

4. Ministries of the Interior and Local Governments can take important first steps to advance tobacco control and accelerate progress towards the SDGs.

The right to health is a fundamental responsibility of government. Tobacco places a significant burden on countries, with cities bearing the majority of the burden. Ministries of Interior and Local Governments are uniquely positioned to take action to strengthen the tobacco control response and reduce this burden.

In the first instance, Ministries of Interior and Local Governments should:

- Encourage the implementation of local initiatives to strengthen tobacco control, for example, implementing smoke-free laws and becoming part of global networks like “Healthy Cities”ⁱⁱ.
- Call for legislation on and enforcement of the WHO FCTC to achieve its full implementation and on becoming a Party to and achieving implementation of the Protocol to Eliminate Illicit Trade in Tobacco Products.
- Bolster a multisectoral response to tobacco control through participation in a national coordination mechanism for tobacco control or supporting its creation, if not already present.
- Build capacity in monitoring, implementing and enforcing tobacco control legislation and policies.
- Work with other parts of government to protect public health policies with respect to tobacco control from tobacco industry interference, in line with WHO FCTC Article 5.3 and its guidelines for implementation.

ii Healthy Cities is a movement to recognize the determinants of health and ensure that health is put high on the social, political and economic agenda of city governments. For more information, see <https://www.who.int/teams/health-promotion/enhanced-wellbeing/ninth-global-conference/healthy-cities>, and <https://cities4health.org/>.

In line with the Convention Secretariat’s [Global Strategy to Accelerate Tobacco Control 2025](#) and [UNDP’s Strategic Plan 2022-2025](#) and [HIV, Health and Development Strategy \(2022-2025\)](#), these briefs emphasise the importance of a coordinated, multisectoral whole-of-government approach to tobacco control, empowering Parties to work across sectors to achieve policy coherence.

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Tobacco Control

What Ministries of the Interior and Local Governments Need to Know

Key Points

- 1 Tobacco damages health, the economy and sustainable development.
- 2 Tobacco threatens the resilience and sustainability of cities.
- 3 Health policy must be protected from industry interference.
- 4 Ministries of Interior and Local Governments can take important first steps to advance tobacco control and accelerate progress towards the Sustainable Development Goals (SDGs).

Sustainable Development Goal 3 (SDG 3) aims ‘to ensure healthy lives and promote well-being for all at all ages’.¹ One of the means of achieving this goal is to strengthen implementation of the World Health Organization Framework Convention on Tobacco Control (WHO FCTC) in all countries, as appropriate (Target 3.a).

The WHO FCTC is a legally binding treaty that reaffirms the right to health.² It was developed in response to the tobacco epidemic and currently has 183 Parties, covering more than 90 percent of the global population.³

1. Tobacco damages health, the economy and sustainable development.

The tobacco epidemic is one of the greatest public health threats. Tobacco use causes more than eight million deaths a year globally. Despite well-documented evidence on the health risks, there are still around 1.3 billion smokers worldwide (aged 15 and above).⁴ While most countries ban the sale of tobacco to minors, around 24 million children between the ages of 13 and 15 smoke, putting them at significant risk.⁵

Tobacco does not only impose a significant health burden on its users but also to those around them. Approximately 15 percent of tobacco-related deaths are a result of exposure to secondhand smoke.⁶ Globally, nearly half of children breathe air that is polluted by tobacco smoke, exposing them to significant health risks and resulting in 65,000 deaths each year.⁷

Tobacco control makes economic sense. Analysis conducted in 24 low- and middle-income countries (LMICs) as part of phase 1 and 2 of the WHO FCTC 2030 projectⁱ found that investing in stronger tobacco control would avert US\$64 billion in economic losses over the next 15 years – a combination of averted health-care costs and avoided economic productivity losses.⁸ Tobacco control also delivers economic benefits at the household and community levels, including for local businesses. Tobacco users spend a significant portion of their income on tobacco products,⁹ diverting spending away from essential purchases such as food, education and health care.¹⁰ Additionally, out-of-pocket medical expenditures to treat tobacco-related diseases can be financially catastrophic, driving or trapping families into poverty, exacerbating inequalities and escalating government social protection costs.

ⁱ See WHO Framework Convention on Tobacco Control. FCTC 2030. <https://fctc.who.int/who-fctc/development-assistance/fctc-2030>.

THE DEADLY CONSEQUENCES OF TOBACCO AND WHY GOVERNMENT SECTORS MUST WORK TOGETHER TO IMPLEMENT THE WHO FCTC

The social, economic and environmental impacts of tobacco consumption and production are staggering. Without adequate investment in tobacco control it is estimated that up to 1 billion people could die from tobacco-related diseases during this century alone.¹¹ Smoking-attributable diseases cost the global economy over a trillion US dollars annually, due to medical expenses and lost productivity.¹² The environmental impacts, due to plastic pollution, deforestation and soil degradation from tobacco growing, as well as water and soil pollution from pesticide use and cigarette littering, are of growing concern. Levels of tobacco consumption and production in society are determined largely by policies beyond the health sector. This means that the development consequences of tobacco are largely avoidable through better policy coherence and common strategies that deliver shared gains for all sectors involved, accelerating progress against multiple SDGs.

2. Tobacco threatens the resiliency and sustainability of cities.

Early death and disease from tobacco use takes a toll on local and national economies, impeding sustainable development. Enormous economic losses accrue from premature deaths amongst the workforce, employees who must take sick leave, and



unwell workers who remain on the job with reduced performance. Moreover, tobacco-attributable diseases also indirectly impact labour market participation for women and girls, who often drop out of school, quit work or abstain from entering the workforce because they must care for a sick relative.

The economic burden of smoking, including health-care expenditures and productivity losses, is equivalent to 1.8 percent of global annual GDP, with almost 40 percent of the burden occurring in LMICs. Indirect costs – due to smoking-attributable disability and mortality – account for 75 percent of this economic burden.¹³

With the majority of the population now living in urban areas, cities and businesses will bear the majority of this health and economic burden imposed by tobacco and tobacco-related diseases, including non-communicable diseases (NCDs). This puts increasing pressure on local governments with the responsibility to protect and enhance the lives of entire city populations.

Users litter the majority of the almost six trillion cigarettes smoked annually, posing an environmental threat to the health and economy of cities and human settlements.¹⁴ It is estimated that cities spend between US\$3 million and US\$16 million cleaning up littered cigarettes.¹⁵

LOCAL TOBACCO CONTROL INITIATIVES

- In 2004, the city of Liverpool initiated the process for local legislation to mandate workplaces and enclosed public places to be smoke-free. After an active and innovative campaign garnering broad support, and pressure from other key cities in the UK, national smoke-free legislation was proposed and passed in Parliament in 2006.¹⁶
- In 2017, in the Philippines, the Baguio city government adopted the Baguio Smoke-Free Ordinance, which prohibits the use of, sale, advertisement and distribution of tobacco products.¹⁷ The city has a dedicated website to share good practices where citizens can also report violations of the ordinance, including pictures or videos.¹⁸

3. Health policy must be protected from industry interference.

The tobacco industry continues to aggressively market its products and attempt to undermine implementation of the WHO FCTC. Implementing measures to protect health policymaking from tobacco industry interference is critical for effective WHO FCTC implementation. As a result, under WHO FCTC Article 5.3, Parties are obligated to “protect these policies from commercial and other vested interests of the tobacco industry in accordance with national law.”¹⁹

Recommended actions include raising awareness about tobacco industry interference across government and among the public; avoiding unnecessary interaction with the industry and ensuring any interactions that do occur are conducted transparently; implementing clear policies to avoid conflict of interest; requiring disclosure of information by the tobacco industry; and denormalising and regulating activities described as “socially responsible” by the industry.²⁰

ACTION TO PROTECT AGAINST INDUSTRY INTERFERENCE – COUNTRY EXAMPLES

- In 2017, Thailand implemented a comprehensive ban on Corporate Social Responsibility (CSR) activities by the tobacco industry. Thailand also implemented a cabinet decision to ensure the state-owned tobacco industry Thai Tobacco Monopoly (TTM) was treated in the same way as any other industry, prohibiting the acceptance of any contributions from TTM.²¹
- In 2019, Australia issued “Guidance for Public Officials on Interacting with the Tobacco Industry,” which comprehensively details public health officials’ and organizations’ legal obligations regarding their interactions with the tobacco industry.²²