

2020 - CORE QUESTIONNAIRE OF THE REPORTING INSTRUMENT OF WHO FCTC

A. ORIGIN OF THE REPORT

Name of contracting Party:

Ghana

Information on national contact responsible for preparation of the report:

Title

Dr

Family name

Kyei-Faried

First name

Sardick

Full name of institution

Ghana Health Service (GHS), Ministry of Health (MOH)

Mailing address

Mailing address 1 Disease Control & Prevention Department
(DCD), Ghana Health Service, Korle-Bu

Mailing address 2

Post code NA

Post box Private Mail bag, Box KB 493

City Accra

Country

Ghana

E-mail

kyei.faried@ghsmai.org

Alternative email address

Telephone number

+233208168760

Fax number

NA

Signature of government official submitting the report:

Title

Mr

Family name

Agyemang-Manu

First name

Kwaku

Full name of institution

Ministry of Health (MOH)

Mailing address

Mailing address 1	Ministry of Health
Mailing address 2	
Post code	NA
Post box	Private Mail Bag MB 44
City	Accra

Country

Ghana

E-mail

info@moh.gov.gh

Alternative email address

Telephone number

+23302665651

Fax number
+233302665651

Web page
<http://www.moh.gov.gh>

Period of reporting:

	Month	Year
Start date	April (4)	2018 (19)
End date	March (3)	2020 (21)

B1. TOBACCO CONSUMPTION

Prevalence of tobacco use

Smoking prevalence in the adult population (all)

(Please provide prevalence data for total adult population, and identify the age considered, e.g. 15 years old and over, 18-64 years; see B112)

Current smokers

	Prevalence (%) (please include all smoking tobacco products in prevalence data)	Average number of the most-consumed smoking tobacco product used per day
MALE	4.8	3
FEMALE	0.1	
TOTAL (males and females)	1.7	3

Daily smokers

Prevalence (%)
(please include all smoking tobacco products in prevalence data)

Average number of the most-consumed smoking tobacco product used per day

Occasional smokers

Prevalence (%)
(please include all smoking tobacco products in prevalence data)

Former smokers

Prevalence (%)
(please include all smoking tobacco products in prevalence data)

Never smokers

Prevalence (%)
(please include all smoking tobacco products in prevalence data)

MALE	91.8
FEMALE	99.6
TOTAL (males and females)	96.7

Please indicate the smoking tobacco products included in calculating prevalence for question B11:

Cigarette smoking mostly Males 4.8% and Females 0.5%.

Pipe smoking males 0.5% and females 0.0%

Males and Females Total Cigarette smoking 1.6% and Pipe smoking 0.5%

Please indicate the age range to which the data used to answer question B11 refer:

	From	To
Age range	15	49

Please indicate the year of the data used to answer question B11:

2014

Please indicate the source of the data used to answer question B11:

Ghana Demographic and Health Survey, 2014

Please provide the definitions of “current smoker”, “daily smoker”, “occasional smoker”, “former smoker” and “never smoker” used in this report.

Current smoker	Interviewee uses cigarette or Pipe or Shisha up to the time of survey
Daily smoker	
Occasional smoker	
Former smoker	
Never smoker	Interviewee has never used cigarette, pipe or shisha up to the time of survey

Please provide a brief explanation of the trend in smoking prevalence in the adult population in the past two years or since submission of your last report.

The trend in reduction in the overall smoking prevalence from 2008 to 2014 is as a results of decline in smoking in the young age groups.

Smoking prevalence in the adult population (by age groups)

(If data are available, please provide prevalence data by age group, and identify the age group considered, preferably by 10-year categories, e.g. 25-34, 35-44 years)

	Range - start age	Range - end age	Prevalence (%) (please include all smoking tobacco products in prevalence data)
MALES - current smokers ¹	15	19	1
MALES - current smokers ¹	20	24	2
MALES - current smokers ¹	25	29	6
MALES - current smokers ¹	30	34	4
MALES - current smokers ¹	35	39	5
MALES - current smokers ¹	40	44	6
MALES - current smokers ¹	45	49	11
FEMALES - current smokers ¹	15	19	0
FEMALES - current smokers ¹	20	24	0
FEMALES - current smokers ¹	25	29	0
FEMALES - current smokers ¹	30	34	0
FEMALES - current smokers ¹	35	39	0
FEMALES - current smokers ¹	40	44	0
FEMALES - current smokers ¹	45	49	0
TOTAL (males and females) - current smokers ¹	15	19	0
TOTAL (males and females) - current smokers ¹	20	24	0
TOTAL (males and females) - current smokers ¹	25	29	2
TOTAL (males and females) - current smokers ¹	30	34	1
TOTAL (males and females) - current smokers ¹	35	39	1

TOTAL (males and females) - current smokers ¹	40	44	2
TOTAL (males and females) - current smokers ¹	45	49	3

Please indicate the smoking tobacco products included in calculating prevalence for question B12:

Cigarette (mostly) and pipe

Please indicate the year of the data used to answer question B12:

2014

Please indicate the source of the data used to answer question B12:

Ghana Demographic and Health Survey, 2014

Please provide a brief explanation of the trend in current smoking prevalence by age group in the past two years or since submission of your last report, if data are available.

The trend in reduction in the overall smoking prevalence from 2008 to 2014 is as a results of decline in smoking in the young age groups.

Prevalence of smokeless tobacco use in the adult population (all)

(Please provide prevalence data for total adult population, and identify the age considered in B132, e.g. 15 years old and over, 18–64 years; see B132)

Males

Prevalence (%)

(please include all smokeless tobacco products in prevalence data)

Current users	1.9
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Females

Prevalence (%)

(please include all smokeless tobacco products in prevalence data)

Current users	0.3
---------------	-----

TOTAL (males and females)

Prevalence (%)

(please include all smokeless tobacco products in prevalence data)

Current users	0.8
---------------	-----

Please indicate the smokeless tobacco products included in calculating prevalence for question B13:

Chewing tobacco. Sniffing tobacco

Please indicate the age range to which the data used to answer question B13 refer:

	From	To
Age range	15	49

Please indicate the year of the data used to answer question B13:

2014

Please indicate the source of the data used to answer question B13:

Ghana Demographic and Health Survey, 2014

Please provide the definitions of "current user", "daily user", "occasional user", "former user" and "never user" (of smokeless tobacco products) used in this report in the space below.

Current user Interviewee uses tobacco products other than cigarette, pipe, and shisha up to the time of survey

Daily user
Occasional user
Former user
Never user

Please provide a brief explanation of the trend in smokeless tobacco use in the adult population in the past two years or since submission of your last report.

No trend is available.

In 2008 (DHS) 0.2 used smokeless tobacco.

In 2014 (DHS) 0.87 used smokeless tobacco

Prevalence of smokeless tobacco use in the adult population (current users) by age group (by age groups)

(If data are available, please provide prevalence data by age group, and identify the age group considered, preferably by 10-year categories, e.g. 25-34, 35-44 years)

	Range - start age	Range - end age	Prevalence (%) (please include all smoking tobacco products in prevalence data)
MALES - current smokers ²	15	24	0
MALES - current smokers ²	25	34	2
MALES - current smokers ²	35	44	4
MALES - current smokers ²	45	49	3
MALES - current smokers ²	50	59	2
FEMALES - current smokers ²	15	24	0
FEMALES - current smokers ²	25	29	0
FEMALES - current smokers ²	35	34	1
FEMALES - current smokers ²	45	49	1
TOTAL (males and females) - current smokers ²	15	24	0
TOTAL (males and females) - current smokers ²	25	34	1
TOTAL (males and females) - current smokers ²	35	44	2
TOTAL (males and females) - current smokers ²	45	49	2

Please indicate the smokeless tobacco products included in the answer to question B14:

Chewing tobacco. Sniffing tobacco

Please indicate the year of the data used to answer question B14:

2014

Please indicate the source of the data used to answer question B14:

Ghana Demographic and Health Survey, 2014

Please provide a brief explanation of the trend in current use of smokeless tobacco by adult age groups in the past two years or since submission of your last report.

Trend does not exist

Tobacco use by ethnic group(s)

(please include all smoking or smokeless tobacco products in prevalence data)

	Ethnic group(s)	MALES - Prevalence (%)	FEMALES - Prevalence (%)	TOTAL (males and females) - Prevalence (%)
Current users ³	Western	8.6	0.1	2.7
Current users ³	Central	3.7	0.2	1.2
Current users ³	Greater Accra	3.9	0.3	1.2
Current users ³	Volta	4.5		1.4
Current users ³	Eastern	8.1	0.1	1.3

Please indicate the tobacco products included in the answer to question B15:

Current Users (Continued)

Ethnic Group Males-Prevalence Female- Prevalence Total- (males and Females) Prevalence

Eastern 2.2 0.1 0.6

Ashanti 2.9 0.0 0.8

Brong-Ahafo 5.7 0.4 1.5

Northern 11.5 3.1 2.7

Upper east 11 0.3 3.0

Upper west 9.9 0.5 2.5

Cigarette mostly used, then pipe

Please indicate the age range to which the data used to answer question B15 refer:

	From	To
Age range	15	49

Please indicate the year of the data used to answer question B15:

2014

Please indicate the source of the data used to answer question B15:

Demographic and Health Survey, 2014

Tobacco use by young persons

(please include all smoking or smokeless tobacco products in prevalence data)

	Age range	SMOKING TOBACCO - Prevalence (%)	SMOKELESS TOBACCO - Prevalence (%)	WATER PIPE - Prevalence (%)
BOYS - Current users ⁴	13-15	3.2	2.5	8.8
GIRLS - Current users ⁴	13-15	2.3	3.7	8.8
TOTAL (boys and girls) - Current users ⁴	13-15	2.8	3.1	8.1

Please indicate the tobacco products included in calculating prevalence for question B16:

Cigarette Smoker

Smokeless tobacco user: Current smokeless tobacco user

Please indicate the year of the data used to answer question B16:

2017

Please indicate the source of the data used to answer question B16:

GYTS 2017, Ghana

Please provide the definition of "current smoking/tobacco use" used to answer question B16 in the space below.

SMOKING TOBACCO: Interviewee Current Cigarette Smoker

Smokeless tobacco user: Interviewee Current smokeless tobacco user

Current Smoker: interviewee uses cigarette up to time of survey

Please provide a brief explanation of the trend in tobacco use by young persons in the past two years or since submission of your last report.

The prevalence of current tobacco use in the age group 13-15 years has declined from year 2000 to 2017; so is current tobacco smoking.

2017 however saw a surge in the use of Shisha and electronic cigarette

Please attach the relevant documentation.

Ghana GYTS
2017

No comment

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Use of novel and emerging tobacco and nicotine products

	Age range	Heated tobacco products (HTPs) - Prevalence (%)	Electronic Nicotine Delivery Systems (ENDS) - Prevalence (%)	Electronic Non-Nicotine Delivery Systems (ENNDS) - Prevalence (%)	Other products - Prevalence (%)
	YOUNG PERSONS - Boys	13-15	8.2		
	YOUNG PERSONS - Girls	13-15	8.8		
	YOUNG PERSONS - Total (boys and girls)	13-15	8.5		

B2-B9. HEALTH, SOCIAL AND ECONOMIC INDICATORS

Exposure to tobacco smoke

Do you have any data on exposure to tobacco smoke in your population?

Yes ✓

Please provide details in the space below (e.g. exposure by gender, at home, in the workplace, on public transport).

23% of students reported exposure to tobacco smoke at home and 39% exposed in enclosed public area.

In 2000 41.4% of students were exposed to smoke in public places, reducing to 31.6% in 2006, 32.3% in 2009

Please indicate the year of the data used to answer question B21:

2017

Please indicate the source of the data used to answer question B21:
Report card on the WHO FCTC Ghana; GYTS 2017 Ghana

Please attach the relevant documentation.

Tobacco-related mortality

Do you have information on tobacco-related mortality in your population?

No ✘

If available, please provide any additional information on mortality attributable to tobacco use (e.g. lung cancer, cardiovascular diseases) in your jurisdiction.

Please indicate the year of the data used to answer question B32 and 33:

Please indicate the source of the data used to answer questions B32 and B33:

Please submit a copy of the study you refer to:

Tobacco-related costs

Do you have information on the economic burden of tobacco use in your population, e.g. the overall cost of tobacco use imposed on your society?

No ✘

Please submit a copy of the study you refer to:

Supply of tobacco and tobacco products

(with reference to Articles 6.2(b), 20.4(c), and 15.5)

Licit supply of tobacco products

	Product	Unit (e.g. pieces, tonnes)	Domestic production	Retail sales	Exports	Imports
Smoking tobacco products	Cigars, cheroots and cigarillos containing tobacco	kg	0.00	NA	0.00	19
Smoking tobacco products	Cigarettes containing tobacco	kg	0.00	NA	0.00	1671292
Smoking tobacco products	Tobacco, partly or wholly stemmed/stripped	kg	0.00	NA	0.00	55
Smoking tobacco products	Water pipe tobacco	kg	0.00	NA	0.00	792
Smoking tobacco products	Smoking tobacco wether or not containing tobacco substitutes in any proportion	kg	0.00	NA	0.00	113
Smoking tobacco products	Tobacco, not stemmed/stripped	kg	0.00	NA	0.00	39

Please provide information on the volumes of duty-free sales (e.g. product, unit, quantity), if available.

The above figures do not include imports of tobacco products exempted from Tax (See attached)

Please indicate the year of the data used to answer question B51 and 52:

2017

Please indicate the source of the data used to answer questions B51 and B52:

Ministry of Finance, Ghana Revenue Authority, Customs Division

Please attach the relevant documentation.

No comment

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No comment

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Seizures of illicit tobacco products

(with reference to Article 15.5)

Seizures of illicit tobacco

Year	Product	Unit (e.g. pieces, tonnes)	Quantity seized
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Do you have any information on the percentage of illicit tobacco products on the national tobacco market?

No

Please provide any further information on illicit tobacco products.

Please indicate the source of the data used to answer questions in section B6:

Please attach the relevant documentation.

Tobacco-growing

Is there any tobacco-growing in your jurisdiction?

No

Please indicate the year of the data used to answer questions in section B7:

Please indicate the source of the data used to answer questions in section B7:

Please attach the relevant documentation.

Taxation of tobacco products

(with reference to Articles 6.2(a) and 6.3)

What proportion of the retail price of the most popular price category of tobacco product consists of taxes (e.g. sum of excise, sales and import duties (if applicable) and value added tax/goods and services tax (VAT/GST))?

30.1

How are the excise taxes levied (what types of taxes are levied)?

Specific tax only	No
Ad valorem tax only	Yes
Combination of specific and ad valorem taxes	No
More complex structure (please explain below)	No

If available, please provide details on the rates of taxation for tobacco products at all levels of Government and be as specific as possible (specify the type of tax, e.g. VAT, sales, import duties)

	Product	Type of tax	Rate or amount	Base of tax⁵
Smoking tobacco products	Cigars, cheroots, cigarillos containing tobacco	Duties and Taxes	8329.68	CIF
Smoking tobacco products	Cigarettes containing tobacco	Duties and taxes	138,162,460.10	CIF
Smoking tobacco products	Other	Duties and Taxes	74,289.36	CIF
Smoking tobacco products	Water pipe tobacco	Duties and Taxes	19,979.75	CIF
Smoking tobacco products	Other	Duties and Taxes	74,289.36	CIF
Smoking tobacco products	Homogenised or reconstituted tobacco	Duties and taxes	11,189.94	CIF
Smoking tobacco products	Expanded tobacco	Duties and taxes	1,598.57	CIF
Other tobacco products	Tobacco not stemmed for the manufacturing industry	Duties and taxes	32.25%	CIF
Other tobacco products	Tobacco partly or wholly stemmes	Duties and taxes	44.00%	CIF
Other tobacco products	Other	Duties and Taxes	44.00%	CIF
Other tobacco products	Tobacco refuse	Duties and taxes	44.00%	CIF

Please briefly describe the trends in taxation for tobacco products in the past two years or since submission of your last report in your jurisdiction.

There was an increase of Ad valorem taxation from 150% in 2014 to 175% in 2016.
The Amounts are in Ghana Cedis (GhC)

Do you earmark any percentage of your taxation income for funding any national plan or strategy on tobacco control in your jurisdiction?

No ✘

Please indicate the year of the data used to answer questions B81 to B86:

2017

Please indicate the source of the data used to answer questions B81 to B86:
2016 Budget statement, Ministry of Finance

Please attach the relevant documentation.

No comment

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Price of tobacco products

(with reference to Articles 6.2(a))

Domestic

Please provide the retail prices of the three most widely sold brands of domestic tobacco products at the most widely used point of sale in your capital city.

Name of the most widely sold brands	Number of units or amount per package	Retail price	Currency

Imported

Please provide the retail prices of the three most widely sold brands of imported tobacco products at the most widely used point of sale in your capital city.

	Name of the most widely sold brands	Number of units or amount per package	Retail price	Currency
Smoking tobacco products	Gold seal	20	1.00	GHS
Smoking tobacco products	555	20	6.00	GHS
Smoking tobacco products	London Brown	20	2.50	GHS

Please indicate the year of the data used to answer question B91:

2014

Please indicate the source of the data used to answer question B91:

GTCR-V, 2015, Ghana

Please briefly describe the trend in the prices of tobacco products in the past two years or since submission of your last report in your jurisdiction.

Retail Price of most common cigarette products have virtually remained the same despite increase in Ad valorem taxation from 150% i 2014 to 175% in 2016

Please attach the relevant documentation.

No comment

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C1. GENERAL OBLIGATIONS

With reference to Article 5

Have you developed and implemented comprehensive multisectoral national tobacco control strategies, plans and programmes in accordance with the Convention?

Yes ✓

Have you established or reinforced and financed:

a focal point for tobacco control?	Yes
a tobacco control unit?	Yes
a national coordinating mechanism for tobacco control?	Yes

Please provide details (e.g. the nature of the national coordinating mechanism, the institution to which the focal point for tobacco control or the tobacco control unit belongs).

There is a Tobacco Control Inter-Agency Coordinating committee (TC-IACC) set up at the Ministry of Health and Chaired by The Minister of Health who delegates to the Chief Director. The Focal Point is the Secretary to the committee. The Committee includes Ministry of Finance (MOF) and Ghana Revenue Authority (GRA) Customs Division, Ministry of Justice, Attorney General (AG) Department, Ghana Education Service (GES), Ministry of Trade and Industry (MOTI), Food and Drug Authority (FDA), Civil Society Organizations (CSO), World Health Organization (WHO) country office, Ghana Health Service (GHS) Public Health and Family Health Divisions, Ministry of Interior (Ghana Police Service), Ghana Immigration Service, the Media, Teaching Hospitals (THs) and Health Training Institutions (HTI). Environmental Protection Agency (EPA), Ghana Tourism Authority, Local Government (LG)

There are five sub-committees:

- (1) Education, communication and training- GES, Media, Health, CSO
- (2) Finance, taxation and logistics- MOF, MOTI, GRA, WHO, UNDP
- (3) Implementation and reporting- MoH/GHS, THs, HTI, GRA, CSO, MOFA
- (4) Legislation and enforcement- AG, FDA, MOTI, GPS, GSA, LG
- (5) Research and Development- MoH/GHS, EPA, CSO, GES

Please provide a brief description of the progress made in implementing Article 5.1 and 5.2 (*General obligations*) in the past two years or since submission of your last report.

In the Disease Control Policy of Ghana is embodied the Tobacco Control Policy. The Programmes Of Work of the Ministry of Health (MOH POW) since 2013 has always captured Tobacco Control as national Priority (See Attachment).

The TC, IACC meets quarterly and the decisions taken are implemented by the relevant agencies or ministries

If you have any other relevant information pertaining to but not covered in this section, please provide details in the space below.

Protection of public health policies with respect to tobacco control from commercial and other vested interests of the tobacco industry

Have you adopted and implemented, where appropriate, legislative, executive, administrative or other measures or have you implemented, where appropriate, programmes on any of the following:

protecting public health policies with respect to tobacco control from commercial and other vested interests of the tobacco industry?

Yes ✓

ensuring that the public has access, in accordance with Article 12(c), to a wide range of information on tobacco industry activities relevant to the objectives of the Convention, such as in a public repository?

Yes ✓

If you answered "Yes" to any of the questions under C121 or C122, please provide details in the space below (specifically, please refer, if relevant, to whether your government or any of its departments 1) have raised awareness on tobacco industry tactics and the need to prevent interference by the tobacco industry with decision making; 2) have avoided entering into any partnerships or voluntary agreements with the tobacco industry; 3) have established any measures to limit interaction of public officials with the tobacco industry, including in the form of a code of conduct; 4) have not granted any incentives, privileges, benefits or preferential tax exemptions to the tobacco industry to establish or run their business; etc.).

Ministry of Health has carried out sensitization activities for Customs and Immigration Officers and all points of entry e.g. Elubo, Takoradi, Aflao, KIA and Tema to create awareness about Tobacco Industry tactics and interference and how to prevent them. In all about 2,000 officers were sensitized. (See picture of Officers at Aflao border)

Please provide a brief description of the progress made in implementing Article 5.3 in the past two years or since submission of your last report.

All meetings with the Tobacco Industry has been open, has been on regulatory or taxation purposes. The Industry has not been allowed in any of meetings or activities of Tobacco control.

Have you utilized the "Guidelines for implementation of Article 5.3 of the WHO FCTC" when developing or implementing policies in this area?

Yes ✓

Please provide details in the space below or refer to section I of the additional questionnaire.

Response to this question or to the additional questionnaire

is **voluntary**. <https://extranet.who.int/dataform/655321?token=i53m2pztw6uxe4h&lang=en>

(<https://extranet.who.int/dataform/655321?token=i53m2pztw6uxe4h&lang=en>)

The Guidelines has been very useful in providing details of composition of the TC IACC, developing the PH Act (ACT 851 2012) and how interaction with the Tobacco Industry has to be to check their negative influence..

If you have any other relevant information pertaining to but not covered in this section, please provide details in the space below.

Please attach the relevant documentation.

No comment

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C2. MEASURES RELATING TO THE REDUCTION OF DEMAND FOR TOBACCO

With reference to Articles 6–14

Price and tax measures to reduce the demand for tobacco

Have you adopted and implemented, where appropriate, legislative, executive, administrative or other measures or have you implemented, where appropriate, programmes on any of the following:

tax policies and, where appropriate, price policies on tobacco products so as to contribute to the health objectives aimed at reducing tobacco consumption?

Yes ✓

prohibiting or restricting, as appropriate, sales to international travellers of tax- and duty-free tobacco products?

Yes ✓

prohibiting or restricting, as appropriate, imports by international travellers of tax- and duty-free tobacco products?

Yes ✓

Please provide a brief description of the progress made in implementing Article 6 (*Price and tax measures to reduce the demand for tobacco*) in the past two years or since submission of your last report.

Ghana does not restrict duty-free sales of tobacco products. However Ghana restricts imports of duty-free tobacco by international travelers and also limits the quantity of tobacco products that can be carried into the country duty-free

Have you utilized the “Guidelines for implementation of Article 6 of the WHO FCTC” when developing or implementing policies in this area?

Yes ✓

If you answered “Yes” to question C215 please provide details in the space below or refer to section H of the additional questionnaire available at this link. Response to this question or to the additional questionnaire is **voluntary**. <https://extranet.who.int/dataform/655321?token=i53m2pztw6uxe4h&lang=en> (<https://extranet.who.int/dataform/655321?token=i53m2pztw6uxe4h&lang=en>)

If you have any other relevant information pertaining to but not covered in this section, please provide details in the space below.

Please attach the relevant documentation.

Protection from exposure to tobacco smoke

Have you adopted and implemented, where appropriate, legislative, executive, administrative or other measures or have you implemented, where appropriate, programmes on any of the following:

banning tobacco smoking in indoor workplaces, public transport, indoor public places and, as appropriate, other public places ?

Yes ✓

What is the type/nature of the measure providing for the ban?

national law	Yes
subnational law(s)	No
administrative and executive orders	Yes
voluntary agreements	No
other measures (please specify in C223 below)	

Please provide a brief explanation of the type/nature and content of the measures providing for the ban.

(1) Public Health Act (ACT 851 2012) Part Six, Tobacco Control Measures, is the legal instrument that provides the ban

(2) Tobacco Control Regulation 2015

Do any of these measures provide for a mechanism/ infrastructure for enforcement?

Yes ✓

Please provide details of this system.

Food and Drug Authority (FDA) is the Regulatory Authority to enforce the ban

Please specify the settings and extent/comprehensiveness of measures applied in indoor workplaces, public transport, indoor public places and, as appropriate, other public places.

Indoor workplaces:

government buildings	Complete
health-care facilities	Complete
educational facilities ⁶	Complete
universities	Partial
private workplaces	Complete
other (please specify below)	

Please specify the settings and extent/comprehensiveness of measures applied in indoor workplaces, public transport, indoor public places and, as appropriate, other public places.

Public transport:

airplanes	Complete
trains	Complete
ferries	Complete
ground public transport (buses, trolleybuses, trams)	Complete
motor vehicles used as places of work (taxis, ambulances, delivery vehicles)	Complete
private vehicles	Partial
other (please specify below)	

Please specify the settings and extent/comprehensiveness of measures applied in indoor workplaces, public transport, indoor public places and, as appropriate, other public places.

Indoor public places:

cultural facilities	Complete
shopping malls	Complete
pubs and bars	Complete
nightclubs	Complete
restaurants	Complete
other (please specify below)	

Please provide a brief summary of complete and partial measures, with specific details of the partial measures that have been implemented:

Banning tobacco smoking in indoor workplaces

Complete means "No smoking".

Banning tobacco smoking in public transport

Complete means "No smoking".

Banning tobacco smoking in indoor public places

Complete means "No smoking".

Please provide a brief description of the progress made in implementing Article 8 (*Protection from exposure to tobacco smoke*) in the past two years or since submission of your last report.

FDA undertakes inspection of Hospitality facilities and guide those who want to set up DSAs. Where this is not yet set up, FDA enforces complete ban.

Have you utilized the "Guidelines for implementation of Article 8 of the WHO FCTC" when developing or implementing policies in this area?

Yes ✓

If you answered "Yes" to question C229 please provide details in the space below or refer to section B of the additional questionnaire available at this link. Response to this question or to the additional questionnaire is **voluntary**. <https://extranet.who.int/dataform/655321?token=i53m2pztw6uxe4h&lang=en> (<https://extranet.who.int/dataform/655321?token=i53m2pztw6uxe4h&lang=en>)

If you have any other relevant information pertaining to but not covered in this section, please provide details in the space below.

Please attach the relevant documentation.

No comment

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Regulation of the contents of tobacco products

Have you adopted and implemented, where appropriate, legislative, executive, administrative or other measures or have you implemented, where appropriate, programmes on any of the following:

testing and measuring the contents of tobacco products?

No ✘

testing and measuring the emissions of tobacco products?

No ✘

regulating the contents of tobacco products?

Yes ✓

regulating the emissions of tobacco products?

No ✘

Please provide a brief description of the progress made in implementing Article 9 (*Regulation of the contents of tobacco products*) in the past two years or since submission of your last report.

Ghana is yet to require the Tobacco Industry to report on Content to FDA and to do testing to confirm content. Ghana benefited for recent training by WHO AFRO on content disclosure and testing that gave clearer undersanding of what has to be done

Have you utilized the “Guidelines for implementation of Articles 9 and 10 of the WHO FCTC” when developing or implementing policies in this area?

Yes ✔

If you answered “Yes” to question C236 please provide details in the space below or refer to section C of the additional questionnaire available at this link. Response to this question or to the additional questionnaire is **voluntary**. <https://extranet.who.int/dataform/655321?token=i53m2pztw6uxe4h&lang=en> (<https://extranet.who.int/dataform/655321?token=i53m2pztw6uxe4h&lang=en>)

If you have any other relevant information pertaining to but not covered in this section, please provide details in the space below (e.g., whether your country 1) has incorporated product regulation in the national tobacco control legislation; 2) has access to either governmental or independent – not owned or controlled by the tobacco industry – laboratories for testing contents and/or emissions of tobacco products; 3) has regulated ingredients, such as flavours (e.g. menthol); 4) has regulated product characteristics, such as design features (e.g., cigarette ventilation); etc.).

Please attach the relevant documentation.

Regulation of tobacco product disclosures

Have you adopted and implemented, where appropriate, legislative, executive, administrative or other measures or have you implemented, where appropriate, programmes on any of the following:

requiring manufacturers or importers of tobacco products to disclose to Government authorities information about the:

contents of tobacco products?	Yes
emissions of tobacco products?	No

requiring public disclosure of information about the:

contents of tobacco products?	No
emissions of tobacco products?	No

Please provide a brief description of the progress made in implementing Article 10 (*Regulation of tobacco product disclosures*) in the past two years or since submission of your last report.

Have you utilized the “Guidelines for implementation of Articles 9 and 10 of the WHO FCTC” when developing or implementing policies in this area?

Yes ✓

If you answered “Yes” to question C244 please provide details in the space below or refer to section C of the additional questionnaire available at this link. Response to this question or to the additional questionnaire is voluntary. <https://extranet.who.int/dataform/655321?token=i53m2pztw6uxe4h&lang=en> (<https://extranet.who.int/dataform/655321?token=i53m2pztw6uxe4h&lang=en>)

If you have any other relevant information pertaining to but not covered in this section, please provide details in the space below (e.g. whether your country has incorporated tobacco product disclosures in the national tobacco control legislation; has regulated the public disclosure of toxic constituents and emissions of tobacco products, aiming to raise public awareness and advance tobacco control policy; etc.).

Please attach the relevant documentation.

Packaging and labelling of tobacco products

Have you adopted and implemented, where appropriate, legislative, executive, administrative or other measures or have you implemented, where appropriate, programmes on any of the following:

requiring that packaging, individual cigarettes or other tobacco products do not carry advertising or promotion?

Yes ✓

requiring that packaging and labelling do not promote a product by any means that are false, misleading, deceptive or likely to create an erroneous impression about its characteristics, health effects, hazards or emissions?

Yes ✓

requiring that each unit packet and package of tobacco products and any outside packaging and labelling of such products carry health warnings describing the harmful effects of tobacco use?

Yes ✓

ensuring that the health warnings are approved by the competent national authority?

Yes ✓

ensuring that the health warnings are rotated?

Yes ✓

ensuring that the health warnings are clear, visible and legible?

Yes ✓

Does your law mandate, as a minimum, a style, size and colour of font to render the warning clear, visible and legible?

Yes ✓

ensuring that the health warnings occupy no less than 30% of the principal display areas?

Yes ✓

ensuring that the health warnings occupy 50% or more of the principal display areas?

Yes ✓

ensuring that health warnings are in the form of, or include, pictures or pictograms?

Yes ✓

Does the Government own the copyright to these pictures and pictograms?

Yes ✓

Would you grant a non-exclusive and royalty-free licence for the use of health warnings developed in your jurisdiction with other Parties?

Yes ✓

requiring that each unit packet and package of tobacco products and any outside packaging and labelling of such products contain information on relevant:

constituents of tobacco products? Yes
emissions of tobacco products? No

requiring that the warnings and other textual information appear on each unit packet and package and on any outside packaging and labelling in the principal language or languages of the country?

Yes ✓

Please provide a brief description of the progress made in implementing Article 11 (*Packaging and labelling of tobacco products*) in the past two years or since submission of your last report.

Have you utilized the “Guidelines for implementation of Article 11 of the WHO FCTC” when developing or implementing policies in this area?

Yes ✓

If you answered “Yes” to question C2516 please provide details in the space below or refer to section D of the additional questionnaire available at this link. Response to this question or to the additional questionnaire is voluntary. <https://extranet.who.int/dataform/655321?token=i53m2pztw6uxe4h&lang=en> (<https://extranet.who.int/dataform/655321?token=i53m2pztw6uxe4h&lang=en>)

If you have any other relevant information pertaining to or not covered in this section, please provide details in the space below.

Please attach the relevant documentation.

Education, communication, training and public awareness

Have you adopted and implemented, where appropriate, legislative, executive, administrative or other measures or have you implemented, where appropriate, programmes on any of the following:

educational and public awareness programmes? (*Please refer to programmes implemented since submission of your two-year report.*)

Yes ✓

To whom are these programmes targeted?

- adults or the general public
- children and young people
- men
- women
- pregnant women
- ethnic groups
- other (please specify)

Health workers in and out
of school, Media people,
Selected ministries,
Departments and Agencies

Do you reflect the following key differences among targeted population groups in educational and public awareness programmes?

- age
- gender
- educational background
- cultural background
- socioeconomic status
- other (please specify)

Current and Expected role
after the sensitization

Do these educational and public awareness programmes cover:

- health risks of tobacco consumption?
 - health risks of exposure to tobacco smoke?
 - benefits of the cessation of tobacco use and tobacco-free lifestyles?
 - adverse economic consequences of tobacco production?
 - adverse economic consequences of tobacco consumption?
 - adverse environmental consequences of tobacco production?
 - adverse environmental consequences of tobacco consumption?
-

awareness and participation of the following agencies and organizations in development and implementation of intersectoral programmes and strategies for tobacco control:

- public agencies?
 - nongovernmental organizations not affiliated with the tobacco industry?
 - private organizations?
 - other (please specify)?
 - Other
-

Are the elaboration, management and implementation of communication, education, training and public awareness programmes guided by research and do they undergo pre-testing, monitoring and evaluation?

Yes ✓

Are appropriate and special training or sensitization and awareness programmes on tobacco control addressed to:

- health workers?
- community workers?
- social workers?
- media professionals?
- educators?
- decision-makers?
- administrators?
- other (please specify)

Law enforcement Agencies

Other

Please provide a brief description of the progress made in implementing Article 12 (*Education, communication, training and public awareness*) in the past two years or since submission of your last report.

Every year primary, Junior high, Senior High schools are targeted and the Programme works with School Health Education (SHEP) Coordinators at national and Regional Levels to implement this provision. Seminars and lectures are also organized for Students of Health Training Institutions, Universities of Ghana and Kwame Nkrumah University of Science and Technology Schools of Public Health, Polytechnics, Medical Schools and Ghana College of Physicians and Surgeons

Have you utilized the “Guidelines for implementation of Article 12 of the WHO FCTC” when developing and implementing policies in this area?

Yes ✓

If you answered “Yes” to question C269 please provide details in the space below or refer to section E of the additional questionnaire available at this link. Response to this question or to the additional questionnaire is voluntary. <https://extranet.who.int/dataform/655321?token=i53m2pztw6uxe4h&lang=en> (<https://extranet.who.int/dataform/655321?token=i53m2pztw6uxe4h&lang=en>)

If you have any other relevant information pertaining to but not covered in this section, please provide details in the space below.

Please attach the relevant documentation.

No comment

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Tobacco advertising, promotion and sponsorship

Have you adopted and implemented, where appropriate, any legislative, executive, administrative or other measures or have you implemented, where appropriate, programmes:

instituting a comprehensive ban on all tobacco advertising, promotion and sponsorship?

Yes ✓

Does your ban cover:

- display and visibility of tobacco products at points of sales?
the domestic Internet?
the global Internet?
 - brand stretching and/or brand sharing?
 - product placement as a means of advertising or promotion?
 - the depiction of tobacco or tobacco use in entertainment media products?
 - tobacco sponsorship of international events or activities and/or participants therein?
 - contributions from tobacco companies to any other entity for “socially responsible causes” and/or any other activities implemented under the umbrella of “corporate social responsibility” by the tobacco industry?
 - cross-border advertising, promotion and sponsorship originating from your territory?
the same forms of cross-border advertising, promotion and sponsorship entering your territory for which domestic regulation apply?
-

cooperating with other Parties in the development of technologies and other means necessary to facilitate the elimination of cross-border advertising?

No ✘

imposing penalties for cross-border advertising equal to those applicable to domestic advertising, promotion and sponsorship originating from your territory in accordance with national law?

Yes ✓

Please provide a brief description of the progress made in implementing Article 13 (*Tobacco advertising, promotion and sponsorship*) in the past two years or since submission of your last report.

Have you utilized the “Guidelines for implementation of Article 13 of the WHO FCTC” when developing and implementing policies in this area?

Yes ✓

If you answered “Yes” to question C2715 please provide details in the space below or refer to section F of the additional questionnaire available at this link. Response to this question or to the additional questionnaire is voluntary. <https://extranet.who.int/dataform/655321?token=i53m2pztw6uxe4h&lang=en>

(<https://extranet.who.int/dataform/655321?token=i53m2pztw6uxe4h&lang=en>)

If you have any other relevant information pertaining to but not covered in this section, please provide details in the space below.

Please attach the relevant documentation.

Demand reduction measures concerning tobacco dependence and cessation

Have you adopted and implemented, where appropriate, legislative, executive, administrative or other measures or have you implemented, where appropriate, programmes on any of the following:

developing and disseminating appropriate, comprehensive and integrated guidelines based on scientific evidence and best practices?

Yes ✓

programmes to promote cessation of tobacco use, including:

- media campaigns emphasizing the importance of quitting?
programmes specially designed for underage girls and young women?
programmes specially designed for women?
programmes specially designed for pregnant women?
telephone quitlines?
- local events, such as activities related to World No Tobacco Day or National No Smoking Day, if appropriate?
- other (please specify)?

Programmes to integrate tobacco cessation measures into routine service delivery

Other

design and implementation of programmes aimed at promoting the cessation of tobacco use, in such locations as:

- educational institutions?
 - health-care facilities?
 - workplaces?
 - sporting environments?
 - other (please specify)?
 - Other
-

inclusion of diagnosis and treatment of tobacco dependence and counselling services for cessation of tobacco use in national programmes, plans and strategies for:

- tobacco control?
 - health?
 - education?
-

inclusion of programmes on the diagnosis and treatment of tobacco dependence in your health-care system?

Yes ✓

Which structures in your health-care system provide programmes for the diagnosis and treatment of tobacco dependence?

- primary health care
 - secondary and tertiary health care
 - specialist health-care systems (please specify below)
 - specialized centres for cessation counselling and treatment of tobacco dependence
 - rehabilitation centres
 - Other
-

Are the services provided in these settings covered by public funding or reimbursement schemes?

primary health care	None
secondary and tertiary health care	Partially
specialist health-care systems (please specify below)	Partially
specialized centres for cessation counselling and treatment of tobacco dependence	None
rehabilitation centres	None
other (please specify below)	

Which health and other professionals are involved in programmes offering treatment for tobacco dependence and counselling services?

Health professionals including:

- physicians
- dentists
- family doctors
- practitioners of traditional medicine
- other medical professionals (please specify below)
- nurses
- midwives
- pharmacists
- Community workers
- Social workers
- other (please specify)
- Other

training on tobacco dependence treatment incorporated into the curricula of health professional training at pre- and post-qualification levels at the following schools:

- medical?
- dental?
- nursing?
- pharmacy?
- Other

facilitating accessibility and/or affordability of pharmaceutical products for the treatment of tobacco dependence?

No ✘

Please provide a brief description of the progress made in implementing Article 14 (*Demand reduction measures concerning tobacco dependence and cessation*) in the past two years or since submission of your last report.

Ghana produced a Tobacco Cessation Guidelines with WHO AFRO in August 2016. The Guidelines provides for the health workers, the structures and the medicines to be used for treating tobacco dependence and cessation.

Have you utilized the "Guidelines for implementation of Article 14 of the WHO FCTC" when developing and implementing policies in this area?

Yes ✔

Please provide details in the space below or refer to section G of the additional questionnaire.

Response to this question or to the additional questionnaire is **voluntary**.

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In the process of setting up primary level screening and getting the medicines into the Essential Medicines List

If you have any other relevant information pertaining to but not covered in this section, please provide details in the space below.

Please attach the relevant documentation.

C3. MEASURES RELATING TO THE REDUCTION OF THE SUPPLY OF TOBACCO

With reference to Articles 15–17

Illicit trade in tobacco products

Have you adopted and implemented, where appropriate, legislative, executive, administrative or other measures or have you implemented, where appropriate, programmes on any of the following:

requiring marking of all unit packets and packages of tobacco products and any outside packaging of such products to assist in determining the origin of the product?

Yes ✓

requiring marking of all unit packets and packages of tobacco products and any outside packaging of such products to assist in determining whether the product is legally sold on the domestic market?

Yes ✓

requiring that unit packets and packages of tobacco products for retail and wholesale use that are sold on the domestic market carry the statement: "Sales only allowed in ..." or carry any other effective marking indicating the final destination of the product?

Yes ✓

developing a practical tracking and tracing regime that would further secure the distribution system and assist in the investigation of illicit trade?

Yes ✓

requiring that marking is presented in legible form and/or appears in the principal language or languages of the country?

Yes ✓

requiring the monitoring and collection of data on cross-border trade in tobacco products, including illicit trade?

Yes ✓

facilitating the exchange of this information among customs, tax and other authorities, as appropriate, and in accordance with national law and applicable bilateral and multilateral agreements?

Yes ✓

enacting or strengthening legislation, with appropriate penalties and remedies, against illicit trade in tobacco products, including counterfeit and contraband cigarettes?

Yes ✓

requiring that confiscated manufacturing equipment, counterfeit and contraband cigarettes and other tobacco products derived from illicit trade are destroyed, using environment-friendly methods where possible, or disposed of in accordance with national law?

Yes ✓

adopting and implementing measures to monitor, document and control the storage and distribution of tobacco products held or moving under suspension of taxes or duties?

Yes ✓

enabling the confiscation of proceeds derived from illicit trade in tobacco products?

Yes ✓

promoting cooperation between national agencies and relevant regional and international intergovernmental organizations in investigations, prosecutions and proceedings, with a view to eliminating illicit trade in tobacco products, with special emphasis on cooperation at regional and subregional levels?

Yes ✓

licensing or other actions to control or regulate production and distribution in order to prevent illicit trade?

Yes ✓

Please provide a brief description of the progress made in implementing Article 15 (*Illicit trade in tobacco products*) in the past two years or since submission of your last report.

If you have any other relevant information pertaining to but not covered in this section, please provide details in the space below.

Please attach the relevant documentation.

Sales to and by minors

Have you adopted and implemented, where appropriate, legislative, executive, administrative or other measures or have you implemented, where appropriate, programmes on any of the following:

prohibiting the sales of tobacco products to minors?

Yes ✓

Please specify the legal age:

18

requiring 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?

Yes ✓

requiring that, in case of doubt, each seller of tobacco products requests that the purchaser provides appropriate evidence of having reached full legal age?

Yes ✓

banning the sale of tobacco products in any manner by which they are directly accessible, such as open store shelves?

Yes ✓

prohibiting the manufacture and sale of sweets, snacks, toys or any other objects in the form of tobacco products which appeal to minors?

Yes ✓

prohibiting the sale of tobacco products from vending machines?

Yes ✓

prohibiting and/or promoting the prohibition of the distribution of free tobacco products:

to the public?

to minors?

prohibiting the sale of cigarettes individually or in small packets?

Yes ✓

providing for penalties against sellers and distributors in order to ensure compliance?

Yes ✓

prohibiting the sales of tobacco products by minors?

Yes ✓

Please provide a brief description of the progress made in implementing Article 16 (*Sales to and by minors*) in the past two years or since submission of your last report.

If you have any other relevant information pertaining to but not covered in this section, please provide details in the space below.

Please attach the relevant documentation.

Provision of support for economically viable alternative activities

Have you adopted and implemented, where appropriate, measures or programmes on any of the following:

promoting economically viable and sustainable alternatives for:

tobacco growers? No

tobacco workers? No

tobacco individual sellers? No

Please provide a brief description of the progress made in implementing Article 17 (*Provision of support for economically viable alternative activities*) in the past two years or since submission of your last report.

Have you utilized the “Policy options and recommendations on economically sustainable alternatives to tobacco growing (in relation to Articles 17 and 18 of the WHO FCTC)” when developing and implementing policies in this area?

No

If you have any other relevant information pertaining to but not covered in this section, please provide details in the space below.

Please attach the relevant documentation.

C4. OTHER MEASURES AND POLICIES

With reference to Articles 18–21

Protection of the environment and the health of persons

Have you adopted and implemented, where appropriate, legislative, executive, administrative or other measures or have you implemented, where appropriate, programmes on any of the following:

implementing measures in respect of tobacco cultivation within your territory, which take into consideration:

the protection of the environment?	Not applicable
the health of persons in relation to the environment?	Not applicable

implementing measures in respect of tobacco manufacturing within your territory, which take into consideration:

the protection of the environment?	Not applicable
the health of persons in relation to the environment?	Not applicable

Please provide a brief description of the progress made in implementing Article 18 (*Protection of the environment and the health of persons*) in the past two years or since submission of your last report.

Have you utilized the “Policy options and recommendations on economically sustainable alternatives to tobacco growing (in relation to Articles 17 and 18 of the WHO FCTC)” when developing and implementing policies in this area?

No

If you have any other relevant information pertaining to but not covered in this section, please provide details in the space below.

Please attach the relevant documentation.

Liability

Have you adopted and implemented, where appropriate, legislative, executive, administrative or other measures or have you implemented, where appropriate, programmes on any of the following:

Does your tobacco control legislation contain measures regarding criminal liability for any violations of that tobacco control legislation?

Yes

Do you have separate criminal liability provisions in relation to tobacco control (outside of the tobacco control legislation)?

No

Do you have any civil liability measures that are specific to tobacco control?

Yes

Do you have any general civil liability provisions that could apply to tobacco control?

Yes

Do you have civil or criminal liability provisions that provide for compensation for adverse health effects and/or for reimbursement of medical, social or other relevant costs?

No

Has any person in your jurisdiction launched any criminal and/or civil liability action, including compensation where appropriate, against any tobacco company in relation to any adverse health effect caused by tobacco use?

No

Have you taken, as appropriate, any legislative, executive, administrative and/or other action against the tobacco industry for full or partial reimbursement of medical, social and other relevant costs related to tobacco use in your jurisdiction?

No

Please provide a brief description of any progress made, as appropriate, in implementing Article 19 (*Liability*) in the past two years or since submission of your last report.

If you have any other relevant information pertaining to but not covered in this section, please provide details in the space below.

Please attach the relevant documentation.

Research, surveillance and exchange of information

Have you adopted and implemented, where appropriate, legislative, executive, administrative or other measures or have you implemented, where appropriate, programmes on any of the following:

developing and/or promoting research that addresses:

- determinants of tobacco consumption?
- consequences of tobacco consumption?
 - social and economic indicators related to tobacco consumption?
 - tobacco use among women, with special regard to pregnant women?
- the determinants and consequences of exposure to tobacco smoke?
 - identification of effective programmes for the treatment of tobacco dependence?
 - identification of alternative livelihoods?
- Other

Prevalence of adult smoking, male and female as part of DHS.

training and support for all persons engaged in tobacco control activities, including research, implementation and evaluation?

Yes ✓

a national system for epidemiological surveillance of:

- patterns of tobacco consumption?
- determinants of tobacco consumption?
- consequences of tobacco consumption?
- social, economic and health indicators related to tobacco consumption?
- exposure to tobacco smoke?
- Other

Please list all surveys, including the year of the survey, that you have undertaken in the past.

1. Tobacco smoke exposure (Agbenyike Wills)
2. Adult (male and Female) smoking prevalence and smokeless tobacco use and by Ethnic background (DHS 2014)
3. GYTS 2009
4. GTCR-5 2015
5. Youth Tobacco use prevalence (Global School-based Students survey, 2012)
6. Tobacco Industry Interference 2014
7. Advertising promotion and Sponsorship 2015
8. Demographic and Health Survey 2014
9. GYTS 2017

Does your country have any plans to repeat any of the above or to undertake a new tobacco survey within three to five years of your last survey? Please provide details in the space below.

Yes. GATS

regional and global exchange of publicly available national:

- scientific, technical, socioeconomic, commercial and legal information?
- information on the practices of the tobacco industry?
- information on the cultivation of tobacco?

an updated database of:

- laws and regulations on tobacco control?
- information about the enforcement of laws on tobacco control?
- pertinent jurisprudence?

Please provide a brief description of the progress made in implementing Article 20 (*Research, surveillance and exchange of information*) in the past two years or since submission of your last report.

If you have any other relevant information pertaining to but not covered in this section, please provide details in the space below (e.g. whether you included information on WHO FCTC implementation in your Voluntary National Review (VNR) on the Sustainable Development Goals (SDGs), related to target 3.a).

Please attach the relevant documentation.

D. INTERNATIONAL COOPERATION AND ASSISTANCE

Pursuant to Article 21.1(c) and in accordance with Article 26, have you either provided or received financial or technical assistance (be it through unilateral, bilateral, regional, subregional or other multilateral channels, including relevant regional and international intergovernmental or nongovernmental organizations and financial and development institutions) for the development and strengthening of multisectoral, comprehensive tobacco control programmes of developing country Parties and Parties with economies in transition in any of the following areas:

development, transfer and acquisition of technology, knowledge, skills, capacity and expertise related to tobacco control?

Assistance provided	No
Assistance received	Yes

provision of technical, scientific, legal and other expertise to establish and strengthen national tobacco control strategies, plans and programmes?

Assistance provided	No
Assistance received	Yes

appropriate training or sensitization programmes for appropriate personnel in accordance with Article 12?

Assistance provided	Yes
Assistance received	Yes

provision of the necessary material, equipment and supplies, as well as logistic support, for tobacco control strategies, plans and programmes?

Assistance provided No
Assistance received Yes

identification of methods for tobacco control, including comprehensive treatment of nicotine addiction?

Assistance provided No
Assistance received Yes

promotion of research to increase the affordability of comprehensive treatment of nicotine addiction?

Assistance provided No
Assistance received Yes

Please identify the Party or Parties from which assistance was received or to which assistance was provided.

Assistance received from Kenya, WHO AFRO, CTFK

Please provide information about any assistance provided or received in the space below, including any support received from nongovernmental organizations (please, specify).

Assistance received in the following areas:

1. Preparation of Regulation
 2. Work on Taxation and tax stamp
 3. Training health workers and preparing Guidelines on dependence and Cessation
 4. South-South and Triangular Cooperation
-

If you have not received or provided assistance in any of the aforementioned areas, please identify any financial or technical assistance that may be under consideration, if appropriate.

Have you encouraged relevant regional and international intergovernmental organizations and financial and development institutions in which you are represented 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?

No

E. PRIORITIES AND COMMENTS

What are the priorities for implementation of the WHO Framework Convention on Tobacco Control in your jurisdiction?

1. Article 5: General Obligations (Getting parliament to pass Regulations)
2. Article 6: Price and tax measures to reduce the demand for tobacco (Implementing high tax policy on Tobacco products)
3. Article 8: Protection from exposure to tobacco smoke (Monitoring and enforcing ban of smoking in Public places)
4. Article 11: Packaging and labelling of tobacco products (Introducing pictorial health warnings)
5. Article 12: Education, communication, training and public awareness
6. Article 13: Tobacco advertising, promotion and sponsorship (Monitoring and enforcing ban on TAPS)
7. Article 14: Demand reduction measures concerning tobacco dependence and cessation (Inaugurating Cessation Guidelines. Implementing treatment of addiction based on cessation Guidelines)
8. Article 21: Reporting and exchange of information (Meeting reporting obligations)

Have you identified any specific gaps between the resources available and the needs assessed for implementing the WHO Framework Convention on Tobacco Control?

Yes ✓

Please provide details in the space below.

We have serious financial gap that does not seem to get meaningful solution at Country level. Tobacco taxation does not come to support Tobacco control activities. There is generally no financial support for Public Health activities in general

WHO support many of the tobacco control activities which includes activities on Article-12 and development and printing of Cessation Guidelines.

CTFK also supported technically and financially the preparation and meetings on Tobacco Control Regulation.

What, if any, are the constraints or barriers, other than lack of resources, you have encountered in implementing the Convention?

There is increasing popularity of Shisha and ENDS becoming a serious emerging tobacco control problem. Food and Drug Authority (FDA) has been pulling Down Bill Board advertising Shisha and efforts are underway to see how Administrative Instrument could be used to stop its use.

Do you have any of the following products available on your national tobacco market?

- smokeless tobacco products
 - water pipe tobacco
 - Electronic Nicotine Delivery Systems (ENDS)
Electronic Non-Nicotine Delivery Systems (ENNDS)
heated tobacco products (HTPs)
Other
-

Have you adopted and implemented any policy or regulation that is specific to the following tobacco products?

- smokeless tobacco products
 - water pipe tobacco
 - Electronic Nicotine Delivery Systems (ENDS)
Electronic Non-Nicotine Delivery Systems (ENNDS)
heated tobacco products (HTPs)
Other
-

If you have any relevant information related to questions E5 and E6, please provide details in the space below.

1. Water pipe (Shisha) is being regulated as Tobacco Product but not explicitly stated in the PH Act
 2. ENDS is being being regulated through registration by Food and Drug Authority
-

Please provide any other relevant information not covered elsewhere that you consider important.

Discussions are ongoing to use Administrative Regulation to ban use of Shisha

Your suggestions for further development and revision of the reporting instrument:

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