

# Index for Tobacco Control Sustainability

ZAMBIA

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)	A	7	0
3	National tobacco control law	A	6	0
4	National budget allocation for tobacco control capacity building	A	6	0
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	A	5	0
10	Health promotion fund for, or including, tobacco control	P	5	5
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	P	5	5
15	National tobacco control strategy	P	4	4
16	Tobacco control and non-communicable 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	A	3	0
22	Developmental assistance funding includes tobacco control	P	3	3
23	Code of conduct for government officials and staff	P	3	3
24	Ministry of health WHO FCTC Article 5.3 policy	A	3	0
25	WHO FCTC Article 5.3 policy across all ministries	A	3	0
26	Economic and social tobacco costs data	P	3	3
27	National focal point post	A	3	0
28	National advisory committee	A	2	0
29	Capacity building plans on research and evaluation	P	2	2
30	Mass media campaigns funded	P	1	1
31	Capacity building plan for non tobacco control specific personnel	P	1	1
<b>Total Score</b>			<b>130</b>	<b>61</b>

## Explanation of the scores:

1. 4 MPOWER policies in place: According to the WHO MPOWER AFRO implantation score card, Zambia has only moderately implemented the smoking ban.<sup>1</sup> The 1992 Public Health Regulations introduced the basic health package warnings. These are text-based – only available in English – and cover an insufficient 30% of the front and back of the package.<sup>2</sup>
2. National tobacco control budget (annual): Zambia does not have a budget allocated specifically for tobacco control.
3. National tobacco control law: Zambia lacks a comprehensive tobacco control law, relying on the 1992 Public Health (Tobacco) Regulation, which covers public smoking restrictions, textual warnings on packaging, and bans on sales to minors.
4. National budget allocation for tobacco control capacity building: Zambia does not have a budget allocated for tobacco control capacity building.
5. Tobacco taxation >75% of retail sales price: Zambia has one of the lowest tax shares in the world currently. Excise taxes comprise only 38.8% of the retail price of the most popular brand of cigarettes.<sup>3</sup>
6. Tobacco taxation increases faster than inflation plus gross domestic product growth: In previous years, Zambia's excise tax rate on tobacco products increased at below the WHO-recommended rate, in some cases just above inflation, but not always.<sup>4,5,6,7</sup>
7. National tobacco control unit: Zambia does not have a national tobacco control unit; however, the Ministry of Health is leading the development of a multisectoral national strategy for tobacco control. The NCD Unit, which is under the Directorate of Health Promotion, Environment, and Social Determinants, has received minimal financial resources for NCD activities.<sup>8</sup>
8. Civil society tobacco control network: Zambia has various civil society networks, such as the Zambia Alliance for Tobacco Control, Zambia Tobacco Control Consortium, Zambia Media Network Against Tobacco and the Zambia Noncommunicable Diseases Alliance, that form a unified national coalition.
9. Civil society representation in national tobacco control advisory committees: There are currently no representatives from civil society in the national tobacco control advisory committee.
10. Health promotion fund for, or including, tobacco control: There is no funding allocated specifically for tobacco control, apart from the general noncommunicable disease provision.
11. National policy against tobacco industry corporate social responsibility: There is no policy against tobacco industry corporate social responsibility.
12. Tobacco-related mortality and morbidity recording system: There is currently no recording system dedicated for tobacco related mortality and morbidity in Zambia.
13. National evaluation framework in place: The Ministry of Health has a national evaluation framework in place. Currently, the health sector framework is being guided by the National Health Strategic Plan 2013–16, which is anchored into the Six National Development Plan and the Zambia Vision 2030 Strategy. (Organization, 2019).
14. Evaluation built into all major policy implementation plans: Evaluation is built on all major implementation plans

<sup>1</sup> Africa MPOWER Multi-Country Workshop-Ends-To Afro

<sup>2</sup> <https://bit.ly/3Vhgofv>

and is well established.

15. National tobacco control strategy: No national tobacco control strategy exists, but a national noncommunicable disease strategic plan is present.
16. Tobacco control and noncommunicable diseases form part of the national health policy: Tobacco control and noncommunicable diseases form part of the national health policy.
17. Tobacco control forms part of national development plan: Tobacco control is linked to the national development plan through the national noncommunicable disease strategic plan.
18. Human resource for implementation (national): Since 2006, the Ministry of Health (MoH) has been implementing the comprehensive Human Resource for Health Strategic Plan 2006–2010. Implementation of this plan has led to positive trends in the numbers, mix of skills, and distribution of health workers.<sup>9</sup>
19. Global tobacco surveillance system surveys: These are some of the global surveillance system surveys in Zambia:
  - The WHO Stepwise approach to Surveillance (STEPS) survey.<sup>10</sup>
  - The Global Youth Tobacco Survey (GYTS) for Zambia.<sup>11</sup>
  - The International Tobacco Control policy evaluation Survey.<sup>12</sup>
20. Intergovernmental coordination mechanism: The government of Zambia has a well-established intergovernment coordination mechanism.
21. Capacity building plan for tobacco control personnel: There is no capacity building plan specially dedicated to tobacco control.
22. Development assistance funding includes tobacco control: Formal development assistance funding exists specifically for tobacco control.
23. Code of conduct for government officials and personnel: The government of Zambia, through the Public Service Management Division, has in place a code of conduct for civil servants.<sup>13</sup>
24. Ministry of Health WHO FCTC article 5.3 policy: The MoH has not yet implemented WHO FCTC article 5.3.
25. Who FCTC article 5.3 policy across all ministries: No ministries have implemented WHO article 5.3.
26. Economic and social tobacco use costs data: The Investment Case for Tobacco Control in Zambia is a report developed by the MoH in partnership with the WHO and the United Nation Development Program that contains detailed data on the economic and social costs of tobacco.<sup>14</sup>
27. National focal point post: There is a national tobacco focal point person available, but the post is neither permanent nor official.
28. Capacity building plans on research and evaluation: There are capacity building plans for research and evaluation,

<sup>3</sup> Ibid

<sup>4</sup> Zambia Revenue Authority Practice Note No. 1/2018. <https://www.zra.org.zm/wp-content/uploads/2020/01/2018-PRAC-TICE-NOTES-1.pdf>

<sup>5</sup> Zambia Revenue Authority Practice Note No. 1/2019. <https://www.zra.org.zm/download/2019-practice-note/#>

<sup>6</sup> Zambia Revenue Authority Practice Note No. 1/2020. <https://www.zra.org.zm/wp-content/uploads/2020/06/Practice-Note-No.-1-of-2020.pdf>

<sup>7</sup> Zambia Revenue Authority Practice Note No. 1/2021. <https://www.zra.org.zm/download/practice-note-no-1-2021-2/#>

<sup>8</sup> <https://bit.ly/3PHQO1U>

but not specifically for tobacco control.

29. Mass media campaigns funded: Mass media campaigns are funded at the MoH through the Department of Health Promotion Environment and Social Determinants.<sup>15</sup>

Capacity building plan for non-tobacco-control-specific personnel: The MoH has in recent years made progress towards increasing production and recruitment of health workers, equitable distribution of appropriate skills and numbers, increasing training and capacity building among existing health workers, efficient and effective utilization of health workers, and retention of the available specialized health workers, to provide quality NCD services at all levels of health care.

## Main findings

The issue of tobacco control sustainability in Zambia is plagued by significant misalignments between the policies of the economic sector and the efforts to implement the provisions of the FCTC. In response to this challenge, advocates in Zambia have been working since 2010 to pass tobacco control laws and address growing concerns about smoking. The proposed Tobacco Control Bill seeks to implement the guidelines set by the WHO FCTC, to which Zambia is a party. These guidelines include measures such as raising excise taxes and implementing the MPOWER package. Despite these efforts, the tobacco industry has been successful in blocking any such legislation in the last decade. This situation underscores the need for continued advocacy and collaboration among stakeholders to ensure that tobacco control policies are effectively implemented in Zambia.

Based on the Global Tobacco Industry Interference Index 2020 and 2021, Zambia has the highest level of tobacco industry interference in Africa.<sup>16</sup> This index assesses the extent to which governments are adhering to Article 5.3 of the WHO FCTC and its implementation guidelines. The report also scrutinizes the actions of tobacco companies, such as inviting ministers and high-ranking officials to inaugurations of new tobacco factories, making donations, and glorifying the tobacco industry for its purported contributions to the national economy and employment.

These tactics are specifically crafted to subvert the efforts of tobacco control and impede or reject the implementation of policies. As an illustration, the Zambia Tobacco Control Bill made significant strides in committees and parliamentary meetings in 2020. However, due to the Covid pandemic, parliament was suspended, which presented an opening for the industry. During the pandemic, tobacco-related corporate social responsibility activities escalated, with Japan Tobacco International alone donating masks, ventilators, and funds worth over \$300,000.<sup>17</sup> As of the present year, no definite clarification has been provided regarding the current state of the bill. Regrettably, Zambia is falling behind other nations in implementing effective measures to safeguard public health from the escalating danger of the tobacco epidemic, despite the robust backing of the public and civil society advocacy. While Zambia ratified the WHO FCTC in May 2008, as of 2018 it had adopted only a limited number of policies aimed at curtailing tobacco consumption, as mandated by the treaty.

In 2018, a joint program was undertaken to launch an investment case that examined the health and economic impact of certain policy measures contained within the bill, as well as the impact of implementing or intensifying additional tobacco control measures, especially increasing tobacco taxes.

<sup>9</sup> <https://bit.ly/3PHQO1U>

<sup>10</sup> [www.afro.who.int/publications/zambia-steps-survey-2017-factsheet](http://www.afro.who.int/publications/zambia-steps-survey-2017-factsheet)

<sup>11</sup> <https://extranet.who.int/ncdsmicrodata/index.php/catalog/187>

<sup>12</sup> <https://itcproject.org/countries/zambia/>

<sup>13</sup> [http://www.psmid.gov.zm/?page\\_id=5665](http://www.psmid.gov.zm/?page_id=5665)

<sup>14</sup> <https://www.undp.org/zambia/stories/zambia-tobacco-control-investment-case>

<sup>15</sup> [https://www.moh.gov.zm/?page\\_id=1126](https://www.moh.gov.zm/?page_id=1126)

Zambia has implemented several laws and policies relating to the control of tobacco since the 1992 Public Health (Tobacco) Regulation, which is the primary legislation that prescribes restrictions on smoking in public, mandates textual warnings on cigarette packages, and bans tobacco sales to minors. However, some of the tobacco control legislation faces implementation challenges.

For instance, the ban on smoking in public places remains weakly enforced, with compliance being especially low in government and educational facilities, cafes, pubs, bars, restaurants, and public transit. Advertising, promotion, and sponsorship are loosely regulated, with no restrictions on billboard, poster, and newspaper advertisements, and no restrictions on promotion and sponsorship. The retail price of tobacco products is also below the FCTC recommended amount of 75% of and the global average of 51.1%.

Furthermore, Zambia's existing regulations on warning labels do not meet the FCTC guidelines in several areas, and there have not been any national mass media campaigns on the health risks of tobacco use and the benefits of cessation.

With the Tobacco Control Bill being reviewed by line government ministries, Zambia has a historic opportunity to mitigate the health and economic losses attributed to tobacco. By adopting the tobacco control bill, Zambia can strengthen its implementation of WHO FCTC demand reduction policy measures of Sustainable Development Goals 3.a. The bill would protect people from exposure to tobacco smoke by banning smoking in public places, comprehensive ban advertising, promotion, and sponsorship of tobacco products, requiring that large graphic warnings labels cover 75% or more of packaging, and granting the Ministry of Health the authority to mandate plain packaging of tobacco products.

### Existing gaps and priorities identified for tobacco control sustainability.

1. Enact a comprehensive Tobacco Control Law – Zambia's 1992 Public Health (Tobacco) Regulation does not cover many areas critical to effective tobacco control. Zambia must enact a comprehensive tobacco control law with the additional benefits of:
  - a. Expanding the ban on tobacco advertising, promotion, and sponsorship (TAPS).
  - b. Banning on smoking in public places.
  - c. Increasing tobacco excise taxes.
  - d. Implementing new measures such as mass media campaigns and plain packaging.

The Ministry of Health should work with parliamentarians, civil societies, the Attorney General's Office, and other ministries to pass the tobacco control bill. Passing the new legislation will help Zambia fulfill its obligation under the WHO FCTC, drive sustainable development, and meet its commitment to health in all policies. By banning sales of single cigarettes and smaller packages, effectively taxing roll-your-own cigarettes, and banning marketing that appeals to the young generation (e-cigarettes), the new legislation would help protect Zambia's youth, among whom tobacco use is on the rise.

2. Raise awareness among stakeholders of the true costs of tobacco and the enormous development benefits of tobacco control – Policymakers across sectors are encouraged to share and discuss hazardous tobacco consumption among all sectors of government, parliament, and civil society, the public, development partners, and economic institutions. Doing so will strengthen public and political support for tobacco control. An advocacy strategy with key messages on how tobacco control can support economic growth and improve population

<sup>16</sup> <https://exposetobacco.org/country/zambia/>

<sup>17</sup> <https://www.znbc.co.zm/news/jti-spends-us300000-on-covid-19-fight-in-western-and-eastern-provinces/>

health can assist policymakers in disseminating the message. To help stem the tobacco epidemic, it is imperative that Zambia raise awareness among the public, particularly among young people. Rising smoking rates among youth and the increase in tobacco use among girls cannot be ignored. Zambia needs to reduce young people's accessibility to tobacco products to avoid the next wave of health and economic consequences from tobacco. As recommended in the needs assessment for implementation of the WHO FCTC in Zambia, the Ministry of Health should develop a communication plan that includes a sustained national mass media campaign. The Ministry of Health should work together with relevant sectors of the government and with civil society to strengthen training for teachers, health professionals, and law enforcement about the health, economic and environmental consequences of tobacco consumption and exposure to tobacco smoke.

3. Strengthen tobacco control coordination and planning — Tobacco control is a sustainable development issue for Zambia with implications for the ministries of Finance, Education, Labor, Agriculture, Commerce, Trade and Industry, other sectors, and parliamentarians. A joint UNDP and WHO FCTC Convention Secretariat discussion paper demonstrates how tobacco impacts virtually every sustainable development goal. These findings must be used to advocate for stronger collaboration and coordination among sectors. Under the leadership of the Ministry of Health, the national coordination mechanism for tobacco control must be reinvigorated.

The Ministry of National Development Planning and other sectors should also champion integration of tobacco control into relevant national and sectoral planning and policy documents. Given the development dimensions of tobacco consumption and production, many ministries in Zambia see tobacco as a win-win opportunity.

4. Ensure adequate funding and resourcing of tobacco control measures — Sustainable financing is essential to implement the WHO FCTC. Using a portion of tobacco excise tax revenues to finance tobacco control and national development priorities, as many other countries do, is a viable option. Given the economic benefits of tobacco control, the Ministry of Health should work with the Ministry of Finance (MoF) on a sustainable financing mechanism for tobacco control. Establishing a national tobacco control programs with multisectoral coordination mechanism and costed strategy will assist in allocating resources towards national tobacco control efforts. Consideration should be given to earmarking revenue from tax increases on tobacco products towards a national tobacco control program, and Ministry of Health should work with the Ministry of Foreign Affairs and international partners to mobilize resources from bilateral and multilateral funding mechanisms to complement domestic resources.
5. Advocate for additional increases in tobacco taxes — Cigarette tax levels in Zambia are currently far below the WHO FCTC recommended levels of 75% of retail price, MoH should work with MoF to create an environment enabling tax increases on tobacco products, including by restructuring the tax system in a way that emphasizes a specific tax component, and taxing all tobacco products uniformly, including loose-leaf, snuff, and smokeless tobacco. Policymakers should be made aware of evidence from other countries who have increased tobacco taxes, that increasing tobacco tax rates on a regular basis to decrease affordability of tobacco products will result in substantial health and economic gains.
6. Strengthen enforcement — Each year that the current tobacco control law's provisions are underenforced, Zambia suffers avoidable health and economic losses. Many stakeholders, including the ministries of Home Affairs, Local Government, and Health, expresses a need for stronger enforcement, especially to enforce smoke-free places and prevent the sale of tobacco to and by minors. Lack of resources and the current highly fragmented tobacco legal framework pose barriers to stronger tobacco control enforcement. Zambia should introduce enforcement mechanisms with clear role assignments and coordination of the work of enforcement officers. Funds dedicated to enforcement and provisions to train officials in all relevant ministries and agencies are further steps to strengthen enforcement.