, in a timely manner.
6	Promote cooperation between national agencies, as well as relevant regional and international intergovernmental organizations as it relates to investigations, prosecutions and Proceedings, with a view to eliminating illicit trade in tobacco products. Special emphasis shall be placed on cooperation at regional and subregional levels to combat illicit trade of tobacco products.	OBLIGATION PARTIALLY MET	Sierra Leone is a member of the World Customs Organization and of ECOWAS. There are ongoing discussions with neighbouring countries regarding the illicit trade of all products, including tobacco products.
7	Each Party shall endeavour to adopt and implement further measures including licensing, where appropriate, to control or regulate the production and distribution of tobacco products in order to prevent illicit trade.	OBLIGATION MET	A licence is required to import tobacco from abroad, but no details were presented to the members of the mission on how such licences are issued and monitored.

### Gaps

1. Although there is a requirement for tobacco products sold in Sierra Leone to include, on their packaging, the statement “For sale in Sierra Leone only”, very few products available in stores carry that statement. This is primarily due to the lack of inspections of cigarettes available on the market or the fact that they are not legally imported products.
2. Seized illicit tobacco products are not destroyed, but returned to the merchant after payment of relevant duties.
3. Penalties for involvement in the illicit tobacco trade have not changed since Sierra Leone’s ratification of the Convention.
4. There is no systematic monitoring and collection of data and information on the trade in tobacco products, either legal or illegal.

It was also noted during the mission that there is no exchange of information among customs, tax and law enforcement authorities aimed at identifying the main routes and characteristics of illicit trade in tobacco products.

Finally, it was also noted that revenue authorities have insufficient information on the requirements of the WHO FCTC and on the Protocol to Eliminate Illicit Trade in Tobacco Products.



### Key observations and recommendations

*It is therefore recommended that the National Revenue Authority, with the cooperation of other Government agencies, such as the Ministry of Trade and Industry, regularly monitor cigarettes available on the market. It is further recommended that the National Revenue Authority and the Ministry of Finance and Economic Development, through a joint task force, start monitoring and collecting data and information on the tobacco trade, including the illicit trade.*

*Sierra Leone should systematically introduce the requirements of Article 15 of the Convention, including provisions allowing for confiscation and destruction, using environmentally-friendly methods, of all confiscated illegally traded tobacco products; and increase the penalties for involvement in illicit trade in tobacco products.*

*Sierra Leone is encouraged to start reviewing the Protocol to Eliminate Illicit Trade in Tobacco Products, adopted at the fifth session of the COP, with a view to its early signature and ratification, in order to participate in and benefit from its implementation as soon as possible.*

### **Sales to and by minors (Article 16)**

Article 16 requires “measures at the appropriate government level to prohibit the sales of tobacco products to persons under the age set by domestic law, national law or eighteen”.

#### Status/gap

There is no policy requiring such measures.

Article 16.1.(a) requires Parties to ensure that “all sellers of tobacco products place a clear and prominent indicator inside their point of sale about the prohibition of tobacco sales to minors and, in case of doubt, [to] request that each tobacco purchaser provide appropriate evidence of having reached full legal age”.

#### Status/gap

There is no policy requiring such measures.

Article 16.1. (b) requires Parties to “ban the sale of tobacco products in any manner by which they are directly accessible, such as store shelves”.

#### Status/gap

There is no policy requiring such a measure. During a site visit the international team observed that tobacco products are indeed placed within easy reach of children.

Article 16.1(c) requires Parties to prohibit “*the manufacture and sale of sweets, snacks, toy or any other objects in the form of tobacco products which appeal to minors*”.

Status/gap

There is no policy requiring such measure.

Article 16.1(d) calls on each Party to ensure “*that tobacco vending machines under its jurisdiction are not accessible to minors and do not promote the sale of tobacco products to minors*”.

Status/gap

There is no policy requiring such measures.

Article 16.3 calls on Parties to “*endeavour to prohibit the sale of cigarettes individually or in small packets which increase the affordability of such products to minors*”.

Status/gap

There is no policy requiring such a measure. The mission was informed that sales in individual sticks are widespread.

Article 16.6 calls on Parties to “*adopt and implement effective legislative, executive, administrative or other measures, including penalties against sellers and distributors, in order to ensure compliance with the obligations contained in paragraphs 1-5 of this Article.*”

Status/gap

There is no such legislation in place in Sierra Leone. No penalties against sellers and distributors were brought to the notice of the mission.

Article 16.7 calls on Parties to prohibit, by means of legislation or other measures “*sales of tobacco products **by** [EMPHASIS ADDED] persons under the age set by domestic law, national law or eighteen*”.

Status/gap

There is no such legislation in place in Sierra Leone.

Key observations and recommendations

There are no policies in place in Sierra Leone concerning sales of tobacco to and by minors, as required by Article 16 of the Convention. The National Tobacco Control

Strategy makes recommendations on scaling up the national regulatory framework in this area. Some measures were included in the draft tobacco control act, and the mission, during its review of the draft legislation, proposed inclusion of all other missing requirement of Article 16 of the Convention in the draft.

***It is recommended that Sierra Leone implement the requirements under Article 16 of the Convention by including its provisions in the draft tobacco control legislation and enforcing them once the legislation is adopted.***

### **Provision of support for economically viable alternative activities (Article 17)**

Article 17 calls on Parties to promote, as appropriate, “*in cooperation with each other and with competent international and regional intergovernmental organizations ... economically viable alternatives for tobacco workers, growers and, as the case may be, individual sellers*”.

Tobacco production and processing used to be a major activity in Sierra Leone before the civil war; the country was able to meet domestic demand and export tobacco. At that time the Aureol Tobacco Company enjoyed a monopoly of manufacturing and distribution of tobacco. Tobacco imports were banned. Although there were reports of smuggling, this was not to the level of threatening the viability of the local monopoly.

Tobacco exports reached a peak in 1994 (total value: US\$ 1 584 000); after that tobacco export earnings declined, with the last recorded earning being only US\$ 3200 in 2000. This decline is mainly blamed on the closure of the Aureol Tobacco Company, which was a result of the decline in the supply of tobacco leaves from farmers, a direct result of the brutal civil war.

Tobacco farmers shifted to growing other crops, such as a new variety of potato (Roport) that had been propagated by the Agricultural Research Institute at the Njala University College. In the Northern Province, formerly the largest supplier of tobacco, reverted to groundnut and maize growing.

According to the information collected by the international team, small-scale tobacco growing still takes place in the Northern districts of Bombali and Kambia. The raw tobacco is used locally, and a small quantity is also exported to neighbouring countries.

### **Gaps**

1. There is no Government programme or policy to actively promote economically viable alternatives for tobacco workers, growers and individual sellers. Possible alternatives for tobacco growers exist, but have not been promoted.
2. There is a lack of data in relation to tobacco farmers.

### Key observations and recommendations

*It is therefore recommended that the Ministry of Health and Sanitation work jointly with the Ministry of Agriculture, Forestry and Food Security to develop policies and actively implement programmes to assist the remaining tobacco farmers to shift to economically viable alternative activities, thereby implementing Article 17 of the Convention. Collaboration with international specialized agencies such as the Food and Agriculture Organization of the United Nations (FAO), which is present in Sierra Leone, and the United Nations Conference on Trade and Development could strengthen research and support in regard to sustainable alternatives.*

### **Protection of the environment and the health of persons (Articles 18)**

*In Article 18, Parties “agree to have due regard to the protection of the environment and the health of persons in relation to the environment in respect of tobacco cultivation and manufacture”.*

#### Status

Sierra Leone does not grow significant volumes of raw tobacco and there is no tobacco manufacturing in the country. However, the National Tobacco Control Strategy recognizes that given the current drive by multinational companies to invest in developing countries, Sierra Leone contains land that could potentially be the target of such investment. Furthermore, the Strategy warns that Sierra Leone must avoid the experiences of other African tobacco-producing countries in which tobacco farming has been a major cause of environmental destruction and desertification.

The Strategy notes that people working in the tobacco fields or involved in the curing processes frequently suffer from green tobacco sickness, while the use of pesticides on tobacco fields is a common cause of human poisoning.

#### Gap

No formal policy exists to protect the environment and the health of persons in relation to tobacco growing.

### Key observations and recommendations

*It is therefore recommended that Ministry of Health and Sanitation sensitize the Ministry of Agriculture, Forestry and Food Security and other relevant ministries on the requirements of Article 18 of the Convention and promote the inclusion of such provisions in any forthcoming normative document regulating the agricultural sector in Sierra Leone. Partnership should be sought with the FAO, which is present in the country, to promote such an endeavour.*

### **Liability (Article 19)**

Article 19 requires Parties to consider, for the purpose of tobacco control, “*taking legislative action or promoting their existing laws, where necessary, to deal with criminal and civil liability, including compensation where appropriate*”.

#### **Status/gap**

No activities have been implemented in relation to this Article in Sierra Leone. There are also no policy or legislative measures related to this article. The members of the mission were not informed of any court cases in which compensation was being sought in relation to any adverse health effects caused by tobacco use, including any action against the tobacco industry (including importers) for full or partial reimbursement of medical, social and other relevant costs related to tobacco use.

*It is therefore recommended that Sierra Leone review and promote options for implementing Article 19 in its national context and subsequently develop policies, as appropriate.*

*An expert group on Article 19 of the Convention will soon be operational, as mandated by the COP; the documents developed by this group will be considered by the sixth session of the COP. Such documents will also assist Sierra Leone in moving forward in this area in its national context.*

### **Research, surveillance and exchange of information (Article 20)**

Article 20 requires Parties to “*develop and promote national research and to coordinate research programmes at the regional and international levels in the field of tobacco control*”.

#### **Status**

**Research** undertaken so far has mostly focused on patterns of tobacco consumption, and was implemented in collaboration with WHO and its partners. For example, Sierra Leone has conducted two surveys on tobacco consumption among adults and young people, respectively

The Global Youth Tobacco Survey was conducted in 2008, in collaboration with WHO and the US Centers for Disease Control and Prevention, among young people aged 13–15 years in the Western Area of Sierra Leone. A WHO STEPS survey was conducted nationally among adults aged 25–64 years, funded by WHO. It included questions on tobacco use and exposure to tobacco smoke. The main findings of these studies are presented in Annex 2 of this report.

Statistics Sierra Leone has run some national surveys which included tobacco-related questions. For example, the 2008 Demographic and Health Survey and the 2011 cancer surveillance initiative included reference to tobacco use nationally and sub-nationally, respectively.

There are three surveys planned for the near future. The Global School Personnel Survey will be carried out for the first time in Sierra Leone later this year. Another Demographic and Health Survey will be conducted later in 2013, but the questionnaire (already printed and ready to be disseminated) only contains one tobacco-related indicator on exposure to tobacco smoke at home. The members of the mission were also informed that in December 2014 a national census is expected to be conducted; Statistics Sierra Leone agreed to liaise with the Ministry of Health and Sanitation and the WHO Country Office in order to include the indicators contained in the WHO FCTC reporting instrument in the survey.

In the area of tobacco taxation, trade and illicit trade, the international team was informed about an ongoing joint research project of the National Revenue Authority, the University of Sierra Leone and Statistics Sierra Leone to be fed into ECOWAS discussions concerning a common taxation policy for tobacco products.

With respect to **surveillance**, the international team found out that there is a national cancer registry in Sierra Leone, and that causes of death are registered in medical notes, which are being centralized and linked to the civil registration system. These could be useful sources of information for future research on the health, social and economic consequences of tobacco consumption, including quantification of the economic burden of tobacco use on the population. Such research may result in powerful arguments concerning direct (health-care related) and indirect (lost productivity) costs of tobacco use, to be used in advocacy campaigns leading up to the consideration of the draft tobacco control law in the Parliament.

However, there is no tobacco monitoring and surveillance system (e.g. with prevalence studies at regular three-year intervals as recommended by WHO) yet put in place in Sierra Leone in any of the areas covered in Article 20.3(a).

### Gaps

1. The capacity and resources to conduct research is limited, and the various research activities are not coordinated.
2. There is limited epidemiological surveillance of tobacco consumption and related social, economic and health indicators.
3. There is a lack of recent national data on adult and youth tobacco use and there is no study implemented yet on the direct and indirect costs imposed on the society by the tobacco use and exposure to tobacco smoke.

### Key observations and recommendations

*To scale up and better coordinate its efforts in the area of research, surveillance and exchange of information it is therefore recommended that the Government of Sierra Leone:*

- 1. Develop, promote, reinforce and finance national research capacity in the area of tobacco control, through the involvement of competent international and regional organizations;*
- 2. Designate an agency (for example Statistics Sierra Leone jointly with the University of Sierra Leone) to coordinate and harmonize tobacco-related research to prevent overlaps and improve cost-efficiency as well as to use the findings for advocacy purposes in a coordinated way. Better coordination can be achieved through the National Tobacco Control Committee, which needs to be established via the new tobacco control legislation or any other administrative means;*
- 3. Include questions related to tobacco use, and other indicators as much as possible, in future censuses implemented by Statistics Sierra Leone, particularly within the upcoming 2014 census; and incorporate the same prevalence indicators in any consequent national surveys to enable collection of comparable data and trend analysis;*
- 4. Conduct a research on economic costs (direct and indirect) of tobacco use, to be utilized during the advocacy campaign promoting the adoption by the Parliament of the new draft tobacco control legislation;*
- 5. Develop mechanisms to systematically use morbidity, mortality and cancer data, available in the national registries for research purposes, e.g., when promoting new or following up implementation of already adopted policies.*

### **Reporting and exchange of information (Article 21)**

Article 21 requires each Party to “submit to the Conference of the Parties, through the Secretariat, periodic reports on its implementation of this Convention”.

#### **Status**

Sierra Leone has met its obligations on reporting under Article 21 of the Convention; it has provided its first implementation report on time and submitted it to the COP, through the Convention Secretariat, on 18 June 2012. The information communicated through this implementation report was reviewed and taken into account during the preparation of the 2012 global progress report on implementation of the WHO FCTC.<sup>1</sup> The report and other documents submitted by Sierra Leone have been published on the web site of the Convention Secretariat.

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<sup>1</sup> Available at: [http://who.int/fctc/reporting/summary\\_analysis/en/index.html](http://who.int/fctc/reporting/summary_analysis/en/index.html).

The next implementation report of Sierra Leone should be submitted in the 2014 reporting period (1 January to 15 April 2014). The report should be sent to [copreporting@who.int](mailto:copreporting@who.int).

#### Key observations and recommendations

*The COP established a new two-year cycle for the submission of Parties' implementation reports, starting from 2012, with a deadline of submission six months prior to each regular COP session; it is therefore recommended that the Government start the preparation of the next report well in advance so that the deadline in 2014 can be met.*

*In preparation for Sierra Leone's next implementation report, which is due between 1 January 2014 and 15 April 2014, it is recommended that the Ministry of Health and Sanitation send a circular letter to other Government ministries requesting the information and data required to complete the report. The task force on tobacco control could be made operational in relation to the preparation of the next implementation report, and could coordinate among its members the gathering of information and/or preparation of the next implementation report, as appropriate.*

#### **Cooperation in the scientific, technical, and legal fields and provision of related expertise (Article 22)**

Article 22 requires that Parties “shall cooperate directly or through competent international bodies to strengthen their capacity to fulfill the obligations arising from this Convention, taking into account the needs of developing country Parties and Parties with economies in transition. Such cooperation shall promote the transfer of technical, scientific and legal expertise and technology, as mutually agreed, to establish and strengthen national tobacco control strategies, plans and programmes”.

#### Status

Tobacco control programmes in Sierra Leone are largely dependent on international donor funding.

The Government departments and agencies that implement tobacco control efforts mostly provide technical expertise for the development and implementation of programmes.

#### *Cooperation with international agencies*

The most important donor agencies include the WHO Country Office, the Irish Government (by funding the NGO GOAL) and the Norwegian Government (by funding the NGO FORUT). WHO and its partners have provided funding for the two latest prevalence surveys implemented in Sierra Leone: the Global Youth Tobacco Survey conducted in 2008 and the WHO STEPS survey implemented in 2009.



WHO will also support the Global School Personnel Survey, which will be conducted in June–July 2013.

*Opportunities for cooperation with the United Nations system*

The WHO Country Cooperation Strategy 2008–2013 for Sierra Leone, in its chapter on noncommunicable diseases, noted how the country had not ratified the WHO FCTC. Since ratification, which followed publication of that document, the WHO Country Office has sustained its support to the Government for the implementation of tobacco control programmes.

The UNDAF is the strategic programme framework jointly agreed between governments and the United Nations system outlining priorities in national development. At its fourth session, in decision FCTC/COP4(17)<sup>1</sup> the COP fully acknowledged the importance of implementation of the Convention under the UNDAF as a strategic approach to ensure long-term and sustainable implementation, monitoring and evaluation of progress for developing countries. It encouraged developing countries to utilize the opportunities for assistance under the UNDAF and requested the Convention Secretariat to actively work with the United Nations agencies responsible for implementation of the UNDAF and coordination of the delivery of assistance, in order to strengthen implementation of the Convention at country level.

Apart from WHO, no United Nations agencies are involved in tobacco control efforts in Sierra Leone. The members of the mission learnt that the country does not currently have an UNDAF, but that such an agreement will be prepared for the years 2015–2019. The agency responsible for coordinating the Government's input is the Ministry of Finance. It is recommended therefore that the Ministry of Health and Sanitation, in collaboration with the WHO Country Office, sensitize other Government departments, specifically the Ministry of Finance, as well as the United Nations Country Team, for the integration of WHO FCTC implementation into the upcoming UNDAF, in the spirit of ECOSOC resolution E/2012/L.18 (of 27 July 2012) on "United Nations system-wide coherence on tobacco control".

Currently, the normative document driving the collaboration between the Government of Sierra Leone and the United Nations system is the United Nations Transition Joint Vision (2013–2014).<sup>2</sup> While the results matrix of this document includes actions that could enhance universal access to comprehensive and quality health-care services, and it briefly touches upon the control of noncommunicable diseases, there is no reference to the WHO FCTC or any matter related to tobacco control in the document.

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<sup>1</sup> See FCTC/COP/4/REC/1, *Decisions and ancillary documents*. Available at: [http://apps.who.int/gb/fctc/E/E\\_cop4.htm](http://apps.who.int/gb/fctc/E/E_cop4.htm).

<sup>2</sup> The United Nations Transitional Joint Vision (2013–2014) includes various health and social development areas, with programmes including poverty reduction, education of children and young people, harmful practices and limited life skills, teenage pregnancy and early marriage. The document is available at: <http://mdtf.undp.org/document/download/9872>

The international team met representatives of UNICEF and learnt that there is a need to raise awareness of Sierra Leone's obligations under the Convention within the United Nations system.

Further details concerning collaboration with the United Nations system are included above, in the section on Article 5.5.

#### Gaps

1. The current bilateral Government–United Nations system normative document, the United Nations Transitional Joint Vision 2013–2016, does not specifically refer to any tobacco-related matter.
2. The next UNDAF is expected to be developed for the 2015–2019 period.

#### Key observations and recommendations

***It is recommended that the Government of Sierra Leone actively seek opportunities to cooperate with other Parties, competent international organizations and development partners present in the country to support implementation of the Convention such as the United Nations Development Programme (UNDP), UNICEF, FAO, and the World Bank.***

***It is also recommended that the WHO Country Office inform the United Nations Country Team of the country's obligations under the WHO FCTC as soon as possible, to ensure that the agencies involved develop a better understanding of the possible United Nations contribution to implementation of the Convention by Sierra Leone.***

***It is also recommended that the Ministry of Health and Sanitation actively follow up with the UNDP coordinator in the country and the Ministry of Finance and Economic Development, responsible for coordinating the country's contribution to the development of the next UNDAF (2015–2019) to ensure that areas of priority concerning implementation of the WHO FCTC are reflected in the UNDAF document. Reference to the WHO FCTC could be made in the annex of the UNDAF document, which contains a listing of the country's international obligations under various treaties to which it is a Party. The activities which may find their way into the next UNDAF document could be based on the needs identified in this needs assessment report.***

***Once implementation of the Convention is included in the UNDAF, it is recommended that the United Nations Country Team include WHO FCTC implementation as a standing, regular agenda item in its meetings.***

The Convention Secretariat is committed to assisting Sierra Leone in facilitating inclusion of the WHO FCTC in its next UNDAF, upon the request of the Ministry of Health and Sanitation.

## **Financial resources (Article 26)**

In Article 26, Parties recognize *“the important role that financial resources play in achieving the objective of this Convention”*. Furthermore, Article 26.2 calls on each Party to *“provide financial support in respect of its national activities intended to achieve the objective of the Convention, in accordance with its national plans, priorities and programmes”*.

### **Status/gaps**

The Government of Sierra Leone does not provide for a separate budget line for tobacco control from the lump sum allocated to the Ministry of Health and Sanitation for health programmes. The international team learnt that no resources from the lump sum are used for tobacco control programmes.

In its implementation report of 2012 Sierra Leone indicated (and this was confirmed during the mission), that the country does not earmark any of its taxation revenue for the funding of any national plan or strategy on tobacco control.

The international team also learnt that the Ministry of Health and Sanitation is promoting the idea of creating a special fund for tobacco control. Such a requirement will be included in the draft tobacco control legislation.

Article 26.3 requires Parties to *“promote, as appropriate, the utilization of bilateral, regional, subregional and other multilateral channels to provide funding for the development and strengthening of multisectoral comprehensive tobacco control programmes of developing country Parties and Parties with economies in transition”*.

### **Status/gaps**

Some international organizations and development partners are active in Sierra Leone. The WHO Regional Office for Africa and the WHO Country Office, the Irish and Norwegian development agencies, the Campaign for Tobacco-Free Kids, and various other organizations and institutions have established good working relationships with the WHO Country Office and the Ministry of Health and Sanitation and implemented several activities to support implementation of the Convention in Sierra Leone.

However, no United Nations agency present in Sierra Leone, apart from WHO, has conducted any activity in relation to tobacco control. The agencies that are present in the country could play a more active role in supporting implementation of the WHO FCTC. The opportunity of the development of the next UNDAF starting in 2015 will need to be utilized to close this gap, in line with the requirements of Article 26.5(a) of the Convention.

Article 26.3 specifically points out that projects promoting *“economically viable alternatives to tobacco production, including crop diversification should be addressed*

*and supported in the context of nationally developed strategies of sustainable development”.*

*Status/gaps*

No efforts have been put in place yet in Sierra Leone to address this matter. The FAO is present in the country, which provides the opportunity to use their expertise in this area.

Article 26.4 stipulates that *“Parties represented in relevant regional and international intergovernmental organizations and financial and development institutions shall encourage these entities to provide financial assistance for developing country Parties and for Parties with economies in transition to assist them in meeting their obligations under the Convention, without limiting the rights of participation within these organizations”.*

*Status/gaps*

The Ministry of Health and Sanitation is committed to ensuring that Sierra Leone will promote implementation of the Convention in the relevant bilateral and multilateral forums, but no actions were taken so far.

*Key observations and recommendations*

***It is recommended that the Government of Sierra Leone allocate sufficient resources for programme financing, in addition to staff salaries, within the Health Education Division of the Ministry of Health and Sanitation, which serves as the focal point for the country’s tobacco control efforts. This can be done by creating a separate budget line for implementation of the WHO FCTC in the budget of the line Ministry in accordance with the National Tobacco Control Strategy 2012–2016 and as required by Article 26.2 of the Convention. It is also recommended that the Government of Sierra Leone require each Government department to allocate staff time for implementation of the relevant requirements of the Convention.***

***Furthermore, the draft tobacco control legislation should refer to the preferred mechanism(s) for ensuring sustainable and long-term funding for implementation of the Convention.***

***It is further recommended that in line with Article 26.3 of the Convention, the Government of Sierra Leone seek assistance from development partners and promote the inclusion of implementation of the Convention in bilateral and multilateral agreements and action plans developed with these agencies, and in particular in the next UNDAF starting in 2015. This will require coordination with the Ministry of Finance and Economic Development which is responsible for developing the country proposal for the next UNDAF.***

*Finally, it is recommended that the Ministry of Health and Sanitation, the Ministry of Agriculture, Forestry and Food Security and other relevant ministries, in collaboration with the FAO, address the issue of economically viable alternatives to tobacco production, including crop diversification, within the framework of any national strategies of sustainable development or food security. Further assistance from United Nations partners can be sought in relation to the national coordinating mechanism for tobacco control, educational and communication programmes, taxation of tobacco and illicit trade in tobacco products.*

## ANNEX 1

### **List of Government agencies and their representatives, legislative bodies, members of the international team and nongovernmental organizations participating in the joint needs assessment**

#### Ministry of Health and Sanitation

Madame Miatta Kargbo, Minister of Health and Sanitation  
Dr Amara Jambai, Acting Chief Medical Officer  
Dr Sarian Kamara, Acting Deputy Chief Medical Officer  
Dr Mohamed Samai, Acting Director of Noncommunicable diseases  
Dr J.N. Kandeh, District Medical Officer, District Health Management Team,  
Western Area  
Mr James Katta, National School and Adolescent Health Programme

#### Ministry of Health and Sanitation, Health Education Division

Mr Sahr Hemore, Tobacco Control Focal Point and Head of Health Education Division  
Mr James Aboo, Voluntary Service Overseas  
Mr Musu Fanta Amara  
Mr Lansana Conteh

#### Ministry of Finance and Economic Development

Mr Edward S. M. Siaffa, Assistant Commissioner – Design and Monitoring, National Revenue Authority (NRA)  
Mr Abu Bakarr Conteh, Revenue and Tax Policy Division  
Mr Mohamed A. Salisu, Economist, Revenue and Tax Policy Division  
Mr Samuel E.B. Momoh, Senior Assistant Secretary, Revenue and Tax Policy Division

#### Ministry of Information and Communication

Dr Ivan Ajibola Thomas, Attitudinal and Behavioural Change Secretariat, Executive Director  
Mr Ishamael Cole, Attitudinal and Behavioural Change Secretariat, Programme Manager  
Mr Edward King, Acting Deputy Director of Directorate of Information

#### Sierra Leone Broadcasting Corporation

Mr Sana Bernard Samura, Deputy Director General  
Mr Thomas Sowa, Director of Administration and Human Resources  
Mr Ransford Raymond Kabia, Director of Media and Public Affairs  
Ms Judith Sana, Reporter

### Statistics Sierra Leone

Mr Mohamed King Koroma, Statistician General  
Mr Andrew A. Kamara, Senior Statistician

### Other Government agencies

Mr Alpha M. Kargbo, Ministry of Agriculture, Forestry and Food Security  
Mr Sahid Conteh, Ministry of Education, Science and Technology  
Mr Charles Moinina, Acting Director of Youth, Ministry of Youth  
Mr Monya Farma, Sierra Leone Standards Bureau

### Parliament

Honourable Claude D. M. Kamanda, Deputy Whip, Health and Sanitation Committee  
Ibrahim S. Sesay, Clerk of Parliament

### WHO Country Office, Sierra Leone

Dr Teniin Gakuruh, Officer in Charge  
Ms Aminata Grace Kobie, National Professional Officer Health Promotion

### United Nations

Mr Ato Brown, Country Manager, World Bank, Sierra Leone Country Office  
Mr Roeland Monasch, Representative, UNICEF Sierra Leone  
Mr Gopal Sharma, Deputy Representative, UNICEF Sierra Leone

### Nongovernmental organizations

Mr Ernest Yassah Conteh, FORUT Sierra Leone  
Ms Katharine Owen, GOAL Sierra Leone  
Mr Alfred S. H. Weggo, GOAL Sierra Leone  
Mr Francis M. Bangura, GOAL Sierra Leone  
Mr Edward Jusu, Health for All Coalition  
Mr Moses Sellu, Health for All Coalition

### Members of the international team

Dr Tibor Szilagyi, Technical Officer, Convention Secretariat  
Ms Gracia Mabaya, Temporary Adviser, Convention Secretariat  
Mr Roberto Iglesias, Senior Economist, World Bank  
Ms Jenninah Kabiswa, WHO Regional Office for Africa

## ANNEX 2

### Prevalence of tobacco use in Sierra Leone

There have been two recent major tobacco use surveys in Sierra Leone.

**First**, the Global Youth Tobacco Survey (GYTS) was undertaken in 2008 in Sierra Leone's Western Area among students aged 13–15 years. The survey showed that among these student, overall prevalence of tobacco use was 5.8%: 6.6% among boys and 5% among girls.

Other tobacco products used by young people in Sierra Leone include tobacco tea, chewing tobacco, snuff and cigarillos.

In addition, the 2008 GYTS showed relatively high levels of exposure to tobacco smoke, with 56.5% of students exposed to tobacco smoke in public places.

**Second**, the STEPs survey was implemented nationally in 2009 among adults aged 25–64 years. The prevalence of tobacco use among the adult population was found to be 43.1% for males, 10.5% for females and 25.8% in total.

The prevalence of smokeless tobacco was exceptionally high among females at 12.1%, compared with 2.9% among males.

In relation to exposure to tobacco smoke, the survey revealed that 76.9% of men and 70.8% of women had been exposed to environmental tobacco smoke on one or more days within the previous seven days in the home, and 76.1% and 62.5% of men and women, respectively, had been exposed in the workplace.



## ANNEX 3

### PROPOSED AMMENDMENTS TO THE DRAFT CONTROL OF USE OF TOBACCO ACT, 2013

**General comment: The articles in the Act should follow the numbering and order of the articles as they are shown in the WHO FCTC**

#### Page 1 of the draft legislation

**Change the title to:**

TOBACCO CONTROL ACT 2013

**Please insert a rationale for the law soon after the Title and Date of commencement.** It can include, as a minimum, the following points:

- Reference to the Republic of Sierra Leon constitution if it guarantees the right to health and the right to life
- The fact that Republic of Sierra Leone ratified the WHO FCTC in 2009 and is obliged to fully implement its provisions

**Include the Object of the Act**

The object and purpose of this Act is to provide a legal framework for the control of the production, manufacture, sale, labeling, advertising, promotion, sponsorship and use of tobacco products, including exposure to tobacco smoke, in order to protect present and future generations from the devastating health, social, environmental and economic consequences of tobacco consupction and exposure to tobacco smoke by reducing continually and substantially the prevalence of tobacco use and exposure to tobacco smoke.

**Add a section on Interpretation as below**

This Act shall be interpreted in the manner consistent with the purpose and spirit of the WHO FCTC, its guidelines and protocols.

**Add a section on: Definitions (under Interpretation) – it would also be better to move the Interpretation section from the end of the draft to the beginning**

Please refer to the glossary of terms used in the WHO FCTC or proposed in the implementation guidelines at [http://www.who.int/fctc/reporting/glossary\\_fctc/.](http://www.who.int/fctc/reporting/glossary_fctc/))

Please also include the definition of tobacco products, as follows:

„tobacco products” means products entirely or partly made of the leaf tobacco as raw mateiral which are manufactured to be used for smoking, sucking, chewing or snuffing

**Add a section on: Comprehensive multisectoral national tobacco control strategies, plans and programmes**

The Minister responsible for health shall develop, implement, periodically update and review comprehensive multisectoral national tobacco control strategies, plans and programs to mitigate tobacco-related illnesses, death and other hazards within the context of the WHO Framework Convention on Tobacco Control and this Act.

**Add a section on: The National Tobacco Control Committee**

(1) A National Tobacco Control Committee (hereinafter called as Committee) is hereby created and placed under the supervision of the Minister responsible for health.

The functions of the Committee shall be to –

- (a) advise the Minister on the comprehensive multisectoral national tobacco control strategy, plan and programme, and policies adopted with regard to the production, manufacture, sale, advertising, promotion, sponsorship and use of tobacco and tobacco products;
- (b) advise the Minister on matters relating to the administration of the Tobacco Control Fund;
- (c) recommend to the Minister and to participate in the formulation of the regulations relevant to this Act;
- (d) ensure follow-up and enactment of the WHO Framework Convention on Tobacco Control and relevant bilateral or multilateral cooperation agreements signed by Sierra Leone in matters concerning tobacco products.
- (e) perform such other functions as may be assigned by the Minister.

(2) The composition and operational rules of the Committee are to be determined by a decree of the Minister responsible for health.

**Add a section on: Tax and price policies**

The Minister in charge of finance shall -

- (a) implement tax policies and where appropriate, price policies on tobacco and tobacco products so as to contribute to the objectives of this Act;
- (b) prohibit or restrict, as appropriate, any sale to, or importation of tax-free tobacco products by international travelers.

**Add a section on: Tobacco Control Fund**

(1) There is established a fund to be known as the Tobacco Control Fund (hereinafter called as Fund).

(2) The Fund shall consist of -

- (a) such sums as may be appropriated by Parliament for that purpose;
- (b) sums received, including fees, contributions, gifts or grants from or by way of testamentary bequest by any person or persons, provided that such sums may not be received from any person that would create a conflict of interest;
- (c) sums originating from fines imposed for non-compliance with the requirements of this Act;
- (d) registration and licensing fees of participants in tobacco and tobacco-related trade;
- (e) relevant levies imposed on the sale of tobacco products;
- (f) interests and dividends derived from the investments of moneys made on behalf of the Fund;
- (g) all other sums which may in any manner become payable to, or vested in, the Fund.

(3) The Fund shall be used for meeting the capital and current expenditure relating to –

- (a) research, surveillance and exchange of information, including dissemination of information on tobacco and tobacco products in the media;
- (b) promoting cessation and rehabilitation programs; and
- (c) any other matter incidental to the matters stated in paragraphs (a) and (b).

(4) The collection of revenues, utilization and administration of the Fund and accountability rules are to be determined by a decree of the Cabinet.

**Amend the section on: Prohibition of smoking in public places**

2.(1) Should read like this:

No person shall smoke tobacco product or hold a lighted tobacco product in

- (a) a public place;
- (b) anywhere within a 5 meter distance from a window of, ventilation inlet of, doorway to or entrance into a public place; or
- (c) any place contemplated in subsection (2).

**DELETE SECTION (2) OF THE CURRENT DRAFT AND INSERT NEW (2) as below**

The Minister may prohibit the smoking of tobacco or a tobacco product in any prescribed outdoor public place or such portion of an outdoor public place as may be prescribed, if persons are likely to congregate in close proximity of one another or where smoking may pose a fire or other hazard.

### **Page 3 of the draft legislation**

#### **Amend the section on: Advertising in relation to tobacco and tobacco products**

INSERT another section –3.2c) display of tobacco products at points of sale,

Also add a new section 3.(3) as below

(3) No person shall, by means of a publication that is published outside Sierra Leone, or a broadcast that originates outside Sierra Leone, or any other communication that originates outside Sierra Leone, promote any product the promotion of which is regulated under 3.(1) and 3.(2), or disseminate promotional material that contains a tobacco-related brand element in a manner that is contrary to the requirements of this Part.

On page 4 of the Tobacco Control Act, Section 4.2.b: make a financial **and or in kind** contribution.....

### **Page 5 of the draft legislation**

#### **Amend the section on: Packaging and Labeling**

Please delete section 6.2 because why its a repetition of Section 6.1

Health Warning on package: Please include pictorial health warnings to take care of WHO FCTC standard practice and those who may not be able to read

Use figures rather than words for percentages eg 50% rather than fifty percent

Also, add a section on information on constituents and emissions

### **Page 8 of the draft legislation**

#### **Amend the section on: Public education against tobacco use**

(1) The Government shall promote public awareness about the health consequences, addictive nature and mortal threat posed by tobacco consumption and exposure to tobacco smoke and the harmful effects of tobacco growing and handling through a comprehensive nation-wide education and information campaign conducted by the Government through the relevant Ministries, departments, authorities and other agencies.

(2) The Government shall provide training, sensitization and awareness programmes on tobacco control for community workers, social workers, media professionals, educators, decision

makers, administrators and other concerned persons for proper information, dissemination and education on tobacco and tobacco products.

(3) In conducting the education and information campaign referred to in this section, the Government shall ensure the involvement and participation of individuals and groups affected by tobacco growing and the handling and use of tobacco products.

(4) Every local authority in collaboration with the civil society and the Ministry, shall conduct education and information campaigns on tobacco within its area of jurisdiction.

(5) The Sierra Leone Broadcasting Corporation will designate free and rotating spaces for the use of public entities and non-governmental organizations for anti-tobacco messages in television, radio and other communication channels under its jurisdiction.

Page 5: Section 5.1 should read as follows:

No person shall promote tobacco or a tobacco product by retail sale through the mail, **the internet** or any other means of communication

Page 5: Please add

**Add a section on: Regulation of tobacco content and disclosures**

The yields of cigarettes released for domestic sale shall not be greater than:

- 1° 15 mg for tar per cigarette;
- 2° 1,5 mg for nicotine per cigarette;
- 3° 15 mg for carbon monoxide per cigarette

Section 10.2 on public education against tobacco use should end this way.....**and in the curriculum at all levels of public and private education**

**Page 9 of the draft legislation**

**Amend section on: Treatment of tobacco addiction**

DELETE Section 11.2

**Amend the section on: Sale of tobacco products**

12.1 (b) should read: in an educational institution; (delete “other than a tertiary institution”).

**Add a section on: Illicit trade on tobacco products**

The Government through the designated relevant agency shall implement effective legislative, executive, administrative or other means to ensure that

- a) Unit packates and packages of tobacco products for retail and wholesale use that are sold in Sierra Leone market carry the statement: Sales only allowed in Sierra Leone”
- b) The designated agency shall monitor and collect information on illicit tobacco trade in Sierra Leone and as is appropriate initiate information exchange among customs, taxes and other authorities with the neighbouring countries to harmonize cross border trade in tobacco products.
- c) The relevant agency may seize any tobacco or tobacco products which contravene this Act, take a full inventory thereof and destroy them in an environmentally friendly manner. Any costs incurred during the process of destruction will be borne by the offender
- d) Unless authorized by the relevant agency, no person shall remove, alter or interfere in any manner with any tobacco,-tobacco product being seized.

#### **Page 7 of the draft legislation**

##### **Amend the section on: Minimum age restrictions**

DELETE 9.1 (d) (unclear)

INSERT NEW (d) distribute free tobacco products to the public.

INSERT NEW (e) manufacture and sells sweets, snacks, toys or any other bjects in the form of, or which are likely to create an association with, cigarettes or other tobacco products.

INSERT NEW (f) sell cigarettes individually or in packets of less than 20 pieces.

INSERT NEW (g) engage any person under theage of 18 years in the selling of tobacco products.

#### **Page 13 of the draft legislation**

##### **Amend the section on: Testing of tobacco and tobacco products**

The Minister shall require that manufacturers and importers of tobacco disclose to the relevant governmental authorities information about the contents and emmissions of tobacco products.

##### **Add a section on: Economically viable alternatives to tobacco growing**

(1) The Minister in charge of agriculture shall put in place policies to promote, as appropriate, economically viable alternatives for tobacco growers.

(2) The Government through the relevant ministries shall put in place policies to promote, as appropriate, economically viable alternatives for tobacco workers, distributors, retailers and individual sellers.

3) The Government shall provide regulations to protect the environment from degradation and harmful effects of tobacco on the environment and shall monitor the environmental impact of tobacco production.