

# Index for Tobacco Control Sustainability

CHINA

INDICATORS		Present (P)/ Absent (A)	Weighted Score	Country Score
1.	Prerequisite Indicator: >4 MPOWER policies in place	A	9	0
2.	National tobacco control budget (annual)	P	7	0
3.	National tobacco control law	P	6	0
4.	National budget allocation for tobacco control capacity building	P	6	6
5.	Tobacco taxation >75% of retail sales price	A	6	0
6.	Tobacco taxation increases faster than inflation plus gross domestic product growth	A	6	0
7.	National tobacco control unit	P	5	5
8.	Civil society tobacco control network	P	5	5
9.	Civil society representation in national tobacco control advisory committees	P	5	5
10.	Health promotion fund for, or including, tobacco control	P	5	0
11.	National policy against tobacco industry corporate social responsibility	A	5	0
12.	Tobacco-related mortality and morbidity recording system	A	5	0
13.	National evaluation framework in place	P	5	5
14.	Evaluation built into all major policy implementation plans	A	5	0
15.	National tobacco control strategy	P	4	4
16.	Tobacco control and noncommunicable diseases form part of national health policy	P	4	4
17.	Tobacco control forms part of national development plan	P	4	4
18.	Human resource for implementation (national)	P	4	4
19.	Global Tobacco Surveillance System surveys	P	4	4
20.	Intergovernmental coordination mechanism	P	3	3
21.	Capacity building plan for tobacco control personnel	P	3	3
22.	Developmental assistance funding includes tobacco control	A	3	0
23.	Code of conduct for government officials and staff	P	3	3
24.	Ministry of health WHO FCTC Article 5.3 policy	P	3	0
25.	WHO FCTC Article 5.3 policy across all ministries	P	3	0
26.	Economic and social tobacco costs data	P	3	3
27.	National focal point post	P	3	3
28.	National advisory committee	P	2	2
29.	Capacity building plans on research and evaluation	P	2	0
30.	Mass media campaigns funded	P	1	1
31.	Capacity building plan for non tobacco control specific personnel	P	1	0
<b>Total Score</b>			<b>130</b>	<b>64</b>

## Explanation of the scores:

1. Prerequisite Indicator: >4 MPOWER policies in place: Only “M” was rated at the highest level as per the 2021 WHO Report on the Global Tobacco Epidemic.
2. National tobacco control budget (annual): An annual national budget is allocated for tobacco control; however, it does not meet the recommended level of US \$0.11 per capita, and the funding level varies every year.
3. National tobacco control law: Currently no national comprehensive tobacco control law exists. Although China has a national advertising law adopted in 2015 that bans all forms of tobacco advertising, it does not cover tobacco promotion and sponsorship.
4. National budget allocation for tobacco control capacity building: The national government allocates an annual budget to support tobacco control capacity building activities. The funding supports China CDC and other agencies in the health sector. However, the level of funding is low.
5. Tobacco taxation >75% of retail sales price: tobacco taxes comprise 54.5% of the retail price, which is lower than the WHO recommended level of 75%.
6. Tobacco taxation increases faster than inflation plus gross domestic product growth: There is no inflation-adjusted index for the tobacco tax.
7. National tobacco control unit: The National Patriotic Health Campaign Committee Office (NPHCCO) of the National Health Commission is the national tobacco control lead agency overseeing the implementation of all tobacco control related strategies, plans, and initiatives. The National Tobacco Control Office of China CDC is the technical counterpart of the NPHCCO.
8. Civil society tobacco control network: China Tobacco Control Association, a government-affiliated CSO, maintains a civil society tobacco control network at both national and local levels.
9. Civil society representation in national tobacco control advisory committees: The Healthy China Expert Advisory Committee was established to support the implementation of the Healthy China Action (2019–2030), attended by representatives from key CSOs.
10. Health promotion fund for, or including, tobacco control: There is currently no designated health promotion fund that provides funding for tobacco control activities.
11. National policy against tobacco industry corporate social responsibility: the policy is far from sufficient to restrict CSR.
12. Tobacco-related mortality and morbidity recording system: The national mortality registration system records data on tobacco-use-related diseases, but no national system exists for recording morbidity data outside of deaths. A national center for morbidity registration has been established; however, data are not collected from all jurisdictions.
13. National evaluation framework in place: The National Health Commission adopted the Healthy China Action plan (2019–2030), which outlines major tobacco control evaluation indicators.
14. Evaluation built into all major policy implementation plans: Evaluation is only included in some policy implementation plans, such as the Healthy China Action plan (2019–2030). There is no evaluation of tobacco taxation policy.

15. National tobacco control strategy: The Healthy China 2030 Strategy, released in 2016, and the Healthy China Action plan (2019–2030), adopted in 2019, outline the national tobacco control strategy and action plans with specific targets.
16. Tobacco control and noncommunicable diseases (NCD) form part of national health policy: Tobacco control and NCD prevention are part of the Healthy China Action plan (2019–2030).
17. Tobacco control forms part of national development plan: Tobacco control is in the national development plan; however, available funding is low.
18. Human resource for implementation (national): Both the National Patriotic Health Campaign Committee Office and the China CDC Tobacco Control Office have staff working full-time or part-time on tobacco control; in addition, there is at least one tobacco control focal point in each province and in some cities to oversee the implementation of national tobacco control programs.
19. Global Tobacco Surveillance System surveys: China conducted GATS in 2009 and 2018, GYTS in 2014, National Adults Tobacco Use Survey in 2015, and National Youths Tobacco Use Survey in 2019. The national surveys are conducted every two years with designated government funding.
20. Intergovernmental coordination mechanism: The FCTC implementation interministry mechanism consists of 14 national government agencies and is chaired by the National Health Commission. The member agencies coordinate and implement tobacco control measures in the FCTC.
21. Capacity building plan for tobacco control personnel: There is designated annual government budget for China CDC Tobacco Control Office to conduct capacity building for tobacco control personnel.
22. Developmental assistance funding includes tobacco control: No evidence shows that development assistance funding covers tobacco control.
23. Code of conduct for government officials and staff: A code of conduct exists for government officials on interactions with the private sector. Government officials are required to disclose any conflict of interests; however, the code does not restrict interactions with the State Tobacco Monopoly Administration, which is a government agency.
24. Ministry of Health WHO FCTC Article 5.3 policy: There is no Article 5.3 policy at the National Health Commission.
25. WHO FCTC Article 5.3 policy across all ministries: There is no Article 5.3 policy in any ministry.
26. Economic and social tobacco costs data: The Health Development Research Center of the National Health Commission conducted research to assess the economic burden of tobacco use. Findings were presented at government meetings and academic conferences.
27. National focal point post: The director of the National Patriotic Health Campaign Committee Office is the national focal point for tobacco control.
28. National advisory committee: The Healthy China Promotion Committee, supported by the Healthy China Expert Advisory Committee, is the primary national committee that oversees the implementation of national tobacco control policies and strategies. Members of the two committees include key government agencies and CSOs.
29. Capacity building plans on research and evaluation: The Healthy China 2030 Strategy requires that more research be conducted, but it did not outline activities to build such capacity. There is no designated government budget to support research. Progress was made at China CDC to conduct regular research seminars and trainings supported by general government funding.

30. Mass media campaigns funded: A proportion of the government budget allocated for the Essential Public Health Service Program supports communication campaigns at the subnational level. In addition, government funding also supports annual World No Tobacco Day events.
31. Capacity building plan for personnel not specific to tobacco control: Trainings are conducted at the subnational level for non-tobacco-control personnel, and many are also supported by government funding; however, there is no designated government budget for capacity building of non-tobacco-control personnel at the national level.

## Main findings:

### Progress in tobacco control sustainability since 2016:

In 2016, the national government of China released the Healthy China 2030 Strategy, which marked a significant milestone in prioritizing the health of its citizens as the top national development priority. In 2018, the National Health Commission assumed the role of chair of the new FCTC implementation mechanism, which consists of 14 ministries and national agencies. The adoption of the Healthy China Action (2019–2030) in 2019 outlined crucial tobacco control strategies, action plans, specific targets, and evaluation indicators. These national strategies and action plans present opportunities for further policy changes and lay the foundation for achieving sustainable tobacco control. To guide the implementation of action plans, the Healthy China Promotion Committee was established, along with a national expert advisory committee consisting of representatives from key CSOs. Since 2020, China has initiated a plan to conduct the National Adults Tobacco Use Survey, the National Youths Tobacco Use Survey, and other national tobacco-use surveys targeting priority groups such as college students. These surveys are supported by designated government funding, which has been recognized by the WHO as a best practice. Furthermore, several cities have recently adopted local smoke-free policies.

### Changes in scores from the 2016 survey:

The current score of China in the 2021 ITCS is 64 out of 130, which is similar to its score in 2016 (61 out of 130). However, notable improvements have occurred in certain indicators. For instance, the country has earned five additional points in the "National evaluation framework/plan in place" indicator due to the adoption of the Healthy China Action plan (2019–2030) by the national government. This action plan includes a tobacco control action plan that outlines specific targets, tasks of multiple sectors, and evaluation indicators.

Moreover, China has earned five additional points in the "Civil society representation in national TC advisory committees" indicator and two more points in the "National advisory committee" indicator. These improvements are attributed to the establishment of the Healthy China Promotion Committee, which provides guidance for the implementation of the Healthy China 2030 Strategy and the Healthy China Action plan (2019–2030).

It is worth noting that two indicators, namely "National TC Budget (annual)" and "Health Promotion Fund for/including TC," which were present in the 2016 ITC, were scored absent in the current assessment. Although there is an annual national budget allocated for tobacco control, it falls short of the recommended level of US \$0.11 per capita, and the funding level varies by region and year. Additionally, the national fund registered under the Ministry of Civil Affairs and approved by the National Health Commission is not authorized by law to provide ongoing funding for health activities. The fund comes from the private sector instead of taxation, fines, or levies.

## Remaining gaps in tobacco control sustainability:

Ensuring consistent and significant tobacco tax increases remains a top priority in closing the current gaps in MPOWER policies. It is imperative to continue strengthening the implementation of effective tobacco control policies and mobilize government investment in tobacco control. Additionally, China needs to adopt a national policy to prevent corporate social responsibility activities by the tobacco industry.