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## **Progress report on the Tobacco Free Initiative**

### **Introduction**

1. Since the adoption of WHO Framework Convention on Tobacco Control (FCTC) in May 2003, and subsequent ratification by WHO Member States, WHO has been supporting the Member States to implement the provisions of FCTC in their national policies and legislation. WHO is also providing technical support to countries to assist them in their efforts to strengthen their infrastructure and take the necessary steps towards implementation of the strongest possible measures suggested in the FCTC and its guidelines. In addition, WHO introduced the MPOWER<sup>1</sup> package of measures in 2008 to assist countries in the implementation of effective measures to reduce demand for tobacco, contained in the FCTC.

2. Article 8 of the WHO FCTC addresses the issue of protecting people from the dangers of second-hand smoke. All Parties to the WHO FCTC have adopted implementation guidelines for countries to follow in meeting their FCTC obligations under Article 8. The guidelines state that all people should be protected from exposure to tobacco smoke; all indoor workplaces and indoor public places should be 100% smoke-free; and that clear and enforceable legislation is necessary to protect people from exposure to tobacco smoke.

3. Nineteen countries of the Region are Parties to the FCTC. Currently almost half the countries of the Region have partially comprehensive smoke-free legislation and many others have restrictions on smoking in public places through ministerial decrees or executive notifications. Yet the protection from second-hand smoke is far from comprehensive and is not in conformity with the legal obligations and guidelines for implementation of Article 8 of the FCTC (see Table 1).

4. This report outlines the findings of a pilot study on second-hand smoke levels conducted in 11 countries of the Region and the challenges faced by countries in protecting their populations from exposure to second-hand smoke. Based on the current situation in the Region, it recommends a number of actions to help countries improve enforcement of and compliance with 100% smoke-free policies. Annex 1 details the status of implementation of MPOWER policy measures Member States of the Region.

### **Situation analysis**

5. In January 2011, results of a worldwide study on the burden of disease related to second-hand smoke were published<sup>2</sup> and showed that 40% of children, 33% of male non-smokers and 35% of female non-smokers worldwide were exposed to second-hand smoke in 2004. This exposure was estimated to have caused 379 000 deaths from ischaemic heart disease, 165 000 from lower respiratory infections, 36 900 from asthma and 21 400 from lung cancer. The findings of the study confirm that substantial health gains can be made by extending effective public health and clinical interventions to reduce passive smoking worldwide.

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<sup>1</sup> **M**onitoring tobacco use and prevention policies; **P**rotect people from tobacco smoke; **O**ffer help to quit, **W**arn about dangers of tobacco use; **E**nforce bans on tobacco advertising, promotion and sponsorship; **R**aise taxes on tobacco

<sup>2</sup> Öberg M et al. The worldwide burden of disease from exposure to second-hand smoke: a retrospective analysis of data from 192 countries. *The Lancet*, 2011, 377:139–46.

**Table 1. Venue types covered by 100% smoke-free policies in countries\***

Country	Health care facilities	Educational facilities	Government facilities	Indoor offices	Restaurants	Bars	Public transport
Afghanistan	Yes	Yes	No	No	No	No	Yes
Djibouti	Yes	Yes	Yes	Yes	No	No	Yes
Egypt	Yes	Yes	Yes	Yes	No	No	Yes
Islamic Republic of Iran	Yes	Yes	Yes	Yes	Yes	–	Yes
Jordan	Yes	Yes	Yes	No	No	No	Yes
Lebanon†	Yes	Yes	Yes	Yes	No	No	Yes
Libya	Yes	Yes	Yes	Yes	Yes	–	Yes
Morocco	Yes	Yes	Yes	Yes	No	No	No
Pakistan	Yes	Yes	Yes	Yes	Yes	–	Yes
Saudi Arabia	Yes	Yes	Yes	No	No	–	No
Syrian Arab Republic	Yes	Yes	No	No	Yes	Yes	Yes
United Arab Emirates	Yes	Yes	No	No	No	No	No
Occupied Palestinian territory	Yes	Yes	Yes	No	Yes	No	Yes
Bahrain	No	No	No	No	No	No	No
Iraq	No	No	No	No	No	No	No
Kuwait	No	No	No	No	No	–	No
Oman	No	No	No	No	No	No	No
Qatar	No	No	No	No	No	No	No
Somalia	No	No	Yes	Yes	No	No	No
Sudan	No	No	No	No	No	–	No
Tunisia	No	No	No	No	No	No	No
Yemen	No	No	No	No	No	No	No

Source: *WHO report on global tobacco epidemic 2011. Warning about the dangers of tobacco*. Geneva, World Health Organization, 2011.

\* Although many countries of the Region have strong restrictions on smoking in public places, they still allow for designated smoking areas and therefore such places cannot be considered 100% smoke-free

† Information updated for Lebanon according to the new tobacco control law promulgated 29 August 2011

– Information not available

6. In 2010–2011, the WHO Regional Office for the Eastern Mediterranean in collaboration with Member States and the Johns Hopkins University Bloomberg School of Public Health's Institute for Global Tobacco Control conducted a pilot study on second-hand smoke levels in the Region. The objectives of the study were to assess second-hand smoke levels from a cross-section of public places in the capitals of participating countries and to introduce fine particle (PM<sub>2.5</sub>) sampling as a method to

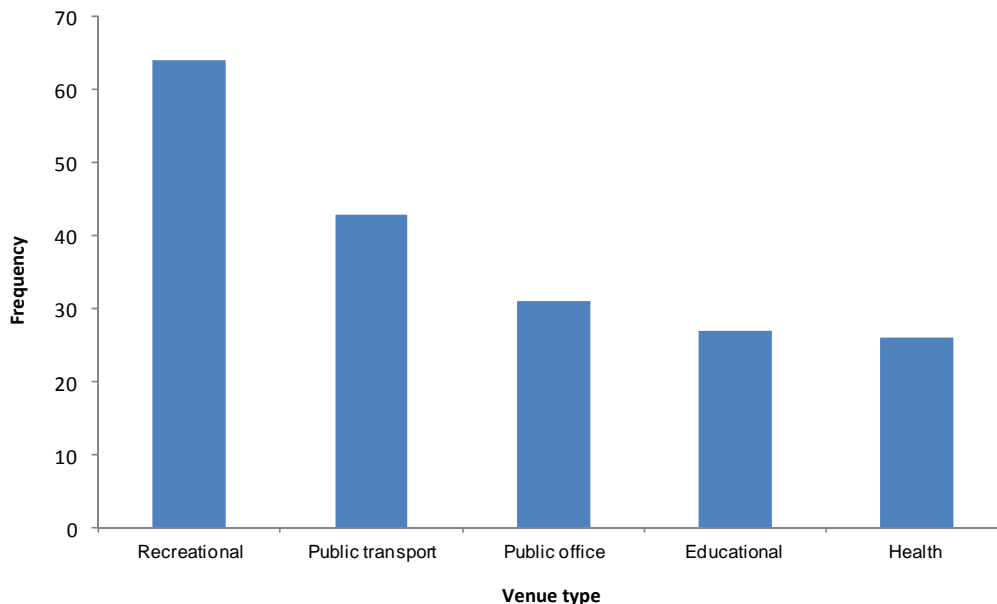
monitor compliance with smoke-free policies. Eleven countries participated: Bahrain, Djibouti, Egypt, Iraq, Islamic Republic of Iran, Jordan, Lebanon, Oman, Pakistan, Sudan and Yemen.

7. In the study, PM<sub>2.5</sub> sampling was conducted in five types of venue: health care facilities, educational facilities, public offices, recreational venues (including restaurants and other places for entertainment) and public transport vehicles. In total, 244 venues across 11 participating countries were sampled and observed in the study. Active smoking was observed in 98 venues. Recreational venues had the highest percentage of observed smoking, followed by public transport venues. Smoking was also observed in nearly a fourth of educational and health care venues (see Figure 1).

8. The presence of signs prohibiting smoking was highly variable. Health care venues were most likely to have signage prohibiting smoking (59%), followed by public offices (53%), educational venues (49%), recreational venues (27%) and public transport venues (20%). Oman had the highest percentage of venues where no smoking signs were observed (93%, 28 of 30).

9. Tobacco advertising was rarely seen in any of the venues studied in this project. However, cigarettes were being sold in educational facilities in four countries and in recreational venues in eight countries.

10. The results of the study show that although many countries of the Region have legislation banning tobacco use in indoor public places, enforcement and compliance remain challenges. As well, very few countries include all public places in their ban on tobacco use. For example, except in a few counties, restaurants and cafes are usually excluded. In many countries, allowances are made for smoking areas or smoking sections in venues that are otherwise considered smoke-free. In some countries, there is a lack of public support for 100% smoke-free venues, particularly recreational venues. This lack of public support poses a challenge to decision-makers. Legislation in some countries contains vague and inaccurate



**Figure 1. Frequency of observed smoking by venue type (all participating countries combined)**

definitions and fails to delineate implementation and enforcement responsibilities. Monitoring and evaluation is not always part of legislation regarding smoke-free public places.

### **Future directions**

11. To overcome existing barriers to making all public venues 100% smoke free, WHO recommends that countries of the Region should, in the context of their unique legislative systems, undertake the following actions as a matter of urgency.

- Completely ban smoking in all indoor public places.
- Use clear and non-debatable language in legislation to avoid conflict during the implementation phase.
- Strengthen implementation by adopting innovative enforcement mechanisms.
- Provide regular training for those responsible for implementing the legislation.
- Develop and implement evidence-based campaigns to raise public awareness of the dangers of second-hand smoke and the need for 100% smoke-free public places.
- Ensure that prominent, clearly visible “no-smoking” signs are posted in places where smoking is not allowed.
- Strengthen the penalties for violating the provisions of national tobacco control legislation.
- Develop and implement regular monitoring and evaluation mechanisms as an integral part of the ban on smoking in public places.
- Integrate tobacco control-related knowledge in national educational curricula to ensure that the information is well transferred to all levels of society.
- Ensure that the ban on smoking in public places is addressed within a comprehensive approach to tobacco control at national level that covers all other measures recommended by the FCTC and WHO.

12. In collaboration with Member States, the Regional Office has developed model legislation for tobacco control and a model by-law. Both contain powerful rules on tobacco-free public places and are based on Article 8 of the WHO FCTC and its guidelines. Countries of the Region are invited to adopt similar legislation in order to protect the public. The evidence is clear that second-hand smoke is dangerous to human health; it is in the hands of ministers of health to control this threat and protect the health of their populations. The Regional Office will continue working with Member States to achieve that goal.

## Annex 1. Status of MPOWER policy measures in countries

Country	MPOWER policy measure										Major areas of progress since 2008 Change in MPOWER indicator group, upwards, since 2008
	M		P		O	W	E		R		
	Monitoring		Smoke-free policies		Cessation programmes	Health warnings	Advertising bans		Taxation		
Adult prevalence (daily smoking; age standard estimates, 2009)	Youth prevalence (currently using any tobacco products)	Venue types covered under 100% smoke-free ban	Compliance (1=weakest; 10=strongest)	Availability of nicotine replacement therapy and/or quit line services	Size (% of pack surface)/pictorial or text	Direct bans (for key advertising medium types <sup>1</sup> )	Indirect bans (for key medium types promoting tobacco indirectly) <sup>2</sup>	Overall tax incidence (% of retail price of most popular brand)	Type of taxes (excise tax and/or import duty)		
Afghanistan	...	9.8%	Education, health care, transport	...	Limited private services only	None	National television and print media only	None	9%	Import duty only	...
Bahrain	18.5%	19.9%	None	...	National quit line	50% pictorial <sup>3</sup>	All except international television and print media	All except discounts and brand sharing	29%	Import duty only	W,E
Djibouti	...	19.0%	All except restaurants and bars	...	Limited private services only	50% pictorial	All medium types	All medium types	31%	Excise tax only	P, W, E
Egypt	19.2%	12.0%	All except restaurants and bars	2	Limited public services only	50% pictorial	All except international television and print media	All except brand sharing	74%	Excise tax only	P,W,R
Iran (Islamic Republic of)	11.0%	26.6%	All venues	8	National quit line	50% pictorial	All except international television and internet	All medium types	13%	Excise tax only	P,W,E
Iraq	15.2%	17.2%	Public transport <sup>4</sup>	...	Limited private services only	Pictorial (size not specified) <sup>4</sup>	All except point of sales and internet <sup>4</sup>	All except appearance in films and television	3%	Import duty only	P, W, E

... Information not available

<sup>1</sup> National and international television and radio, local and international magazines and newspapers, billboards, point of sales, internet.

<sup>2</sup> Free distribution, discounts, brand sharing, appearance in films and television, sponsoring events.

<sup>3</sup> Information updated as specified in 'GCC Standardization Organization' (GSO) regulation no. GSO 246/2011, dated 9 August 2011.

<sup>4</sup> Information updated for Iraq according to new tobacco control law no. 19 (2012), dated 7 February 2012.

Jordan	25.9%	26.1%	All except restaurants and indoor offices	7	Limited public services only	30% pictorial	All except internet	All except appearance in films and television	75%	Mainly excise tax	P,W
Kuwait	17.1%	17.6%	All venues <sup>5</sup>	...	Limited public services only	50% pictorial <sup>3</sup>	All except international television, print media and internet	All except appearance in films and television	34%	Import duty only	P,W
Lebanon	36.9%	59.7%	All except restaurants and bars <sup>6</sup>	2	Limited private services only	15% text	All except international television, print media and internet	All medium types	47%	Mainly excise tax	P,W,E
Libyan Arab Jamahiriya	22.7%	8.1%	All venues	3	Limited private services only	25% text	All except international television, print media and internet	All except discounts and brand sharing	2%	Excise tax only	...
Morocco	16.0%	11.0%	All except restaurants and bars	...	Limited private services only	text	All except international print media and internet	All except brand sharing and appearance in films and television	...	...	...
Oman	3.9%	3.3%	None	...	Limited private services only	50% pictorial <sup>3</sup>	None	None	31%	Import duty only	...
Pakistan	16.9%	10.1%	All venues	1	Limited private services only	40% pictorial	None	All except brand sharing	62%	Mainly excise tax	P,W,R
Qatar	...	17.9%	None	...	Limited public services only	50% pictorial <sup>3</sup>	All except international television, print media and internet	All medium types	33%	Import duty only	W
Saudi Arabia	9.5%	14.9%	None	..	National quit line	50% pictorial <sup>3</sup>	All except international television, print media, point of sales and internet	All except appearance in films and television, and sponsorship	29%	Import duty only	W
Somalia	...	15.6%	None	...	No services	None	None	None	10%	Import duty only	...

<sup>5</sup> Information updated for Kuwait according to the ministerial decree no. 23 (2012), dated 12 February 2012.

<sup>6</sup> Information updated for Lebanon according to the new tobacco control law promulgated 29 August 2011.

Sudan	12.0%	7.4%	None	...	No services	15% text	All except international television, print media and internet	All medium types	72%	Mainly excise tax	...
Syrian Arab Republic	...	24.5%	All except government and indoor offices	5	Limited public services only	15% text	All medium types	All medium types	33%	Excise tax only	P
Tunisia	31.1%	11.4%	None	...	Limited private services only	text	All except point of sales	All medium types	65%	Mainly excise tax	...
United Arab Emirates	7.2%	19.5%	Education and health care	7	National quit line	50% pictorial <sup>3</sup>	All except international television, print media and internet	All medium types	29%	Import duty only	W
West Bank and Gaza Strip	...	40.2%	All except indoor offices and bars	9	Limited private services only	10% text (non-mandated)	All except international television, print media, point of sales and internet	None	78%	Mainly excise tax	...
Yemen	21.1%	14.1%	None	...	No services	Text (non-mandated)	All medium types	All except brand sharing	53%	Excise tax only	...